Health Reform 201

Impact of Replacing ACA with AHCA in Utah

March 23, 2017
Who is UHPP?

Utah Health Policy Project is a non-profit, non-partisan organization advancing sustainable health care solutions for underserved Utahns, through better access, education, and public policy.

www.healthpolicyproject.org
@UHPP
www.facebook.com/uthpp
FACT

Congress will try to make dramatic changes to the Affordable Care Act (also called Obamacare) this March and April.
Introducing the American Health Care Act (AHCA)

COMMITTEE PRINT

Budget Reconciliation Legislative Recommendations Relating to Repeal and Replace of the Patient Protection and Affordable Care Act

TITLE I—ENERGY AND COMMERCE

Subtitle A—Patient Access to Public Health Programs

SEC. 101. THE PREVENTION AND PUBLIC HEALTH FUND.
(a) In General.—Subsection (b) of section 4002 of the Patient Protection and Affordable Care Act (42 U.S.C. 300u–11), as amended by section 5009 of the 21st Century Cures Act, is amended—
Previous GOP plans repealed more of the ACA...

Speaker Paul Ryan
The Better Way Plan
(33-page outline)

Rep. Tom Price
H.R. 2300:
Empowering Patients
First Act

✓ Switched to age-based tax credits
✓ Provided lower tax credits with no ceiling on income eligibility
✓ Repealed individual and employer mandates
✓ Eliminated Medicaid Expansion immediately
✓ Eliminated ACA’s essential health benefits immediately
✓ Failure to maintain continuous coverage would result in 12/18-month 30% to 50% surcharge to cover pre-existing conditions
✓ Charged women more than men
✓ Changed age ratio to 5:1
✓ Capped pre-tax contributions of employer-based insurance
✓ Funded high-risk pools to help uninsurable
12 Things in the AHCA We Didn’t Expect...

1. Protections for pre-existing conditions that match the ACA
2. No gender disparity for insurance premiums
3. Increased dollar amounts for age-based tax credits (2x gain)
4. Income ceiling for new tax credits ($75k single, $150k family)
5. No lifetime or annual caps on insurance benefits
6. Advanceable & refundable tax credits for premium assistance
7. Continuation of ACA’s essential health benefits thru 2019
8. Caps on out-of-pocket expenditures (deductibles, OPMs)
9. Preservation of tax protections for employer-based insurance
10. No mention of selling insurance across state lines
11. Extension of tax credits to off-exchange plans
12. Keeps Medicaid expansion thru 2019
## 10 Things in the AHCA We Did Expect...

1. The bill doesn’t actually repeal or replace the ACA...
2. Repeal of employer and individual mandates
3. Repeal of cost-sharing reductions (CSRs) that limit out-of-pocket costs
4. Continuous coverage requirement to avoid 30% surcharge on insurance premiums for 12 months (63-day uninsured limit)
5. Switching from income/family size subsidies to age-based tax credits
6. Allowing states to let insurers expand age-ratio from 3:1 to 5:1
7. Repeal of ACA taxes on insurers, high-income earners, tanning salons, medical device makers, insurers ($10T over ten years)
8. Creation of Patient and State Stability Funds to support high-risk pools ($100B over eight years)
9. Cuts Medicaid by changing to a per-capita funding model for states
10. Increase allowable contributions to Health Savings Accounts (HSAs)—and allow HSA funds to purchase OTC medications
7 Things the CBO Revealed About the AHCA

1. 14 Million Americans will lose coverage in 2018, and 24 million by 2026—doubling the U.S. uninsured rate to +18%

2. Utah uninsured rate likely to rise from 10.5% to 15% within 2-3 years

3. The ACA marketplace will remain “stable in most areas”

4. By 2020, two million people will lose employer-based coverage—which will grow to seven million by 2026

5. Medicaid funding will be cut by $880 billion by 2026—resulting in serious benefit and coverage cuts to Utah kids, pregnant women, and people with disabilities

6. Premiums will rise 15-20% over the next few years before falling as older & sicker people lose coverage and drop out of the market

7. The GOP plan will reduce the federal deficit by $337 billion largely due to massive cuts to Medicaid

8. The GOP plan increases the deficit by repealing $600 billion in taxes on capital gains, insurers, prescription drugs and indoor tanning
CBO prediction: **24 million more uninsured Americans** by 2026

Reasons for AHCA coverage loses:
1) Repeal of individual and employer mandates
2) Premium increases / affordability
3) Medicaid cuts

How can insurance premiums change?

1) Age (return to ratio of 5:1)
2) Tobacco use (ratio of 1.5:1)
3) Geography (by counties)
4) Health history (pre-existing)
5) Gender (women pay more)

Due to the return to a 5:1 age ratio, Utahns over age 40 will face premiums hikes up to 30%
The ACHA repeals the individual mandate starting in 2018

- $695 per adult
- $347.50 per child
- Up to $2,085 per household*

Which-ever is higher...

...or 2.5% of adjusted gross income**

(* Flat fee is adjusted for inflation after 2016
(**) Gross income minus the filing threshold
### ACHA age-based annual tax credits

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Credit Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-30</td>
<td>$2,000</td>
</tr>
<tr>
<td>30-39</td>
<td>$2,500</td>
</tr>
<tr>
<td>40-49</td>
<td>$3,000</td>
</tr>
<tr>
<td>50-59</td>
<td>$3,500</td>
</tr>
<tr>
<td>60+</td>
<td>$4,000</td>
</tr>
</tbody>
</table>

- Tax credits begin to phase-out at **$75,000 for single filers**, and **$150,000 for joint filers**, according to Modified Adjusted Gross Income (MAGI).
- Credit amount adjusted annual by CPI + 1% starting in 2021.
- Phase-out is equal to 10% of excess of MAGI above limit, e.g. tax credit for 29 year old ($2,000) would zero out at $95,000.
Who qualifies for the new AHCA tax credits?

