Context Matters

Health Insurance Coverage Is Fundamental to Ending the HIV Epidemic
The Affordable Care Act (ACA) was signed into law ten years ago on March 23, 2010. **Since its implementation, millions of Americans including people living with HIV have benefited from expanded access to healthcare.** But these gains are in jeopardy. Congress and the Trump administration are undermining the ACA.

This brochure shows what we have gained and what we may lose. In particular, we draw attention to how the ACA could benefit President Trump’s Plan to End the HIV Epidemic (EHE) — currently underway in seven states and 50 local jurisdictions.
A majority of Americans support the ACA — and the support is bipartisan

Today, more Americans have a favorable rather than an unfavorable view of the Affordable Care Act—a steady trend that began in 2017.

In fact, a majority of Democrats, Independents and Republicans continued to support each of the main provisions in the Affordable Care Act in 2010 and in 2018.
What is the impact of the Affordable Care Act?

The percentage of uninsured Americans dropped from 2012 through 2017, but EHE locations lagged behind the nation as a whole.

Nevertheless, insurance access increased for people living with or at high risk for HIV soon after ACA became law.

More Americans with HIV get their health insurance through Medicaid compared to the general population (42% vs 13%).

Several research studies have shown that HIV-related health outcomes or health services improved because of the ACA and Medicaid expansion.

- Increase in HIV testing in Medicaid expansion states, 2010–2017
  (Gai et al, AJPH, 2019)

- Greater access to opioid addiction medications in Medicaid expansion states, 2011–2016
  (Sharp et al, AJPH, 2018)

- Greater sustained viral suppression among PLWH in Medicaid expansion states, 2015
  (Crepaz et al, CDC HIV Prevention Conf, 2019)

- ACA insurance enrollment associated with undetectable viral load
  (Furl et al, BMC Infect Dis, 2018)

- Ten-year decrease in HIV diagnoses after Medicaid expansion in Louisiana, 2016–2018
  (Louisiana Dept of Health, 2019)

- Fourfold increase in PrEP uptake among Medicaid recipients, 2012–2015
  (Laufer et al, MMWR, 2015)
However, these gains are under threat

The proportion of uninsured in the U.S. increased from 2017 to 2018 for the first time in 10 years. The increase was greatest among non-citizens.

(US Census Bureau, 2019)

How are opponents trying to dismantle the ACA?

1 Medicaid block grants
   The proposed Medicaid block grant will impact low-income people by encouraging states to reduce coverage.

2 Medicaid work requirements
   Although most people enrolled in Medicaid work, new and stricter work requirements may needlessly force some people out of healthcare.

3 Reproductive health
   Guaranteed coverage for contraceptive services under the ACA was rolled back by the Trump administration in 2017.

4 Pre-existing conditions
   The GOP 2017 healthcare plan scrapped coverage for pre-existing conditions. Although that plan failed to pass Congress, this policy remains a top priority for the administration and GOP congressional leaders.

5 Less expensive, higher-risk health plans
   The administration is pushing shorter-term, limited duration plans that are less expensive but do not cover protections under the ACA such as pre-existing conditions.

6 Targeting immigrants
   The public charge rule prevents non-citizens from accessing public services, including healthcare, by jeopardizing their application to gain U.S. citizenship. Sadly, keeping people from seeking healthcare is the opposite of what needs to happen to control HIV or any other epidemic.

7 Targeting transgender populations
   The administration rolled back anti-discrimination protections for transgender and LGBT populations guaranteed under the ACA.

8 Suing to end the ACA
   In 2019, the Fifth Circuit Court of Appeals found that the lack of a penalty made the individual mandate unconstitutional. The Trump administration is now using this Circuit Court decision to ask the Supreme Court to completely strike down the ACA.

9 ACA enrollment
   Each year, the administration has hampered signup efforts during ACA enrollment periods to decrease the number of people in the program.

10 White House budget markers
   The White House 2021 budget includes a $920 billion cut to Medicaid over 10 years. The budget explicitly calls out eliminating the federal match for Medicaid expansion enrollees.

PERCENT UNINSURED ACROSS GROUPS, 2017–2018

2017  2018

- Black
- Hispanic
- Foreign born
- Non-citizen foreign born
- Non-citizen children

However, these gains are under threat
Americans in EHE states are at risk

Americans in EHE states are also at risk. The proportion of all uninsured Americans in 2018 was higher in EHE states and counties than the U.S. overall.

Americans of every race and ethnicity are more likely to be uninsured in the seven EHE states compared to the EHE counties or the nation overall.
Nearly 60,000 HIV-positive Americans live in a Medicaid non-expansion state. Five of the seven EHE states have not expanded Medicaid. People with HIV who do not have insurance are more likely to live in states that have not expanded Medicaid compared to states that have (19% vs 5%).

All seven EHE states do not bar LGBT discrimination in health insurance coverage. EHE counties may be in jurisdictions that prohibit LGBT discrimination in health coverage, but are in states that do not guarantee such protections.

(Movement Advancement Project, 2019)
PrEP coverage is higher in Medicaid expansion states—particularly EHE jurisdictions—compared with localities (EHE or otherwise) that have not expanded Medicaid.

We cannot end HIV transmission when insurance access is undermined in localities central to the President’s Ending the HIV Epidemic plan.

Access additional data at amfAR’s *Ending the HIV Epidemic* database.

ehe.amfar.org