

The ACA: What's Out, What's In, What's Next

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The ghosts of health care past: Where we were a year ago

G.O.P. Plans Immediate Repeal of Health Law, Then a Delay

By ROBERT PEAR, JENNIFER STEINHAUER and THOMAS KAPLAN DEC. 2, 2016

Here's how Republicans plan to repeal Obamacare within weeks of Trump taking office

by Philip Klein | Dec 15, 2016, 1:56 PM

Trump Tells Congress to Repeal and Replace Health Care Law 'Very Quickly'

By MAGGIE HABERMAN and ROBERT PEAR JAN. 10, 2017

Then what happened?

House Passes Measure to Repeal and Replace the Affordable Care Act

By THOMAS KAPLAN and ROBERT PEAR MAY 4, 2017

Senate Rejects Slimmed-Down Obamacare Repeal as McCain Votes No

By ROBERT PEAR and THOMAS KAPLAN JULY 27, 2017

Collins to vote 'no' on Graham-Cassidy bill, likely killing latest Obamacare repeal



By [MJ Lee](#) and [Lauren Fox](#), CNN

Updated 10:48 PM ET, Mon September 25, 2017



Caitlin Owens Nov 14

Senate tax bill will include individual mandate repeal

The heart of the ACA is still intact

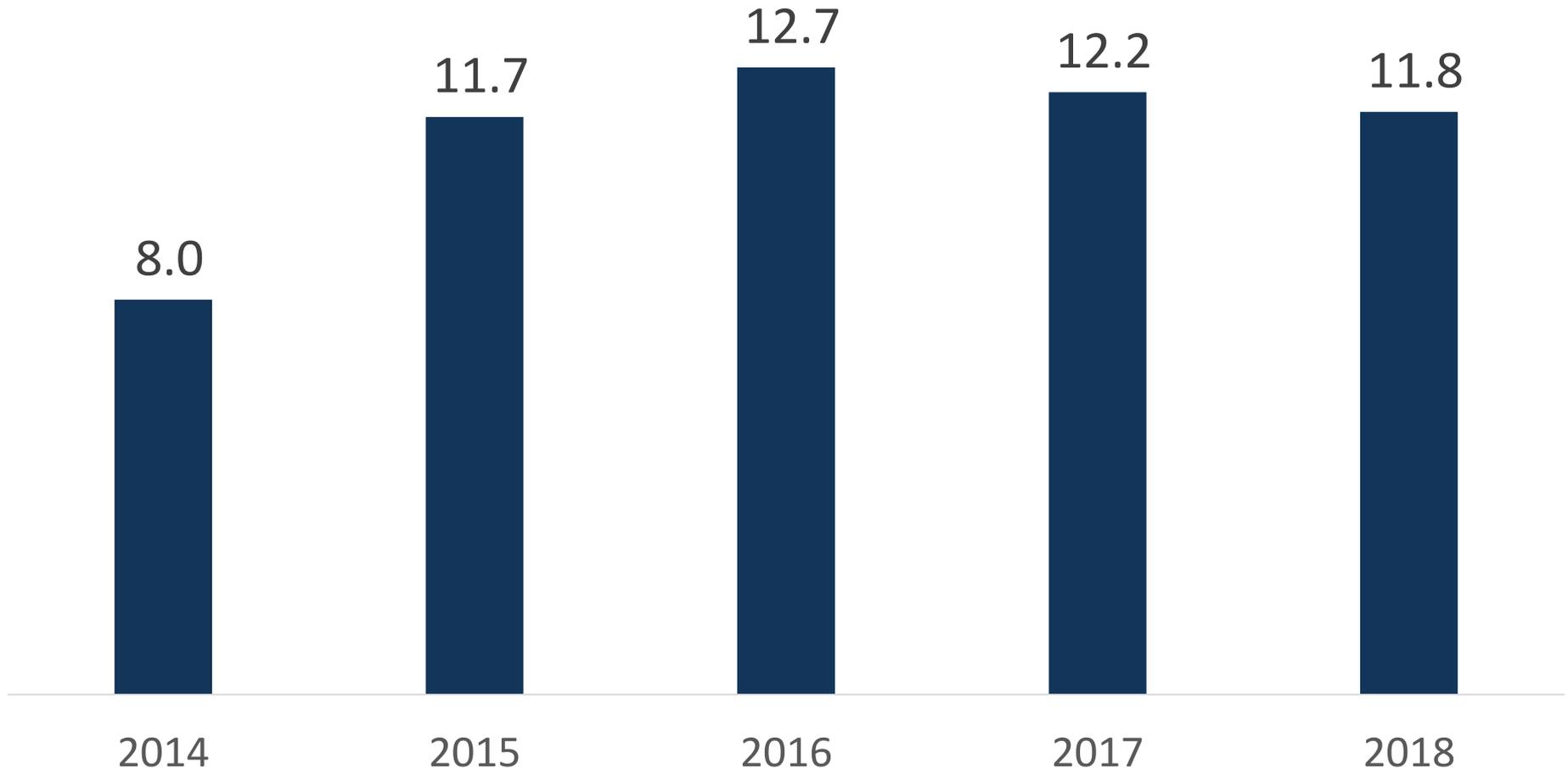
- Enhanced federal matching payments for expanded Medicaid eligibility up to 138% of the poverty level.
- Required coverage of essential benefits.
- Protections for people with pre-existing conditions.
- Premium subsidies for people buying their own insurance with incomes up to 400% of the poverty level.