- Those covered by state-approved individual health insurance (on or off-exchange) that does not cover non-excepted abortions
- Citizens or nationals of the United States or qualified aliens
- Those not incarcerated other than pending disposition of charges
- Note: Unclear if AHCA tax credits can be applied to health care sharing ministries, and those covered by short-term coverage or unsubsidized COBRA coverage

Who is Excluded from Coverage?

- Those covered by employer-based insurance
- Those covered by government-sponsored coverage (Medicaid, CHIP, Medicare, Tricare, or some COBRA plans)
- Those covered by grandfathered or grandmothered plans
- Undocumented immigrants
Who Wins & Loses under the AHCA?

**Winners**

Younger people (< age 40)

High-income earners insured by individual market (~1.3% of Utah pop.)
(tax credits up to $75k single, or $150k joint filers; higher than ACA)

High-income earners who pay ACA capital gains taxes (~3% of Utah households)
(tax cut for over $250,000 joint filers, $200,000 single filers)

Tanning salons, insurance executives, medical devices (repeals ACA taxes)

**Losers**

Older people (> age 40, and especially ages 55-64)

Utah Medicaid recipients
Kids, pregnant woman, people with disabilities, parents under 50% of poverty)

Anyone concerned about high deductibles
(cost-sharing help cut for 72% of Utah families—deductibles will rise 3x to 6x)

Low-income Utah families with kids on Medicaid or CHIP
(no tax credit for their kids)

Rural Utahns
(No geographic adjustment for locally higher premiums)
## Comparing Monthly Tax Credits for Utah Families

<table>
<thead>
<tr>
<th>Family</th>
<th>Ages</th>
<th>County</th>
<th>Annual Income</th>
<th>% of Poverty Level</th>
<th>ACA</th>
<th>AHCA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pulsipipers</strong></td>
<td>37, 35, 12, 10, 8, 6 (Kids on Medicaid)</td>
<td>Sevier County</td>
<td>$36,000</td>
<td>109%</td>
<td>$652</td>
<td>$375</td>
</tr>
<tr>
<td><strong>Hernandez’s</strong></td>
<td>32, 29, 10, 12</td>
<td>Salt Lake County</td>
<td>$26,000</td>
<td>109%</td>
<td>$502</td>
<td>$375</td>
</tr>
<tr>
<td><strong>Shumways</strong></td>
<td>24, 23, 1</td>
<td>Salt Lake County</td>
<td>$44,000</td>
<td>220%</td>
<td>$348</td>
<td>$500</td>
</tr>
<tr>
<td><strong>Petersons</strong></td>
<td>55, 52, 17, 14, 12, 10 (Kids on CHIP)</td>
<td>Utah County</td>
<td>$53,000</td>
<td>160%</td>
<td>$779</td>
<td>$500</td>
</tr>
<tr>
<td><strong>Smiths</strong></td>
<td>62, 60</td>
<td>Washington County</td>
<td>$42,000</td>
<td>263%</td>
<td>$1,210</td>
<td>$667</td>
</tr>
</tbody>
</table>

Sources: AHCA; https://www.healthcare.gov/see-plans/; Image sources: Chemisti; LorenKerns; Moodboard
The Shumways
Family of 4
Ages: 32, 32, 12, and 10
Income: $40,000

Children on CHIP

Repealing the ACA will double the health insurance exposure for the middle-class Shumway family....

<table>
<thead>
<tr>
<th></th>
<th>Real Premium (annual)</th>
<th>Deductible (annual)</th>
<th>Premium + Deductible</th>
<th>P+D as % of income</th>
<th>Out-of-Pocket Max</th>
<th>Total (P+OPM)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ACA</strong> (Benchmark Silver Plan)</td>
<td>$1,951*</td>
<td>$1,400**</td>
<td>$3,351</td>
<td>8.4%</td>
<td>$4,000</td>
<td>$5,951</td>
</tr>
<tr>
<td><strong>AHCA</strong> (Latest plan)</td>
<td>$1,000***</td>
<td>$6,000</td>
<td>$7,000</td>
<td>17.5%</td>
<td>$10,000</td>
<td>$11,000</td>
</tr>
</tbody>
</table>

| Difference | -48% | +329% | +109% | +109% | +150% | +85% |

(*) ACA: $162.56 monthly premium after $386.82 monthly subsidy; [Unsubsidized monthly premium for two adults: $549.38]

(**) ACA: Cost-sharing reductions (CSRs) decreased deductible from $7,000 to $1,400 annual. CSRs not included in AHCA.

(*** ACHA: $500 monthly premium ($6,000 annual) offset by $5,000 age-based tax credit ($2,500 per parent); $83 monthly premium
The Simonsens
Family of 4
Ages: 32, 32, 12, and 10
Income: $120,000

Repealing the ACA will decrease real premium costs by 9x for the Simonsen family

<table>
<thead>
<tr>
<th>487% FPL</th>
<th>Real premium (annual)</th>
<th>Deductible (annual)</th>
<th>Premium + Deductible</th>
<th>P+D as % of income</th>
<th>Out-of-Pocket Max</th>
<th>Total (P+OPM)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ACA</strong> (Benchmark Silver Plan)</td>
<td>$10,354*</td>
<td>$7,000</td>
<td>$17,354</td>
<td>14.5%</td>
<td>$14,300</td>
<td>$24,654</td>
</tr>
<tr>
<td><strong>AHCA</strong> (Latest plan)</td>
<td>$600**</td>
<td>$6,000</td>
<td>$6,600</td>
<td>5.5%</td>
<td>$10,000</td>
<td>$10,600</td>
</tr>
<tr>
<td><strong>Difference</strong></td>
<td>-94%</td>
<td>-14%</td>
<td><strong>-62%</strong></td>
<td>-62%</td>
<td>-30%</td>
<td>-57%</td>
</tr>
</tbody>
</table>

