PROTECT OUR CARE

Trump Administration Attempts to Reverse Pre-Existing Condition Protections, Threatening 1.2 Million Mississippians' Care

The Trump Administration recently [announced](#) a dramatic escalation of its attempts to roll back protections for people with pre-existing conditions, saying its Department of Justice will ask the courts to eliminate these protections. The move comes after [multiple](#) [attempts](#) by Congress to [repeal](#) the Affordable Care Act and Administration proposals to encourage [short-term 'junk' plans](#) that can discriminate against people with pre-existing conditions.

1,195,900 Mississippians Live With A Pre-Existing Condition. About one in two Mississippians, 49 percent, lives with a pre-existing condition. *[CAP, [4/5/17](#)]*

173,700 Mississippi Children Already Have A Pre-Existing Condition. Roughly 174,000 Mississippians below age 18 live with a pre-existing condition. *[CAP, [4/5/17](#)]*

262,200 Older Mississippians Live With A Pre-Existing Condition. 262,200 Mississippi adults between the ages of 55 and 64 live with at least one pre-existing condition, meaning attacks on these protections significantly threaten Mississippians approaching Medicare age. *[CAP, [4/5/17](#)]*

THE AFFORDABLE CARE ACT OUTLAWED DISCRIMINATION BASED ON PRE-EXISTING CONDITIONS

Because Of The Affordable Care Act, Insurance Companies Can No Longer Deny Coverage Or Charge More Because Of Pre-Existing Conditions. "Under current law, health insurance companies can't refuse to cover you or charge you more just because you have a 'pre-existing condition' — that is, a health problem you had before the date that new health coverage starts." *[[HHS](#)]*

The ACA Outlawed Medical Underwriting, The Practice That Let Insurance Companies Charge Sick People And Women More. As the Brookings Institution [summarizes](#), "The ACA outlawed medical underwriting, which had enabled insurance carriers to court the healthiest customers while denying coverage to people likely to need costly care. The ACA guaranteed that all applicants could buy insurance and that their premiums would not be adjusted for gender or personal characteristics other than age and smoking."

The ACA Stopped Companies From Charging Women More Than Men For The Same Plan. The Affordable Care Act eliminated "gender rating," meaning American women no longer have to pay an aggregated [$1 billion more](#) per year than men for the same coverage.

Thanks To The Affordable Care Act, Insurance Companies Can No Longer Rescind Coverage Because of Illness. Because of the ACA, insurance companies can [no longer](#) rescind or cancel someone's coverage arbitrarily if they get sick.

NOW, THE TRUMP ADMINISTRATION WANTS TO BRING BACK PRE-EXISTING CONDITION DISCRIMINATION

Since Assuming Office, President Trump And Congressional Republicans Have Repeatedly Attempted To Repeal The Affordable Care Act And With It, Protections For People With Pre-Existing Conditions.

- **The Trump Administration Just Asked Courts To Eliminate Protections For People With Pre-Existing Conditions.** In early June, the Trump Administration's Department of Justice [decided to argue](#) that courts should throw out the Affordable Care Act's protections for people with pre-existing conditions.

- **Senate Republican Repeal Bill Would Have [Allowed States](#) To Waive ACA Protections, Allowing Insurance Companies To Charge Sick Patients More.**

- **House Republican Repeal Bill Would Have Allowed Insurance Companies to Charge People With Pre-Existing Conditions "[Prohibitively High Premiums](.)."**

BEFORE THE AFFORDABLE CARE ACT, INSURANCE COMPANIES ROUTINELY DENIED COVERAGE BECAUSE OF PRE-EXISTING CONDITIONS

Before The Affordable Care Act, Insurance Companies Maintained Lists Of So-Called Deniable Medical Conditions. If someone had one or more 'deniable' conditions, they were automatically denied coverage. Common 'deniable' conditions included:

- Pregnancy, alcohol or drug abuse with recent treatment, dementia, arthritis, cancer, cerebral palsy, epilepsy, hemophilia, hepatitis, diabetes, paralysis, severe obesity, sleep apnea, AIDS/HIV, kidney disease, multiple sclerosis, bipolar disorder, eating disorders, pending surgery or hospitalization, and muscular dystrophy. *[Kaiser Family Foundation, [December 2016](.)]*

Many Insurance Companies Also Maintained Lists Of Deniable Medications — Meaning That They Could Deny Coverage To Any Applicant With A Prescription For: Anti-arthritic medications, anti-diabetic medications, medications for HIV/AIDS or hepatitis, anti-cancer medications, anti-psychotics or other central nervous system medications, anti-coagulant medications, and other common drugs. *[Kaiser Family Foundation, [12/12/16](.)]*

Insurance Companies Also Denied Coverage Based On People's Jobs. For example, Preferred One Insurance Company used to deny coverage from people with the following [professions](.): active military personnel, air traffic controllers, bodyguards, firefighters, law enforcement professionals, detectives, professional athletes, taxi cab drivers, window washers, security guards, scuba divers, miners, pilots, and offshore drillers.

Before The Affordable Care Act, 18 Percent Of Individual Market Applications Were Denied By Insurance Companies Because Of A Pre-Existing Condition. Experts believe this shocking statistic is actually an underestimate, [because](.) "many people with health conditions did not apply [for coverage] because they knew or were informed by an agent that they would not be accepted." *[Kaiser Family Foundation, [12/12/16](.)]*

If Someone Who Managed To Get Insurance Later Got Sick, Insurance Companies Could Find Ways To Charge Them More Or Rescind Coverage. Before the ACA, if someone had a condition expected to cost the insurance company more, such as acne, the insurance company would follow a practice called "medical underwriting" that allowed them to charge the applicant a higher premium, specifically exclude coverage for the condition that was expected to be costly, charge the applicant a higher deductible, and/or limit the applicant's benefits (for instance, offer a policy that does not cover prescription drugs). Conditions that would trigger medical underwriting [included](.): acne, allergies, anxiety, asthma, basal cell skin cancer, depression, ear infections, fractures, high cholesterol, hypertension, incontinence, joint injuries, kidney stones, menstrual irregularities, migraine headaches, being overweight, restless leg syndrome, tonsillitis, urinary tract infections, varicose veins, and vertigo.

- **This Foul Play Impacted Robin Beaton, Whose Insurance Company Denied Her Coverage For A Double Mastectomy Because She Had Previously Received Acne Treatment.** "Robin Beaton found out last June she had an aggressive form of breast cancer and needed surgery -- immediately. Her insurance carrier precertified her for a double mastectomy and hospital stay. But three days before the operation, the insurance company called and told her they had red-flagged her chart and she would not be able to have her surgery. The reason? In May 2008, Beaton had visited a dermatologist for acne. A word written on her chart was interpreted to mean precancerous, so the insurance company decided to launch an investigation into her medical history. Beaton's dermatologist begged her insurance provider to go ahead with the surgery...Still, the insurance carrier decided to rescind her coverage. The company said it had reviewed her medical records and found out that she had misinformed them about some of her medical history. Beaton had listed her weight incorrectly. She also didn't disclose medication she had taken for a pre-existing heart condition -- medicine she wasn't taking when she originally applied for coverage." [*CNN*, [6/19/09](.)]