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## Missourians brace for loss of health insurance as Congress moves to dismantle Obamacare

By Samantha Liss • St. Louis Post-Dispatch Jan 8, 2017



House Speaker Paul Ryan of Wis. holds his copy of insurance premium statistics during a news conference on Capitol Hill in Washington, Thursday, Jan. 5, 2017. (AP Photo/Manuel Balce Ceneta)

### CHANGES UNDER ACA

#### Change in the uninsured rate

	Nation	Missouri	Illinois
<b>2010</b>	15.5 pct	13.2 pct	13.8 pct
<b>2015</b>	9.4 pct	9.8 pct	7.1 pct

#### Individuals who picked a 2017 insurance plan on HealthCare.gov

**Mo.** 249,732 ..... **Ill.** 351,175

A key part of the ACA allowed consumers to shop online for health insurance plans. The plans are required to offer a set of covered benefits, and consumers can qualify for financial help to afford the coverage they purchase on HealthCare.gov.

#### Individuals who gained coverage by staying on their parents' plan

**Mo.** 44,000 ..... **Ill.** 91,000

Prior to the ACA, many young adults were removed from their parents' plans at age 19 unless they were full-time students. They law now requires plans that cover dependents to allow children to remain on their parents' plans until age 26, long after they may have graduated from college. (Measured 2013)

#### Individuals with lifetime limits on coverage before the ACA

**Mo.** 2,148,000 ..... **Ill.** 4,670,000

Prior to the ACA, a health insurer could impose a lifetime or annual limit on the services it would pay for – usually, a specific dollar amount, easily reachable in one catastrophic health event. Consumers were then on the hook for any bills above that limit. The ACA prohibits the practice.

#### Individuals with pre-existing conditions before the ACA

**Mo.** 2,601,893 ..... **Ill.** 5,635,622

Individuals cannot be charged more or denied coverage because of a pre-existing condition. This was not the case before the ACA. Now insurers cannot charge women more than men.

#### Individuals who gained Medicaid coverage, including children

**Mo.** 121,200 ..... **Ill.** 490,996

Under the ACA, some states chose to expand Medicaid, the health insurance program for the poor. Prior to the ACA, few childless adults were eligible. The ACA allowed states to raise the ceiling on income eligibility requirements, essentially allowing more individuals to enroll. Illinois choose to expand Medicaid. Missouri did not.

#### Total Medicare enrollees saved from donut hole

**Mo.** \$102,895,608 . **Ill.** \$204,732,932

The ACA helped alleviate some costs seniors face when purchasing prescription drugs. The ACA attempted to close the gap in coverage known as the donut hole. The donut hole forces seniors to pay for the full cost of drugs after reaching a dollar limit. Financial relief kicks in only after reaching an out-of-pocket maximum limit for the year. The ACA includes some drug discounts for seniors in the donut hole. (Measured 2015)

#### Individuals who received tax credits for coverage

**Mo.** 225,878 ..... **Ill.** 259,701

Based on income, some individuals qualify for financial help – including tax credits – to afford coverage on HealthCare.gov. (Measured Q1 2016)

#### Individuals who received subsidies

**Mo.** 148,033 ..... **Ill.** 156,469

In addition to tax credits, some individuals qualify (based on income) for cost sharing reductions for deductibles and copayments. (Measured Q1 2016)

Source: U.S. Department of Health and Human Services

This chart looks at how many Missouri and Illinois residents have been affected by provisions of the Affordable Care Act.

As Republicans begin the process of repealing the Affordable Care Act, some consumers in Missouri are bracing for life without health insurance coverage.

"It makes me incredibly angry," Lucinda Cobb of Warson Woods said of the move in Congress to dismantle President Barack Obama's signature health care reform law.

Cobb is 61. Because of the Affordable Care Act she decided she was able to retire early from Washington University and become the full-time caregiver for her daughter Laura, now 30.

"I decided the ACA would offer me a big solution," Cobb said. "It was a big relief for me to have that option."

Without the law's provisions, Cobb said, she would have had to wait until age 65 to qualify for Medicare, the government-run health insurance for seniors. Even then, her daughter would have been left without coverage: Laura had been covered by Lucinda's employer-provided plan.

Eight years ago, Laura was in a car accident on the way home from the library. She had been studying for one of her college courses. The accident resulted in a traumatic brain injury that damaged the parts of her brain that are responsible for reading, writing and communication.

Laura continues to have trouble speaking and communicating, and requires lots of medical care. The health insurance plan that her mother purchased for her through [HealthCare.gov](http://HealthCare.gov) ensures her access to her Washington University and BJC HealthCare physicians.

If the Affordable Care Act is repealed, Cobb worries that her daughter will lose access to coverage and by extension her doctors. And she's not eligible for Medicaid or Medicare, which can help cover disabled individuals. She didn't work long enough to qualify for Medicare coverage for those disabled, and her household income is too high for Medicaid eligibility.

"I want them to sit down and explain to her face why they're going to take her health care away," Cobb said of Missouri's Republican politicians.

The Cobbs are among an estimated 20 million Americans who have access to health insurance because of the Affordable Care Act, according to the Obama administration and health policy experts who back the reform.

"We've made some pretty significant gains," said Ryan Barker, vice president of health policy for the [Missouri Foundation for Health](http://MissouriFoundationforHealth.org). "Missourians stand a lot to lose with the ACA if it would get repealed."

In Missouri, nearly 250,000 consumers have picked a health plan on [HealthCare.gov](http://HealthCare.gov) for 2017 coverage. A majority of them receive financial help to afford the coverage.

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In 2010, before the ACA, 13.2 percent of Missourians were uninsured. In 2015, the uninsured rate fell to 9.8 percent.

Millions of Americans gained access to coverage because the Affordable Care Act provided financial help and required insurance companies to provide a certain threshold of benefits to consumers.

One of the more popular provisions is that preventative care — such as that annual check-up at the doctor or birth control for women — is free. It also requires insurance companies to spend a certain amount of premium dollars on medical care — not administrative costs such as salaries and profits.



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What it prohibited was denying coverage to individuals based on pre-existing health conditions such as diabetes. It also blocked insurers from imposing lifetime limits, or dollar-amount limits on what they would spend on covered services for consumers.

To encourage healthy and young individuals to buy plans, the law requires most individuals to have health insurance or face a financial penalty. Critics have disliked the individual mandate, but others say it's needed to help ensure a healthy enough pool of people.

Some of the nation's largest insurers struggled to make money selling plans through [HealthCare.gov](http://HealthCare.gov), and within the last year many decided to stop offering coverage to consumers, leaving some with fewer choices. That, critics said, was a sign of failure. But for others it was a signal that competition was working — weeding out those who struggled to compete.

For those who don't receive financial help for coverage, premiums have increased dramatically.

But the legislation is largely about providing access, not addressing current cost issues.

"Of course we need to address health care costs, but to do that you don't need to repeal the ACA," Barker said. "You need to come back with a second set of policy options to address health care spending."

Eugene Litvak, president of the [Institute for Healthcare Optimization](http://Institute for Healthcare Optimization) and an adjunct professor at Harvard, said the issue must now focus on cost, a topic both sides — Democrats and Republicans — have failed to address.

"I see both parties are talking in a parallel world. They do not address what each other is saying," Litvak says. "One party is saying many people benefited from the ACA and that is true, and another party is saying that it's too expensive and that is true again."

Litvak said the inefficiencies in the health care system that lead to higher costs had never been addressed.

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