

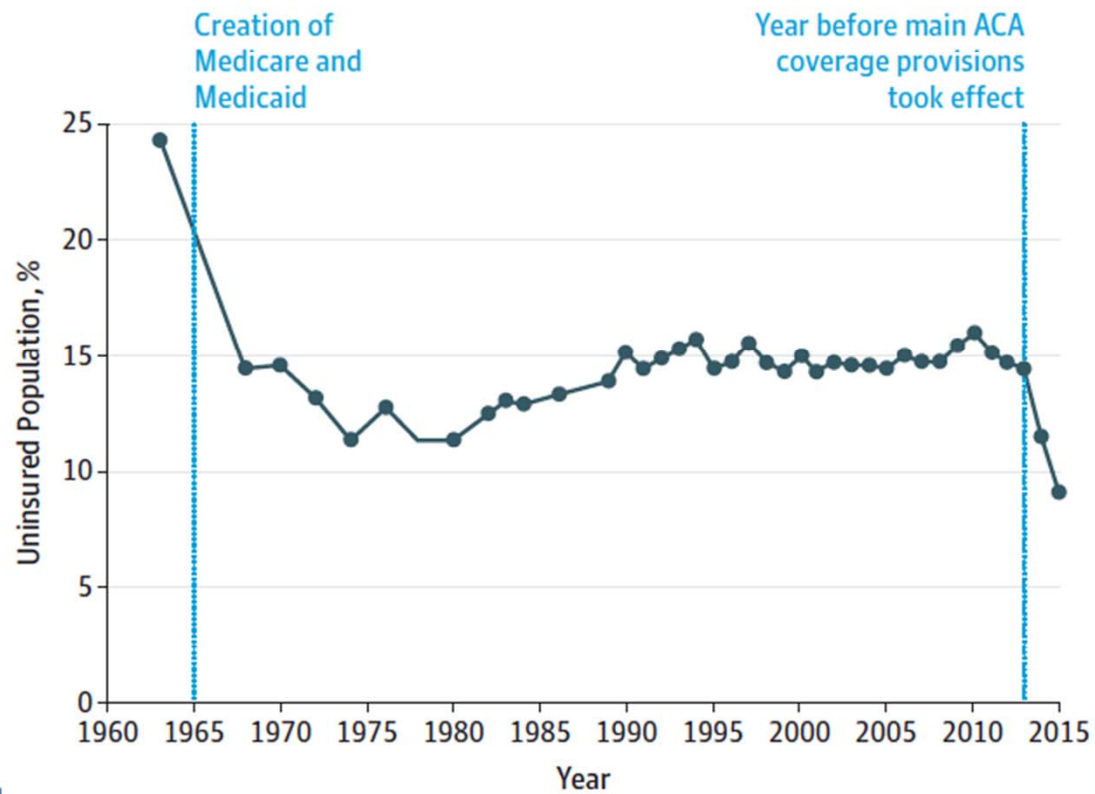
THE ACA AT SIX: **UNCERTAIN VICTORIES, ENDURING POLITICS**

Philip Rocco, PhD

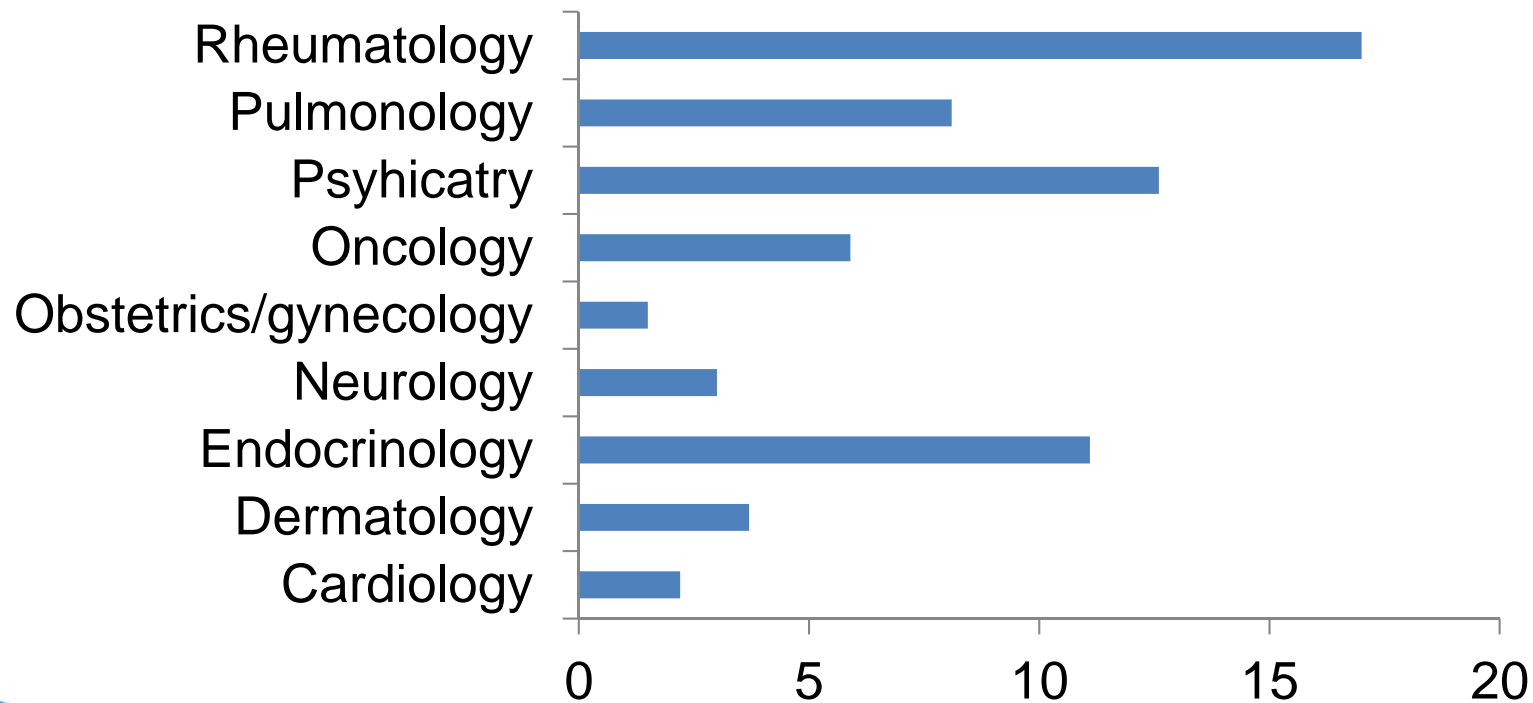
Assistant Professor, Department of Political Science
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Health Policy Institute of Ohio, October 26, 2016

Figure 1. Percentage of Individuals in the United States Without Health Insurance, 1963-2015

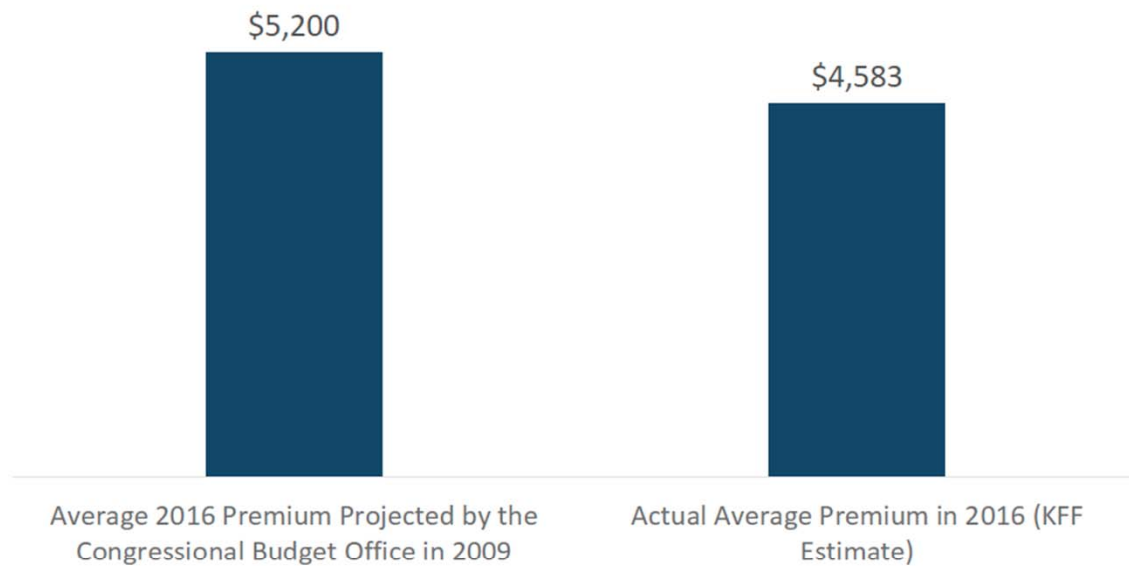


Percent of Marketplace Plans with <5 Specialists (Dorner et al. 2015)



Actual ACA Benchmark Premiums in 2016 vs. CBO Projections

National Average Premium for the Second-Lowest-Cost Silver Plan in ACA Marketplaces



Source: Kaiser Family Foundation analysis using federal marketplace premiums by county, insurer rate filings and state-based marketplace shopping tools, and marketplace enrollment data from HHS. CBO projection from a letter to Senator Evan Bayh, November 30, 2009.



