

Lowering Costs, Expanding Coverage, and Advancing Equity

Building on Our Victories, Defending Our Progress, and Educating Voters



Introduction

In 2024 Protect Our Care is **working to bring lower costs and better care** to more Americans, **defend critical health care programs** from the MAGA agenda, and **educate voters** on recent improvements to their health care and the threats to that progress.

The issue of health care is incredibly salient everywhere in America and the policies in this agenda are overwhelmingly popular with Americans, no matter their political party. Lowering health care costs is one of the most effective ways to put money back into the American people's pockets. These policies are also critical to tackling systemic inequities that persist due to racism and discrimination and are needed to address basic conditions that affect health outcomes, particularly for historically marginalized people including people of color, rural Americans, LGBTQ+ individuals, and people with disabilities.

In 2024, Protect Our Care will work with the Biden administration, Congress, and allies to build on recent achievements to lower costs and improve health care for **all** Americans. Our agenda includes making lower Marketplace premiums permanent, expanding the Inflation Reduction Act's lower drug costs to people with private insurance, closing the Medicaid coverage gap, making 12 months of postpartum Medicaid coverage mandatory in all states, and taking additional steps to lower costs and improve care. Additionally, it is critical to hold Republicans accountable for their attacks – whether in Congress or the courts – on Medicare, Medicaid, lower prescription drug costs, and the Affordable Care Act (ACA). Finally, Protect Our Care will continue to educate voters about the lower costs and better care achieved by the Biden administration and Democrats in Congress over the last three years.

PROTECT OUR CARE



Building on Our Victories

Lower Health Care Costs

Lower Health Insurance Premiums by Making the Enhanced Premium Tax Credits Permanent

- The American Rescue Plan and Inflation Reduction Act have helped enrollees save an average \$2,400 per year on premiums through 2025. These premium savings have made more than 65 percent of uninsured Black adults and more than 68 percent of uninsured Hispanic and Latino adults eligible for zero dollar premium plans. Additionally, nearly 80 percent of uninsured Hispanic and Latino adults and 75 percent of uninsured Black adults can now also access plans for less than \$50 a month. If trends continue, if these tax credits are allowed to expire in 2025, millions of Americans could lose their health insurance and over 14 million would see their premiums skyrocket. Congress must prevent health care costs from increasing by making enhanced premium tax credits a permanent feature of Marketplace coverage.
- Thanks to the American Rescue Plan and Inflation Reduction Act, the 2023 open enrollment period was the most successful to date. <u>15.6 million people</u> enrolled 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. Republicans continue to try to dismantle the Affordable Care Act by advancing junk insurance and handouts to the wealthy in the form of more generous health savings accounts. Lawmakers must continue to protect the ACA from Republican attacks and attempts to roll back our progress.

Reduce Prescription Drug Prices For Everyone

- Increase the Number of Drugs Subject to Medicare Negotiation. Congress should pass the Lowering Drug Costs for American Families Act to increase the annual number of prescription drugs selected for negotiation from 20 to 50.
- Extend \$35 Insulin To Everyone. The Inflation Reduction Act lowers prescription drug costs for Medicare's 65 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 high-income countries. The Inflation Reduction





Act has been the first federal initiative to control the affordability of insulin for those currently on Medicare, which represents around <u>41 percent</u> of those who currently rely on insulin, and is saving Medicare beneficiaries an average of \$500 annually. Every Republican in Congress voted against this historic legislation and <u>voted to block</u> its provisions from lowering prescription drug costs for Americans with private health insurance. In response to pressure from President Biden and Democrats, three <u>leading insulin manufacturers</u> have voluntarily agreed to cap insulin costs at \$35 per month. However, Congress should permanently expand the \$35 insulin cap to all Americans. This change would save \$500 annually for the <u>25 percent</u> of Americans who currently pay more than \$35 a month for insulin,and save \$225 annually for half of people who take insulin, drastically reducing the burden of health care costs for those with diabetes.

- Make Lower Prices Negotiated by Medicare Available To All. Congress should pass the Lowering Drug Costs for American Families Act to make lower drug prices negotiated by Medicare available to people with private health coverage. With nearly 83 percent of the American public in support of Medicare having the power to negotiate lower drug prices, this provision is 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 reports 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 would save a collective \$54 billion over the same period.
- **Protect More Americans From Big Pharma's Outrageous Price Hikes.** Congress should pass the Lowering Drug Costs for American Families Act to penalize drug companies that increase prices for people with private insurance faster than the rate of inflation. As of October 1, 2022, drug companies are charged a penalty 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 and Expand Coverage

