An Agenda *for* Health Care in 2023: Building on Our Victories

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Defining a Health Care Agenda for the 118th Congress

Introduction

In 2020, voters went to the polls demanding lower health care costs, and now they are getting the relief they desperately need. President Biden and Democratic lawmakers have delivered the most expansive health care reforms since passage of the Affordable Care Act (ACA). In 2021, Democrats passed the American Rescue Plan, which provided essential relief during the COVID-19 pandemic and lowered health care premiums for millions of families. In 2022, Democrats passed the Inflation Reduction Act to drive down drug prices and extend the premium savings under the American Rescue Plan. Congress also passed a far-reaching package to strengthen health care for moms and kids and address the nation's maternal health crisis.

In addition to passing this historic legislation, the Biden administration took important executive actions to expand coverage, lower costs, and advance health equity. The Biden administration boosted funding for the Navigator program to help connect even more people to coverage, with a focus on outreach to racial and ethnic minorities, people in rural areas, LGBTQ+ people, and other underserved communities. President Biden also eliminated the "family glitch," which previously blocked millions of families from receiving affordable coverage under the ACA, allowing an estimated 200,000 uninsured Americans to gain coverage and save hundreds of dollars each month on health premiums. As a result, ACA coverage is more affordable than ever before, and the uninsured rate has reached an <u>all-time low</u>.

These policies are overwhelmingly popular with Americans, no matter their political party. They are also critical to expand access to care and, ultimately, achieve better health outcomes, particularly for people of color, rural Americans, LGBTQ+ individuals, people with disabilities, and more. The issue of health care remains evergreen in its power to bring voters together.

Still, there is more work to be done to protect these coverage gains and make health care more affordable and more equitable for the American people. As we enter the 118th Congress, President Biden and Democratic lawmakers should build on the achievements over the past two years to lower costs, improve care, and put the well-being of families first.

Additionally, it is critical to hold Republicans accountable for their efforts to undermine health care for millions, specifically their attacks on Medicare, Medicaid, the IRA, and the ACA through legislation and in the courts. Every Republican in Congress voted against lowering drug and

premium prices, and the MAGA-majority in the House along with GOP leaders in the Senate have promised to gut Medicaid and Medicare and repeal the Inflation Reduction Act. Meanwhile, <u>nearly</u> a dozen Republican states continue to stand in the way of expanding Medicaid, and far-right advocates continue to attack protections under the ACA in the courts. The GOP's <u>plan</u> would raise premiums, end Medicare and Medicaid as we know it, rip away lifesaving protections, reverse recent coverage gains, and hike prescription drug costs for the American people.

Specifically, Congress should work to permanently extend the enhanced ACA tax credits that made coverage more affordable for millions of people. Lawmakers should also build on the historic progress of the Inflation Reduction Act to reduce prescription drug prices not just for seniors, but for everyone with insurance. Additionally, lawmakers must continue to work toward closing the Medicaid coverage gap and strengthening coverage for mothers, children, and families across the country.

Our strategies are driven by a broader commitment to tackling systemic inequities that persist due to racism and discrimination and the reality that multi-sector policies are needed to address basic conditions that affect health and related outcomes, particularly for people of color, rural Americans, LGBTQ+ individuals, people with disabilities, and other marginalized communities. As lawmakers continue to build on their progress to make health care more affordable, accessible, and equitable, we are getting closer to making health care a right for every American.

Lower Health Care Costs

Central to Protect Our Care's agenda is lowering costs so everyone can get the health care they need to thrive. Lower costs also mean Americans can have more breathing room to pay for other necessities like food, child care, and rent. In order to do so, lawmakers must build on the Inflation Reduction Act to further reduce drug costs and permanently extend the enhanced ACA tax credits that made coverage more affordable for millions of people. These policies will make health care more accessible and are important steps to make care more equitable for Americans, from rural residents to people with disabilities to people of color.