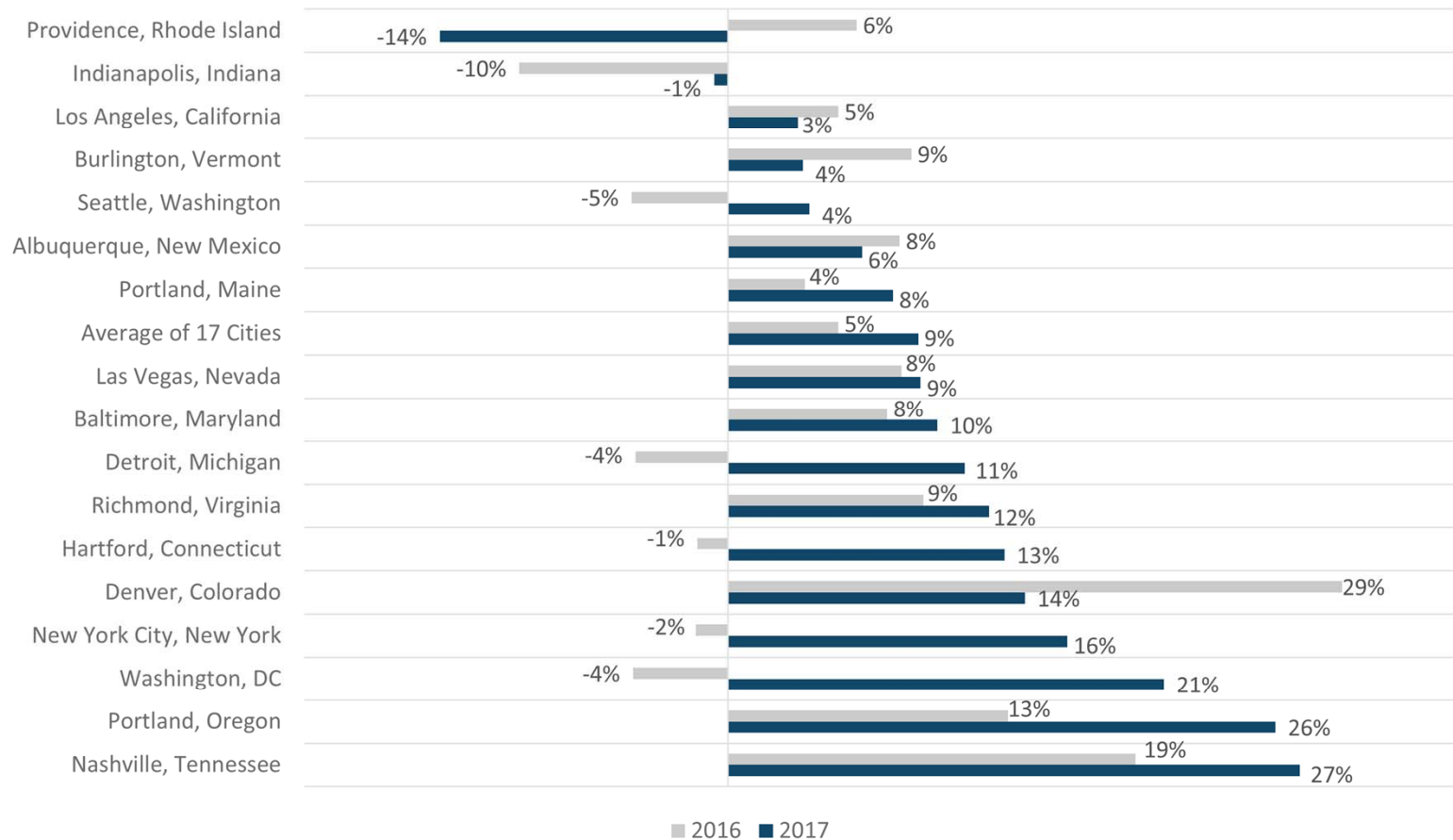
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Figure 1

Lowest-Cost Silver Premium Percent Change from Previous Year

Lowest-cost silver plan change, in a major city in 16 states and the District of Columbia, where 2017 data are available

