



**ZERO TO THREE**  
Early connections last a lifetime

# America's Babies Need Affordable Health Care

## What the repeal of the ACA means for babies and our future workforce

For the approximately 4 million babies born each year in the United States, health care can mean the difference between a strong beginning and a fragile start. Receiving recommended health care services sets the stage for healthy development—cognitive, social-emotional as well as physical—making it the keystone for children's future health and success as adults. Well-baby checks and routine screenings catch problems before they worsen and become more difficult and costly to treat. Insured children are much more likely to receive this cost-saving preventive care. But accessing insurance and being assured of appropriate care is very much a family affair. Parents' ability to find and afford coverage affects their own health and ability to parent as well as the likelihood that their children will be covered.

Since 2010, the Patient Protection and Affordable Care Act (ACA) has increased access to health coverage and improved care for families with young children. Together with Medicaid, which covers almost half of all births in the United States,<sup>i</sup> and the Children's Health Insurance Program (CHIP), the ACA has helped reduce the proportion of uninsured children in the United States from 13% in 1997 to a record low of 3.2% for young children under 5 years old in 2015.<sup>ii\*</sup> If repealed, many families across the country will lose access to health services that ensure their children's growth and development, compromising their chances for a healthy future.



**To make America strong and build our future workforce and economy, babies and families must have access to quality and continuous health coverage.** If the ACA is repealed without a robust replacement, the results for our families—and our country—would be ominous.

## Implications of Repealing the ACA:

**Close to 1 million children under 5 years old—4.5% of all children in that age range—are projected to lose insurance coverage. This loss would more than double the percentage of uninsured young**

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\* This brief focuses on the impact of the ACA itself, including expansion of Medicaid to adults, on young children. However, many more young children would be affected if basic Medicaid and CHIP programs were altered because they cover 45% of children under 6 years old.

**children, a major step backward that would decrease their ability to get the well-child care critical to their healthy development.**

- 1 in 5 children who will lose coverage with a repeal of the ACA are under 5.<sup>iii</sup>
- The ACA required states to maintain eligibility levels for children if they were higher than the federal statutory requirements. This requirement is known as the Maintenance of Effort (MOE) provisions. As many as 18 million children (across all age groups) could become uninsured if Medicaid and CHIP MOE provisions in the ACA are repealed and states choose to restrict income eligibility to federal limits.<sup>iv,v</sup>
- During their first 5 years, children should have 14 well-child visits, half before they turn 1.<sup>vi</sup> Uninsured young children are much less likely to see a doctor for preventive care (68% compared with 92% of insured children).<sup>vii</sup>
- Under the ACA, families have no copays for prevention and wellness services, making them more likely to get immunizations and regular screenings.<sup>viii</sup>

**Young children who still have insurance could lose essential benefits that promote healthy growth and development or could be denied coverage because of pre-existing conditions.**

- Families with health plans that cover their children may no longer be assured that basic preventive pediatric services essential to their health, including oral and vision care, will be covered.<sup>ix</sup>
- Families could face tough choices if 17 million children under age 18 with pre-existing conditions are no longer guaranteed health coverage from their private insurance companies. Families with children with conditions such as asthma, diabetes, autism, and birth defects—all of which lead to chronic health care needs—may lose insurance coverage, be locked into unsatisfactory plans, or be subject to lifetime or yearly caps.<sup>x</sup>



**Parents would have reduced access to insurance coverage.**

- The ACA gave many more adults access to coverage, including many parents and future parents who previously had no coverage through their jobs and could not afford the private market. In states that adopted Medicaid expansion, 11 million more adults now are covered.<sup>xi</sup>
- Parents' access to health insurance helps their children get covered as well, as they become more familiar with insurance systems and become better advocates for their children.<sup>xii, xiii, xiv, xv</sup> Overall, the percentage of uninsured children has been declining, but states opting for Medicaid expansion have seen nearly twice the decline as other states. As a result of covering more parents, more children were enrolled in Medicaid and CHIP, cutting the uninsured rate of eligible children in half.<sup>xvi</sup>