(*) ACA: $862.80 monthly premium. No subsidy
(**) AHCA: $800 monthly premium ($9,600 annual) offset by $9,000 age-based tax credits ($2,500 per parent; $2,000 per child); $50 month premium after tax credit
FACT: The AHCA tax credits will allow a family of 4 earning $120,000 a year to pay less in premiums than an identical family making $40,000

<table>
<thead>
<tr>
<th>Annual Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1,000</td>
</tr>
<tr>
<td>$600</td>
</tr>
</tbody>
</table>

The Shumways
Family of 4
Ages: 32, 32, 12, and 10
Income: $40,000
167% of poverty level

The Simonsens
Family of 4
Ages: 32, 32, 12, and 10
Income: $120,000
467% of poverty level

Notes: Shumways: Assuming $500 monthly premium [9% discount form 2017 ACA Benchmark Silver plan] ($6,000 annual) offset by $5,000 age-based tax credit ($2,500 per parent); no tax credits for kids because they are on Medicaid; $83 monthly premium; Simonsens: Assuming $800 monthly premium [7% discount from 2017 ACA Silver Benchmark plan] ($9,600 annual) offset by $9,000 age-based tax credits ($2,500 per parent; $2,000 per child); $50 month premium after tax credit
The next Open Enrollment period would be cut in half under proposed HHS regulations.

Next Open Enrollment: Nov. 1, 2017 -- Dec. 15, 2017
Most insurers believe the 30% premium surcharge won’t be enough to stabilize risk pools.
Summary: Impact of repealing the ACA on Utahns

Reduces financial assistance for tens of thousands of Utah families by replacing income-based subsidies with age-limited tax credits

**Cuts tax credits** for families with children covered by Medicaid/CHIP

Spikes insurance premiums by 20-30% for older Utahns [age 40+]

Penalizes Utahns with a 12-month, 30% surcharge on insurance premiums if they don’t sign up—essentially a “sick penalty” because only the desperately sick will pay the extra cost

Sets up **Medicaid for deep benefit cuts** by creating state budget holes

**Raises co-pays and deductibles** for 72% of Utahns enrolled in marketplace insurance by eliminating cost-sharing assistance

Cuts Medicaid by $882 billion—leading to coverage & benefit cuts

**Makes 52 million Americans uninsured** by 2026 - according to CBO report
Proposed Timeline for Passing the AHCA

**HOUSE**

**Early January** | Congress passed a budget resolution with instructions to develop the language for package.

**March 6** | Ways & Means and Energy & Commerce committees released drafts of American Health Care Act (AHCA)

**March 8** | The House Ways & Means and Energy & Commerce committees begin bill mark-up process

**March 8-10** | Each committee will then vote on their bill and we expect each committee to pass their version.

**March 13** | House Republicans send the approved language to the Budget Committee to combine into one bill.

**March 13-16** | Budget Committee most confirm bill satisfies reconciliation instructions to reduce costs by $2 billion dollars over the next 10 years. Budget Committee needs “score” from the Congressional Budget Office (“CBO”). CBO score is expected by March 15. CBO score will include the cost estimate, who receives tax cuts, how many people will lose coverage and the impact on federal Medicaid spending.

**March 15-16** | If bill satisfies reconciliation requirements, Budget Committee approves bill and sends to the Rules Committee for a vote.

**March 20-24** | Republicans send approved language from Rules committee to the floor of the House for debate, amendments, and a floor vote. **Note:** We do not believe that the Republican leadership has the votes for passage and may not have the votes locked down even when the bill hits the House floor. They will be working the House members to vote in favor of the reconciliation legislation from now through the roll call vote on the floor.

**SENATE**

**March 27** | If the House passes the bill, it will go to the Senate, bypass the committees and head straight to the floor.

**March 27-28** | Senate Parliamentarian will certify which portions are sufficiently related to the federal budget. Any items that do not meet this test will be eliminated from the legislation (i.e. the so-called “Byrd Bath”).

**March 27-30** | Senate rules require 20 hours of debate before a vote. Only 51 votes are required to pass budget reconciliation in the Senate. If the Senate does not pass the same bill as the House, the Senate will send the bill back to the House for one last vote.

**April 3-7** | Likely week of Senate vote and conference committee to reconcile differences between bills. Sent to President Trump for signature.

**April 10-21** | Scheduled April recess for Congress
Where Utah Stands in 2017
Utah’s sign-ups on healthcare.gov reached 197,187 in 2017

Utah’s ACA enrollment grew 12.3% in 2017
Utah’s enrollment growth ranked #3 among 37 FFM* states

<table>
<thead>
<tr>
<th>Rank</th>
<th>State</th>
<th>2016 Open Enrollment 3 (Final)</th>
<th>2017 Open Enrollment 4 (Final)</th>
<th>Difference (#)</th>
<th>Difference (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Hawaii</td>
<td>14,564</td>
<td>18,938</td>
<td>4,374</td>
<td>30.0%</td>
</tr>
<tr>
<td>2</td>
<td>South Dakota</td>
<td>25,999</td>
<td>29,622</td>
<td>3,623</td>
<td>13.9%</td>
</tr>
<tr>
<td>3</td>
<td>Utah</td>
<td>175,637</td>
<td>197,187</td>
<td>21,550</td>
<td>12.3%</td>
</tr>
<tr>
<td>4</td>
<td>Oregon</td>
<td>147,109</td>
<td>155,430</td>
<td>8,321</td>
<td>5.7%</td>
</tr>
<tr>
<td>5</td>
<td>Wyoming</td>
<td>23,770</td>
<td>24,826</td>
<td>1,056</td>
<td>4.4%</td>
</tr>
<tr>
<td>6</td>
<td>New Jersey</td>
<td>288,573</td>
<td>295,067</td>
<td>6,494</td>
<td>2.3%</td>
</tr>
<tr>
<td>7</td>
<td>North Dakota</td>
<td>21,604</td>
<td>21,982</td>
<td>378</td>
<td>1.7%</td>
</tr>
<tr>
<td>8</td>
<td>Wisconsin</td>
<td>239,034</td>
<td>242,863</td>
<td>3,829</td>
<td>1.6%</td>
</tr>
<tr>
<td>9</td>
<td>Nevada</td>
<td>88,145</td>
<td>89,061</td>
<td>916</td>
<td>1.0%</td>
</tr>
<tr>
<td>10</td>
<td>Florida</td>
<td>1,742,819</td>
<td>1,760,025</td>
<td>17,206</td>
<td>1.0%</td>
</tr>
</tbody>
</table>