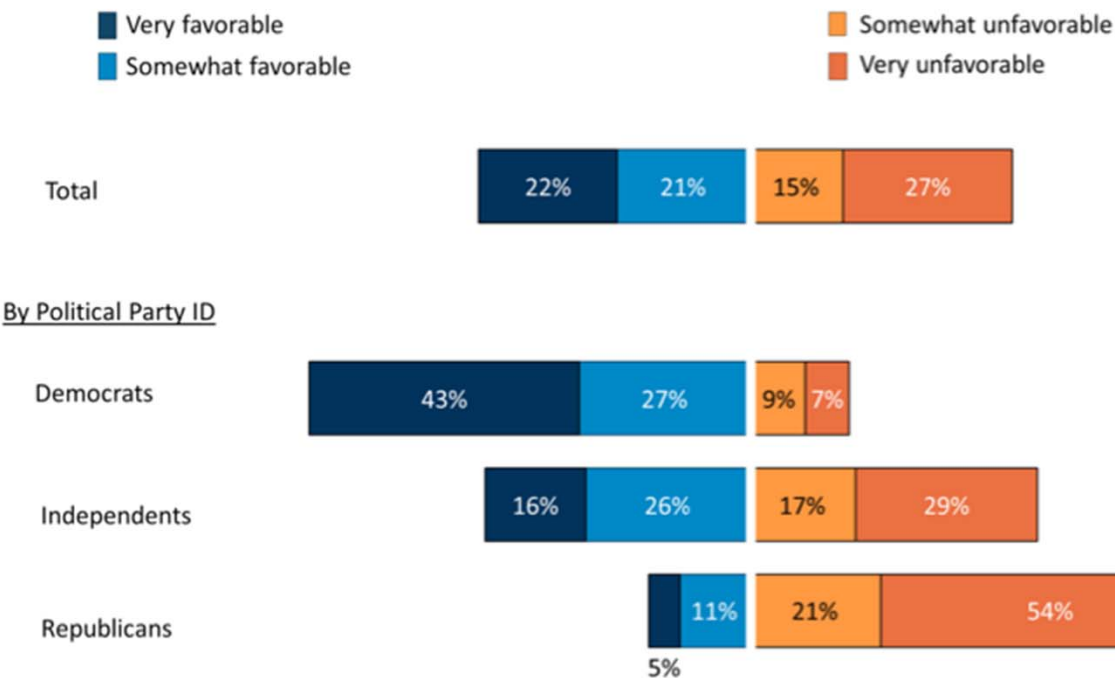


Source: Kaiser Family Foundation analysis of 2017 insurer rate filings to state regulators

Notes: Rates are not yet final and subject to review by the state. Premium changes are representative of the rating area that contains the major city.

Large Partisan Divide In Views Of Health Care Law

As you may know, a health reform bill was signed into law in 2010. Given what you know about the health reform law, do you have a generally favorable or generally unfavorable opinion of it?



NOTE: Don't know/Refused responses not shown.
SOURCE: Kaiser Family Foundation Health Tracking Poll (conducted April 8-14, 2015)



