

HEALTH CARE TALKING POINTS (as of 6/23/2017)

The [Better Care Reconciliation Act of 2017 \(BCRA\)](#) and Its Impact on the Health Care System

- On June 22, 2017, the Senate Republicans published a discussion draft of legislation entitled the [Better Care Reconciliation Act of 2017 \(BCRA\)](#). This is the Senate's response to the [House passed American Health Care Act \(AHCA\)](#).
- The [Better Care Reconciliation Act of 2017](#), drafted by 13 Republican Senators, would dismantle the existing health care coverage system for millions of Americans and expose many individuals to risk of health care protections existing under current law. Republicans and Democrats have already expressed opposition to the bill. The taxes being eliminated from the ACA will leave fewer resources to fund the health benefits offered through Medicaid and the premium subsidies to individuals. Further, it is understood that the BCRA savings will not be devoted to deficit reduction but to allow future new tax cuts to wealthy individuals.
- The BCRA jeopardizes the U.S. health care system capabilities to provide care for existing covered individuals. BCRA **does not** meet [ANA's Principles of Health System Transformation](#) including:
 - universal access to a standard package of essential health benefits for all citizens and residents;
 - utilization of primary, community-based and preventative services while supporting the cost-effective use of innovative, technology-driven, acute, hospital-based services;
 - the economical use of health care services with support for those who do not have the means to share in costs; and
 - a sufficient supply of a skilled workforce dedicated to providing high quality health care services.
- ANA is very concerned with a number of the bill's key provisions proposed to eliminate coverage, such as the following:
 - Tens of millions of Americans would lose health insurance coverage, while millions more would see their premiums and out-of-pocket costs rise;
 - **States could waive Essential Health Benefits, putting a critical set of health coverage protections at risk. [Currently, every health plan must cover the following:](#)**
 - Ambulatory patient services (outpatient care you get without being admitted to a hospital)
 - Emergency services
 - Hospitalization (like surgery and overnight stays)
 - Pregnancy, maternity, and newborn care (both before and after birth)

- Mental health and substance use disorder services, including behavioral health treatment (this includes counseling and psychotherapy)
- Prescription drugs
- Rehabilitative and habilitative services and devices (services and devices to help people with injuries, disabilities, or chronic conditions gain or recover mental and physical skills)
- Laboratory services
- Preventive and wellness services and chronic disease management
- Pediatric services, including oral and vision care (but adult dental and vision coverage aren't essential health benefits)
- Access to affordable coverage on the individual market would be further compromised with cuts to subsidies and a lower income eligibility limit (Individuals at 400% of poverty eligible for subsidies under ACA, Senate bill lowers to 350%)
- Medicaid expansion would be rolled back over a 3 year phase-out period for expansion states between 2020-2023. The bill does not provide a specified proposal on next steps for states with expansion;
- The Medicaid program would be fundamentally restructured to a per-capita or [Medicaid block grant funding](#) structure – shifting costs to already overburden state budgets;
- Any increases in Medicaid payments would be limited to the Consumer Price Index (CPI) after 2025, an even lower growth rate than the CPI medical care index as specified in the House-passed bill;
- Medicaid waivers would allow states to undermine protection against discrimination for those with pre-existing conditions;
- And more than 2.4 million women benefitting from care provided by Planned Parenthood clinics across the country would see their access to services disrupted. The bill defunds Planned Parenthood for a year. Defunding this program for one year is likely to impact future funding;
- The BCRA threatens health care affordability, access, and delivery for individuals across the nation. In its current form, the bill changes Medicaid to a per capita cap funding model, eliminates the Prevention and Public Health Fund, restricts millions of women from access to critical health services, and repeals income based subsidies that millions of people rely upon; and,
- The BCRA makes significant changes to the Affordable Care Act (ACA) and generally reduces access to care and financial assistance – particularly for low-income and vulnerable populations who often have high rates of chronic conditions and other serious health issues.

10 Quick Talking Points on BCRA

1. Unaligned with ANA priorities for health system transformation;
2. Unaligned with [ANA Code of Ethics for Nurses](#), (p.vii, and p.10);

3. Leaves vulnerable populations such as the young, elderly, and disabled at greater risk
4. Slashes Medicaid funding, potentially jeopardizing access to health care for vulnerable populations, including seniors, and children;
5. Squeezes state budgets, forcing states to make the stark choice of either replacing federal funding with state dollars or to narrow eligibility, or reduce services provided or provider payments;
6. Changes how healthcare is financed, particularly for individuals without employer-sponsored health care coverage;
7. Offers Health Savings Accounts with higher allowable contributions; however, these forms of coverage will only be useful to high earners or individuals with extra savings to spare;
8. Rolls back mandated employment-based health insurance by eliminating the legal requirement that employers with more than 50 employees to pay for health insurance coverage;
9. Removes almost \$1 billion in annual appropriations, including roughly \$325 million for immunization programs, for the Prevention and Public Health Fund; and
10. Defunds Planned Parenthood, severely impacting the ability of millions of women to access preventive and reproductive health services.

Following is [a high level review and comparison](#) of some of the provisions that are inconsistent with ANA's core principles:

I) Universal Access to a Standard Package of Essential Health Benefits for All Citizens and Residents

- a. Repeals Medicaid Expansion and allows work requirements for certain individuals
- b. Authorizes states to eliminate coverage mandates for essential health benefits, create high risk pools for people with pre-existing conditions, and weakens consumer protections
- c. Gives tax credits based on age and income only, not adjusted for local cost of living differences
- d. Denies coverage of some women's reproductive health services and defunds Planned Parenthood for one year

II) Utilization of primary, community-based and preventative services while supporting the cost-effective use of innovative, technology-driven, acute, hospital-based services

- a. Uses tax code to discourage use of high cost health services particularly those available through employer based plans
- b. Eliminates funding after FY 2017 for the Prevention and Public Health Fund within the ACA and adds one-time, supplemental funding increases for both the

Community Health Center Program and to combat the opioid abuse and mental health crises

III) Encourage the economical use of health care services with support for those who do not have the means to share in costs

- a. Eliminates cost-sharing reductions which allow low-income individuals to purchase basic preventive healthcare services
- b. Repeals taxes on a wide range of providers and services intended to fund the purchase of affordable healthcare and incentivize health care
- c. Increases reliance on HSAs to fund health insurance and medical out-of-pocket expenses
- d. Forces states to operate individual and small group insurance markets using flat rate federal grant money

IV) Ensure a Sufficient Supply of a Skilled Workforce Dedicated to Providing High Quality Health Care Services

- a. Does not include any provisions related to nursing workforce or adequate staffing
- b. Increases federal funding for hospitals in states that did not expand Medicaid

Conclusion

- Nurses provide care in virtually every health care setting, providing expert, compassionate health care services for people throughout all stages of life.
- As the organization representing the nation's largest group of health care professionals and its most trusted profession, ANA has asked the Administration and Congress time and again to keep our patients' access to affordable, quality care foremost in their discussions over how to improve our nation's health care system. It is for the reasons laid out above that the American Nurses Association strongly opposes the U.S. Senate's bill to replace the Affordable Care Act. This bill would not improve the U.S. health care delivery system; rather, it would significantly weaken it and would rip away access to vital health care coverage and patient protections that have been put into place over the last seven years.