



**The American Health Care Act released by House Republicans on March 6, 2017 will hurt people living with HIV and others with chronic health conditions.**

**Proposed Process:**

- The ***American Health Care Act*** was introduced on March 6, 2017 in two bills in the US House Ways and Means and the Energy and Commerce Committees.
- March 8, 2017: Committees will begin the mark up of the bills.
- If passed, the bills will be combined by the House Budget Committee and sent to the House Rules Committee.
- If passed, American Health Care Act will move to the full House for a vote, then on to the Senate.
- The Congressional Budget Office (CBO) has not yet released cost estimates for the legislation. [Note: it is unusual for a bill to begin mark up without the CBO having first “scored” the legislation.]

**Selected Provisions of the proposed American Health Care Act that are of Concern to PLWHA**

- **Continuous Coverage Requirement:** The Legislation requires health plans to cover ***pre-existing conditions***, however adds a ***continuous coverage requirement*** for all individuals. Any person who has ***a lapse in coverage of more than 63 days*** will be charged ***30% more*** for their health insurance for one year regardless of their health status. This provision will make it difficult if not impossible for low-income people with pre-existing conditions to re-enter the insurance market once they have had more than a two-month lapse in coverage for a variety of reasons, such as loss of employment.
- **Tax Credits:** Under the ***Affordable Care Act***, individuals received ***tax credits pegged to their income, local cost of insurance, and age*** to help purchase private health insurance. Under the ***proposed American Health Care Act***, ***tax credits are pegged to age only***. According to the [Kaiser Family Foundation](#), the proposed plan will result in low-income people getting less help to pay for their health insurance premiums. The ***tax***

**credits would increase** based on the **Consumer Price Index plus one** and **would not be tied to increases in health care spending nor the cost of insurance.**

- The legislation creates a **Patient and State Stability Fund** that states can use to for high risk pools and other purposes. The bill appropriates \$15 billion/year for 2018 and 2019 and \$10 billion/year each year through 2026. We know from past experience that **high risk pools do not work for low-income people** because of high premiums and high deductibles, among other factors.
- **Issues related to abortion services and Planned Parenthood.**
  - The new tax credits **cannot be used to purchase any health insurance plans that offer elective abortion coverage.**
  - The legislation **prohibits funding for Planned Parenthood for one year** beginning with the law's enactment. [Planned Parenthood](#) operates 650 health centers in the US and provides more than 4.2 million tests and treatment for sexually transmitted infections, including more than 650,000 HIV tests.

#### **Proposed Changes to the Medicaid Program**

- **The Medicaid Program will no longer be a federal entitlement program** under the proposed legislation.
- **Federal Medicaid funding** would be provided to the states on a **per-capita cap** basis. The federal government would provide the states a **pre-set cap per Medicaid enrollee** based on each state's spending in 2016. This proposal puts a cap on federal funding for Medicaid and **shifts responsibility to the states** for all costs over the per beneficiary cost. The proposal also locks in disparities between states in the amount of per-enrollee Medicaid spending and **will likely result in heavy pressure on the states to cut benefits and eligibility in their programs.**
- **Medicaid Expansion:**
  - **Repeals the state option to expand Medicaid above 138% of the federal poverty level as of December 31, 2019.**
  - **Phases out the enhanced federal match for Medicaid beneficiaries in Medicaid expansion states by 2020** making it difficult for many states to continue providing expanded Medicaid.

## Take Action

To reach the [House Ways and Means Committee](#) call (202) 225-3625. The Members of the House Ways and Means Committee [here](#). To reach the [House Energy and Commerce Committee](#) call (202) 225-2927. The Members of the House Energy and Commerce Committee [here](#).

You can find out who your Member of Congress is [here](#).

And you can find *state-specific fact sheets* on the *Impact of the Affordable Care Act* in *Deep South states* [here](#).

1. Ask the Committees to ***hold hearings on the American Health Care Act*** and to ***allow for public comment***;
2. Ask that the legislation ***not be considered until after the Congressional Budget Office has “scored” the legislation*** (conducted an economic analysis of the legislation’s impact.)

## Resources to learn more about the proposed American Health Care Act:

- [House Republicans Unveil Health Care Proposal](#), Center for Health Law & Policy Innovation at Harvard Law School, March 7, 2017
- [Examining The House Republican ACA Repeal and Replace Legislation](#) by Timothy Jost, HealthAffairs Blog, March 7, 2017.
- [What the Republican Obamacare replacement plan means for the sickest Americans](#), Vox, March 7, 2017.
- [Tax Credits under the Affordable Care Act vs. the American Health Care Act: An Interactive Map](#), Kaiser Family Foundation, March 7, 2017.
- [NASHP Chart—A Crosswalk of ACA Provisions with Proposed Language Under the House American Health Care Act](#), National Academy for State Health Policy, March 6, 2017.