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6

OBAMACARE WARS

**FEDERALISM,
STATE POLITICS,
AND THE
AFFORDABLE
CARE ACT**



**Daniel Béland,
Philip Rocco,
and Alex Waddan**



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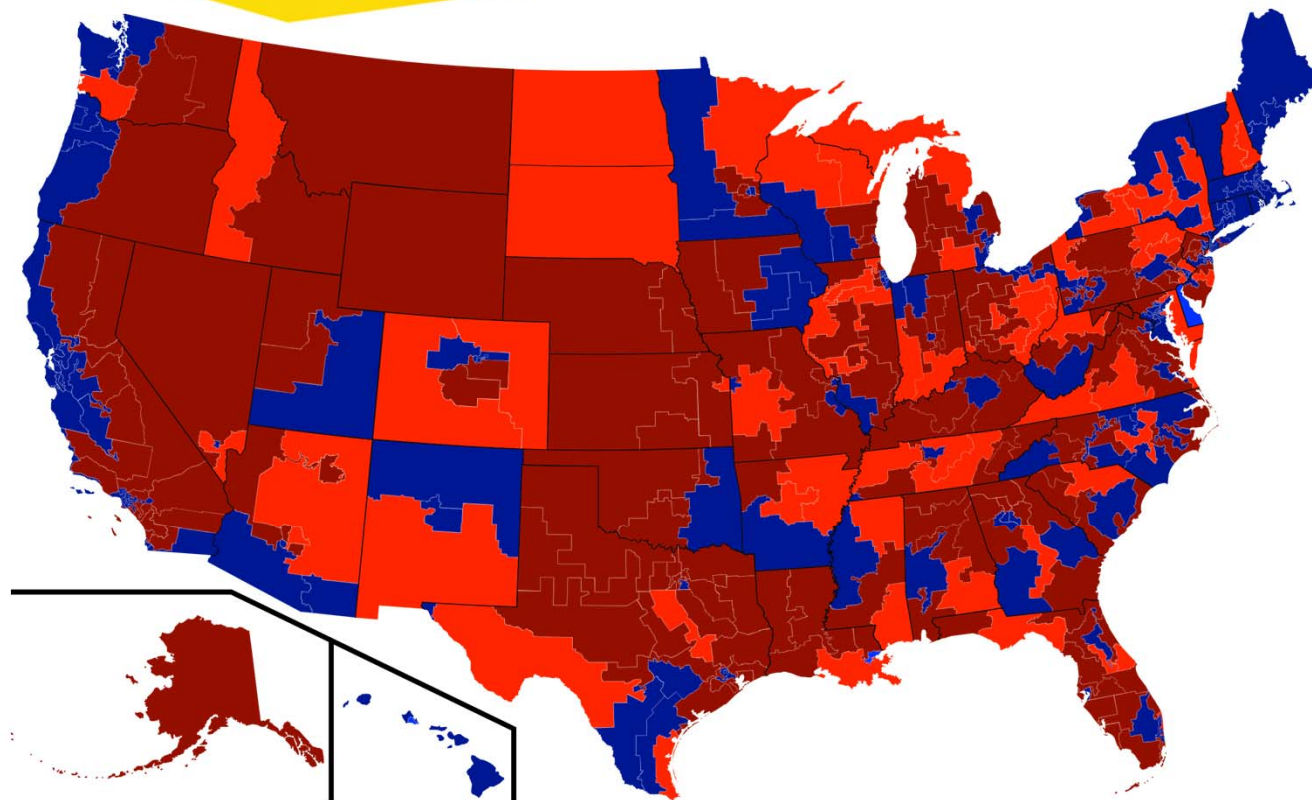
Key points:

1. **The ACA is a plural noun.**
2. Policy legacies and institutional fragmentation shape ACA politics.
3. Implementation reshapes the political turf.



Votes on final passage

- House:
 - Dem: 219-34
 - Rep: 0-178
- Senate:
 - Dem: 59-0 (+ Sanders)
 - Rep: 0-39 (Bunning (KY) abstained)



House Election Results, 2010

Table 2 – The 10 Titles Of The ACA

Title	Name	Purpose
1	Quality Affordable Coverage for all Americans	Reform and expansion of private health insurance
2	The Role of Public Programs	Medicaid expansion and reform
3	Improving the Quality and Efficiency of Health Care	Medicare changes and delivery system reforms
4	Prevention of Chronic Disease and Improving Public Health	Prevention, wellness, and public health
5	Health Care Workforce	Improving workforce quality and quantity
6	Transparency and Program Integrity	Fraud and abuse control; clinical comparative effectiveness, transparency, physician payment sunshine act, and more
7	Improving Access to Innovative Medical Therapies	Allowing follow-on biologic drugs in the US pharmaceutical market
8	Community Living Assistance Service & Supports	Cash assistance for temporarily or permanently disabled Americans (repealed)
9	Revenue Provisions	Financing about half the cost of the full ACA
10	Strengthening Quality Affordable Health Care for All	Amendments to Titles 1-9 including Indian Health Reauthorization Act





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Federalism and the ACA

- 1) Health insurance exchanges;
- 2) Medicaid expansion;
- 3) Regulatory reforms (“Patient’s Bills of Rights,” MLR, Rate Review)



