

Trump-Backed Texas Lawsuit Would Devastate Nebraskans

The future of our health care is at stake. On November 10, 2020 — one week after the election — the U.S. Supreme Court will hear oral arguments in California v. Texas, a case that could overturn the entire Affordable Care Act (ACA), ending its protections for 135 million Americans with pre-existing conditions and ripping health care away from more than 20 million Americans, all during a raging pandemic. As Senate Republicans continue to rush the confirmation of anti-ACA Judge Amy Coney Barrett, it has never been more clear that Americans' health care is on the ballot.

If Trump Gets His Way, Nebraskans Would Lose Their Coverage

- **125,000 Nebraskans Could Lose Coverage.** According to the Urban Institute, 125,000 Nebraskans would lose coverage by repealing the Affordable Care Act, leading to a 93% increase in the uninsured rate.
- 14,000 Nebraska Young Adults With Their Parents' Coverage Could Lose Care. Because of the Affordable Care Act, millions of young adults are able to stay on their parents' care until age 26.
- **Nebraska Children Could Lose Their Coverage.** Almost <u>three million children</u> nationwide gained coverage thanks to the ACA. If the law is overturned, many of these children will lose their insurance.
- 3,400 Nebraska Latinos Could Lose Coverage. The percentage of people gaining health insurance under the ACA was higher for Latinos than for any other racial or ethnic group in the country. According to a study from <u>Families USA</u>, 5.4 million Latinos nationwide would lose coverage if the lawsuit succeeds in overturning the ACA.
- Nebraskans Would Lose Important Federal Health Care Funding An Estimated Reduction Of \$1.2 million In
 The First Year. The Urban Institute <u>estimates</u> that a full repeal of the ACA would reduce federal spending on
 Nebraskans' Medicaid/CHIP care and Marketplace subsidies by \$1.2 million.

If Trump Gets His Way, Insurance Companies Would Be Put Back In Charge, Ending Protections For The 135 Million People Nationwide With A Pre-Existing Condition

- According to a recent <u>analysis</u> by the Center for American Progress, roughly half of nonelderly Americans, or as many as 135 million people, have a pre-existing condition. This includes:
 - O 44 million people who have high blood pressure
 - O 45 million people who have behavioral health disorders
 - O 44 million people who have high cholesterol
 - O 34 million people who have asthma and chronic lung disease
 - O 34 million people who have osteoarthritis and other joint disorders
 - 789,700 Nebraskans <u>have</u> a pre-existing condition, including 113,500 Nebraska <u>children</u>, 398,000 Nebraska women, and 189,200 Nebraskans between ages 55 and 64.

If Trump Gets His Way, Insurance Companies Would Have The Power To Deny, Drop Coverage, And Charge More Because Of A Pre-Existing Condition

Before the Affordable Care Act, insurance companies routinely denied people coverage because of a pre-existing condition or canceled coverage when a person got sick. If the Trump-GOP lawsuit is successful, insurance companies will be able to do this again.

- A 2010 congressional report found that the top four health insurance companies <u>denied coverage to one in seven</u> <u>consumers</u> on the individual market over a three year period. A 2009 congressional report found that the largest insurance companies had retroactively canceled coverage for 20,000 people over the previous five year period
- The Kaiser Family Foundation estimates that <u>54 million people</u>, or 27% of adults aged 18 to 64, have a condition that would have been grounds for coverage denial in the pre-ACA marketplace.

