



**LEAGUE OF WOMEN VOTERS®
OF NORTH CAROLINA**

Health Care Webinar

Presented by the LWVNC Health Care League Action Team

02-Apr-2017

5:30-6:30

Thank you for joining us online

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Agenda

- Welcome and Introductions - Jim (5min.)
 - Note this Webinar is being recorded for future viewing and sharing
- Health Care Update - Jim (20min.)
 - With no AHCA, the ACA remains - what's next?
 - ACA: Affordable Care Act (Obamacare)
 - AHCA: American Health Care Act (The failed Republican House Plan)
- Advocacy Opportunities - Kim (10min.)
 - Protect and Expand Health Care Advocacy Week: This week!
- Health Care League Action Team (HCLAT) - Jim (5min.)
- Sign up for Action - Kim (5min.)
 - Offer your talents based on YOUR availability
- Q&A - All (15min.)



Welcome and Introductions - Jim (5min.)

- Welcome to this timely Webinar
 - Thank you for your attendance AND your interest in this very important topic
 - This is the second monthly Webinar meeting of the LWV HCLAT
 - This webinar is being recorded, so please feel free to share with others in your networks
- Introduction of today's speakers:
 - Jim Foster - Retired Cardiologist
 - Kim Moore - Former GSK (GlaxoSmithKline) Scientist and Project Team Manager
- Introduction of today's Webinar Facilitation:
 - Kim Moore - Webinar Facilitator
 - To keep Webinar to 1 hour we will mute everyone until the Q&A Portion of the Agenda.
 - **Problems during the webinar: Text Kim Moore @ 919-602-6272**



Health Care Update - Jim (20min.)

The AHCA Failed –
What Might Happen Next?



True or False?

“We’re going to be living with Obamacare for the foreseeable future.”

- Speaker of the House Paul Ryan, March 24, 2017



Possible Directions for Health Care after the AHCA

- Continue the ACA (Obamacare) as is
- Bipartisan legislative ACA improvements
- Executive (Trump) ACA improvements
- Executive “fixes” to the ACA by Trump
- Another attempt to “repeal and replace”



Continue the ACA as is

- Unless undermined, the ACA would probably survive
- But . . .
- Many people would remain uninsured because they still can't afford it
 - Their share of the premium is too high even after subsidy
 - Their cost-sharing too high (i.e., deductibles, co-pays, co-insurance)
- Persistent resentment about individual mandate
- Continued imbalance in insurance risk pool
- Medicaid would remain non-expanded in many states
- And, the many benefits of the ACA would continue



Possible Legislative Improvements to the ACA

- Increase the subsidies
 - Many more people could afford insurance
 - Lower Deductibles, co-pays and co-insurance would decrease out-of-pocket cost (cost-sharing reductions)
 - Young, healthy people (“young invincibles”) could afford insurance, so the individual mandate (tax penalty for no insurance) might no longer be necessary



Possible Legislative Improvements to the ACA

- Fix the “Family Glitch”
 - Family members are excluded from subsidized insurance if the employee’s insurance alone is “affordable”, meaning $< 9.7\%$ of income
 - The family can get insurance only through the employer, paying full premiums
- This means that families may have to pay as much as 20% of their income for health insurance
- So many families end up being uninsured



Possible Legislative Improvements to the ACA

- Restore DSH Payments to rural hospitals
- Reinsurance for insurance companies that encounter unexpectedly high risk pools
- Repeal the employer mandate – not worth it
- Allow government to negotiate drug prices with pharmaceutical industry
- Increase ACA administrative funding
- Incentives to states to expand Medicaid



Possible Executive ACA Improvements

- Vigorously defend ACA cost-sharing subsidies in the upcoming Supreme Court case
 - GOP House of Representatives sued the Obama administration, claiming that payment for cost-sharing subsidies for silver plans had bypassed congressional authority
 - District Court ruled for the House claim, HHS appealed
 - If SCOTUS upholds the district court, these payments would stop. Insurance companies would lose funding for contracted expense obligations, and probably withdraw from the ACA insurance market
- Increase publicity and support for enrollment
- Encourage insurers to stay in the market



Executive “fixes” to the ACA by Trump

- By “fix” we mean deliberately sabotaging the ACA, presented as a noble attempt to save it from its own inevitable “disaster,” then trying to put the blame on Obama



Executive “fixes” to the ACA by Trump

- Withdraw the House suit to overturn cost-sharing reductions, letting the District Court ruling stand, eliminating payment for cost-sharing subsidies and imploding the market
- Stop enforcing the individual mandate
- Further decrease publicity for ACA enrollment
- Stop encouraging insurance companies to remain in the market



Another attempt to “repeal and replace”

- Early this past week, there were reports that the GOP House was meeting again to resurrect a version of the AHCA
- But House Ways and Means Chairman Kevin Brady said “It’s time to move on,” effectively killing repeal and replace for now
- NC HHS Secretary Dr. Mandy Cohen says the ACA will continue at least through 2018



What are the possible scenarios?



