

## Defending Health Care in 2017: What Is at Stake for New Jersey

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With a new president and Congress, the health care gains made throughout the last six years face their greatest threat yet. Congress has voted more than 60 times to roll back the historic progress that has been made to expand health coverage to millions of people in this country and to improve coverage for those who already had it. These proposed changes will put the health—and lives—of countless New Jerseyans at risk. Here's what New Jersey stands to lose if the new president and Congress move forward to upend our health care system:

### Hundreds of thousands of New Jerseyans stand to lose health coverage

**799,000** New Jerseyans stand to lose their health coverage.<sup>1</sup>

New Jersey stands to lose **\$60 billion** in federal funding for Medicaid, CHIP, and financial assistance for marketplace coverage.<sup>2</sup>

Approximately **205,000** New Jerseyans who currently get financial assistance to help pay for their health coverage will lose this help and will no longer have affordable coverage options. In 2016, New Jerseyans receiving financial assistance saw their monthly premiums reduced on average **\$322** thanks to this help.<sup>3</sup>

The now-historically low rate of uninsured people will spike, with the number of uninsured in New Jersey increasing **124 percent** by 2019.<sup>4</sup> This will reverse the immense progress that has been made to expand coverage. Between 2013 and 2015:

- The number of uninsured in New Jersey declined **34 percent**<sup>5</sup>

### Repeal will end New Jersey's Medicaid expansion and cause ripple effects across the state economy

**533,000** people stand to lose health coverage, most of whom are working.<sup>6</sup> The Medicaid expansion has extended health coverage to lower-income New Jerseyans who hold down jobs that are the backbone of the state's economy—from fast food workers to home care attendants to construction workers to cashiers. Repeal will leave these hard working New Jerseyans out in the cold.

New Jersey will lose billions in Medicaid funding. Over the course of a year and a half alone, Medicaid expansion brought **\$3.6 billion** in federal dollars into the state economy.<sup>7</sup> The impact of that lost federal Medicaid funding will have a ripple effect throughout the state economy, affecting hospitals, other health care providers, and businesses.

### New Jerseyans with private health insurance will be stripped of vital protections against discrimination

Approximately **3.8 million** New Jerseyans with pre-existing conditions like asthma, diabetes, and cancer could once

again be denied affordable, comprehensive coverage that actually covers their health care needs.<sup>8</sup>

Women in New Jersey will once again be charged more for health coverage just for being a woman.

- Prior to the Affordable Care Act (ACA), women in New Jersey were charged as much as **47 percent** more than men for the same coverage.<sup>9</sup>

New Jerseyans will once again face a world where insurance plans routinely cap the most they will pay for someone's health care in a year and in their lifetime, effectively cutting off coverage for the sickest individuals when they most need it.

- Roughly **3.3 million** New Jerseyans (including **877,000 children**) saw lifetime limits on coverage disappear thanks to the ACA's ban on these practices.<sup>10</sup>

## **Millions of New Jerseyans will lose guaranteed coverage of free preventive services, like recommended cancer screenings and vaccines**

Approximately **4.2 million** New Jerseyans with private health coverage (including **887,000 children**) and **1.5 million New Jersey seniors** on Medicare will lose guaranteed access to free preventive care, like blood pressure screenings, immunizations, and cancer screenings.<sup>11,12</sup>

## **Insurance companies will no longer be required to put New Jerseyans' premiums toward care, not profits**

Insurers will no longer be held accountable for using people's premium dollars on care and quality improvement or paying back the difference.

- New Jerseyans have received around **\$19.9 million** in refunds from plans that overcharged for premiums since the ACA took effect.<sup>13</sup>

## **Thousands of seniors and people with disabilities will lose comprehensive drug coverage**

The Medicare donut hole will re-open. This will leave New Jersey's seniors and people with disabilities with a gap in prescription drug coverage and forced to pay thousands of dollars more in drug costs.

- Seniors and people with disabilities in New Jersey have saved approximately **\$1 billion** on drug costs thanks to the ACA's closing the Medicare donut hole.<sup>14</sup>
- In 2015 alone, approximately **212,000** seniors and people with disabilities in New Jersey saved on average **\$1,241** on drug costs.<sup>15</sup>



799,000 New Jerseyans would lose health coverage

**3.8M DENIED**



3.8 million New Jerseyans with pre-existing conditions could be denied life-saving coverage



\$60 billion in federal funds to the state could be lost

## Endnotes

<sup>1</sup> Loss of coverage estimates are based on insurance coverage estimates for 2019 under the Affordable Care Act (ACA) and under partial repeal of the ACA through a January 2017 reconciliation bill. Linda J. Blumberg, Matthew Buettgens, and John Holahan, Implications of Partial Repeal of the ACA through Reconciliation (Washington, DC: Urban Institute, December 2016), available online at <http://www.urban.org/research/publication/implications-partial-repeal-aca-through-reconciliation> (last accessed Dec. 7, 2016).

