The Oregon Health Insurance Experiment is a landmark study of the effect of expanding public health insurance coverage in Oregon. The experiment randomly assigned half of the Oregon population to receive health insurance through the state’s Medicaid program, while the other half acted as a control group. This allowed researchers to compare health outcomes, healthcare utilization, and other economic indicators between the two groups. The results of the experiment have been influential in shaping policies and discussions around health care reform.
health insurance on health care use, health outcomes, financial strain, and well-being of low-income adults. It uses an innovative randomized controlled design to evaluate the impact of Medicaid in the United States. Although randomized controlled trials are the gold standard in medical and scientific studies, they are rarely possible in social policy research. In 2008, the state of Oregon drew names by lottery for its Medicaid program for low-income, uninsured adults, generating just such an opportunity. This ongoing analysis represents a collaborative effort between researchers and the state of Oregon to learn about the costs and benefits of expanding public health insurance. Brief overview of the study and its findings, prepared by J-PAL North America.

Results

Oregon's health insurance lottery allowed researchers to study the effect of the first one to two years of Medicaid coverage on health care utilization, financial hardship, health, and labor market outcomes and political participation. In the first one to two years, Medicaid increased health care utilization, reduced financial strain, and reduced depression, but produced no statistically significant effects on physical health or labor market outcomes.

Medicaid coverage resulted in significantly more outpatient visits, hospitalizations, prescription medications, and emergency department visits. Coverage significantly lowered medical debt, and virtually eliminated the likelihood of having a catastrophic medical expenditure. Medicaid substantially reduced the prevalence of depression, but had no statistically significant effects on blood pressure, cholesterol, or cardiovascular risk. Medicaid coverage also had no statistically significant effect on employment status or earnings. Medicaid increased voter turnout in the 2008 Presidential election. Winning the lottery increased Medicaid enrollment of already-eligible children in the household. More information about these results.

Data and Protocols

Data from the study has been made publicly available. Analysis plans and survey instruments are also available.

Trial Registry

The Oregon Health Insurance Experiment is registered with the American Economic Review registry for randomized controlled trials at: https://www.socialscienceregistry.org.
Investigators

**Katherine Baicker, Principal Investigator**

Katherine Baicker is Dean and Emmett Dedmon Professor at the University of Chicago Harris School of Public Policy. Her research focuses on the effects of public and private health insurance coverage on the distribution and quality of health care services.

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**Amy Finkelstein, Principal Investigator**

Amy Finkelstein is the John and Jennie S. MacDonald Professor of Economics at the Massachusetts Institute of Technology and the co-founder and Co-Scientific Director of the Jameel Poverty Action Lab-North America. Her research interests focus on public finance and health economics, particularly market failures and government intervention in insurance and health care markets. She has been an NBER affiliate since 2001.
Out of the Woodwork: Enrollment Spillovers in the Oregon Health Insurance Experiment

MARCH 2020 - WORKING PAPER 26871
AUTHOR(S) - Adam Sacarny, Katherine Baicker & Amy Finkelstein

We analyze the impact of expanded adult Medicaid eligibility on the Medicaid enrollment of already-eligible children. To do so, we exploit the 2008 Oregon Medicaid lottery, in which some low-income uninsured adults were randomly selected for the chance to apply for Medicaid. Children in these...

Losing Insurance and Psychiatric Hospitalizations

JUNE 2019 - WORKING PAPER 25936
AUTHOR(S) - Johanna Catherine Maclean, Sebastian Tello-Trillo & Douglas Webber

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