REPUBLICAN SABOTAGE OF HEALTH CARE UNDER THE ACA IS DRIVING UP COSTS AND REDUCING CHOICE

Suspension of Risk Adjustment Payments

On July 7, 2018, the Trump Administration announced it would no longer provide statutorily-required payments to health plans covering sicker patients.

"This decision will … **create more market uncertainty and increase premiums for many health plans – putting a heavier burden on small businesses and consumers, and reducing coverage options.**"

- America's Health Insurance Plans (AHIP)

"[T]his action will significantly **increase 2019 premiums for millions of individuals and small business owners** and could result in far fewer health plan choices**.** It will undermine Americans' access to affordable coverage, particularly for those who need medical care the most."

- Blue Cross Blue Shield Association

Refusal to Defend Protections for Pre-Existing Conditions

On June 7, 2018, the Trump Administration refused to defend fundamental consumer protections of the Affordable Care Act in Texas v. United States.

"The elimination of these protections could result in **millions of people facing limited access to health care coverage and higher cost** as a result of insurers being allowed to return to discriminatory coverage and pricing practices."

- Statement of physician groups, including American Academy of Family Physicians, American Academy of Pediatrics, American College of Obstetricians and Gynecologists, American College of Physicians, and American Psychiatric Association

"[The Administration's decision] creates further uncertainty that could ultimately result in **higher costs for millions of Americans and undermine essential protections for people with pre-existing conditions**, such as asthma, cancer, heart disease, arthritis and diabetes"

- Senator Susan Collins (R-ME)

"The Justice Department argument in the Texas case is **as far-fetched as any I've ever heard**."

- Senator Lamar Alexander (R-TN)

"It exposes the Administration's intent to **eliminate critical protections for people with pre-existing conditions** … The ongoing attempts to dismantle this law **highlight a disturbing disregard, by the Trump Administration, for the needs of people with disabilities**."

- The Arc

Ending Subsidies for Cost-Sharing Reductions

On October 12, 2017, the Trump Administration announced that it would terminate Cost-Sharing Reduction (CSR) payments for plans covering consumers earning between 100 and 250 percent of the federal poverty level.

"[G]ross **premiums for silver plans offered through the marketplaces are, on average, 10 percent higher in 2018 than they would have been** without the announcement in October 2017 that the Administration would no longer reimburse insurers for the cost of CSRs."

- Congressional Budget Office

"Millions of hard-working Americans with modest incomes depend on cost-sharing reduction (CSR) benefits to get access to medical care. These benefits help real people every day, and if they are ended, there will be real consequences… This action will make it harder for patients to access the care they need. **Costs will go up and choices will be restricted**"

- America's Health Insurance Plans (AHIP) and Blue Cross Blue Shield Association

"This … creates still more uncertainty in the ACA marketplace just as the abbreviated open enrollment period is about to begin, further **undermining the law and threatening access to meaningful health insurance coverage for millions of Americans. Our patients will ultimately pay the price**."

- American Medical Association

"Our organizations, representing millions of Americans with chronic and serious diseases, are deeply disappointed by this decision, which shows a clear disregard for patients, providers and their families….The fallout for the health and wellbeing of all Americans, especially those with chronic or serious illnesses, could be catastrophic."

- Statement of leading patient groups, including American Diabetes Association, American Heart Association, American Lung Association, and United Way Worldwide

Impact of the Tax Scam on Health Costs and Coverage

The Republican tax legislation enacted in December 2017 eliminated the penalty for enforcing the individual mandate.

"In total, CBO and JCT expect premiums for nongroup health insurance **will be about 10 percent higher in 2019** than they would have been if the individual mandate penalty remained in place and was enforced."

- Congressional Budget Office

"Eliminating the mandate without implementing an alternative means to drive enrollment among healthy individuals would likely result in a **deterioration of the risk pool due to lower coverage rates among lower-cost individuals. Premiums would increase as a result**."

- American Academy of Actuaries

"Repealing the individual mandate without a workable alternative will reduce enrollment, further **destabilizing an already fragile individual and small group health insurance market** on which more than 10 million Americans rely."

- Statement of stakeholders, including America's Health Insurance Plans, American Hospital Association, and American Medical Association

"There are many, and I am one of them, who believes that that actually will harm the pool in the exchange market because you'll likely have individuals who are younger and healthier not participating in that market… **And, consequently, that drives up the cost for other folks in that market."**

- Former Secretary of Health and Human Services Tom Price (R-GA)

Expansion of Association Health Plans

On January 5, 2018, the Trump Administration issued a proposed rule that would loosen restrictions on Association Health Plans. The rule was finalized on June 19, 2018.

"The proposed rule is projected to **result in 130,000 additional individuals becoming uninsured** by 2022, compared to current law. The increased number of uninsured is **largely caused by premium increases** in the individual market as healthier enrollees shift into AHPs."

- Avalere Health

"These things will cherry-pick the healthiest groups and individuals and the rest of the … market will become so expensive that no one will be able to afford it."

- Mila Kofman, Washington DC Health Benefit Exchange Authority

"Before passage of the ACA in 2010, association health plans flourished across the United States and millions of Americans were enrolled in them. But the plans proved to be magnets for scam artists, and many became insolvent. **As a result, hundreds of thousands of beneficiaries found themselves saddled with hundreds of millions of dollars in unpaid medical bills**."

- Pew Charitable Trusts

Expansion of Short-Term, Limited Duration Coverage

On February 28, the Tramp Administration issued proposed rule that would expand the sale of plans that provide short-term, limited duration coverage.

"[W]e are concerned that substantially expanding access to short-term, limited duration insurance (short-term plans) will negatively impact conditions in the individual health insurance market (both on and off exchange), **exacerbating problems with access to affordable comprehensive coverage for all individual market consumers**."

- America's Health Insurance Plans (AHIP)

"The introduction of expanded short-term, limited-duration policies… would **increase the number of people without minimum essential coverage by 2.5 million in 2019.**"

- Urban Institute

"[This] would allow insurers to sell products that do not constitute true "insurance" … covering **fewer benefits and ensuring fewer patient protections, such as coverage of pre-existing medical conditions**. In addition, the expansion of these types of plans could undermine the individual market by concentrating the risk of less healthy individuals in those markets, **driving up the cost of comprehensive coverage**."

- American Hospital Association

Cuts to Navigator and Advertising Funding

On September 13, 2017, just days before the 2018 Open Enrollment Period, the Trump Administration announced a 40 percent cut in funding to Navigator organizations and a 90 percent cut in funding for advertising.

"Cutting funds for outreach at a time when there is shortened open enrollment creates more and more barriers to reaching the remaining uninsured, and those at risk of losing coverage"

- JoAnn Volk, Georgetown University

"Cutting ACA Advertising by 90% is evidence-based policy ... if policy goal is sabotage"

- Daniel Polsky, University of Pennsylvania

"There's no doubt that cuts to outreach and advertising will result in more people uninsured."

- Larry Levitt, Kaiser Family Foundation

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