



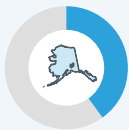
Medicaid Matters to Alaska

Alaska's Medicaid program (DenaliCare) is a lifeline in the Last Frontier

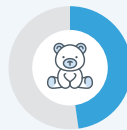
DenaliCare provides health coverage to 251,000 people — 34% of all Alaska residents, including children, working families, veterans, vulnerable seniors, people with disabilities, and many other Alaskans.¹

Medicaid also serves as the core financial backbone of the state's health care system, paying for care and services at local clinics and hospitals, including in frontier communities, and serving as a critical engine for the local economy.

In Alaska, DenaliCare Serves:



Nearly 100,000 Alaska Native people — **40% of Medicaid enrollees** in Alaska.²

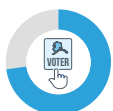


A total of 83,200 children — **48% of all children** in Alaska.³



A total of **27,700 seniors and people with disabilities**.⁴

Hundreds of thousands of Alaskans will lose health coverage and access to care if Congress cuts or caps Medicaid funding, forcing the state to offset budget holes by throwing people off coverage, cutting provider reimbursement, and/or eliminating essential health services. Any cut to Medicaid is a direct attack on the health and financial security of people living in Alaska and runs counter to the will of the vast majority of voters from across political parties who want Congress to continue to guarantee coverage for low-income people through Medicaid.⁵



A total of **71% of voters** want Congress to continue to guarantee coverage for low-income people through Medicaid.⁶

Protecting Medicaid Means:

CHILDREN IN ALASKA

Have access to newborn care, checkups, care for diabetes and asthma, and more.

Stay healthy and ready to learn, miss fewer school days, are more likely to graduate, and earn more as adults.⁷



FAMILIES IN ALASKA

Have access to cancer screenings, mental health and substance use disorder treatment, and diabetes and blood pressure medications.

Have less risk of medical debt and eviction and can better afford to buy groceries or pay rent.⁸



SENIORS IN ALASKA

Have access to nursing home care, transportation to medical appointments, and home health services.

Stay healthy and receive needed care in their homes and communities.



Medicaid keeps families in Alaska healthy and working

Many low-wage jobs either do not offer health coverage or offer coverage that is unaffordable. Medicaid provides health coverage for workers at these jobs so they can remain healthy and earn income for their families.

- **At least 48,800 low-wage workers** in Alaska are covered by Medicaid.⁹
- Nationwide, **92% of adults** covered by Medicaid either work, care for a family member, have an illness or disability, or attend school.¹⁰

Cutting Medicaid would make our country's affordability crisis much worse for families in Alaska who already face significant health care costs.

Medicaid is the bedrock of health care systems in Alaska

DenaliCare keeps hospitals in Alaska open. It pays for at least 20% of all services in most Alaska hospitals, including Alaska Regional Hospital, Mat-Su Regional Medical Center and Providence Alaska Medical Center. **Medicaid also pays for 56% of all hospital services provided at Norton Sound Regional Hospital in Nome, Alaska.**¹¹ If Medicaid is cut, these hospitals will treat more uninsured people and the amount of uncompensated care will increase. A total of 10.4% of Alaskans are already uninsured — increased losses in patient revenue would put all Alaska hospitals at risk.¹²

Medicaid also plays important roles in accessing behavioral health care and nursing home care. DenaliCare is the largest payer of mental health care, substance use disorder treatment, and other community services to curb the opioid epidemic and care for people with mental illness.

DenaliCare also covers 7 in 9 nursing home residents in Alaska.¹³

Medicaid stabilizes Alaska's state and local economies

Medicaid is the largest source of federal funding for Alaska, accounting for 29% of the federal funds received by the state.¹⁴ Medicaid dollars ensure Alaska can deliver essential health care without depleting resources reserved for other essential services, including public safety, transportation, housing and education.

Cutting Medicaid would make our country's affordability crisis much worse. Americans from all backgrounds just voted for economic security, imploring their representatives to lower costs on everyday needs including health care. Cutting Medicaid would be a direct betrayal of constituents by making health care more unaffordable.

