Little is known about the impact of Affordable Care Act (ACA) Medicaid expansion on health care access and services for patients at risk for diabetes mellitus (DM) or diagnosed with DM. As many persons affected by both DM and the ACA Medicaid expansions receive primary care in safety net community health centers (CHCs), this study will compare pre-post access to and receipt of health care services and Medicaid expenditures within CHCs in states that did and did not expand Medicaid; compare pre-post receipt of primary and secondary DM preventive services in expansion versus non-expansion states; compare pre-post changes in DM-related biomarkers among the newly insured compared to already insured and uninsured patients in expansion states; and measure pre-post changes in Medicaid expenditures among newly insured compared to those already insured in Oregon.

Potential Impact

Because the ACA legislation was designed, in part, to improve health and mitigate healthcare disparities, results of this work will formally evaluate the extent to which the ACA’s efforts to expand insurance coverage to vulnerable populations actually reduces disparities among patients with DM risk or DM. Furthermore, knowing more about the impact of ACA Medicaid expansions on DM screening and primary prevention among patients at risk for DM will be useful for informing future national and state health policies.