If Trump Gets His Way, Insurance Companies Would Have The Power To Charge You More, While Their Profits Soar

- Insurance Companies Could Charge Premium Surcharges In The Six Figures. If the Trump-GOP lawsuit is successful, insurance companies would be able to charge people more because of a pre-existing condition. The health care repeal bill the House passed in 2017 had a similar provision, and an analysis by the Center for American Progress found that insurers could charge up to \$4,270 more for asthma, \$17,060 more for pregnancy, \$26,180 more for rheumatoid arthritis and \$140,510 more for metastatic cancer.
- Women Could Be Charged More Than Men for the Same Coverage. Prior to the ACA, women were often charged premiums on the nongroup market <u>up to 50 percent higher</u> than men were charged for the same coverage
- People Over The Age Of 50 Could Face A \$4,000 "Age Tax," Including \$6,011 In Nebraska. Because Judge O'Connor sided with Republican lawmakers, insurance companies would be able to charge people over 50 more than younger people. The Affordable Care Act limited the amount older people could be charged to three times more than younger people. If insurers were to charge five times more, as was proposed in the Republican repeal bills, that would add an average "age tax" of \$4,124 for a 60-year-old in the individual market, including \$6,011 in Nebraska, according to the AARP.
- 76,949 Nebraskans In The Marketplaces Would Pay More For Coverage. If the Trump-GOP lawsuit is successful, consumers would no longer have access to tax credits that help them pay their marketplace premiums, meaning roughly nine million people who receive these tax credits to pay for coverage will have to pay more, including 76,949 in Nebraska.
- 29,089 Nebraskans Seniors Could Have To Pay More For Prescription Drugs. If the Trump-GOP lawsuit is successful, seniors could have to pay more for prescription drugs because the Medicare "donut" hole would be reopened. From 2010 to 2016, "More than 11.8 million Medicare beneficiaries have received discounts over \$26.8 billion on prescription drugs an average of \$2,272 per beneficiary," according to a <u>January 2017 CMS report</u>. In Nebraska, 29,089 seniors each saved an average of Nebraskans \$999.
- Insurance Companies Do Not Have To Provide The Coverage You Need. The Affordable Care Act made
 comprehensive coverage more available by requiring insurance companies to include "essential health benefits" in
 their plans, such as maternity care, hospitalization, substance abuse care and prescription drug coverage. Before the
 ACA, people had to pay extra for separate coverage for these benefits. For example, in 2013, 75 percent of non-group
 plans did not cover maternity care, 45 percent did not cover substance abuse disorder services, and 38 percent did
 not cover mental health services. Six percent did not even cover generic drugs.

If Trump Gets His Way, Insurance Companies Would Have the Power to Limit the Care You Get, Even If You Have Insurance Through Your Employer

- Reinstate Lifetime And Annual Limits On 701,000 Privately Insured Nebraskans. Repealing the Affordable Care
 Act means insurance companies would be able to impose <u>annual and lifetime limits</u> on coverage for those insured
 through their employer or on the individual market.
- 923,926 Nebraskans Could Once Again Have To Pay For Preventive Care. Because of the ACA, health plans must cover preventive services like flu shots, cancer screenings, contraception, and mammograms at no cost to consumers. This includes nearly 923,926 Nebraskans, most of whom have employer coverage.
- Employers Could Eliminate Out-Of-Pocket Caps, Forcing Employees To Pay More For Care. Under the ACA, health insurers and employer group plans must cap the amount enrollees pay for health care each year. If the law is overturned, these cost-sharing protections would be eliminated. The ACA also barred employer plans from imposing waiting periods for benefits that last longer than three months.

If Trump Gets His Way, Medicaid Expansion Would Be Repealed

- 106,000 Nebraskans Who Could Gain Coverage If Nebraska Were To Expand Medicaid Will Be Denied That Possibility. By not fully expanding Medicaid, Nebraska has <u>restricted</u> its Medicaid program, preventing 106,000 residents from gaining coverage.
- Access To Treatment Would Be In Jeopardy For 800,000 People With Opioid Use Disorder. Roughly four in ten, or 800,000 people with an opioid use disorder are enrolled in Medicaid. Many became eligible through Medicaid expansion.
- **Key Support For Rural Hospitals Would Disappear**, <u>leaving</u> Nebraska hospitals with \$183 million more in uncompensated care.