Permanently Extend Tax Credits to Lower Premiums For American Families

- **Making Enhanced Premium Tax Credits Permanent.** The American Rescue Plan helped enrollees save an average \$2,400 per year on premiums through 2025. The premium savings continued through the Inflation Reduction Act have made more than <u>65 percent</u> of uninsured Black adults and more than <u>68 percent</u> of uninsured Hispanic and Latino adults eligible for zero dollar premium plans. Additionally, nearly <u>80 percent</u> of uninsured Hispanic and Latino adults and <u>75 percent</u> of uninsured Black adults can now also access plans for less than \$50 a month. If trends continue, once the premium tax credits expire in 2025, millions of Americans could lose their health insurance and upwards of 20 million would see health care prices skyrocket. This situation must be avoided and Congress must continue building upon the success of the ACA, ARP, and IRA in order to provide more Americans with affordable health care.
- Thanks to the American Rescue Plan and Inflation Reduction Act, the 2023 open enrollment period was the most successful to date. The latest numbers indicate that a record breaking <u>16 million people</u> have been able to enroll in quality, affordable coverage, with <u>80 percent</u> of enrollees finding plans for \$10 or less.
- Despite historic gains in health care coverage, Republicans are seeking to repeal the premium tax credits, which would result in nearly <u>3 million</u> Americans losing health care coverage entirely. While Republicans have spent years trying to dismantle the Affordable Care Act, President Biden and Democrats delivered on their promise to protect and expand it. Lawmakers must continue to protect the ACA from Republican attacks and attempts to roll back our progress.

Reduce Prescription Drug Prices For Everyone

• **Extend Insulin Caps To Everyone.** The Inflation Reduction Act lowers prescription drug costs for Medicare's 49 million beneficiaries by capping out of pocket costs at \$2,000 a year, limiting insulin copays to \$35 a month, and for the first time allowing

Medicare to negotiate lower drug prices on behalf of its beneficiaries. In a ten year period, insulin prices <u>skyrocketed</u> from \$231 per milliliter to an average of \$736 with the most commonly used forms of insulin in the United States costing nearly <u>10 times</u> that of other developed nations. The Inflation Reduction Act has been the first federal initiative to control the pricing of insulin for those currently on Medicare, which represents around <u>41 percent</u> of those who currently rely on insulin, and can save some Medicare beneficiaries up to <u>\$1,500 annually</u>. Every Republican in Congress voted against this historic legislation and voted to block its provisions from applying to every American with health insurance. If this cap is expanded to include all Americans on private insurance, around <u>25 percent</u> of those who currently pay more than \$35 a month on insulin would save over \$500 annually, and half would save over \$225 annually, drastically reducing the burden of health care for those with diabetes.

- Make Medicare Price Negotiations Available To All. With nearly <u>83 percent</u> of the American public in support of Medicare having the power to negotiate lower drug prices, this provision was one of the most popular in the Inflation Reduction Act. Billions of dollars annually are estimated to be saved with Medicare now having the power to negotiate prescription drug costs. These savings will be seen in not just the federal government but the out-of-pocket medical expenses paid by millions of American families. However, there is room to expand these savings from just Medicare recipients to all Americans on private insurance. According to <u>reports</u> analyzing the potential effects of the original H.R. 3 bill from the 117th Congress, the federal government negotiating drug prices on behalf of both Medicare and private insurance would save Part D enrollees nearly \$120 billion over a ten year period, and those with private insurance <u>would save</u> a collective \$54 billion over the same period.
- **Protect More Americans From Big Pharma's Outrageous Price Hikes.** As of October 1, 2022, drug companies are charged a <u>penalty</u> when they raise Medicare drug prices faster than the rate of inflation thanks to the Inflation Reduction Act. In recent years, Americans have been paying three times more than people in other countries for the same prescription drugs and <u>HHS</u> found that drugmakers raised the list prices of more than 1,200 treatments above the 8.5 percent rate of inflation from July 2021 to July 2022. Applying the Inflation Reduction Act's rebate requirements to the private insurance market in addition to Medicare would generate drug cost <u>savings</u> for people with employer-sponsored insurance as well as those who buy coverage individually.