Policy legacies prior to the ACA

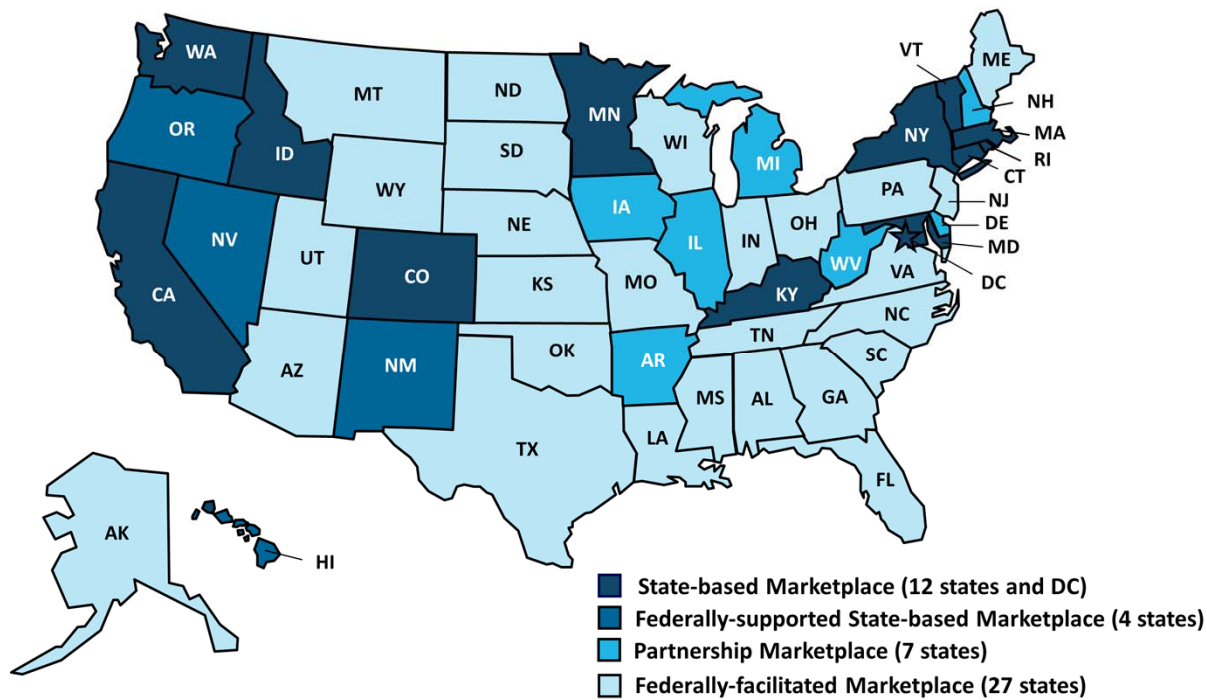
- 1 state with insurance exchange (MA)
- 50 states with Medicaid program (waivers and program variations)
- >25 states with consumer protection, rate review, Medical Loss Ratio



Institutional fragmentation

- **Exchanges:** high
- **Medicaid Expansion:** medium
- **Regulatory Reforms:** low

State Health Insurance Marketplace Types, 2016



NOTES: This map displays the marketplace type for the individual market. For most states, the marketplace type is the same for the small business, or SHOP, marketplace; however, AR, MS, and UT operate State-based SHOP Marketplaces.

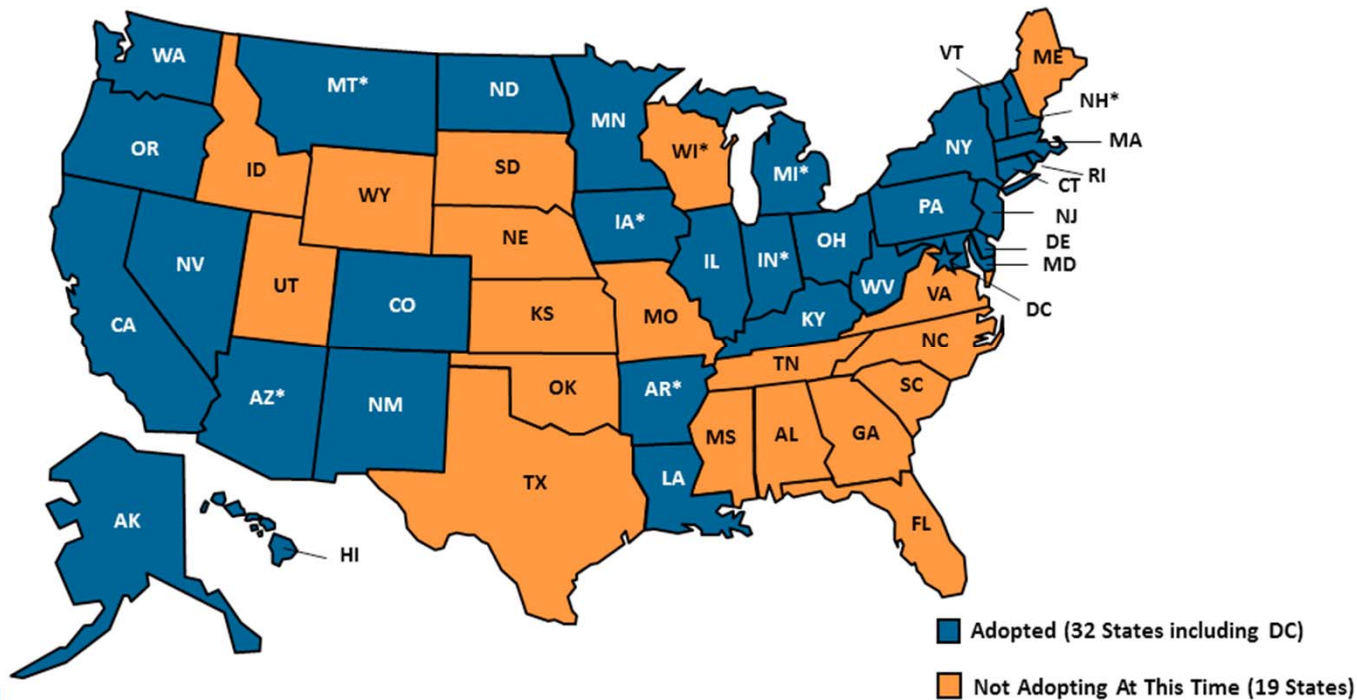
SOURCE: *State Health Insurance Marketplace Types, 2016*, KFF State Health Facts:

