

Study finds 'far-reaching' impact from Affordable Care Act

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By 2008, when President Obama was first elected, the rate of uninsurance in the U.S. had been steadily deteriorating: nearly 56 million Americans reported they had no health insurance for at least part of the prior year. Despite a long-lasting economic boom, a substantial expansion of public coverage for children, federal tax subsidies for people buying high-deductible health plans, and many state efforts, the nation's rate of uninsured had been climbing since 1999, and 10 million more Americans were projected to join the ranks of uninsured by 2019. Even those with middle and higher incomes were worried about being financially devastated by a serious illness.

Since the Affordable Care Act (ACA) became law on March 23, 2010, however, the crisis has eased, substantially so, according to a new study led by Sherry Glied, dean and professor of public service at the Robert F. Wagner Graduate School of Public Service at New York University. Some 19.3 million people have gained coverage because of the ACA, according to her study, entitled "Did the Affordable Care Act Lower Americans' Financial Barriers to Health Care?"—published today (Mar. 2) in *Health Affairs* and coauthored with Sara R. Collins, vice president for health care coverage and access at the Commonwealth Fund, New York City, and Saunders Lin, a Master's of Public Administration student at the Wagner School and general surgery resident at Oregon Health and Science University, Portland.

The fact that 19.3 million more people have <u>health insurance</u> coverage today than in 2008 understates the law's impact, according to the



researchers. That is because all government forecasts before the law was passed projected that the number of uninsured people would have risen even further if nothing were done. The authors found that some 30 million more people have coverage today than was anticipated back in 2009, and the uninsurance rate is just half as high as was forecast.

"Collectively, the ACA's coverage expansions and market reforms generated substantial and widespread improvements in reducing financial barriers to coverage, improving access to health care, and lowering the financial risks of illness," the article stated. "The coverage expansions reduced uninsurance rates, especially relative to earlier forecasts; improved access to health care; and led to measurable gains in the financial well-being of poor Americans. The law's market reforms reduced the burden of maintaining continuous eligibility for coverage and ensured that people with insurance had true risk protection."

Before joining NYU Wagner, Glied served as a senior economist on the President's Council of Economic Affairs under Presidents George H.W. Bush and Bill Clinton, and was Assistant Secretary for Planning and Evaluation at the Department of Health and Human Services during the Obama administration. Despite the law's impact, she and her co-authors wrote, the ACA's reach has been constrained by <u>court rulings</u> such as the Supreme Court's decision in NFIB v. Sebelius, along with congressional and executive branch actions. In addition, Congress and the Trump administration have chipped away at the law's market reforms. One example: Congress's repeal of the individual mandate penalty, which took effect in 2019, is projected to increase the uninsured by 7 million people over the next decade.

As the law continues to be legally contested, "the courts remain an existential threat to both the coverage expansions and the market reforms—with the latest case, Texas V. United States, contesting the constitutionality of the ACA in the absence of the individual mandate



penalty," according to the article. The case is headed to the Supreme Court, as are other cases targeting different aspects of the law. "But the justices will need to reckon with a considerable body of evidence showing the far-reaching effects of the ACA on Americans' insurance coverage, access to care, and financial health ten years after the law's historic passage," the researchers concluded.

Provided by New York University

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