

# HOW THEY STACK UP

Updated March 21, 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.**

If an enrollee drops coverage, insurers may add a 30 percent surcharge upon re-enrollment.

**Bans insurers** from denying coverage to people with preexisting medical conditions or charging them more.



**Guaranteed Issue**

**Retains** this reform from the ACA.

**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.

**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. **Allots \$75 billion in tax credits to support 50-64 year-old consumers.**

**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**

**Retains** the 10 essential 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.

**All premiums** paid by employer are pre-tax.



**Employer Sponsored Insurance**

**Retains** the pre-tax structure.

**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.

**Not part** of ACA.



**Patient and State Stability Fund**

**New \$100 billion pot of money** over 9 years for states to use as they see fit for health-related policies.