

The Patient Protection and Affordable Care Act

what you need to know

The following answers are based on the truth, not “alternative facts.” They are provided by the Indivisible Bluegrass Research Team.

Q: Is healthcare a right or privilege?

A: If healthcare is a privilege, then that implies inequality, and in the case of immense wealth, immense inequality. The have-lots in the healthcare debate are those that have employer-based coverage and can afford to pay premiums, co-pays, and deductibles or those that can afford their own individual policies. Individuals that cannot afford these expenses are the have-nots.

The Universal Declaration of Human Rights, of which the United States is a signatory, states: “Everyone has the **right** to a standard of living adequate for the health and well-being of himself and of his family including...**medical care** and necessary social services, and **the right to security** in the event of **sickness**, widowhood...or other lack of livelihood in circumstances beyond his control.”

Denying healthcare to those without financial means displays callous indifference to our

fellow brothers and sisters. As Martin Luther King, Jr. stated, “Of all forms of inequality, injustice in healthcare is the most shocking and inhumane.”

Q: How would repealing the PPACA affect Kentuckians?

A: In an April, 2017 town hall, Andy Barr claimed, “This law is hurting my constituents.” Mr. Barr is either woefully uninformed or intentionally misleading.

In the 6th district, 43,811 of his constituents got healthcare coverage from the reforms brought about through the PPACA and 69,724 more gained coverage through Medicare expansion. Of the 13,816 people in the 6th district who purchased healthcare through the KYnect marketplace, 78% received financial help through risk corridor subsidies. The uninsured rate in the 6th district fell from 13.1% to 6.9%. The PPACA benefits tens of thousands of Andy Barr’s constituents.



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It is also notable that Kentucky added at least 13,000 health care sector jobs since the Medicaid expansion. Without a doubt, some of those jobs are in rural hospitals and clinics in the 6th district.

Q: Where did the idea of the PPACA come from?

A: Ironically, the basic architecture of the bill, including the idea of an individual mandate, was conceived in 1989 by Stuart Butler at the conservative Heritage Foundation. His policy paper, “Assuring Affordable Health Care for All Americans” stated: “...each household has the obligation ... to avoid placing demands on society by protecting itself...A mandate on households certainly would force those with adequate means to obtain insurance protection. Not having health insurance...may also impose costs on others, because we as a society provide care to the uninsured. The risk of shifting costs to others has led many states to mandate that all drivers have liability insurance. The same logic applies to health insurance...”

Q. Was the PPACA in a “death spiral?”

A. Andy Barr often falsely claimed that the PPACA was in a “death spiral.” Implemented as planned, the act could be sustainable.

In the insurance industry, the “death spiral” concept has a specific meaning with 3 components: Shrinking enrollment, healthy people leaving the system, and rising premiums. When healthy people drop coverage, premiums rise for everyone else. As the premiums increase, more people will leave the system due to high costs, thus causing a cycle that causes system collapse. Trump’s

administration exacerbated this process by eliminating the risk corridor subsidies to insurance companies meant to supplement premium costs.

As a senator, Jeff Sessions fought to eliminate risk corridor subsidies by attacking their legality. Insurance companies are in business to make profit, so this dubious ploy guaranteed that insurance providers would lose money and pull out of the marketplaces. In 2015, insurance companies were reimbursed only \$400 million for \$2.9 billion owed from subsidies, throwing insurance companies into fiscal peril. Republican schemes were responsible for the turmoil, yet they repeatedly and untruthfully blame the PPACA structure.

Q: Every other industrialized country has solved their healthcare cost problems. Why can’t we?

A. All the other developed countries have settled on one model for health-care delivery and finance; we’ve created a costly, confusing, bureaucratic mess. A persistent myth about American healthcare is that we have the finest health care in the world. We don’t. In terms of results, almost all advanced countries have better national health statistics than the United States does. Prior to the PPACA, 700,000 Americans went bankrupt annually because of medical bills. By unleashing market forces, this is where we will return. Don’t we care for each other more than that?

To learn more, go to www.indivisiblebluegrass.org and click on Resistance Toolkit > Research > Healthcare

December 2017