

Public health amicus brief argues in support of administration position in King v. Burwell

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On March 4, the U.S. Supreme Court will hear oral arguments in *King v. Burwell*, a landmark case that takes aim at President Obama's Affordable Care Act (ACA). The ruling, expected sometime in June, will decide whether low and moderate income people living in the 34 states that rely on the federal health insurance exchange will still be able to get the subsidies they need to make health insurance affordable. A public health "friend-of-the-court" brief filed in the case yesterday argues that if the Court strikes down the subsidies, such a ruling would leave millions uninsured and ultimately could result in more than 9,800 preventable deaths every year.

"If the Supreme Court rules against the administration, millions of Americans will be left without the protection of health coverage," said Lynn R. Goldman, MD, MS, MPH, Michael and Lori Milken Dean of the Milken Institute School of Public Health at the George Washington University, and one of the public health deans joining the brief. "Such a ruling would weaken the ACA and put millions of people at risk for illness and death that could have been prevented or managed with the appropriate medical care."

This amicus brief by 19 deans and over 80 faculty members from schools of public health and public health programs across the nation, as well as the American Public Health Association, was written in support of the administration's position in *King v Burwell*. The challengers in *King* argue that tax subsidies are available only to residents of <u>states</u> that have established their own exchange rather than electing to use the



federal exchange as permitted under the law. Represented by a legal team at McDermott, Will & Emery LLP, the amici argue that the tax subsidies provided in the ACA were designed to help qualified residents in all states, not just those who live in states that have established their own Exchanges. The brief estimates that 18 million subsidy-eligible Americans live in the 34 states that either by necessity or by choice have not established their own exchange but instead rely on the federal exchange.

Should the Court rule against the administration, an estimated 9.3 million people would lose subsidies by 2016, and over 8 million would become completely uninsured, according to expert data cited in the public health brief.

The brief estimates that a loss of insurance coverage by more than 8 million people translates into more than 9,800 additional deaths annually in states served by the federal exchange. This estimate is based on data from a previous study that examined the impact on death rates after Massachusetts implemented a near-universal health plan.

Goldman and the other public health deans, scholars, and leaders, who joined the brief, argue that if subsidies are withdrawn, the predictable result would be loss of coverage and denial of care to uninsured people in the 34 states in question. The brief notes that rates of diabetes, high blood pressure and depression are higher in these states. If the challengers in this case succeed, the end result will put more people in these states at risk of deteriorating health—and premature death, they say.

The 34 states that have opted not to run their own exchanges have more low-income residents, and their residents are more likely to be completely uninsured and therefore without the means to secure adequate medical care. If the tax subsidies are eliminated, the



overwhelming majority of those who have been able to gain coverage will lose it and will be without the means to obtain necessary health care, according to the brief.

"The Supreme Court's decision on *King v. Burwell* is the difference between lives saved and lives lost, a healthier nation or a sicker one," said Georges Benjamin, MD, executive director of the American Public Health Association. "A ruling in the plaintiff's favor would force millions of Americans to lose health coverage, and we know being uninsured is a driver of preventable deaths. The architects of the ACA knew this when they wrote it. Its legislative record is clear; the law is intended to make care affordable and accessible even in the federally run exchanges. It is called the Affordable Care Act for a reason. The court should rule in the administration's favor."

More information: View the full amicus brief of Public Health Deans, Chairs, and Faculty and the American Public Health Association in Support of Respondents: publichealth.gwu.edu/pdf/amicu... eans chairs_faculty_%20APHA.pdf

Provided by George Washington University

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