



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

The cuts to health care proposed by Congress will affect millions of families across our nation. Latinos in Nevada 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.<sup>1</sup> At the same time, the Latino child uninsured rate (7.5 percent) is at its lowest rate ever recorded.<sup>2</sup> 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.<sup>3</sup>

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 Nevada—more than 1 in 4 Nevadans identify as Latino—any changes affecting that population could reverberate through the entire state in several ways.<sup>4</sup> 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.

### **Nevada 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 Nevada declined from 34 percent to 19 percent.<sup>5</sup> The rate of uninsured Latino children in Nevada was nearly cut in half from 20 percent to 10.7 percent during this period.<sup>6</sup>

### **Proposed Medicaid cuts will fall heavily on Latinos in Nevada**

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 Nevada would lose an estimated \$5 billion in federal Medicaid funding, forcing the state to restrict Medicaid benefits, cut coverage, or both.<sup>7</sup> 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.<sup>8</sup>

- » About 225,400 Latinos in Nevada have Medicaid coverage, comprising 47 percent of non-elderly enrollees.<sup>9</sup>
- » About 54 percent of children with Medicaid or CHIP coverage in Nevada are Hispanic/Latino.<sup>10</sup>
- » Nevada is one of 32 states, including Washington, DC, that expanded Medicaid coverage to cover working adults with low incomes. As of March 2016, 203,929 Nevada residents were newly-eligible Medicaid expansion enrollees, and the latest Census data show that 40 percent of the newly-eligible Medicaid expansion population in Nevada is Latino.<sup>11</sup>

### **Proposed cuts and changes in marketplace premium credits and subsidies will harm Nevada'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 Nevada, 83.4 percent of all marketplace enrollees received financial assistance to make premiums more affordable, and 55 percent also received subsidies that helped lower their out-of-pocket health care costs like deductibles and co-pays.<sup>12</sup>

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.

- » In Nevada, 11,682 marketplace enrollees indicated they were Latino. The actual number is likely much higher, as an estimated 35 percent of enrollees did not indicate a race or ethnicity, while 20 percent of those who did, indicated that they were Latino.<sup>13</sup>

- » Most Latinos enrolled through the marketplace would see higher costs. For example, in Clark County, where the median income for a Latino individual is \$24,783<sup>14</sup>, a 60-year-old with an income of \$20,000 would pay \$6,400 more annually in premiums after credits under the AHCA than under ACA.<sup>15</sup>

### **Nevada's Latinos have much to lose under the AHCA**

Under the ACA, millions of Latino families across the country, and tens of thousands in Nevada, 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 Nevada.

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## Endnotes

<sup>1</sup>Centers 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>.

<sup>2</sup>Sonya 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>.

<sup>3</sup>Michelle 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>.

<sup>4</sup>R. 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/>.

<sup>5</sup>Kaiser 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&currentTimeframe=0&startTimeframe=2&selectedDistributions=hispanic&selectedRows=%7B%22nested%22:%7B%22nevada%22:%7B%7D%7D%7D&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>.

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

<sup>7</sup>John 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>.

<sup>8</sup>U.S. Census Bureau, Current Population Survey, 2016 Annual Social and Economic Supplement, Table H108.

<sup>9</sup>Kaiser 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>.

<sup>10</sup>Center 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>.

<sup>11</sup>National 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 (HHS) "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>.

<sup>12</sup>CMS, 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](https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Marketplace-Products/Plan_Selection_ZIP.html).

<sup>13</sup>CMS, 2017 Marketplace State-Level Open Enrollment Public Use File, op cit.

<sup>14</sup>U.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](https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_15_5YR_B20017I&prodType=table).

<sup>15</sup>"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/>.

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