Strengthen Medicaid and Close The Medicaid Coverage Gap

- Provide Coverage For Over Two Million Americans In Non-Expansion States, Including Georgia and Wisconsin. Closing the Medicaid coverage gap will provide millions of Americans living in states that have not expanded Medicaid access to quality, affordable health coverage. <u>Over two million</u> adults are currently in the Medicaid "coverage gap" in the 10 states 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.
- Strengthen Medicaid Eligibility and Enrollment Systems. Congress should make permanent statutory and regulatory changes to strengthen Medicaid eligibility and enrollment systems based on lessons learned throughout the continuous coverage requirement during the COVID-19 public health emergency and its subsequent unwinding. These improvements include encouraging states to take the renewal burden off families by relying on ex parte Medicaid renewals, and adopting continuous eligibility periods of longer than one year for young children, and continuous eligibility for a full year for adults. States should also eliminate CHIP enrollment fees and premiums to facilitate seamless transitions to CHIP, and promote automatic enrollment in Marketplace plans for people who are no longer eligible for Medicaid.
- Hold Accountable Governors Who Could Do More to Protect Coverage During Medicaid Unwinding. Throughout the "unwinding" of the COVID-19 public health emergency continuous coverage requirement, states' actions have played a determinative role in whether individuals who continue to qualify for Medicaid remain enrolled. Some states have underutilized automatic renewals that keep people covered, some states have cut children and families off coverage simply for missing paperwork. Protect Our Care will hold lawmakers accountable for not doing more to protect coverage for children and families.



Build on ACA and Make Marketplace Coverage Available to More People

• Support Policies to Strengthen Marketplace Coverage. Policymakers should strengthen the quality of coverage by modernizing and enhancing Essential Health Benefits to include adult dental services, a higher standard of maternity care, gender-affirming care, and better access to behavioral health treatment. Expanding Special Enrollment Periods, allowing more people with unaffordable employer-based plans to enroll in Marketplace coverage, and automatically enrolling people transitionally off Medicaid into a Marketplace plan would help make affordable coverage available to more people.

Save Lives By Addressing the Maternal Health Crisis

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

Inflation Reduction Act: Lowering the Cost of Medicine

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Black, American Indian, and Alaska Native women over 30, the rate of maternal mortality is <u>four to five</u> <u>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.

- Call on the Four Remaining States To Expand Medicaid Coverage for a Full 12 Months of Postpartum. Arkansas, Idaho, Iowa, and Wisconsin have not expanded or made plans to expand their Medicaid programs to cover women for a full 12 months postpartum. States were given this option as part of the American Rescue Plan of 2021, and the 2022 omnibus made this a permanent option for states. Only <u>four states</u> have not expanded or agreed to expand postpartum coverage in the near future. In September 2023, the Wisconsin Senate passed a 12 month expansion on a bipartisan basis, but the Republican-controlled Wisconsin State Assembly has refused to consider the measure.
- Require States to Provide 12 Months of Postpartum Medicaid Coverage 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 2022 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, <u>46 states and the District of Columbia have extended or plan to extend this coverage to the</u> full 12 months allotted by the American Rescue Plan but there are still 10 states which have not expanded Medicaid coverage. If all 50 states expand postpartum Medicaid coverage, an estimated 28,000 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. Rep. Robin Kelly and Sen. Dick Durbin's CARE for Moms Act would require all states to offer 12 months of postpartum Medicaid coverage.
- Pass the Black Maternal Health Momnibus Act to comprehensively address the drivers of maternal mortality, morbidity, and disparities. The <u>Black Maternal Health Momnibus</u> <u>Act</u> makes critical investments to address social determinants of health, provide funding for community-based organizations,grow and diversify the perinatal health workforce, expand access to maternal mental health care, address the effects of climate change on maternal and infant health, and improve data collection processes.



Protecting Our Progress in Congress and in the Courts

Protect Our Progress in Congress

Protect Funding for Medicare, Medicaid, and Health Care Programs from Republican Budget Cuts. Throughout the budget and appropriations process, Protect Our Care will work to ensure lawmakers understand how essential health care programs are to the American people, and prevent budget cuts to mandatory programs including Medicare, Medicaid, and the ACA, as well as discretionary programs like maternal health programs and health centers. We will protect Medicaid from threats like budget cuts, per capita caps, and bureaucratic work reporting requirements. We will protect Medicare from threats to cut benefits for current and future seniors, including increasing the Medicare eligibility age.

Oppose Drug Industry Legislative Efforts To Repeal or Undermine the Medicare Drug Price Negotiation Program. Including by calling attention to drug industry greed through Greedwatch and monitoring industry financial statements, by refuting their anti-innovation arguments through surveillance of their financial statements and business practices such as M&A and R&D activity, and reminding lawmakers and the public of the popularity of the price negotiation program. Encourage key Congressional Committees including the Senate Finance Committee and Senate Judiciary Committee to conduct oversight of pharmaceutical industry practices.

Oppose Legislation That Undermines The Affordable Care Act and Promotes HSAs to Give Handouts to the Wealthy. House Republicans have been <u>advancing</u> legislation to <u>expand</u> the use of health savings accounts (HSAs), which give another tax break to high income earners while doing nothing to make care more affordable for working families, exacerbating racial inequalities in health care, and costing taxpayers billions.

Protect Our Progress in the Courts

Oppose Litigation That Would Increase Prescription Drug Costs By Dismantling the Medicare Drug Price Negotiation Program. Nine lawsuits filed across the country by big drug companies and their deep-pocketed lobbying group allies threaten to overturn the Medicare Drug Price Negotiation program, increasing drug costs for seniors and taxpayers. Protect Our Care will continue to educate the public about these cases, and to educate the court about the impact these cases have on Americans' ability to afford prescription drugs and stay healthy.





