

In the aftermath of the Supreme Court's 2012 health reform ruling, states are quickly making decisions about whether to implement the Affordable Care Act's adult Medicaid expansion. The stakes are huge: 17 million low-income individuals could gain access to much-needed health coverage.

A key factor for many states is potential cost. However, a number of state fiscal analyses greatly exaggerate the cost of the Medicaid expansion, creating confusion among policy makers and health advocates.

After reviewing more than a dozen of these analyses and related literature, NHeLP has developed a number of tools for advocates to make the economic case for expanding Medicaid.

- [Top Five Myths and Facts about the Cost of the ACA's Adult Medicaid Expansion](#)
- [NHeLP's Guide for Evaluating Fiscal Analyses of the ACA's Adult Medicaid Expansion](#)
- [Coverage for Lower-Income Adults: Exchange versus Medicaid](#)