Administrative actions threatened to undermine open enrollment

- Termination of cost-sharing subsidy payments to insurers.
 - Low-income consumers remain eligible for reduced cost-sharing.
 - Most states and insurers blunted the impact by adding premium surcharges only to silver plans (the benchmark for premium subsidies).
- A 90% reduction in federal outreach funding and a 41% reduction in navigator grants.
- A shortened open enrollment period.

Despite facing significant headwinds, the marketplace persisted

Marketplace plan selections, in millions

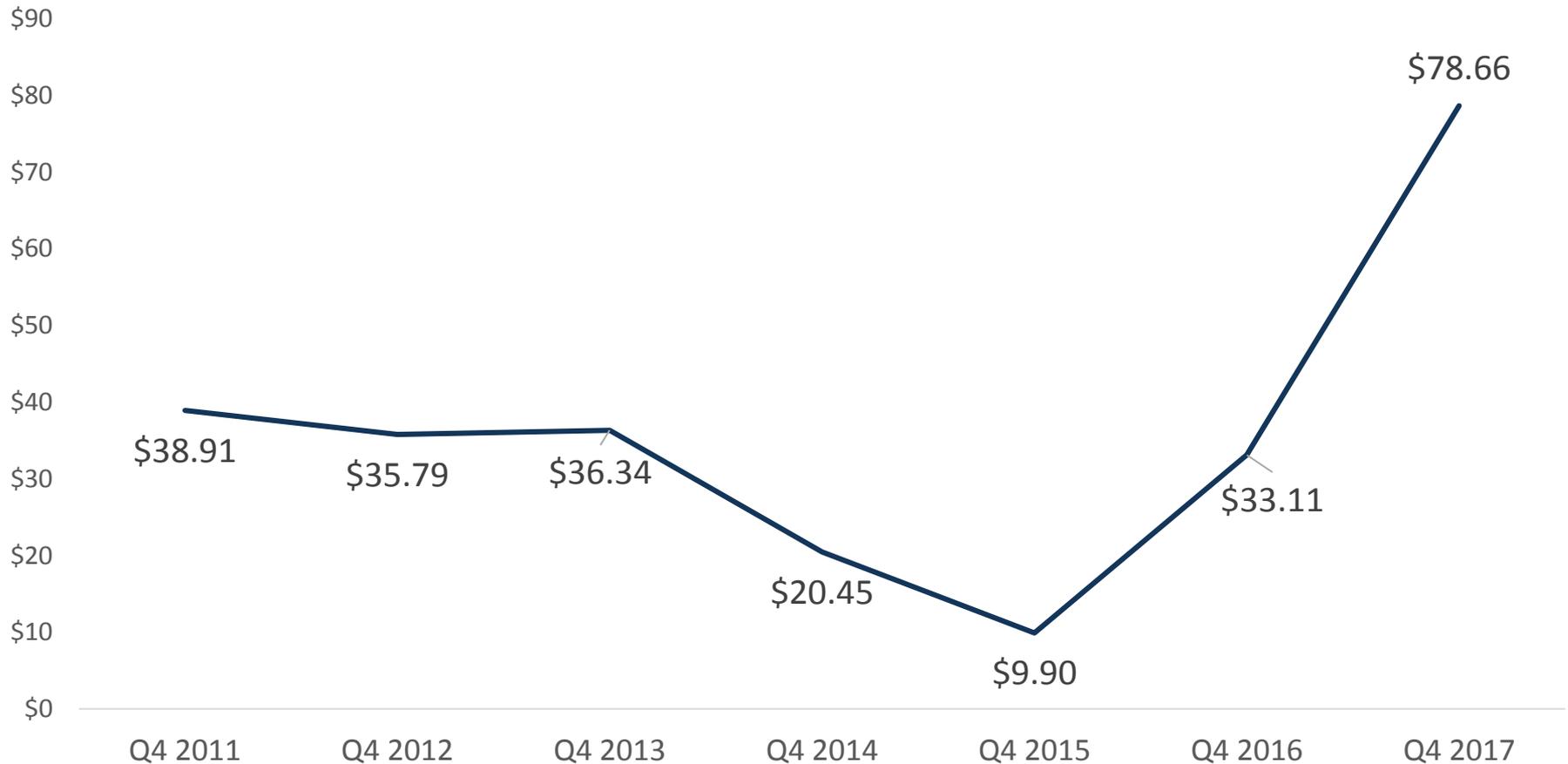


Note: 2018 is preliminary and does not include final figures for California and New York.

