The Affordable Care Act: Who, Why, and What?

Who Are the Uninsured? We recently saw the assault on the Patient Protection and Affordable Care Act (PPACA) close the federal government (costing at least $25 billion dollars) and almost wreck the economy by refusing to lift the debt limit. Let us go through that again, it is important to remind ourselves about the who, why, and what of our current health care reform. We look first at those without health care coverage. Current estimates indicate that approximately 50 million people are now without health care (and a whopping 86 million more uninsured at some point in a two-year period, including 18.6 million people in the five Gulf South states[6]).

Looking more closely, we can see some further details. First, using 2012 and 2013 data from the Census Bureau, the following table shows the percentages of nonelderly persons uninsured and the percentage of each affected group (NSD=insufficient data).

<table>
<thead>
<tr>
<th>Location</th>
<th>Uninsured Rate</th>
<th>White Uninsured</th>
<th>Hispanic Uninsured</th>
</tr>
</thead>
<tbody>
<tr>
<td>United States</td>
<td>14%</td>
<td>21%</td>
<td>18%</td>
</tr>
<tr>
<td>Alabama</td>
<td>21%</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Florida</td>
<td>17%</td>
<td>19%</td>
<td>20%</td>
</tr>
<tr>
<td>Louisiana</td>
<td>15%</td>
<td>17%</td>
<td>20%</td>
</tr>
<tr>
<td>Mississippi</td>
<td>18%</td>
<td>20%</td>
<td>17%</td>
</tr>
<tr>
<td>Texas</td>
<td>15%</td>
<td>14%</td>
<td>14%</td>
</tr>
</tbody>
</table>

Non-Elderly Uninsured in the U.S. and Gulf South The table underscores the fact that significantly higher percentages of African-Americans and Hispanics are uninsured than whites in the nation and in the Gulf South states.

Catholic Teaching on Health Care The Catholic Church has been clear in its teaching that health care is a basic human right and that it is a function of government to assure this right in the public square. (See Catholic Social Thought and Health Care in this issue.) During the debate over passage of PPACA, the U.S. Catholic bishops launched a website to focus directly on health care reform and to bring together Catholic concerns about health care, social justice, protecting human life, and the rights of immigrants. On that site[6] and in communications to members of Congress and the administration, the bishops highlighted four essential elements for reform:

- A truly universal health policy with respect for human life and dignity.
- Access for all with special concern for the poor and inclusion of legal immigrants.
- Pursuing the common good and preserving pluralism including freedom of conscience and variety of options; and
- Restraining costs and applying them equitably across all payers.

The site also referred readers to the comprehensive statement on health care reform approved by the full body of bishops in 1983, titled “A Framework for Comprehensive Health Care Reform: Protecting Human Life, Promoting Human Dignity, Pursuing the Common Good.”

UNINSURED PEOPLE BY RACE IN THE U.S. AND GULF SOUTH

<table>
<thead>
<tr>
<th>Location</th>
<th>Under 65</th>
<th>65+</th>
</tr>
</thead>
<tbody>
<tr>
<td>United States</td>
<td>14%</td>
<td>16%</td>
</tr>
<tr>
<td>Alabama</td>
<td>16%</td>
<td>18%</td>
</tr>
<tr>
<td>Florida</td>
<td>18%</td>
<td>20%</td>
</tr>
<tr>
<td>Louisiana</td>
<td>17%</td>
<td>19%</td>
</tr>
<tr>
<td>Mississippi</td>
<td>20%</td>
<td>22%</td>
</tr>
<tr>
<td>Texas</td>
<td>19%</td>
<td>21%</td>
</tr>
</tbody>
</table>

Health care advocates know that any real reform must deal with at least several key issues simultaneously: access, costs, coverage, and quality. Partial efforts of the past that did not address all these factors—employment-based health insurance, managed care, quality control, Medicare, Medicaid, SCHIP—will leave us with spiraling health care costs, emergency rooms primary care, denial of coverage for pre-existing conditions, and millions more people a year without coverage. Market-driven health care and our employment-based system failed to deal comprehensively with reform’s key issues.

Coverage under PPACA The PPACA responds to the challenge of covering the uninsured in the following ways. The first expands and reforms the private insurance market by:

- Requiring that employers with 50 or more full-time employees provide employee health insurance;
- Requiring that almost every uninsured person purchase health insurance or face a tax penalty; and
- Providing tax credits for individuals and families with incomes below 400 percent of the federal poverty line to make insurance purchase more affordable.

Health care advocates for people to purchase insurance so that competition will help keep rates low.

- Preventing exclusion of people from coverage for pre-existing conditions;
- Eliminating annual or lifetime dollar limits on insurance benefits; and
- Allowing young adults to stay on their parents’ plans until age 26.