- Insured parents, particularly those now covered by Medicaid, have access to much-needed health care, including medical services, substance abuse treatment, and mental health services, that help them provide a safe and nurturing home for their children.<sup>xvii</sup>

**Emphasis on healthy pregnancies and newborns could be reduced. Babies benefit when their mothers have greater access to preconception, well-woman, and perinatal care with no cost-sharing, meaning they are better able to support a healthy pregnancy and infancy.**<sup>xviii</sup>

- With the Essential Health Benefits (EHB) requirement in the ACA, all plans had to cover maternity and newborn care. Prior to the ACA, 62% of plans in the individual market did not include such coverage.<sup>xix</sup>
- Maternal depression, which can negatively impact a baby's social-emotional development, may not be identified and treated if more mothers lose insurance coverage.<sup>xx</sup>
- The ACA required insurance to cover breast pumps for nursing mothers and amended federal labor laws to require employers to protect breastfeeding mothers' ability to pump at work, enabling babies to benefit longer.<sup>xxi</sup> If repealed, this coverage and protections would be lost.

**Increased economic insecurity and increased health costs in the long run.**

- More than half (1.4 million) of those who will lose coverage through an ACA repeal will have family incomes below 200% of the federal poverty level—less than \$49,000 annually for a family of four.<sup>xxii</sup>
- Insurance coverage could be out of reach for many families: The Congressional Budget Office estimates that with repeal, premiums for people not covered by employer-sponsored health plans would rise sharply. Policies obtained through the individual marketplaces or purchased directly from insurers would increase 20–25% in 2018 when compared to current law, increasing to 50% by 2019, and 100% by 2026.<sup>xxiii</sup>
- High premiums and out-of-pocket costs or loss of Medicaid or other health insurance altogether will financially strain already stressed families, forcing them to go without health care or cut other essentials for meeting basic needs.<sup>xxiv</sup>

**Any replacement plan must take these considerations and consequences into account. Babies and their families—most notably those who cannot afford more costly and competitive options—need a robust plan to ensure quality and continuous health coverage. The next generation of parents, leaders, and workers are depending on it.**

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<sup>i</sup> Rossier, M. A., Andres, E., West, K. D., Garro, N., & Pellegrini, C. (2013). Medicaid covered births, 2008 through 2010, in the context of the implementation of health reform. *Women's Health Issues, 23*(5), e273– e280.

<sup>ii</sup> Karpman, M., Gates, J. A., Kenney, G. M., & McMorrow, S. (2016). *Uninsurance among young children, 1997–2015: Long-term trends and recent patterns*. Washington, DC: Urban Institute. Retrieved from [www.urban.org/research/publication/uninsurance-among-young-children-1997-2015-long-term-trends-and-recent-patterns](http://www.urban.org/research/publication/uninsurance-among-young-children-1997-2015-long-term-trends-and-recent-patterns)

<sup>iii</sup> Buettgens, M., Kenney, G. M., & Pan, C. (2016). Partial repeal of the ACA through reconciliation: Coverage implications for parents and children. Washington, DC: Urban Institute. Retrieved from [www.urban.org/sites/default/files/publication/86706/coverage\\_implications\\_for\\_parents\\_and\\_children\\_0.pdf](http://www.urban.org/sites/default/files/publication/86706/coverage_implications_for_parents_and_children_0.pdf)

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- <sup>x</sup> Buettgens. Ibid.
- <sup>xi</sup> Rudowitz, R., Artiga, S., & Young, K. (2016). *What coverage and financing is at risk under a repeal of the ACA Medicaid expansion?* The Henry J. Kaiser Family Foundation. Retrieved from <http://files.kff.org/attachment/Issue-Brief-What-Coverage-and-Financing-is-at-Risk-Under-a-Repeal-of-the-ACA-Medicaid-Expansion>
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