(*) FFM means federally-facilitated marketplace, or healthcare.gov

Sources: [2017 Final] Biweekly Enrollment Snapshot; Weeks 12 through 14; Date 2017-02-03; Weeks 12-14; 11/1/16 thru 1/31/17; Link: https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2017-Fact-Sheet-items/2017-02-03.html?DLPage=1&DLEntries=10&DLSort=0&SortDir=descending; [2016 Final] Health Insurance Marketplace Open Enrollment Snapshot - Week 13; Date 2016-02-04; Week 13; 11/1/15 thru 1/31/16; https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2016-Fact-sheets-items/2016-02-04.html
## Utah’s Recent ACA Enrollment Growth Remains Concentrated in Utah County

<table>
<thead>
<tr>
<th>ZIP CODE</th>
<th>City</th>
<th>2017</th>
<th>2016</th>
<th># Change 2016-17</th>
<th>% Change 2016-17</th>
<th>2017 Rank</th>
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<tbody>
<tr>
<td>84043</td>
<td>Lehi</td>
<td>4,479</td>
<td>3,827</td>
<td>652</td>
<td>17.0%</td>
<td>1</td>
</tr>
<tr>
<td>84095/84009*</td>
<td>South Jordan</td>
<td>4,343</td>
<td>3,835</td>
<td>508</td>
<td>13.2%</td>
<td>2</td>
</tr>
<tr>
<td>84003</td>
<td>American Fork</td>
<td>3,538</td>
<td>3,291</td>
<td>247</td>
<td>7.5%</td>
<td>3</td>
</tr>
<tr>
<td>84062</td>
<td>Pleasant Grove</td>
<td>3,497</td>
<td>3,253</td>
<td>244</td>
<td>7.5%</td>
<td>4</td>
</tr>
<tr>
<td>84790</td>
<td>St. George</td>
<td>3,412</td>
<td>3,208</td>
<td>204</td>
<td>6.4%</td>
<td>5</td>
</tr>
<tr>
<td>84770</td>
<td>St. George</td>
<td>3,368</td>
<td>3,112</td>
<td>256</td>
<td>8.2%</td>
<td>6</td>
</tr>
<tr>
<td>84020</td>
<td>Draper</td>
<td>3,333</td>
<td>2,936</td>
<td>397</td>
<td>13.5%</td>
<td>7</td>
</tr>
<tr>
<td>84660</td>
<td>Spanish Fork</td>
<td>3,232</td>
<td>2,698</td>
<td>534</td>
<td>19.8%</td>
<td>8</td>
</tr>
<tr>
<td>84604</td>
<td>Provo</td>
<td>3,006</td>
<td>2,604</td>
<td>402</td>
<td>15.4%</td>
<td>9</td>
</tr>
<tr>
<td>84065</td>
<td>Riverton/Bluffdale</td>
<td>2,868</td>
<td>2,527</td>
<td>341</td>
<td>13.5%</td>
<td>10</td>
</tr>
<tr>
<td>84010</td>
<td>Bountiful</td>
<td>2,824</td>
<td>2,745</td>
<td>79</td>
<td>2.9%</td>
<td>11</td>
</tr>
<tr>
<td>84096</td>
<td>Herriman</td>
<td>2,818</td>
<td>2,521</td>
<td>297</td>
<td>11.8%</td>
<td>12</td>
</tr>
<tr>
<td>84119</td>
<td>West Valley City</td>
<td>2,788</td>
<td>2,901</td>
<td>-113</td>
<td>-3.9%</td>
<td>13</td>
</tr>
<tr>
<td>84058</td>
<td>Orem</td>
<td>2,783</td>
<td>2,479</td>
<td>304</td>
<td>12.3%</td>
<td>14</td>
</tr>
<tr>
<td>84404</td>
<td>Ogden</td>
<td>2,760</td>
<td>2,646</td>
<td>114</td>
<td>4.3%</td>
<td>15</td>
</tr>
<tr>
<td>84121</td>
<td>Cottonwood Heights</td>
<td>2,747</td>
<td>2,530</td>
<td>217</td>
<td>8.6%</td>
<td>16</td>
</tr>
<tr>
<td>84057</td>
<td>Orem</td>
<td>2,719</td>
<td>2,574</td>
<td>145</td>
<td>5.6%</td>
<td>17</td>
</tr>
<tr>
<td>84120</td>
<td>West Valley City</td>
<td>2,664</td>
<td>2,842</td>
<td>-178</td>
<td>-6.3%</td>
<td>18</td>
</tr>
<tr>
<td>84015</td>
<td>Clearfield</td>
<td>2,613</td>
<td>2,625</td>
<td>-12</td>
<td>-0.5%</td>
<td>19</td>
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<tr>
<td>84663</td>
<td>Springville</td>
<td>2,527</td>
<td>2,191</td>
<td>336</td>
<td>15.3%</td>
<td>20</td>
</tr>
</tbody>
</table>