<sup>2</sup> Estimates of lost federal assistance are based on estimates of federal spending on Medicaid/CHIP and Marketplace financial assistance from 2019 through 2028 under the Affordable Care Act (ACA) and under partial repeal of the ACA through a January 2017 reconciliation bill. Linda J. Blumberg, Matthew Buettgens, and John Holahan, Implications of Partial Repeal of the ACA through Reconciliation (Washington, DC: Urban Institute, December 2016), available online at <http://www.urban.org/research/publication/implications-partial-repeal-aca-through-reconciliation> (last accessed Dec. 7, 2016).

<sup>3</sup> Centers for Medicare and Medicaid Services, March 31, 2016 Effectuated Enrollment Snapshot, (Baltimore, MD: Centers for Medicare and Medicaid Services, June 2016), available online at <https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2016-Fact-sheets-items/2016-06-30.html> (last accessed Dec. 6, 2016).

<sup>4</sup> Linda J. Blumberg, Matthew Buettgens, and John Holahan, Implications of Partial Repeal of the ACA through Reconciliation (Washington, DC: Urban Institute, December 2016), available online at

<http://www.urban.org/research/publication/implications-partial-repeal-aca-through-reconciliation> (last accessed Dec. 7, 2016).

<sup>5</sup> Jessica C. Barrett, and Maria S. Vornovitsky, *Health Insurance Coverage in the United States: 2015*, (Washington, DC: U.S. Government Printing Office, September 2016), available online at <http://www.census.gov/library/publications/2016/demo/p60-257.html> (last accessed Dec. 6, 2016).

<sup>6</sup> Robin Rudowitz, Samantha Artiga and Katherine Young, *What Coverage and Financing is at Risk Under a Repeal of the ACA Medicaid Expansion* (Washington DC: The Kaiser Family Foundation, December 2016), available online at <http://kff.org/report-section/what-coverage-and-financing-is-at-risk-under-a-repeal-of-the-aca-medicaid-expansion-appendix/> (last accessed Dec. 7, 2016).

<sup>7</sup> Id.

<sup>8</sup> White House, *State by State Cost of Repeal Reports*, (Washington, DC: White House), available online at [https://www.whitehouse.gov/sites/default/files/docs/state\\_by\\_state\\_cost\\_of\\_repeal\\_report.pdf](https://www.whitehouse.gov/sites/default/files/docs/state_by_state_cost_of_repeal_report.pdf) (last accessed Dec 6, 2016).

<sup>9</sup> Danielle Garrett, *Turning to Fairness: Insurance Discrimination Against Women Today and the Affordable Care Act*, (Washington, DC: National Women's Law Center, March 2012), available online at [http://www.nwlc.org/sites/default/files/pdfs/nwlc\\_2012\\_turningtofairness\\_report.pdf](http://www.nwlc.org/sites/default/files/pdfs/nwlc_2012_turningtofairness_report.pdf) (last accessed Dec. 6, 2016).

<sup>10</sup> Tomas D. Musco and Benjamin D. Sommers, *Under the Affordable Care Act, 105 Million Americans No Longer Face Lifetime Limits on Health Benefits*, (Washington, DC: Office of Assistant Secretary for Planning and Evaluation, March 2012), available online at <https://aspe.hhs.gov/basic-report/under-affordable-care-act-105-million-americans-no-longer-face-lifetime-limits-health-benefits> (last accessed Dec. 6, 2016).

<sup>11</sup> ASPE, *ASPE Data Point: The Affordable Care Act is Improving Access to Preventive Services for Millions of Americans*, (Washington, DC: Department of Health and Human Services, May 2015), available online at <https://aspe.hhs.gov/pdf-report/affordable-care-act-improving-access-preventive-services-millions-americans> (last accessed Dec. 6, 2016).

<sup>12</sup> Kaiser Family Foundation, *Total Number of Medicare Beneficiaries: 2015*, (Washington, DC: Kaiser Family Foundation), available online at <http://kff.org/medicare/state-indicator/total-medicare-beneficiaries/> (last accessed Dec. 6, 2016).

<sup>13</sup> Families USA *Analysis of 2012-2015 MLR Rebate Reports by State*.

<sup>14</sup> Centers for Medicare and Medicaid Services, *Part D Donut Hole Savings by State YTD 2015*, (Baltimore, MD: Centers for Medicare and Medicaid Services, August 2016), available online at <https://downloads.cms.gov/files/Part%20D%20dount%20hole%20savings%20by%20state%20YTD%202015.pdf> (last accessed Dec. 6, 2016).

<sup>15</sup> Centers for Medicare and Medicaid Services, *Part D Donut Hole Savings by State YTD 2015*, (Baltimore, MD: Centers for Medicare and Medicaid Services, August 2016), available online at <https://downloads.cms.gov/files/Part%20D%20dount%20hole%20savings%20by%20state%20YTD%202015.pdf> (last accessed Dec. 6, 2016).