

HOW THEY STACK UP

Updated May 4, 2017
Amendments shown in red.

ACA

FEATURES

AHCA

Individual Mandate.

Most people must obtain health insurance or pay a penalty of 2.5% of household income or \$695 per adult, whichever is greater.



Coverage Requirement

Continuous Coverage.

Individual mandate penalty repealed. Also, if an enrollee drops coverage, insurers may add a 30 percent surcharge upon re-enrollment.

Bans insurers from denying coverage to people with pre-existing medical conditions or charging them more.



Pre-Existing Conditions

States may waive rules against different pricing based on pre-existing health conditions.

May stay on parents' plan until age 26.



Young Adults

Retains this reform from the ACA.

3:1 Ratio.

Insurers may charge an older adult three times more than a younger adult.



Age-Based Pricing

5:1 Ratio.

Insurers may charge an older adult five times more than a younger adult. **States may approve higher ratios.**

Income-Based. Provides credits for people earning between 139% (\$16,000) and 400% (\$48,000) of federal poverty level. Credits are higher in areas with higher insurance prices.



Tax Credits

Age-Based (with Income-Based Caps). Provides refundable \$2,000/year credits for people under 30, increasing to \$4,000/year for those over 60. Bigger credits for larger families. Not based on price.

Expanded eligibility to all low-income people below 139% of federal poverty level. Federal government pays at least 90% of cost.



Medicaid Eligibility Expansion

Continues expansion through 2020, but then freezes enrollment. Eliminates enhanced federal payment rate for all but those continuously enrolled on December 2019. States could impose work requirements.

Joint federal and state funding that covers all eligible residents and all permitted medical services.



Medicaid Funding

Transition federal portion to a per capita allotment, or a set amount per enrollee, in 2020, using 2016 as base year. **States could opt for block grants instead.**

Provides cost-sharing subsidies for households between 100% and 250% FPL to reduce out-of-pocket costs. Must buy silver plan.



Cost Sharing

Repeals subsidies in 2020.

Caps tax-free contributions at \$3,350 annually for individual. Must be in a high deductible plan.



Health Savings Accounts (HSAs)

Expands availability of HSAs, increases tax-free contributions.

Requires insurers to offer 10 benefits in all plans.



Essential Health Benefits

Allows states to waive some or all benefits.

Creates online marketplaces to purchase individual insurance, and designates marketplaces as the only place tax credits are available.



Health Insurance Marketplaces

Retains the marketplaces, but makes tax credits available outside the marketplace.

Bans insurers from limiting coverage.



Annual/Lifetime Dollar Limits

Retains ban.

Requires larger companies to provide affordable coverage to employees.



Employer Sponsored Insurance

Eliminates the penalty.

Removed need by requiring insurers to cover all people with preexisting conditions.



High Risk Pools

Provides \$138 billion for a "Patient and State Stability Fund." States have option to use this money to create a high risk pool.

Didn't affect Planned Parenthood



Reproductive Health

Adds a ban of funding to Planned Parenthood in 2018. Forbids tax credits for buying an insurance plan with abortion benefits.