(*) In 2015, the USPS split the 84095 ZIP code for South Jordan into two ZIP Codes. The new ZIP Code is 84009, which includes all of the Daybreak planned community. 84095 had 3,007 people enrolled in OE4; while 84009 had 1336 enrolled in OE4 - making a total of 4,343 for South Jordan. The OE3 data in this chart also accounts for the two ZIP Codes. During OE3 the 841095 ZIP Code enrolled 3,669 people, while only 166 people were counted for enrollment in 84009. Source: [2016] Addendum to the Health Insurance Marketplaces 2016 Open Enrollment Period: Final Enrollment Report; Date: 2016-03-11; For the period: November 1, 2015 – February 1, 2016; https://aspe.hhs.gov/health-insurance-marketplaces-2016-open-enrollment-period-final-enrollment-report; [2017] Health Insurance Marketplace Plan Selections by ZIP Code; 2017 Open Enrollment Period - Mid Open Enrollment Report; Nov. 1, 2016 — Dec. 24, 2016; https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Marketplace-Products/Plan_Selection_ZIP.html
### Enrollment grew more in newer suburban areas of Salt Lake County

<table>
<thead>
<tr>
<th>City</th>
<th>Zip Code</th>
<th>Open Enrollment 3 (as of 2/1/16)</th>
<th>Open Enrollment 4 (as of 12/24/16)</th>
<th>Change OE3 to OE4</th>
<th>% Change OE3 to OE4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Draper</td>
<td>84020</td>
<td>2,936</td>
<td>3,333</td>
<td>397</td>
<td>13.5%</td>
</tr>
<tr>
<td>Magna</td>
<td>84044</td>
<td>1,241</td>
<td>1,117</td>
<td>-124</td>
<td>-10.0%</td>
</tr>
<tr>
<td>Midvale</td>
<td>84047</td>
<td>2,036</td>
<td>1,974</td>
<td>-62</td>
<td>-3.0%</td>
</tr>
<tr>
<td>Riverton</td>
<td>84065</td>
<td>2,527</td>
<td>2,868</td>
<td>341</td>
<td>13.5%</td>
</tr>
<tr>
<td>Sandy</td>
<td>84070; 84092; 84093; 84094</td>
<td>7,088</td>
<td>7,450</td>
<td>362</td>
<td>5.1%</td>
</tr>
<tr>
<td>West Jordan</td>
<td>84084; 84088</td>
<td>3,576</td>
<td>3,485</td>
<td>-91</td>
<td>-2.5%</td>
</tr>
<tr>
<td>South Jordan</td>
<td>84095, 84009</td>
<td>3,835</td>
<td>4,343</td>
<td>508</td>
<td>13.2%</td>
</tr>
<tr>
<td>Herriman</td>
<td>84096</td>
<td>2,521</td>
<td>2,818</td>
<td>297</td>
<td>11.8%</td>
</tr>
<tr>
<td>Salt Lake City</td>
<td>84101-84114; 84116-84124</td>
<td>23,681</td>
<td>23,770</td>
<td>89</td>
<td>0.4%</td>
</tr>
<tr>
<td>South Salt Lake</td>
<td>84115</td>
<td>1,800</td>
<td>1,807</td>
<td>7</td>
<td>0.4%</td>
</tr>
<tr>
<td>West Valley City</td>
<td>84128; 84120; 84119; 84118</td>
<td>9,493</td>
<td>9,005</td>
<td>-488</td>
<td>-5.1%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>60,568</strong></td>
<td><strong>61,970</strong></td>
<td><strong>1402</strong></td>
<td><strong>2.3%</strong></td>
</tr>
</tbody>
</table>

Source: [2016] Addendum to the Health Insurance Marketplaces 2016 Open Enrollment Period: Final Enrollment Report; Date: 2016-03-11; For the period: November 1, 2015 – February 1, 2016; https://aspe.hhs.gov/health-insurance-marketplaces-2016-open-enrollment-period-final-enrollment-report
# Total ACA enrollment in Utah County grew 26.7% in 2016-17

<table>
<thead>
<tr>
<th>City</th>
<th>Zip Code</th>
<th>Open Enrollment 3 (as of 2/1/16)</th>
<th>Open Enrollment 4 (as of 12/24/16)</th>
<th># Change OE3 to OE4</th>
<th>% Change OE3 to OE4</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Fork</td>
<td>84003</td>
<td>2948</td>
<td>3,538</td>
<td>590</td>
<td>20.0%</td>
</tr>
<tr>
<td>Alpine</td>
<td>84004</td>
<td>719</td>
<td>905</td>
<td>186</td>
<td>25.9%</td>
</tr>
<tr>
<td>Eagle Mountain</td>
<td>84005</td>
<td>1539</td>
<td>1,940</td>
<td>401</td>
<td>26.1%</td>
</tr>
<tr>
<td>Cedar Valley</td>
<td>84013</td>
<td>71</td>
<td>70</td>
<td>-1</td>
<td>-1.4%</td>
</tr>
<tr>
<td>Lindon</td>
<td>84042</td>
<td>752</td>
<td>932</td>
<td>180</td>
<td>23.9%</td>
</tr>
<tr>
<td>Lehi</td>
<td>84043</td>
<td>3501</td>
<td>4,479</td>
<td>978</td>
<td>27.9%</td>
</tr>
<tr>
<td>Saratoga Springs</td>
<td>84045</td>
<td>1324</td>
<td>1,785</td>
<td>461</td>
<td>34.8%</td>
</tr>
<tr>
<td>Orem</td>
<td>84057, 84058, 84097</td>
<td>5,808</td>
<td>7,399</td>
<td>1,591</td>
<td>27.4%</td>
</tr>
<tr>
<td>Pleasant Grove</td>
<td>84062</td>
<td>2,931</td>
<td>3,497</td>
<td>566</td>
<td>19.3%</td>
</tr>
<tr>
<td>Provo</td>
<td>84601, 84602, 86604, 84606</td>
<td>5,702</td>
<td>7,081</td>
<td>1,379</td>
<td>24.2%</td>
</tr>
<tr>
<td>Goshen</td>
<td>84633</td>
<td>59</td>
<td>59</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Payson</td>
<td>84651</td>
<td>1,410</td>
<td>1,760</td>
<td>350</td>
<td>24.8%</td>
</tr>
<tr>
<td>Salem</td>
<td>84653</td>
<td>557</td>
<td>768</td>
<td>211</td>
<td>37.9%</td>
</tr>
<tr>
<td>Santaquin</td>
<td>84655</td>
<td>695</td>
<td>883</td>
<td>188</td>
<td>27.1%</td>
</tr>
<tr>
<td>Spanish Fork</td>
<td>84660</td>
<td>2,377</td>
<td>3,232</td>
<td>855</td>
<td>36.0%</td>
</tr>
<tr>
<td>Springville</td>
<td>84663</td>
<td>1,929</td>
<td>2,527</td>
<td>598</td>
<td>31.0%</td>
</tr>
<tr>
<td>Mapleton</td>
<td>84664</td>
<td>665</td>
<td>939</td>
<td>274</td>
<td>41.2%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>32,987</strong></td>
<td><strong>41,794</strong></td>
<td><strong>8,807</strong></td>
<td><strong>26.7%</strong></td>
</tr>
</tbody>
</table>