Strengthen Coverage

Protect Our Care is fighting to expand existing programs and strengthen the coverage provided by them, particularly Medicaid. For example, over <u>31 million</u> adult women rely on Medicaid and women of color are <u>disproportionately</u> likely to be covered by Medicaid. As well, due to systemic inequality, nearly <u>33</u> percent of Black Americans, <u>30</u> percent of Hispanic or Latino individuals, nearly <u>15</u> percent of Asian and Pacific Islanders, and <u>34</u> percent of American Indian and Alaska Native individuals are enrolled in Medicaid, compared with <u>15</u> percent of white individuals. Medicaid coverage is a key to making health care more accessible, and together with a broader set of policies that address socioeconomic inequities, a key path to achieving health equity.

Close The Medicaid Coverage Gap

- **Provide Coverage For Millions Of Americans In Non-Expansion States.** Closing the Medicaid coverage gap will provide millions of Americans living in states that have not expanded Medicaid access to quality, affordable health coverage. More than two million adults are currently in the Medicaid "coverage gap" in the <u>11 states</u> where Republicans have refused to expand Medicaid, despite mounting evidence that expanding Medicaid coverage <u>saves lives</u>, causes a <u>significant</u> reduction in poverty, generates <u>economic benefits</u> for states and providers, and advances <u>health equity</u>. Most people in the coverage gap live in the south, where recent polling has shown that expanding Medicaid is overwhelmingly popular. In <u>Mississippi</u> and <u>North Carolina</u>, nearly 80 percent of respondents favored expanding Medicaid to provide life-saving coverage to hundreds of thousands of adults.
- **Create a Federal Option on the ACA Exchanges.** Of the millions of Americans currently trapped in the Medicaid coverage gap, <u>62 percent</u> are in the labor force, <u>30 percent</u> are parents with children at home, and <u>15 percent</u> are adults with a disability. Closing this gap does not have to be simply a state-by-state project but can also be addressed by introducing a federal option to ACA exchanges. According to studies, anywhere from <u>2 million</u> to <u>3.7 million</u> Americans would be eligible to enroll in ACA marketplace plans without having to pay any premiums. This would not only give millions of Americans quality and affordable health care, but by confronting the Medicaid coverage gap through direct insurance eligibility to this group, <u>60 percent</u> of which are people of color with no current path to coverage, persistent racial health care disparities related to access can be lowered.

Coverage for Mothers And Children

Congress should continue to do more to combat the maternal mortality crisis and strengthen health care for moms, children, and families. America has the highest maternal mortality rate of any industrialized country in the world and <u>80 percent</u> of deaths, the majority of which are

women of color, are entirely preventable. In 1915, the maternal mortality rate for Black women was <u>1.8 times</u> higher than for white women, with disparities increasing in subsequent decades. In 2018, the maternal mortality rate for Black women was <u>3.2 times</u> higher than for white women — the same disparity recorded 80 years ago. American Indian and Alaska Native women have a maternal mortality rate <u>2.3 times</u> higher than white women. For Black, American Indian, and Alaska Native women over 30, the rate of maternal mortality is <u>four to five times higher</u> than for their white counterparts. Nearly <u>12 percent</u> of maternal deaths occur between six weeks and one year following delivery after Medicaid coverage has ended.

