WHAT’S AT STAKE FOR WOMEN AND FAMILIES UNDER THE AHCA?

- Millions of women and families would lose coverage, preventing access to primary and preventative services.
- Healthcare costs would increase for millions under the new plan, while providing weaker protections and less adequate coverage.
- Deep, permanent cuts to Medicaid and the elimination of Medicaid expansion would threaten coverage for millions, particularly low-income women and women of color.
- Reductions to insurance tax credits and subsidies could make healthcare unaffordable for many low- and moderate-income women and families.
- The AHCA would block federal funds from Planned Parenthood and other health facilities providing abortion; denying access to preventative and primary care for millions, particularly low-income women, women of color, and women in rural areas.
- The House GOP bill would jeopardize the Essential Health Benefits (EHB) standard provided under the ACA, which has made groundbreaking advancements for women in healthcare such as guaranteed maternity coverage.
- Women may be forced to pay out-of-pocket for mental health treatment or substance abuse services.
- Expanded restrictions on abortion coverage for both public and private insurance plans could potentially dismantle insurance coverage for abortion.
- Older women face exponentially higher costs for coverage, while losing access to some financial assistance for purchasing insurance.
- Women in poverty could be negatively impacted by the emphasis on Health Savings Accounts (HSA) to cover future healthcare costs.
- Women – particularly women of color and women with disabilities – would be disproportionately impacted by the bill’s negative implications for those living in poverty.
The Impact of the House Republican’s ACA Repeal and Replace Bill, The American Health Care Act (AHCA), on Women and Families

The Affordable Care Act (ACA) – also known as Obamacare – has greatly benefited women and families. It has made healthcare affordable for many low- and middle- income women and families, and has provided protections from sex discrimination women faced regularly with healthcare in pricing, in coverage, and in access to care. Despite the successes of the ACA, Republican leaders have vowed to repeal and replace the law.

On Monday, March 6, House Republicans unveiled the American Health Care Act (AHCA), their long-awaited healthcare bill to repeal and replace the ACA. Since the release of the proposal, growing concerns have arisen about that the negative implications of the bill. And while the ACA has led to groundbreaking improvements in healthcare for women, the House Republicans’ replacement bill would be disastrous for women and families.

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Millions of women and families would lose access to healthcare coverage, preventing access to primary and preventative services. Overall, devastating reductions in insurance tax credits and subsidies, cuts to Medicaid, and hikes in premium costs would make healthcare unaffordable and inaccessible for millions of women and families. Under the ACA, women are guaranteed coverage for preventative services such as birth control, cervical cancer screenings, and annual well-woman visits without co-pays, deductibles, or other out-of-pocket costs. Access to these preventative services, which has improved women’s health and in turn helped women achieve better economic security, would be denied to the millions of women losing coverage under the House Republicans’ bill.

In fact, a report released by the nonpartisan Congressional Budget Office, predicts after the first year of the GOP healthcare bill, the number of uninsured people would increase by 14 million people. They further project that 24 million fewer people would have coverage a decade from now than if the Affordable Care Act remains in law. This would nearly double the share of Americans who are uninsured, jumping from 10 percent to 19 percent.
Healthcare costs would increase for millions under the replacement plan, while providing weaker protections and less adequate coverage. The House GOP bill would repeal certain key standards for how much coverage an insurer must provide based on the cost of the premium they charge. As insurers are given a greater flexibility to raise the out-of-pocket costs, shifting costs from insurers to individuals seeking coverage, women and families would be forced to pay more for less adequate coverage. Quality, affordable coverage would be out of reach for many women and families under the AHCA as a result of increased insurance premiums and decreased access to financial assistance. However, wealthy individuals, big insurance companies, and pharmaceutical companies would receive hundreds of billions in tax breaks under the replacement proposal.

Deep, permanent cuts to Medicaid and the elimination of Medicaid expansion would threaten coverage for the millions of low-income women and families, pregnant women, women with disabilities, and elderly women that depend on the program for coverage. One of the most significant changes the GOP replacement bill would make is to the Medicaid program. Under the original proposal, Medicaid funding would be changed to a per capita cap method, which would provide states with a set amount of federal money for each Medicaid enrollee based on 2016 demographics and cost rather than providing the funding based on state needs. Republican leaders made changes to the bill through a “manager’s amendment” that would further change the Medicaid program. Under the amended version of the bill, states would be able to choose a block grant over the per capita cap to fund traditional adult and children in the Medicaid program. Under block grant funding, a state would be given greater flexibility in determining which populations they would cover and the services they would provide, meaning that it is likely either more people would be cut from the Medicaid program or those that are enrolled would receive less coverage. It’s been widely criticized that the changes in funding structure would lead to reduced federal funding to the states and less coverage to the most vulnerable populations currently receiving coverage through the program.

Despite the fact that 77 percent of Medicaid beneficiaries are in households with a workers, the manager’s amendment allows states to include a work requirement for any non-disabled, non-elderly, non-pregnant individual in order to qualify for Medicaid enrollment. As women make up 62 percent of Medicaid enrollees who are not working, these work requirements would disproportionately impact women.

The House Republicans’ plan would also devastate those receiving care through Medicaid expansion. The ACA allowed for states to expand eligibility to Medicaid, which has provided coverage for nearly 700,000 Ohioans. The amendments made to the GOP bill would end the additional Medicaid expansion funding provided under the ACA for any states that have not yet chosen to expand the program as of 2018. States could cover the ACA expansion population, however, as an optional category with their normal Medicaid federal funding after the 2018 deadline. And Medicaid expansion would be phased out by 2020 under the GOP bill, meaning that only those that are enrolled up to and on that date would be able to remain in the program, effectively freezing Medicaid expansion enrollment.