Source: [2016] Addendum to the Health Insurance Marketplaces 2016 Open Enrollment Period: Final Enrollment Report; Date: 2016-03-11; For the period: November 1, 2015 – February 1, 2016; https://aspe.hhs.gov/health-insurance-marketplaces-2016-open-enrollment-period-final-enrollment-report
## Total ACA enrollment in Washington County grew 6.1% in 2016-17

<table>
<thead>
<tr>
<th>City</th>
<th>Zip Code</th>
<th>Third Open Enrollment (as of 3/1/16)</th>
<th>Fourth Open Enrollment (as of 12/24/2016)</th>
<th># Change OE3 to OE4</th>
<th>% Change OE3 to OE4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enterprise</td>
<td>84725</td>
<td>175</td>
<td>175</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Hurricane</td>
<td>84737</td>
<td>1,166</td>
<td>1,107</td>
<td>-59</td>
<td>-5.1%</td>
</tr>
<tr>
<td>Ivins</td>
<td>84738</td>
<td>609</td>
<td>700</td>
<td>91</td>
<td>14.9%</td>
</tr>
<tr>
<td>La Verkin</td>
<td>84745</td>
<td>278</td>
<td>262</td>
<td>-16</td>
<td>-5.8%</td>
</tr>
<tr>
<td>New Harmony</td>
<td>84757</td>
<td>89</td>
<td>90</td>
<td>1</td>
<td>1.1%</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>84765</td>
<td>652</td>
<td>665</td>
<td>13</td>
<td>2.0%</td>
</tr>
<tr>
<td>Springdale</td>
<td>84767</td>
<td>107</td>
<td>102</td>
<td>-5</td>
<td>-4.7%</td>
</tr>
<tr>
<td>Saint George</td>
<td>84770; 84771; 84790; 84791</td>
<td>6,320</td>
<td>6,780</td>
<td>460</td>
<td>7.3%</td>
</tr>
<tr>
<td>Toquerville</td>
<td>84774</td>
<td>108</td>
<td>120</td>
<td>12</td>
<td>11.1%</td>
</tr>
<tr>
<td>Washington</td>
<td>84780</td>
<td>2,021</td>
<td>2,226</td>
<td>205</td>
<td>10.1%</td>
</tr>
<tr>
<td>Veyo</td>
<td>84782</td>
<td>75</td>
<td>74</td>
<td>-1</td>
<td>-1.3%</td>
</tr>
<tr>
<td>Dammeron Valley</td>
<td>84783</td>
<td>69</td>
<td>71</td>
<td>2</td>
<td>2.9%</td>
</tr>
<tr>
<td>Hildale</td>
<td>84784</td>
<td>75</td>
<td>82</td>
<td>7</td>
<td>9.3%</td>
</tr>
<tr>
<td>Leeds</td>
<td>84746</td>
<td>84</td>
<td>95</td>
<td>11</td>
<td>13.1%</td>
</tr>
<tr>
<td>Virgin</td>
<td>84779</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>11,828</strong></td>
<td><strong>12,549</strong></td>
<td><strong>721</strong></td>
<td><strong>6.1%</strong></td>
</tr>
</tbody>
</table>

Source: [2016] Addendum to the Health Insurance Marketplaces 2016 Open Enrollment Period: Final Enrollment Report; Date: 2016-03-11; For the period: November 1, 2015 – February 1, 2016; [https://aspe.hhs.gov/health-insurance-marketplaces-2016-open-enrollment-period-final-enrollment-report](https://aspe.hhs.gov/health-insurance-marketplaces-2016-open-enrollment-period-final-enrollment-report)
In Utah, the uninsured rate for people earning over 200% of poverty has **declined the most**

**Utah Uninsured Rate by Income Level (2009-2015)**

<table>
<thead>
<tr>
<th>Year</th>
<th>Under 200% FPL</th>
<th>All incomes</th>
<th>Above 200% FPL</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>26.6%</td>
<td>14.6%</td>
<td>9.3%</td>
</tr>
<tr>
<td>2010</td>
<td>27.7%</td>
<td>15.4%</td>
<td>9.2%</td>
</tr>
<tr>
<td>2011</td>
<td>27.1%</td>
<td>15.3%</td>
<td>9.3%</td>
</tr>
<tr>
<td>2012</td>
<td>27.0%</td>
<td>14.5%</td>
<td>8.1%</td>
</tr>
<tr>
<td>2013</td>
<td>25.3%</td>
<td>14.0%</td>
<td>8.7%</td>
</tr>
<tr>
<td>2014</td>
<td>23.3%</td>
<td>12.5%</td>
<td>7.8%</td>
</tr>
<tr>
<td>2015</td>
<td>19.9%</td>
<td>10.5%</td>
<td>6.5%</td>
</tr>
</tbody>
</table>