<http://kff.org/health-reform/state-indicator/state-health-insurance-marketplace-types/>.



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Current Status of State Medicaid Expansion Decisions

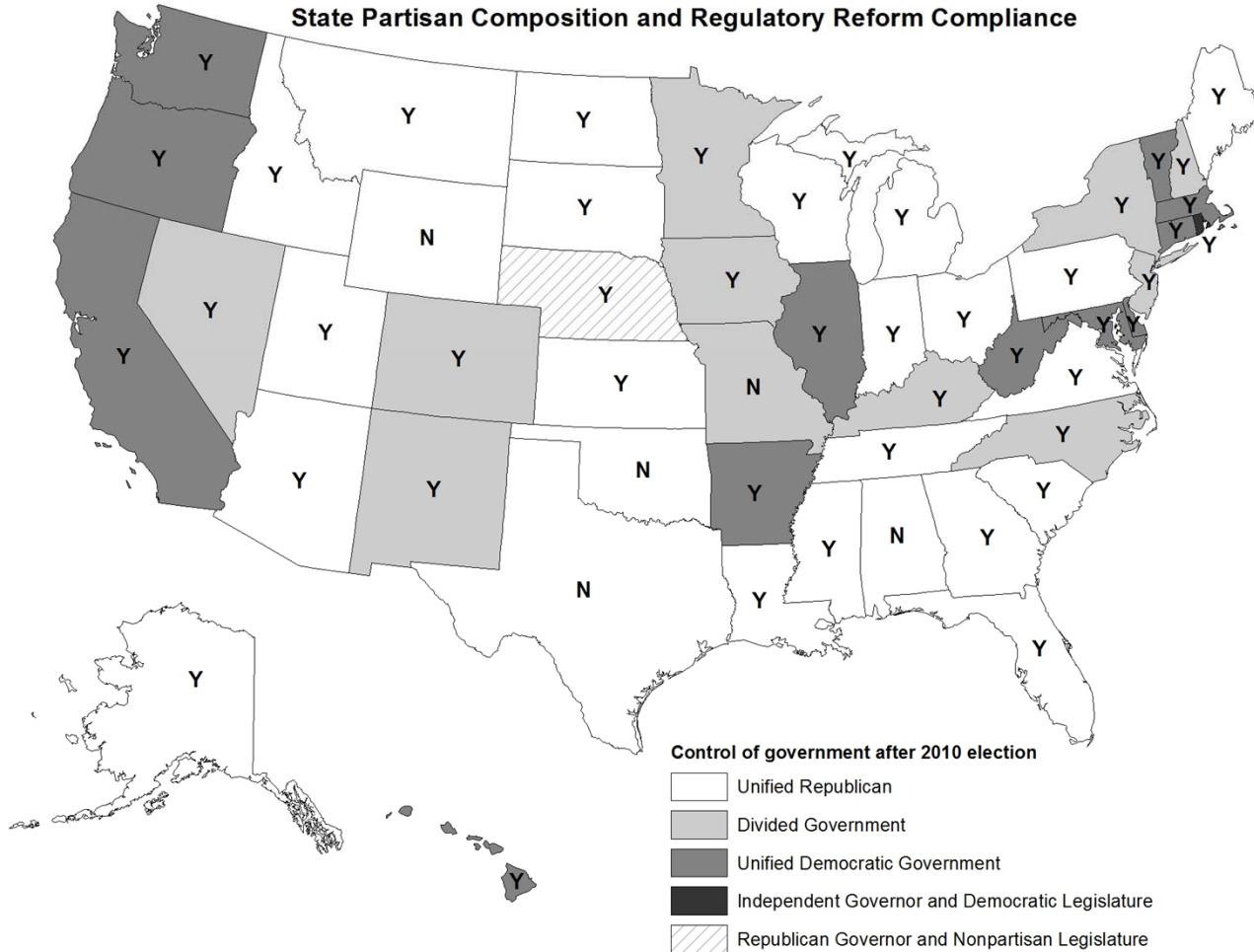


NOTES: Current status for each state is based on KCMU tracking and analysis of state executive activity. *AR, AZ, IA, IN, MI, MT, and NH have approved Section 1115 waivers. WI covers adults up to 100% FPL in Medicaid, but did not adopt the ACA expansion.

SOURCE: "Status of State Action on the Medicaid Expansion Decision," KFF State Health Facts, updated October 14, 2016.

<http://kff.org/health-reform/state-indicator/state-activity-around-expanding-medicaid-under-the-affordable-care-act/>

State Partisan Composition and Regulatory Reform Compliance

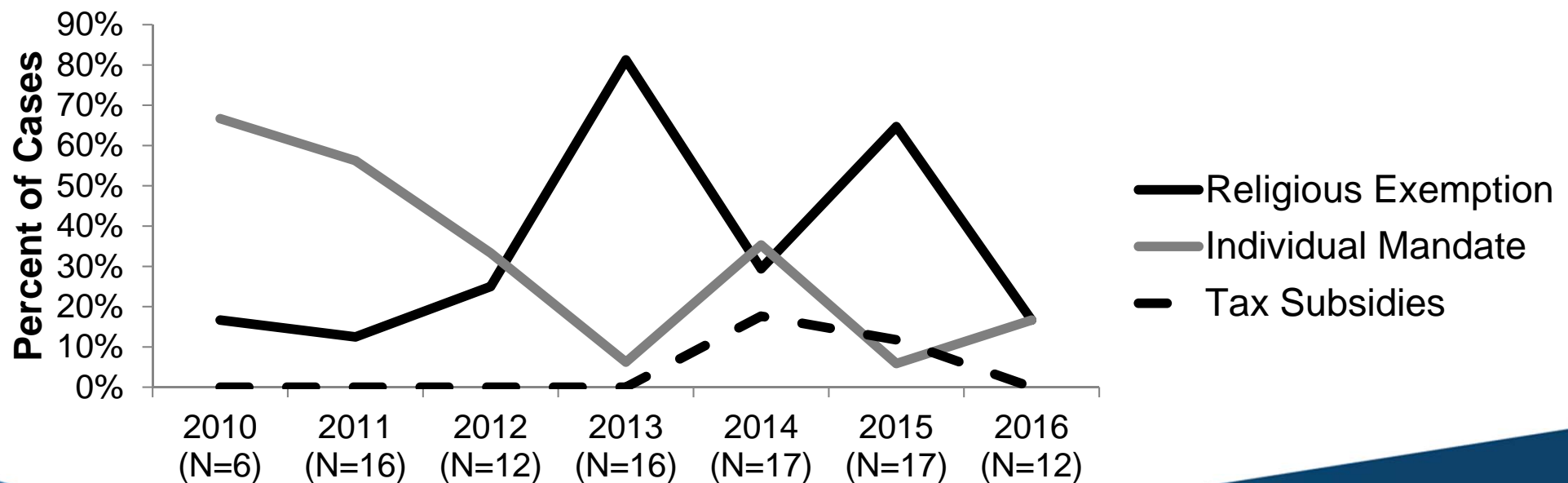




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Shift away from legal challenges



...Towards legislative politics

- Increasing congressional attention to premiums, deductibles
- Heightened scrutiny of implementation (GAO)
- Legislative alternatives





Sample of bipartisan changes to ACA

- PACE Act
- Rescinding of CO-OP Funding
- Repeal of CLASS Act
- Stronger eligibility verification procedures



Catalysts for change

- **Issue expansion:** Debate over gov't market-making capacity and Medicaid expansion outcomes
- **Venue shifting:** Section 1115 waivers (Medicaid), Section 1332 waivers (exchanges)
- **Lateral effects:** Recognition of tradeoffs among elements of ACA (e.g. effect of regs and Medicaid expansion on premiums)



Final observations

- ACA = contested transition to universalism
- “Obamacare wars” will continue after Nov. 8
- Debates will be shaped by policy legacies and institutions
- Focus on tradeoffs among ACA’s numerous goals.