Source: <https://www.kff.org/health-reform/state-indicator/marketplace-enrollment-2014-2017/?currentTimeframe=1&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>

Financial condition of non-group market health insurers stabilized with 2017 premium increases

Average individual market gross margins per member per month



Note: Q3 data is year-to-date from January 1 – September 30

Source: Kaiser Family Foundation analysis of data from Mark Farrah Associates Health Coverage Portal TM

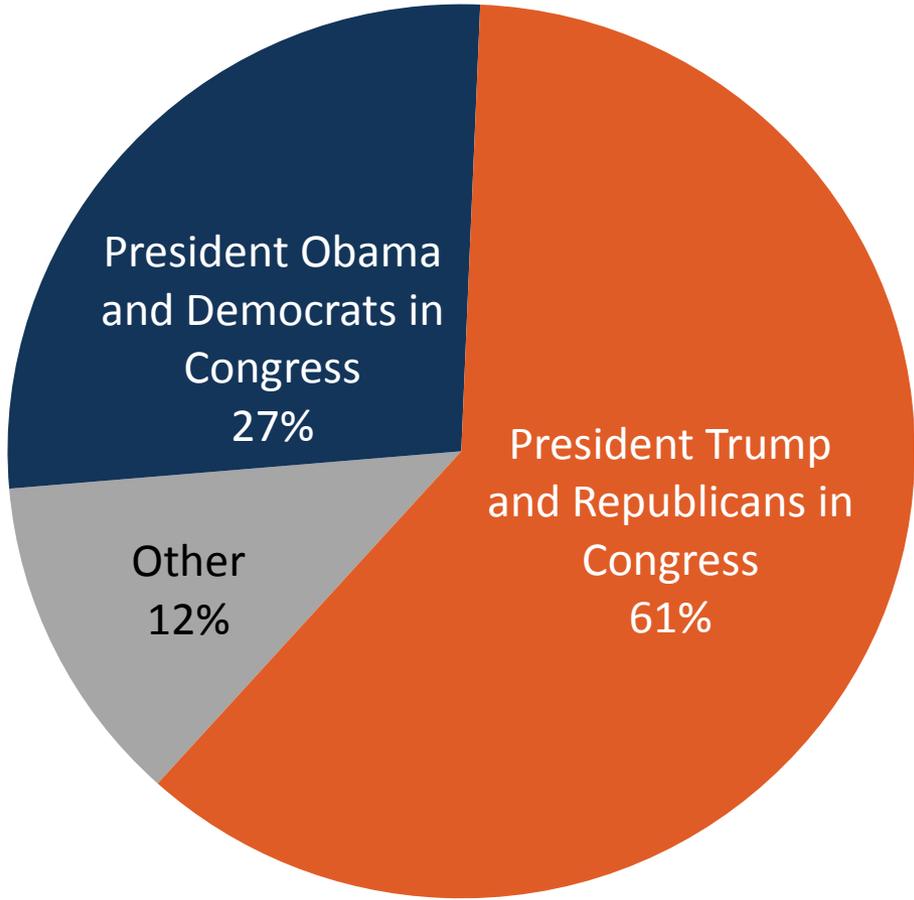
Changes underway will wound the ACA, but not kill it

- Repealing the individual mandate penalty in 2019 will increase premiums and reduce coverage.
 - CBO: 10% average premium increase in the individual insurance market, and 13 million more people uninsured by 2027.
- Loosely-regulated association and short-term health plans will be able to cherry pick healthy people with lower premiums, increasing premiums in the regulated ACA market.
- Premium subsidies will protect lower income people from rate hikes and help to keep the market stable.
- Healthy people may get cheaper options, but middle-class people with pre-existing conditions will feel the full brunt of premium increases.

The effects of federal policy changes will vary tremendously from state to state

- Some markets are more stable than others.
- States running their own insurance exchanges are shielded from federal outreach funding reductions.
- States may be able to limit the expansion of loosely-regulated association and short-term plans.
- States can impose their own individual mandates.
- New flexibility in Medicaid (such as work requirements) is at state discretion.

Who is responsible for any ACA problems going forward?



NOTE: "Other" includes the shares that say "Neither of these/someone else is responsible" (Vol.) and "Both are equally responsible" (Vol.).
SOURCE: Kaiser Family Foundation Health Tracking Poll (conducted January 16-21, 2018).

What's next?

- A bipartisan effort (Alexander-Murray) to fund cost-sharing subsidies seems to be losing steam, and might even do more harm than good at this point.
- A separate effort (Collins-Nelson) would provide federal funding for reinsurance (\$10 billion over two years) and help temporarily offset the premium increase from repealing the individual mandate penalty.
- Another attempt to repeal and replace the ACA or convert Medicaid to a block grant?
- A health care détente?