Families in Alaska already face significant health care costs. The median amount of medical debt in collections in Alaska is \$1406.¹⁵

Congress has the responsibility to stand with families in Alaska and across the country by protecting Medicaid and opposing any attempts to weaken this essential program.

Endnotes

- ¹ Families USA analysis of The Commonwealth Fund, “What Medicaid Brings to Alaska,” accessed on March 11, 2025, <https://interactives.commonwealthfund.org/2025/medicaid-fact-sheets/Alaska.pdf> and U.S. Census Bureau, U.S. Department of Commerce, “Age and Sex,” American Community Survey, ACS 1-Year Estimates Detailed Tables, Table S0101, 2023, https://data.census.gov/table/ACSST1Y2023.S0101?g=040XX00US02_500XX00US0622.
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- ⁴ Euhus, Burns, and Rudowitz, “Congressional District Interactive Map.”
- ⁵ Grace Sparks, Robin Rudowitz, and Ashley Kirzinger, “Public Opinion on the Future of Medicaid: Results From the KFF Medicaid Unwinding Survey and KFF Health Tracking Poll,” KFF, June 4, 2024, <https://www.kff.org/medicaid/poll-finding/public-opinion-on-the-future-of-medicaid-kff-medicaid-unwinding-kff-health-tracking-poll/>; Shannon Schumacher et al., “KFF Health Tracking Poll February 2025: The Public’s Views on Potential Changes to Medicaid,” KFF, March 7, 2025, https://www.kff.org/medicaid/poll-finding/kff-health-tracking-poll-public-views-on-potential-changes-to-medicaid/?utm_campaign=KFF-Polling-Surveys&utm_medium=email&hsenc=p2ANqtz-8iNmxiRg_gtnbWKy1kvLR_3dqUj8mA--j6CjS84vvlfiW3AzWgtdMq_ajiem7psqyowvFZW-j9r7ybektDj7dmsdMK9_wSOGGrcZ5NStozHi_enFM&hsmi=350586980&utm_content=350586980&utm_source=hs_email.
- ⁶ *ibid.*
- ⁷ Georgetown University McCourt School of Public Policy, Center for Children and Families, “How Medicaid Supports Student Success,” accessed March 11, 2025, <https://ccf.georgetown.edu/2025/01/09/how-medicaid-supports-student-success/>.
- ⁸ David U. Himmelstein et al., “Prevalence and Risk Factors for Medical Debt and Subsequent Changes in Social Determinants of Health in the US,” *JAMA Network Open* 5, no. 9 (2022): e2231898, <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2796358>; Raymond Kluender et al., “Medical Debt in the US, 2009-2020,” *JAMA* 326, no. 3 (2021): 250–256, <https://jamanetwork.com/journals/jama/fullarticle/2782187>.
- ⁹ U.S. Census Bureau, U.S. Department of Commerce, “Public Health Insurance by Work Experience by Sex,” American Community Survey, ACS 1-Year Estimates Detailed Tables, Table B27014, 2023, <https://data.census.gov/table/ACSST1Y2023.B27014?q=B27014&g=040XX00US02>.
- ¹⁰ Jennifer Tolbert et al., “Understanding the Intersection of Medicaid and Work: An Update,” KFF, February 4, 2025, <https://www.kff.org/medicaid/issue-brief/understanding-the-intersection-of-medicaid-and-work-an-update/>.
- ¹¹ “Hospital Cost Tool,” National Academy for State Health Policy, last updated February 7, 2025, <https://tool.nashp.org/>.
- ¹² U.S. Census Bureau, U.S. Department of Commerce, “Selected Characteristics of Health Insurance Coverage in the United States,” American Community Survey, ACS 1-Year Estimates Subject Tables, Table S2701, 2023, <https://data.census.gov/table/ACSST1Y2023.S2701?q=S2701&g=500XX00US0200.3617>.
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- ¹⁴ “Medicaid Is Vital to Alaska,” Georgetown University Center for Children and Families, February 2025, <https://ccf.georgetown.edu/wp-content/uploads/2025/02/Medicaid-is-Vital-to-Alaska-2025-Fact-Sheet.pdf>.
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