Protect Coverage of Preventive Services By Opposing the Plaintiffs in Braidwood v. Becerra.

Braidwood v. Becerra puts lifesaving care at risk by threatening to overturn the Affordable Care Act requirement that insurers cover preventive services without cost sharing. Eliminating costs for these lifesaving screenings and services has transformed how preventive care is delivered, saved countless lives, improved health outcomes, reduced disparities in care, and cut consumer health care costs for more than 150 million people. If the Court agrees with the plaintiffs, consumers could lose access to affordable cancer screenings, anxiety and depression screenings for children and adults, immunizations, contraception, and PrEP (pre-exposure prophylaxis) medication, which can reduce the chance of contracting HIV. Protect Our Care will continue to educate the public about this case and ensure the court understands the catastrophic impact it would have on access to lifesaving care for millions of Americans.

Protect Access to Medical Abortion and the Independence of FDA by Opposing <u>Alliance for</u>

Hippocratic Medicine v. FDA. The Supreme Court will decide whether millions of Americans will continue to have access to mifepristone, which the FDA has determined to be safe and effective. If the Supreme Court sets the precedent of allowing courts to overrule the FDA's drug approval decisions, the U.S. drug approval system would be thrown into chaos, <u>threatening</u> future innovation and the public's access to other critical and lifesaving health care. Protect Our Care will continue to educate the public about this case and ensure the court understands that siding with the plaintiffs in any way would cause chaos in our drug approval system and chill innovation.





Educating Voters

Protect Our Care will conduct campaigns to educate the public on how Democrats have made Marketplace health coverage more affordable than ever, lowered the cost of prescription drugs for seniors, expanded Medicaid to more low income people and mothers, and how these changes are advancing equity and making health care better for everyone. As a component of our campaigns, we will continue to work with our partner organizations in the health equity and civil rights communities to publish reports and conduct events to ensure this information reaches Americans from many different backgrounds.

Key voter education campaigns for 2024 include:

- 14th Anniversary of the ACA (March 2024)
- Medicaid Awareness Month (April 2024)
- Lower Costs, Better Care Bus Tour (September and October 2024)
- Medicare and ACA Open Enrollments (October thru December 2024)

Lower Health Care Costs

- Marketplace Coverage is More Affordable and More Popular Than Ever. Thanks to President Biden and Congressional Democrats passing the American Rescue Plan and Inflation Reduction Act, four out of five HealthCare.gov enrollees are able to find a plan for \$10 or less after tax credits. The Biden administration has also invested heavily in the Navigator program and fixed the family glitch. This has led a record 16.3 million Americans to sign up for Marketplace coverage in 2023, including 3.6 million new enrollees. This investment in the Affordable Care Act is leading more people than ever from communities of color to enroll: 53 percent more Latinos, 49 percent more Black Americans, and 32 percent more American Indian and Alaska Natives have enrolled in Marketplace coverage. This improved affordability has also led more young people than ever to enroll in coverage.
- Democrats Have Stood Up to Big Pharma and Lowered Prescription Drug Costs. The Inflation Reduction Act capped the cost of insulin at \$35 per month for seniors, makes recommended vaccines free to seniors, penalizes drug companies for increasing prices faster than inflation, caps out-of-pocket prescription drug costs for seniors at \$2,000 per year starting in 2025, and finally gives Medicare the power to negotiate lower prescription drug prices. This new law, which every Republican in Congress voted against and pharmaceutical companies are trying





to repeal, is already giving seniors the financial relief and breathing room they deserve, with more benefits to come. In 2025 when the \$2,000 cap takes effect, 19 million seniors will save an average of \$400 per year on prescription drugs. Seniors with the highest prescription drug costs will begin to see savings in 2024. And because seniors from historically marginalized communities disproportionately face cost-related barriers to care and higher burdens of certain diseases, Black Americans, Latinos, Asian Americans, LGBTQ+ Americans and others will especially benefit from lower prescription drug costs.

Strengthen Coverage

- Medicaid Has Been Expanded to Cover More People Than Ever, Including Postpartum Moms. Since the Biden-Harris Administration took office, 4 states (Oklahoma, Missouri, South Dakota, and North Carolina) have expanded their Medicaid programs, covering an additional X million Americans. And because the American Rescue Plan provided a strong incentive for states to expand Medicaid eligibility to a full 12 months postpartum and that incentive was made permanent in subsequent government funding legislation, <u>46 states and the District of</u> <u>Columbia</u> have extended or plan to extend Medicaid coverage for a full year to postpartum individuals. We will promote this heavily during Medicaid Awareness Month.
- The Biden-Harris Administration is Cracking Down on Junk Insurance and Making Comprehensive Coverage More Affordable. New proposed rules would close loopholes that allow junk insurance companies to take advantage of families and sell misleading insurance plans that can discriminate based on pre-existing conditions and refuse to cover necessary services like hospital care, mental health services, and prescription drugs. The Biden administration fixed the family glitch to make Marketplace plans that are required to cover essential health benefits available to <u>5 million</u> more people.