## 2014-17 Individual Marketplace Comparison

<table>
<thead>
<tr>
<th>Year</th>
<th>Plans</th>
<th>Altius Health Plans</th>
<th>Arches</th>
<th>BridgeSpan</th>
<th>Humana</th>
<th>Molina Healthcare</th>
<th>Select Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>91</td>
<td>6</td>
<td>26</td>
<td>34</td>
<td>24</td>
<td>6</td>
<td>11</td>
</tr>
<tr>
<td>2015</td>
<td>101</td>
<td>5</td>
<td>26</td>
<td>40</td>
<td>27</td>
<td>5</td>
<td>11</td>
</tr>
<tr>
<td>2016</td>
<td>74</td>
<td>2</td>
<td>19</td>
<td>19</td>
<td>21</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>2017</td>
<td>28</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year</th>
<th>Plans</th>
<th>Humana (6)</th>
<th>Molina Healthcare (3)</th>
<th>Select Health (60)</th>
<th>University of Utah (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>91</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>101</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>74</td>
<td>(6)</td>
<td>(3)</td>
<td>(60)</td>
<td>(5)</td>
</tr>
<tr>
<td>2017</td>
<td>28</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Platinum**  
1 plan  
0 plans  
2 plans  
0 plans

**Gold**  
24 plans  
27 plans  
21 plans  
4 plans

**Silver**  
34 plans  
40 plans  
27 plans  
11 plans

**Bronze**  
26 plans  
29 plans  
19 plans  
11 plans

**Catastrophic**  
6 plans  
5 plans  
5 plans  
2 plans

Sources:  
95% of Utahns will have access to two or more marketplace insurers in 2017

<table>
<thead>
<tr>
<th>Accessible Insurers</th>
<th>Utah Population (2014)</th>
<th>% of Utah Population (2014)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Molina; SelectHealth; Univ. of Utah Health Plans</td>
<td>2,375,104</td>
<td>80.7%</td>
</tr>
<tr>
<td>SelectHealth; Univ. of Utah Health Plans</td>
<td>424,851</td>
<td>14.4%</td>
</tr>
<tr>
<td>SelectHealth</td>
<td>142,947</td>
<td>4.9%</td>
</tr>
</tbody>
</table>

8 Utah counties added a marketplace insurer in 2017

Gained one insurer in 2017
Sliding-scale subsidies make insurance more affordable

If your income/family size is on this chart, you qualify for a subsidy

<table>
<thead>
<tr>
<th>Household Size</th>
<th>100%</th>
<th>139%</th>
<th>150%</th>
<th>200%</th>
<th>250%</th>
<th>300%</th>
<th>400%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$11,880</td>
<td>$16,524</td>
<td>$17,820</td>
<td>$23,760</td>
<td>$29,700</td>
<td>$35,640</td>
<td>$47,520</td>
</tr>
<tr>
<td>2</td>
<td>$16,020</td>
<td>$22,272</td>
<td>$24,030</td>
<td>$32,040</td>
<td>$40,050</td>
<td>$48,060</td>
<td>$64,080</td>
</tr>
<tr>
<td>3</td>
<td>$20,160</td>
<td>$28,032</td>
<td>$30,240</td>
<td>$40,320</td>
<td>$50,400</td>
<td>$60,480</td>
<td>$80,640</td>
</tr>
<tr>
<td>4</td>
<td>$24,300</td>
<td>$33,780</td>
<td>$36,450</td>
<td>$48,600</td>
<td>$60,750</td>
<td>$72,900</td>
<td>$97,200</td>
</tr>
<tr>
<td>5</td>
<td>$28,440</td>
<td>$39,540</td>
<td>$42,660</td>
<td>$56,880</td>
<td>$71,100</td>
<td>$85,320</td>
<td>$113,760</td>
</tr>
<tr>
<td>6</td>
<td>$32,580</td>
<td>$45,288</td>
<td>$48,870</td>
<td>$65,160</td>
<td>$81,450</td>
<td>$97,740</td>
<td>$130,320</td>
</tr>
<tr>
<td>7</td>
<td>$36,730</td>
<td>$51,060</td>
<td>$55,095</td>
<td>$73,460</td>
<td>$91,825</td>
<td>$110,190</td>
<td>$146,920</td>
</tr>
<tr>
<td>8</td>
<td>$40,890</td>
<td>$56,844</td>
<td>$61,335</td>
<td>$81,780</td>
<td>$102,225</td>
<td>$122,670</td>
<td>$163,560</td>
</tr>
</tbody>
</table>

For 2017, a family of four can earn about **$97,000** a year and receive a premium subsidy.

