Covering Connecticut
The effects of the Affordable Care Act on state residents

BLACK RESIDENTS

This analysis compares estimates of health care coverage in 2017 with the Affordable Care Act (ACA) and without it. Numbers are rounded to the nearest thousand.

For more data, please see the full report at www.cthealth.org.

DEMOGRAPHIC OVERVIEW: Black residents under 65

<table>
<thead>
<tr>
<th>Total black residents under age 65</th>
<th>Uninsured, 2017</th>
<th>Would be uninsured without the ACA</th>
</tr>
</thead>
<tbody>
<tr>
<td>316,000</td>
<td>26,000</td>
<td>49,000</td>
</tr>
</tbody>
</table>

23,000 black Connecticut residents are covered because of the ACA

- There are 26,000 uninsured black residents under age 65 in 2017. Without the ACA, that number would be 49,000.
- The uninsured rate among black residents is 8%. Without the ACA, it would be 15% – nearly twice as high.

Black Connecticut residents would be disproportionately affected by a repeal of the ACA or major reductions to the coverage it provides.

- 46% of black residents have employer-sponsored insurance, compared to 72% of whites. As a result, black residents are more vulnerable to changes to Medicaid or the individual insurance market – the two types of coverage most affected by the health law.
- Without the ACA, an additional 7% percent of black Connecticut residents under age 65 would become uninsured.

Coverage changes resulting from the ACA, black residents under age 65, 2017

<table>
<thead>
<tr>
<th>Coverage Source</th>
<th>Number without the ACA</th>
<th>Number with the ACA</th>
<th>Changes resulting from ACA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number of people</td>
<td>Percentage change</td>
<td></td>
</tr>
<tr>
<td>Medicaid</td>
<td>105,000</td>
<td>124,000</td>
<td>19,000</td>
</tr>
<tr>
<td>Individual market coverage</td>
<td>5,000</td>
<td>10,000</td>
<td>5,000</td>
</tr>
<tr>
<td>Employer-sponsored insurance</td>
<td>148,000</td>
<td>146,000</td>
<td>-2,000</td>
</tr>
<tr>
<td>Other*</td>
<td>9,000</td>
<td>9,000</td>
<td>**</td>
</tr>
<tr>
<td>Uninsured</td>
<td>49,000</td>
<td>26,000</td>
<td>-23,000</td>
</tr>
<tr>
<td>Total</td>
<td>316,000</td>
<td>316,000</td>
<td></td>
</tr>
</tbody>
</table>

Source: Urban Institute analysis, Health Insurance Policy Simulation Model 2017. Note: Components may not add because of rounding. For example, rounded to the nearest 100, the numbers of black residents who have coverage through the individual market with and without the ACA are respectively 10,100 and 4,900. Accordingly, the ACA is responsible for a 108% higher proportion of black residents who receive individual coverage.

* Other coverage includes military coverage, Veterans Health Administration coverage, and Medicare for people under age 65.

** Numbers are not shown due to small sample size.
New safeguards and benefits for people with private insurance and Medicare

Under the ACA, people with employer-sponsored coverage:

- Are protected from catastrophic medical costs because insurers can no longer impose annual or lifetime coverage limits
- Receive coverage of preventive services – including check-ups for babies, children, and adults; cancer screenings; and contraception – without copayments, deductibles, or other out-of-pocket costs
- Can immediately obtain coverage through Medicaid or Access Health CT if they lose their job-based coverage

These protections benefit the 146,000 black residents – 46% of those under 65 – who have employer-sponsored insurance.

In addition to those protections, people who buy insurance through the individual market:

- Cannot be denied coverage or charged more if they have pre-existing conditions
- Are guaranteed coverage of all "essential health benefits,” including treatment of mental health and substance use disorders, prescription drugs, and maternity care
- May qualify for financial assistance to lower their premiums and out-of-pocket cost-sharing on plans offered through Access Health CT, depending on their income

These protections benefit the 10,000 black residents – 3% of those under 65 – who buy coverage through the state's individual market.

The ACA gives Medicare beneficiaries additional coverage of preventive services and lowers their costs for prescription drugs. For them, the ACA has:

- Provided coverage of annual physicals, cancer screenings, and other preventive services, free of charge
- Increased coverage for medications in the “donut hole.” Medicare now covers 60% of the cost of name-brand drugs and 49% of the cost of generic medications for drug expenses that are between $3,700 and $4,950 per year. Without the ACA, Medicare beneficiaries would pay the full cost of these drugs.

These protections affect the 40,000 black residents – more than 10% of those of all ages – who are covered by Medicare.

The uninsured rate among black Connecticut residents is 8%.

Without the ACA, it would be nearly twice as high.