



Latino Health at Risk: What the American Health Care Act Means for Latinos in Colorado

The cuts to health care proposed by Congress will affect millions of families across our nation. Latinos in Colorado will be particularly hard hit. Children, the elderly, the disabled and other vulnerable people will suffer serious losses to coverage and access to care.

Access to quality health coverage and care is essential to living a healthy life. The Affordable Care Act (ACA, also known as Obamacare), has helped provide coverage to 20 million Americans, including 6 million Latinos* since implementation of the law in 2013.

These gains have been especially important to the Latino community. The uninsured rate for Latino adults under age 65 has declined by over 40 percent—from 43.2 percent in 2010 to 25 percent in 2016—the largest decline of any demographic group.¹ At the same time, the Latino child uninsured rate (7.5 percent) is at its lowest rate ever recorded.² Increasing health coverage

has also helped Latinos access health care services. In a national survey, three-quarters of previously uninsured U.S-born Latinos and Blacks said they used their coverage to visit a doctor, hospital, or other health care provider or pay for prescription drugs—care that most said they would not have been able to access or afford before getting insurance.³

This historic progress is now under attack. In early May 2017, the House of Representatives passed the American Health Care Act (AHCA), a bill that aims to repeal and replace the ACA, and to cut and restructure the Medicaid program. While these cuts would have a significant effect nationally, it is worthwhile to examine

*The terms “Hispanic” and “Latino” are used interchangeably by the U.S. Census Bureau to refer to people of Mexican, Puerto Rican, Cuban, Central and South American, Dominican, Spanish, and other Hispanic descent; they may be of any race.

the effects at a state level. For example, given the size of the Latino population in Colorado—more than 1 in 5 Coloradans identify as Latino—any changes affecting that population could reverberate through the entire state in several ways.⁴ This fact sheet shows how proposed cuts would affect the tens of thousands of Latinos in the state who have gained coverage in recent years.

Colorado Latinos will be hard hit if the American Health Care Act becomes law

The ACA made historic improvements in health coverage for Latinos. Between 2013 and 2015, the uninsured rate of non-elderly Latinos in Colorado declined from 21 percent to 14 percent.⁵ The rate of uninsured Latino children in Colorado was cut by more than half, from 13.1 percent to 6 percent during this period.⁶

Proposed Medicaid cuts will fall heavily on Latinos in Colorado

Medicaid is a federal-state partnership that provides quality health coverage to low-income children and families, the elderly, and the disabled. The AHCA severely undermines this partnership. Under the AHCA, the state of Colorado would lose an estimated \$15 billion in federal Medicaid

funding, forcing the state to restrict Medicaid benefits, cut coverage, or both.⁷ Further, the repeal of the state's Medicaid expansion program, along with severe cuts to the traditional program, would severely cripple the state's ability to provide adequate health care for its residents. These cuts would be especially devastating to Latinos, who tend to work in low-wage, part-time, or hourly sectors of the economy that are less likely to provide job-based insurance. Nationally, one-third of Latinos are covered by Medicaid, including over half (56 percent) of Latino children.⁸

- » About 405,300 Latinos in Colorado have Medicaid coverage, comprising 40 percent of non-elderly enrollees.⁹
- » About 52 percent of children with Medicaid or CHIP coverage in Colorado are Hispanic/Latino.¹⁰
- » Colorado is one of 32 states, including Washington, DC, that expanded Medicaid coverage to cover working adults with low incomes. As of March 2016, 423,462 Colorado residents were newly-eligible Medicaid expansion enrollees, and the latest census data show that 28 percent of the newly-eligible Medicaid expansion population in Colorado is Latino.¹¹

Proposed cuts and changes in marketplace premium credits and subsidies will harm Colorado's Latinos

For individuals and families with incomes that are above Medicaid's income limits who do not have coverage through their jobs, ACA's marketplace plans are an important source of coverage. Need-based financial assistance is available at a sliding scale to help low- and middle-income families pay for marketplace premiums, with the amount of assistance pegged to their income level and where they live. There are also subsidies available to lower-income people to help cover deductibles and co-pays. In Colorado, 64 percent of all marketplace enrollees received financial assistance to make premiums more affordable, and 26 percent also received subsidies that helped lower their out-of-pocket health care costs like deductibles and co-pays.¹²

The AHCA would dramatically cut the funding available for financial assistance, and change the program so assistance would no longer be based on financial need, but rather on a person's age—even if that person does not have financial need. Cost-sharing subsidies would be eliminated entirely. Most Latino marketplace enrollees would see much higher out-of-pocket costs, threatening their ability to afford coverage.

- » Most Latinos enrolled through the marketplace would see higher costs. For example, in Denver County, where the median income for a Latino individual is \$24,787¹³, a 27-year-old with an income of \$20,000 would pay \$670 more annually in premiums after credits under the AHCA than under ACA, while a 60-year-old with the same income would pay \$4,440 more.¹⁴

Colorado's Latinos have much to lose under the AHCA

Under the ACA, millions of Latino families across the country, and tens of thousands in Colorado, have finally attained quality health coverage that they would otherwise not be able to afford. Yet, the actions of the Republican-led House of Representatives make it clear that they aim to reverse course on this progress, rescind the promise of the Medicaid program to cover those with low incomes and disabilities, and strip away the right to health care from millions. The data make it clear that the AHCA does not offer better, more affordable health care options—but instead, threatens the well-being and financial stability of millions of our nation's working families, including many in Colorado.

