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## Health officials offer caution, concern on GOP bill

American Medical Association calls proposal 'critically-flawed'



David Barbe

Jodie Jackson Jr. Mar 9, 2017

As Congress begins debating a replacement plan for the Affordable Care Act, also known as Obamacare, both consumers and health care professionals must let legislators know that access to affordable health insurance should be a top priority, the incoming president of the American Medical Association said Tuesday.

David Barbe, a Mountain Grove physician and graduate of the University of Missouri School of Medicine, talked to physicians at MU Health Care, Boone Hospital Center and the Boone County Medical Society on the heels of the release of a Republican plan to replace the 2010 Affordable Care Act.

The AMA officially panned the proposed American Health Care Act with a letter on Tuesday, outlining provisions that it said would have an adverse effect on patients and the nation's health, largely because of an expected decline in health insurance coverage.

The AMA said the proposed budget reconciliation bill was "critically-flawed."

Jen Bersdale, executive director of the advocacy group Missouri Health Care for All, said the Obamacare replacement bill filed by House Speaker Paul Ryan and House Republicans would repeal "broad swaths of the Affordable Care Act and make radical, harmful changes to Medicaid." She said the result would be "millions of people losing their health care."

Specifically, the bill proposes shifting from income-based to age-based qualification for subsidies or, in the case of the replacement bill, refundable tax credits. That part of the bill would hurt low- and middle-income and sicker individuals "in favor of assistance for wealthy and healthy people," Bersdale said.

By tying tax credits to age and not income, a 29-year-old investment banker who makes \$75,000 per year would receive the same \$2,000 tax credit as a 29-year-old making only \$25,000 annually, Barbe said.

The bill also proposed repealing a number of ACA-related taxes that had helped finance portions of the current law.

Barbe said the proposed bill would not repeal the requirement for insurance companies to cover "essential health benefits," including an array of screening and preventive measures. He also pointed out the bill does not propose eliminating some of the more popular aspects of the ACA such as the prohibitions against denying health insurance to someone with a pre-existing condition, charging women higher premiums than men and allowing children to stay on a parent's policy until the age of 26.

"It's going to be really difficult for those pieces to be dismantled without a significant public hue and cry," Barbe said, noting that many Republicans have called for an end to those benefits. But he added, "There are plenty of other pieces" of the ACA "that are proposed to be modified pretty heavily."

The proposed legislation would abolish the individual mandate to obtain insurance and the requirement for employers to cover workers by eliminating the penalties for noncompliance. The bill also seeks to roll back Medicaid expansion and put a “per capita cap” on funding that would scale back the federal government’s financial commitment to Medicaid.

“We don’t want to see any losses in coverage” or “degradation of safety net programs” such as Medicaid and the Children’s Health Insurance Program, or CHIP, the Medicaid program for children, Barbe said. And changing tax credit eligibility to an age-based measure could decrease affordability, especially for individuals who don’t have employer-sponsored health insurance, he said.

“I think everybody should be involved in the current debate on health care reform. It affects us all,” Barbe said. “For many people, it’s still not affordable.”

Removing the requirement for individuals to have insurance could lead to higher premiums and even fewer players in the health insurance market, said Karen Edison, professor and chair of the Department of Dermatology and director of the Center for Health Policy at the University of Missouri.

Currently, Anthem Blue Cross Blue Shield is the only insurer in Missouri offering plans on the federally-run online marketplace or exchange where individuals and families can purchase health insurance, often with the help of tax credits or subsidies.

“Most people understand the risk they run by not having insurance,” Barbe said. “It is also an economic consideration.”

Those who wait until they are sick and have to be admitted to a hospital or develop a chronic condition drive up health care costs, Barbe said.

“If you had spent \$100 to begin with” toward a premium or doctor’s visit, “it might have been better,” he said.

Edison, meanwhile, cautioned consumers from making decisions now about their health care based on the proposed Obamacare replacement plan.

“It could be changed along the way,” she said. “It’s not a done deal. It’s a very complex, broad set of proposals. In some ways, it’s like Obamacare 2.0” because the bill would keep much of the ACA’s insurance regulations intact.

The Congressional Budget Office estimates that roughly 20 million Americans have health insurance as a result of the Obamacare exchanges and Medicaid expansion.

“Anything that would be a barrier to access for health care for Missourians and Boone Countians is something I would hate to see happen,” Edison said. “There are already enough barriers” when it comes to geography, income and the cost of medications.

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Jodie Jackson Jr.