The second major coverage element of PPACA expands Medicaid to cover all people whose incomes are below 138 percent of the federal poverty line ($15,856 for an individual or $26,970 for a family of three in 2013). Federal funding to states for this Medicaid expansion is 100 percent for the first three years and then is reduced gradually to a floor of 90 percent by the year 2021, with states assuming the balance. Estimates are that PPACA would make 15 million adults newly eligible for Medicaid.

The Congressional Budget Office (CBO) estimated in February 2013 that in five years 27 million Americans would be receiving health insurance through the new health insurance exchanges and 11 million Americans would be added to coverage under Medicaid and the Children’s Health Insurance Program (CHIP). The number of uninsured would decline from pre-PPACA levels by 27 million persons.

Problems with PPACA Technical failures in online access to the federal insurance exchange and some state exchanges have filled the news, as have the efforts to remedy those failures. Of more concern to the Catholic Bishops’ Conference and others has been the Administration’s inclusion of contraceptive coverage as a mandate under the 2012 HHS rule implementing PPACA[1]; the mandate has given rise to a major religious freedom campaign and a number of pending lawsuits by religious employers and others challenging the mandate.

Another major problem arose from the president’s decision to extend the U.S. Supreme Court to make the Medicaid expansion provision of PPACA a state option. Twenty-five states currently are refusing to expand the Medicaid program, denying potential coverage to 13.4 million adults, including 5.5 million in the Gulf South states.[2]

Others concerned about PPACA look to the failure to include many legal immigrants (barred for five years) and those who are undocumented. The CBO’s estimate of the number of uninsured nonelderly persons in the country in five years will still be 29 million persons, including various immigrants as well as others who are eligible but not enrolled.[3]

What is certain about PPACA is that it takes a major step to cover tens of millions of the uninsured—those who are now served in hospital emergency rooms or who more usually go without health care. Opponents offer little more than lukewarm letters of failed past efforts, if even that. In implementing PPACA, health care advocates must work to ensure that proposed regulations and practices do in fact expand universality, respect for life and dignity, access for the poor and vulnerable, freedom of conscience, and cost containment.

---Endnotes on back cover
### Who Are the Uninsured?

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</tr>
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<tbody>
<tr>
<td>Mississippi</td>
<td>19%</td>
<td>100%</td>
</tr>
<tr>
<td>Alabama</td>
<td>21%</td>
<td>100%</td>
</tr>
<tr>
<td>Florida</td>
<td>24%</td>
<td>100%</td>
</tr>
<tr>
<td>Louisiana</td>
<td>13%</td>
<td>100%</td>
</tr>
<tr>
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### Other Concerns About PPACA

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The Spiral of Violence and Corruption

In mid-September, JSRI Associate Mary Baudouin joined a U.S. Jesuit Conference delegation for a week traveling across Honduras to learn about the political and social problems confronting that Central American country of 8.3 million people. The delegation visited small campesino communities struggling to make a living after losing their land to multinational mining companies; a filthy, overcrowded prison farm where a prisoner explained he was not even present at the trial that convicted him of murder; a church parish where mothers prayed to hear from their sons who had left for the United States; and a Jesuit advocacy organization using figures from the Census Bureau and the March 2012 and 2013 Current Population Survey.

The Bishop of La Ceibe told us of people forced at gunpoint to sell their land to mining companies. The level of violence is shocking, and the impunity enjoyed by criminal actors has led to an overwhelming sense of hopelessness. I am embarrassed to say that I knew almost nothing about how bad things have become there, even though I have known Honduras my whole life growing up in New Orleans. New Orleans’ ties to Honduras began in the early 1900s with the importation of bananas from Honduras and other Central American countries through the Port of New Orleans. In the late 1950s and early 1960s, political instability in Honduras led to a large influx of Honduran immigrants who had known New Orleans largely through the banana trade. Hondurans continued to settle in New Orleans during the Central American wars of the 1970s and 80s, and in response to the need for reconstruction workers after Hurricane Katrina. The 2010 Census of the New Orleans-Metairie-Kenner Metropolitan Statistical Area (MSA) revealed the sixth largest population of Hondurans in the United States: 25,112.

To better understand local Hondurans’ views on the acute challenges facing the country of their birth, Sue Weishar interviewed Honduran members of her church parish. Everyone she spoke to had bad family members who were victims of violent crime.

Joan Molina, a building contractor, grew up in a poor neighborhood in Tegucigalpa, the Honduran capital, and came to New Orleans in 1994. In the past five years, five of his eight brothers and sisters in Honduras were robbed at gunpoint or had their lives threatened by extortionists. The ex-husbands of two of his sisters are journalists. Both have been threatened for exposing official...