The 2016 FPL guidelines are applied to the 2017 Marketplace plans.
These guidelines only apply to the Lower 48 States (Alaska and Hawaii have their own guidelines).
Source: Link: http://familiesusa.org/product/federal-poverty-guidelines
# The Hernandez Family

**Residence:** Salt Lake City, Utah  
**Ages:**  
- Dad: 33  
- Mom: 29  
- Kids: 11, 7  
**Annual income:** $26,000  
**% of poverty level:** 109%

## Monthly Premium Details
- **Premium:** $550  
- **Subsidy pays:** $502 per month  
- **The Hernandez’s pay:** $48 per month  

## ACA Tax Credit
- **ACA tax credit:** $6,024

## Health Insurance Plan Details
- **Deductible:** $500  
- **Out-of-pocket maximum:** $2,500  
- **Primary doctor:** $5  
- **Specialist doctor:** $15  
- **Emergency room care:** $100  
- **Generic drugs:** $3

Source: [https://www.healthcare.gov/see-plans/](https://www.healthcare.gov/see-plans/); Image source: Moodboard
### Jill

**Residence:** Provo, Utah  
**Age:** 31  
**Child:** 8  
**Child:** 6  

#### Annual income:
- **$32,000**

#### % of poverty level:
- **156%**

#### Monthly premium:
- **$282**
  - **Subsidy pays:** $160 per month  
  - **Jill pays:** $122 per month

#### ACA tax credit:
- **$1,920**

### How much does Jill pay for health insurance?

- **Deductible:** $700  
- **Out-of-pocket maximum:** $2,000

- **Primary doctor:** $10  
- **Specialist doctor:** $25  
- **Emergency room care:** $150  
- **Generic drugs:** $5

**Plan Details**

- **Benchmark Silver plan (Molina):** $141/month with $300 deductible  
- **SelectHealth Silver plan costs:** $141/month with $300 deductible

Source: https://www.healthcare.gov/see-plans/; Image source: Moodboard
The Shumway Family
Residence: Draper, UT
Ages:
  Dad: 24
  Mom: 23
  Kid: Newborn

Annual income: $44,000
% of poverty level: 220%

Monthly premium: $612
Subsidy pays: $348 per month
The Shumway’s pay: $263 per month

ACA tax credit: $4,176

Plan Details
Deductible: $6,000
Out-of-pocket maximum: $11,400

Primary doctor: $30
Specialist doctor: $65
Emergency room care: $300
Generic drugs: $10

Source: https://www.healthcare.gov/see-plans/; Image source: Moodboard
The Smiths
Residence: Santa Clara, UT
Ages: 62, 60

How much do the Smith’s pay for health insurance?

Annual income: $42,000
% of poverty level: 263%

Monthly premium: $1,544
Subsidy pays: $1,210 / month
The Smith’s pay: $333 per month

ACA tax credit: $14,520

Benchmark Silver plan
Subsidy increased by $400 per month over 2016 amount

Plan Details
Deductible: $3,000
Out-of-pocket maximum: $14,300
Primary doctor: $35
Specialist doctor: $60
Emergency room care: $600
Generic drugs: $15

Source: https://www.healthcare.gov/see-plans/; Image source: Moodboard
Utah has the nation’s highest percentage (25%) of children enrolled in ACA coverage.

Source: Health Insurance Marketplaces 2017 Open Enrollment Period: January Enrollment Report; Date: 1/10/17; For period 11/1/16 to 12/24/16; Weeks 8-9; Link: https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2017-Fact-Sheet-items/2017-01-10.html?DLPage=1&DLEntries=10&DSort=0&DSortDir=descending

(*) FFM stands for Federally-managed marketplace (healthcare.gov)
72% of Utah’s ACA enrollment earns below 250% of the poverty level

Source: Health Insurance Marketplaces 2017 Open Enrollment Period: January Enrollment Report; Date: 1/10/17; For period 11/1/16 to 12/24/16; Weeks 8-9; Link: https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2017-Fact-Sheet-items/2017-01-10.html?DLPage=1&DLEntries=10&DLSort=0&DLSortDir=descending

Thirty-seven FFM states

ACA reduces deductibles & co-pays for families earning below 250% FPL

Poverty Level

- 100% to 150%
- 151% to 200%
- 201% to 250%
- 251% to 300%
- 301% to 400%

Utah Pie Chart

- 31% earning below 200%
- 22% earning 100% to 150%
- 19% earning 151% to 200%
- 9% earning 201% to 250%
- 8% earning 251% to 300%
- 9% earning 301% to 400%

Source: Health Insurance Marketplaces 2017 Open Enrollment Period: January Enrollment Report; Date: 1/10/17; For period 11/1/16 to 12/24/16; Weeks 8-9; Link: https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2017-Fact-Sheet-items/2017-01-10.html?DLPage=1&DLEntries=10&DLSort=0&DLSortDir=descending
ACA subsidies cover 69% of average monthly premiums for Utah enrollees

**Impact of monthly subsidies on ACA insurance premiums**

- **Utah**
  - Average Monthly Premium: $271/month
  - Subsidy Impact:
    - Consumer Cost: $84 (31%)
    - Subsidy Amount: $187 (69%)

**Subsidy Impact**

- Consumer Cost
- Subsidy Amount

**37 FFM states**

- Average Monthly Premium: $290/month
  - Subsidy Impact:
    - Consumer Cost: $106 (27%)
    - Subsidy Amount: $290 (73%)

Source: Addendum to the Health Insurance Marketplaces 2016 Open Enrollment Period: Final Enrollment Report; For the period: November 1, 2015 – February 1, 2016 [https://aspe.hhs.gov/health-insurance-marketplaces-2016-open-enrollment-period-final-enrollment-report; Released: March 11, 2016](https://aspe.hhs.gov/health-insurance-marketplaces-2016-open-enrollment-period-final-enrollment-report)
Ways to Repair the ACA

• Fix the “family glitch” so that family members priced out of employer-based coverage can get subsidies to purchase marketplace insurance

• Add tax credits for consumers on individual market earning above 400% of poverty level

• Increase contribution amounts to health savings accounts (HSAs)

• Create “Copper Plan” with high deductibles, low premiums, and open to all consumers regardless of age, income

• Allow more small business “association health plans” sponsored by business and professional organizations

• Allow Medicare to negotiate for prescription drugs

• Allow insurers to sell policies across state lines
Where can Utahns find help applying for health insurance?

www.takecareutah.org  |  call 2-1-1

TCU’s trained counselors are ready to help you understand your new options to find affordable health care coverage today.
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