The AHCA would dramatically cut the funding available for financial assistance, and change the program so assistance would no longer be based on financial need, but rather on a person's age—even if that person does not have financial need.

Endnotes

¹Centers for Disease Control, *National Health Interview Survey*, 2016, Family Core component, Table IX, available at <https://www.cdc.gov/nchs/data/nhis/earlyrelease/insur201609.pdf>.

²Sonya Schwartz, et al, *Historic Gains in Health Coverage for Hispanic Children in the Affordable Care Act's First Year* (Washington, DC: Georgetown University Health Policy Institute Center for Children and Families and National Council of La Raza, January 2016), available at <http://ccf.georgetown.edu/wp-content/uploads/2016/01/CCF-NCLR-Uninsured-Hispanic-Kids-Report-Final-Jan-14-2016.pdf>.

³Michelle Doty, et al, "Latinos and Blacks Have Made Major Gains Under the Affordable Care Act, But Inequalities Remain" (New York: Commonwealth Fund, August 2016), available at <http://www.commonwealthfund.org/publications/blog/2016/aug/latinos-blacks-major-gains-under-aca>.

⁴R. Stepler and M. Lopez, "Ranking the Latino population in the states" (Washington, DC: Pew Research Center, September 2016), available at <http://www.pewhispanic.org/2016/09/08/4-ranking-the-latino-population-in-the-states/>.

⁵Kaiser Family Foundation, *State Health Facts: Uninsured Rates for the Nonelderly by Race/Ethnicity* (Washington, DC: Kaiser Family Foundation, 2017), available at <http://kff.org/uninsured/state-indicator/rate-by-raceethnicity/?activeTab=graph¤tTimeframe=0&startTimeframe=2&selectedDistributions=hispanic&selectedRows=%7B%22nested%22:%7B%22colorado%22:%7B%7D%7D%7D&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D>.

⁶Schwartz, et al, *Historic Gains in Health Coverage for Hispanic Children in the Affordable Care Act's First Year*.

⁷John Holahan, et al, *The Impact of Per Capita Caps On Federal and State Medicaid Spending* (Washington, DC: Urban Institute and Princeton: Robert Wood Johnson Foundation, March 2017), available at <http://www.rwjf.org/en/library/research/2017/03/the-impact-of-per-capita-caps-on-federal-and-state-medicaid-spen.html>.

⁸U.S. Census Bureau, *Current Population Survey, 2016 Annual Social and Economic Supplement*, Table HI08.

⁹Kaiser Family Foundation, "Distribution of the Nonelderly with Medicaid by Race/Ethnicity" (Washington, DC: Kaiser Family Foundation, 2015), available at <http://kff.org/medicaid/state-indicator/distribution-by-raceethnicity-4/?currentTimeframe=0>.

¹⁰Center for Children and Families, *Snapshot of Children's Coverage by Race and Ethnicity* (Washington, DC: Georgetown University Health Policy Institute, April 2017), available at <http://ccf.georgetown.edu/wp-content/uploads/2017/04/Snapshot-of-Children%E2%80%99s-Coverage-by-Race-and-Ethnicity.pdf>.

¹¹National Council of La Raza, Analysis of Census Bureau's Current Population Survey, 2015-2016 Annual Social and Economic Supplement, with assistance from the Center on Budget and Policy Priorities; and Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services "Total Medicaid Enrollees – VIII Group Break Out Report" (Washington, DC: HHS, 2016), available at <https://www.medicaid.gov/medicaid/program-information/downloads/cms-64-enrollment-report-jan-mar-2016.pdf>.

¹²CMS, 2017 Marketplace State-Level Open Enrollment Public Use File, available at https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Marketplace-Products/Plan_Selection_ZIP.html.

¹³U.S. Census Bureau, American Community Survey, "Median Earnings in the Past 12 Months," available at https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_15_5YR_B20017I&prodType=table.

¹⁴Kaiser Family Foundation, "Premiums and Tax Credits Under the Affordable Care Act vs. the American Health Care Act: Interactive Maps" (Washington, DC: Kaiser Family Foundation, 2017), available at <http://kff.org/interactive/tax-credits-under-the-affordable-care-act-vs-replacement-proposal-interactive-map/>.

All referenced online sources were accessed in May and June, 2017

Publication ID: ACA-DEF061417-02

Produced in partnership with National Council of La Raza (NCLR)

This publication was written by:

Cheryl Fish-Parcham, Director of Access Initiatives, Families USA

Sinsi Hernández-Cancio, Director of Health Equity, Families USA

David Thomsen, Policy Analyst, Health Policy, NCLR

Samantha Vargas Poppe, Associate Director, Policy Analysis Center, NCLR

With the help of:

Steven T. López, Associate Director, Health Policy, NCLR

Renato Rocha, Policy Analyst, Economic Policy, NCLR

Additional data assistance provided by the Center on Budget and Policy Priorities (CBPP).

The following Families USA staff contributed to the preparation of this material (listed alphabetically):

Nichole Edralin, Senior Designer

Eliot Fishman, Senior Director of Health Policy

William Lutz, Senior Director of Communications

Mariann Seriff, Director of Publications

© Families USA 2017

NCLR
NATIONAL COUNCIL OF LA RAZA

FAMILIESUSA
THE VOICE FOR HEALTH CARE CONSUMERS

1225 New York Avenue NW, Suite 800

Washington, DC 20005

202-628-3030

info@familiesusa.org

FamiliesUSA.org

facebook / FamiliesUSA

twitter / @FamiliesUSA