These deep, permanent cuts to the Medicaid program would shift costs to the states, likely leading to more limited eligibility for enrollment and cuts to coverage benefits. Slashing Medicaid would threaten coverage for low-income women and families, pregnant women, people with disabilities, and the elderly that depend on the program for health coverage. Women of color would be disproportionately impacted by these cuts as black women and latina women are more likely than white women to be insured through Medicaid.
Reductions to insurance tax credits and subsidies could make healthcare unaffordable for many low- and moderate-income women and families. The ACA provides access to tax credits and subsidies for many low- and middle-income individuals in order to make access to coverage affordable. Under the House GOP plan, these tax credits would be greatly reduced for those above Medicaid eligibility, but increased for those with higher incomes.

By cutting the ACA’s premium and cost-sharing subsidies, healthcare coverage could become unaffordable for many low- and moderate-income women. And starting in 2020, the income-based subsidies would change to flat tax credits adjusted for age. This system of age-based tax credits would disadvantage younger women that rely upon current financial assistance to access coverage.

The AHCA also imposes a continuous coverage penalty in the form of a 30 percent premium surcharge to be paid to the insurer if the person experiences a break in coverage greater than 63 consecutive days. For many women and families, this penalty would create a financial barrier that puts coverage out of reach.

The AHCA would block federal funds from Planned Parenthood and other health facilities providing abortion; denying access to preventative and primary care for millions, particularly low-income women, women of color, and women in rural areas. The AHCA blocks federal funding from Planned Parenthood and any health organization that offer abortion, except in cases of rape, incest, or life of the pregnant person. Despite the fact that providers are already barred from using federal funding for elective abortions, the GOP’s bill would cut off federal funding in the form of Medicaid reimbursements for Planned Parenthood and any other other healthcare facilities providing abortion outside of those three limited exceptions.

This means that the 2.5 million women getting care at Planned Parenthood under Medicaid coverage would be denied access to vital preventative and primary services such as STI testing, cancer screenings, and birth control. For many low-income and rurally located women, Planned Parenthood clinics are the only available option to receive healthcare services.

The House GOP bill would jeopardize the Essential Health Benefits (EHB) standard provided under the ACA, which has made groundbreaking advancements for women in healthcare such as guaranteed maternity coverage. The EHB would “sunset” by 2020, meaning that it would be left up to states to decide whether or not insurers are required to cover these services. Without the EHB standards, women would be forced to pay out-of-pocket for maternity care, potentially costing them thousands of dollars to deliver a child.

Women may be forced to pay out-of-pocket for mental health treatment or substance abuse services. As the new proposal would phase out both Medicaid and eliminate the guaranteed Essential Health Benefits standard which includes mental health services and substance treatment, many women would no longer be covered for everything from opioid addiction to depression. These individuals would now be forced to pay out-of-pocket to treat any mental health or substance abuse issues.

Expanded restrictions on abortion coverage for both public and private insurance plans could potentially dismantle insurance coverage for abortion. Insurance coverage for abortion already faces dangerous restrictions, but the House GOP bill would create further barriers to accessing abortion coverage. Women would no longer be able to use tax credits to purchase insurance for plans that cover abortion, with exceptions for rape, incest, or life of the pregnant person. The loss of tax credits to afford policies covering abortion would make them too expensive for many individuals and businesses.
This cost-prohibitive provision would then drastically shrink access women have to abortion coverage, or possibly even lead to insurance providers completely dropping abortion coverage from their plans. It would cause women to have to either buy an unsubsidized, far more expensive plan or purchase a separate “rider” on their healthcare plan for abortion coverage.

**Older women face exponentially higher costs for coverage, while losing access to some financial assistance for purchasing insurance.** Prior to the ACA, it was common for insurance companies to hike up the price of coverage for older Americans. To combat this issue, the ACA included a provision that insurance companies were limited to only being allowed to charge three times as much for individuals over 60. The GOP plan would allow for insurance companies to charge as high as five times as much for coverage, while at the same time reducing the amount of premium tax credits available to them and shifting their availability to younger adults.

In the Republican leadership’s amendments to the bill, they did attempt to address this issue by setting aside roughly $85 billion in funding for additional tax credits to buy insurance for individuals between the ages of 50 to 64. However, the House leadership did not specify the exact structuring of these credits in their version of the bill; leaving it up to the Senate to formulate if the bill passes in the House.

**Women in poverty could be negatively impacted by the emphasis on Health Savings Accounts (HSA) to cover future healthcare costs.** The House Republican plan emphasizes the use of Health Savings Accounts, which allows for people to set aside pre-tax dollars to pay for future medical costs. These HSA tend to favor the wealthy, and are an impractical system for low-income women and families unable to put away savings or to cover an unforeseen emergency health issues. Additionally, in changes made to the bill through a manager’s amendment offered by Republican leadership, excess tax credits after paying for premiums are prohibited from being put into HSAs. It is expected that this change was made as a way to ensure that women will not be able to use any tax credits deposited into an HSA to pay for abortions. While this change does not prevent a HSA from reimbursing for abortion, it would prevent tax credits from covering costs of an abortion.

**Women – particularly women of color and women with disabilities – would be disproportionately impacted by the bill’s negative implications for those living in poverty.** Poverty rates are higher for women than they are for men, meaning that many of the provisions new bill that harm those living in poverty would disproportionately impact women. Women of color and women with disabilities would be hit even harder as they experience even higher rates of poverty.

The Ohio Women’s Public Policy Network is a non-partisan coalition of over 25 key advocacy organizations working collaboratively to promote public policies that create economic security for women and strengthen families.

For more information, visit our website at [WWW.WOMENSPUBLICPOLICYNETWORK.ORG](http://WWW.WOMENSPUBLICPOLICYNETWORK.ORG)