Worst Case Scenario

- Trump withdraws the appeal to SCOTUS, the lower court ruling stands, payment for cost-sharing reductions is eliminated, insurance companies leave the market or even go bankrupt, tens of millions lose insurance, financial viability of the entire health care system is threatened, people may die as they lose their health care coverage
- In desperation, Americans accept an even stingier version of the AHCA
- Trump and the GOP successfully fix the blame for the long-predicted “disaster” on Obama and the Democrats
- Republicans sweep to even bigger wins in 2018 and Trump is re-elected in 2020



Best Case Scenario

- SCOTUS acts in the best interest of the American people and finds a way to preserve the subsidies for cost sharing reductions
- Trump encourages enrollment, enforces the individual mandate, announces further regulatory “tweaks,” the risk pool balance improves, and the insurance market thrives
- Support for the ACA (no longer derided as Obamacare) continues to improve, until the GOP decides to cooperate with Democrats and improve the ACA to make it a good health care system (maybe even with a public option or, pie in the sky, single payer)



Most Likely Scenario

- SCOTUS acts in the best interest of the American people and finds a way to preserve the subsidies for cost sharing reductions
- Trump's administrative undermining fails to damage the ACA enough to destroy it
- The ACA continues to limp along
- The uninsured rate decreases slowly, due mostly to more states expanding Medicaid



What does the Health Care League Action Team Do Now?



What does the Health Care League Action Team Do Now?

- Work to prevent SCOTUS from eliminating cost-sharing subsidies
 - Oppose confirmation of Gorsuch
 - Work to prevent NC defunding of Planned Parenthood
- Be alert for any health care sabotage by Trump
- Resume our work to encourage NC to expand Medicaid, that is, to Close the Gap!
- Work with Secretary Cohen's office to re-frame and re-language the campaign, avoiding any use of "Medicaid," "expansion" or similar charged words



What does the Health Care League Action Team Do Now?

- Advocate, as we always have:
 - Meetings with elected and other officials,
 - Talks throughout the state
 - Resolutions for city councils, county commissioners
 - Write LTEs, Op-Eds
 - Send Postcards and Letters to elected officials
 - Make phone calls to elected officials
 - Be open to suggestions and guidance from Secretary Cohen, NC Justice Center and others



Advocacy Opportunities - Kim (10min.)

- Protect and Expand Health Care Week of Advocacy - THIS WEEK!
 - Health Action NC Coalition is Organizing the Week of Advocacy
 - LWV HCLAT Advocacy Group is facilitating our involvement:
 - Stevie McNeal, Mary Parry, Kim Moore, and Jim Foster
- April 4 - Lobby day at NC General Assembly
 - 8:00 - 10:45 - Sign-in, Educational and Advocacy Training
 - First Baptist Church
 - Kim Moore will be there (button and ribbon)
 - 10:45-2:30 - Visit with your legislators
 - Advocacy Group has scheduled appointments and will be there (buttons and sign)
 - 2:30 - Press Conference
 - “LWV Recommends” - Information and Leave Behind has been developed
- April 4 - Post Card Campaign
 - Encouraging EVERYONE to send postcards this week!



Advocacy Opportunities - Kim (10min.)

- “LWV Recommends” - Information and Leave Behind



Advocacy Opportunities - Kim (10min.)

- Postcards - please print and send to your NCGA Representative and Senator



Health Care League Action Team - Jim (5min.)

- L WVNC League Action Teams are at the State League Level
- HCLAT is also connected to a broader Coalition: Health Action NC (HANC)
- HCLAT has been active the past several years
 - Currently Members from 10 of the 18 LWV local chapters
- HCLAT 2017 Steering Committee:
 - Jim Foster - ODC – HCLAT Team Lead
 - Angela Johns - ODC - Education Lead
 - Karen Bean - CLT - Education Team
 - Stevie McNeal - ODC – Advocacy Team
 - Janet Hoy - ODC
 - Kate Torrey - ODC
 - Margaret Salinger - PT (Piedmont Triad)
 - Pat Adams – TC (Twin Counties)
 - Ellie Lawrence - ODC
 - Mary Parry - ODC - Communications Co-Lead
 - Kim Moore - ODC - Communications Co-Lead



Sign up for Action - Kim (5min.)

- HCLAT will be sending frequent communications so that you can:
 - Keep Aware of Issues: sign up at <http://eepurl.com/bvw-wD>
 - Spread the word to others in your personal networks
 - Provide Feedback to State and National Representatives
- Post Webinar Communication
 - Lobby Day Signup - please indicate if you will be joining us!
 - Lobby Day “LWV Recommends” Info Sheet
 - Post Cards to print
 - Google form - 5 min survey to capture your skills and interests for ongoing activity
- Next meeting of the HCLAT
 - Sunday, April 30th, 5:30-6:30 - to include:
 - Debrief from Lobby Day
 - Ideas from LWV meeting with Dr. Mandy Cohen - DHHS



Questions and Answers

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