

GOP False Promises Primer: How Affordable Care Act Replacement Proposals Fall Short

GOP Proposal	What it does	What they'll say	How it falls short	How it differs from ACA
Creating state high-risk pools	Creates special state-based plans for people with serious pre-existing conditions	Lowers premiums for everyone else while still providing access to insurance for sicker people	Leaves states unable to cover their costs — eventually premiums rise to unaffordable levels, states must scale back benefits or cap enrollment The scant federal support Republicans have promised means a repeat of these problems	ACA bans discrimination against people with pre-existing conditions ACA keeps healthy people in the pool — and premiums down — through the individual mandate and sufficient premium subsidies
Expanding Health Savings Accounts (HSAs)	Increases the amount individuals can deposit into tax-favored HSAs and/or allows HSA funds to be used for premiums	Allows for consumer-directed care as patients control where their money goes — which helps keep costs down	Benefits go disproportionately to the wealthy — as the accounts give a bigger tax break to those in higher tax brackets — while lower- and middle-income families most likely to be uninsured receive little help	ACA provides tax credits for working families and expands Medicaid to those who struggle most to afford insurance
Allowing insurers to sell across state lines	Allows insurers licensed in one state to sell insurance to individuals in another state	Increases competition among insurers and options for consumers	Allows plans from weakly regulated states to attract healthier individuals Leaves a sicker pool of people in states with stronger rules, and leave consumers without protection if they have problems with their insurer Drives up premiums for older and sicker people	ACA protects state authority over their markets ACA promotes insurer competition by creating a level playing field ACA discourages insurers from competing only by avoiding people who have health conditions
Protecting people with pre-existing health conditions only if they have continuous coverage	Guarantees access to an individual-market plan, regardless of pre-existing conditions, but only if people have maintained coverage without a gap	Ensures that people who have been “responsible” can get coverage even if they have health problems	Rolls back popular protections by leaving people who have a gap in coverage facing much higher premiums or being denied coverage outright. Hits people with pre-existing conditions, lower incomes, and without employer coverage hardest	ACA ensures access to affordable coverage for a broad array of people It prods healthier people with the mandate to buy coverage It won't punish people facing hard times
Establishing new tax credits for health coverage	Replaces ACA tax credits with fixed amounts that don't change based on income, plan cost, or adequately adjust for age	Gives consumers more power and choice, and keeps costs down because people have more “skin in the game”	Reduces people's ability to afford comprehensive coverage Hits lower- and moderate-income families hardest, who are most likely to be uninsured	ACA credits automatically adjust based on income, age, and the cost of a good plan to help people most likely to struggle to pay premiums. ACA also helps with deductibles and co-pays for the low-income.
Restructuring Medicaid through block-grants /per-capita caps	Restructure Medicaid financing by capping and cutting federal funding	Provides flexibility to states to revamp their Medicaid programs so that they can find the most cost-efficient way to provide care	Imposes deep cuts to federal Medicaid funding for states, leading them to impede enrollment, cut eligibility, and reduce benefits and provider payments Eliminates or reduces access to care and coverage for millions of low-income families, people with disabilities, and seniors	ACA expanded Medicaid to provide greater access to insurance for low-income people Medicaid offers states flexibility to reform care delivery, improve health outcomes, lower costs