- Requiring Post Partum Under Medicaid for Mothers. The Biden • administration's American Rescue Plan created a temporary pathway to coverage for pregnant Americans, allowing states to extend postpartum coverage under Medicaid from 60 days to 12 months following pregnancy. The recent omnibus subsequently made this state option permanent, but Congress should go further and require postpartum coverage in every state. Research shows that health care coverage before, during, and after birth are incredibly important indicators in the outcomes of mothers and their children. With people of color more likely, due to systemic inequities, to face barriers accessing health care, Medicaid's postpartum expansion is essential for reducing the racial health gap in maternal mortality rates. Today, 37 states and the District of <u>Columbia</u> have extended or plan to extend this coverage to the full 12 months allotted by the American Rescue Plan but there are still 13 states which have not expanded Medicaid coverage. If all 50 states expand postpartum Medicaid coverage, an estimated 720,000 additional people will gain coverage for 12 months after birth. In the short term, prioritizing these holdout states while also furthering the Momnibus legislation and other federal policy to address inequities in peripartum care will be essential to lowering the maternal mortality rate.
- **Protect Children's Coverage by Permanently Authorizing CHIP.** CHIP is a block grant program, meaning Congress must act periodically to extend funding for the program. This leaves coverage for <u>over 9 million</u> children vulnerable to political attacks. In 2018, after allowing funding for CHIP to lapse for an unprecedented 114 days, Congress extended CHIP funding through the federal fiscal year (FFY) 2023. States that don't provide continuous coverage experience <u>increased churn</u>, or children who dis-enroll and re-enroll in coverage within the same year. As a way to mitigate coverage loss when the COVID-19 PHE ends and provide children stable coverage permanently, Congress extended CHIP authorization in the end of the year omnibus package, but it should now permanently authorize CHIP. Continuous coverage would help reduce racial and income disparities as <u>nearly 14 percent</u> of Hispanic children, 12 percent of Black children, and <u>13 percent</u> of children in low or moderate income households faced uninsurance for all or part of the year. These households are the most likely to qualify for/be enrolled in Medicaid and CHIP.

Expand Medicare Coverage For Vision, Hearing, And Dental

In August 2022 the FDA finalized a rule allowing the sale of over the counter hearing aids for the first time, offering potential savings of thousands of dollars to seniors. Now Congress must take the next steps and expand Medicare benefits to include hearing, dental, and vision. Millions of seniors and people with disabilities struggle with dental problems, poor vision, and hearing loss due to cost. Expanding Medicare benefits to include vision, dental, and hearing would benefit all of the 38 million traditional Medicare beneficiaries, but especially the <u>9.5 million</u> seniors who went without this type of care in the last year.

- **Provide Dental Care For The Nearly 50 Percent Of Medicare Beneficiaries who Are Without Dental Coverage.** <u>47 percent</u> of Medicare beneficiaries don't have dental insurance and haven't had a dental visit within the past year. Lack of dental care in the traditional Medicare plan leaves seniors <u>vulnerable</u> to chronic conditions such as diabetes and heart disease and delayed diagnosis of preventable diseases. Uninsured beneficiaries spent an average of <u>\$874</u> in 2018 for any dental service.
- Vision Care For The Nearly Half Of Medicare Beneficiaries Who Fail To Receive A Yearly Eye Exam. Medicare Parts A and B currently only cover an annual eye exam if a medical condition exists and leaves beneficiaries to pay the <u>full price</u> of prescription glasses or contact lenses. Many seniors put off or completely forego getting their exam or glasses to avoid paying high costs out of pocket and <u>57 percent</u> of Medicare beneficiaries fail to receive a yearly eye exam.
- **Full Hearing Care For Seniors.** Although hearing aids are now available over the counter at substantial savings, Medicare is still <u>prohibited</u> from covering them, as well as any related rehabilitative services provided by audiologists. The Build Back Better Act of 2021 would have updated Medicare to cover audiological support services and prescription hearing aids for those unable to benefit from OTC devices, and Congress should enact new legislation to finally permit Medicare beneficiaries to receive hearing care support services from an audiologist. In addition to quality of life concerns, the lack of regular exams and auditory care is also detrimental to preventive care to reduce risk factors of <u>dementia</u>.