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COVID-19, Unemployment Compensation, and State Medicaid Expansion Decisions: Some Workers Losing Jobs and Health Insurance Remain Ineligible for Subsidized Coverage

Linda J. Blumberg, Michael Simpson, Matthew Buettgens, John Holahan, and Jessica Banthin

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Introduction

A recent analysis[1] found that over 70 percent of 7.4 million workers with pre-pandemic employer-based insurance through industries now vulnerable to high rates of unemployment would be eligible for some assistance with health insurance (Medicaid or marketplace subsidies) if they lost their jobs. However, eligibility differs significantly between workers in states that have and have not expanded Medicaid under the Affordable Care Act (hereinafter, expansion and nonexpansion states). The receipt of unemployment compensation also has a substantial impact on eligibility for health insurance programs. The temporary federal unemployment compensation provided through the Coronavirus Aid, Relief, and Economic Security (CARES) Act is included in the income determination for marketplace subsidies (premium tax credits and cost-sharing reductions) but is not included in the determination of Medicaid or CHIP eligibility. This means that the additional cash assistance will affect workers and their family members in Medicaid expansion states (where Medicaid is a more substantial part of the health insurance safety net) differently than their counterparts in nonexpansion states (where marketplace subsidies make up a larger percentage of the health insurance safety net).

In this analysis, we expand upon our earlier work to show how the additional levels of unemployment insurance provided through the Federal Pandemic Unemployment Compensation program affects eligibility for subsidized coverage in expansion and nonexpansion states. We then simulate the effects on eligibility of extending the additional federal unemployment compensation, currently limited to 16 weeks, through the remainder of 2020, as proposed in the "Health and Economic Recovery Omnibus Emergency Solutions (HEROES) Act."[2] We also simulate the ramifications if all unemployment compensation was disregarded for eligibility determination in both programs.

We find that:

- In Medicaid expansion states, the additional federal unemployment compensation of $600 per week for up to 16 weeks reduces the number of previously insured workers in the most vulnerable industries eligible for marketplace subsidies, because the additional compensation leads to more newly unemployed workers maintaining household income above 400 percent of the federal poverty level (FPL) (39 percent eligible with compared to 44 percent eligible without the additional federal unemployment compensation).
- In nonexpansion states, in contrast, workers in these industries are more likely to be eligible for marketplace subsides due to the additional federal unemployment compensation. While the additional amount leaves some workers over the 400 percent of FPL subsidy eligibility maximum, this effect is dwarfed by the fact that many more newly unemployed lower income workers are eligible for marketplace subsides because their incomes are above 100 percent of FPL with state and additional unemployment compensation combined (64 percent eligible with, compared to 53 percent eligible without the additional federal unemployment compensation).
- Under an alternative policy where the additional federal unemployment compensation were extended to the end of the calendar year without additional changes, the number of workers eligible for subsidized coverage would be lower in both expansion and nonexpansion states, than under current law, though the difference would be larger in expansion states. The current limit on marketplace subsidies at 400 percent of FPL means that fewer workers would be eligible for financial assistance in getting or maintaining health insurance coverage. However, the additional cash funds could help them meet other pressing needs, such as housing and food.
- Finally, under a policy where no unemployment compensation (neither state nor federal) were counted as income in the eligibility determination process for Medicaid or marketplace subsidies during the course of the 2020 crisis, 83 percent of vulnerable workers in expansion states would be eligible for help but only 52 percent of vulnerable workers in nonexpansion states would be eligible. In addition, the lion's share of assistance would be provided through Medicaid in expansion states (a lower cost, more comprehensive set of benefits for enrollees) and through the marketplaces in nonexpansion states (entailing more costs to enrollees).

Data and Methods

This analysis was done using the Urban Institute's Health Insurance Policy Simulation Model (HIPSM). HIPSM is a microsimulation model of the health insurance system, representing US residents under age 65 not enrolled in Medicare. The methods are consistent with our prior analysis of public program eligibility for workers employed in industries most vulnerable to unemployment due to the pandemic and the family members of these workers.[3] All estimates are computed for 2020.

This analysis focuses on the 7.4 million workers in these highly vulnerable industries who had employer-based insurance through a vulnerable employer pre-pandemic. In this analysis, we do not attempt to project the share of these workers who would become unemployed. We simply compute the eligibility of each of these 7.4 million workers for Medicaid, CHIP, and marketplace subsidies, assuming they received their pre-crisis actual wages January through March, became unemployed as of April 1, and remained unemployed through the remainder of 2020. Clearly, not all these workers would lose their jobs, and some would lose work but start a new job at some point during the year. Some workers in other industries would lose jobs as well. We are using this structure to provide insights into the implications of additional unemployment compensation for health insurance program eligibility, but are not trying to provide point estimates of actual coverage or job loss.

Under current law, state unemployment compensation counts toward income eligibility for both Medicaid/CHIP and marketplace subsides. The additional federal unemployment compensation of $600 per week for up to 16 weeks counts toward the determination of marketplace eligibility but does not count toward Medicaid/CHIP eligibility.

Results

Maximum unemployment compensation provided through CARES Act under current law

Table 1 and figure 1 show the eligibility of the most vulnerable workers if they receive the full unemployment compensation allowed under current law, including the additional federal compensation and the extended state compensation. This is the same information provided in our previous report in the first section of Appendix Table 2. While eligibility for assistance of any kind is not substantially different between expansion and nonexpansion states when all the cash assistance available is received, workers in expansion states are seven times as likely as workers in nonexpansion states to be eligible for Medicaid. Because Medicaid is generally available to eligible people with no premiums or out-of-pocket costs, the coverage it provides is more affordable for enrollees than the partial subsidies provided through the marketplaces.

Additional federal unemployment compensation provided through CARES Act eliminated or excluded from marketplace subsidy eligibility determination

Table 2 and figure 2 provide eligibility of the same workers if they received state unemployment compensation (including the additional 13 weeks permitted under the recent federal legislation) but did not receive the additional federal compensation. The estimates in this section are also consistent with a policy change that excluded the additional federal compensation from the calculation of marketplace subsidy eligibility. While the overall share of workers eligible for assistance with health insurance nationally would stay roughly the same as if the additional compensation was received and counted, the distribution of eligibility by state expansion status would change significantly. In expansion states, a slightly larger percentage of workers would be eligible for assistance without the additional federal compensation than with it (78 percent versus 73 percent). In nonexpansion states, a significantly smaller percentage of workers would be eligible for subsidized insurance or free coverage without the additional compensation than with it (59 percent versus 70 percent).

In both expansion and nonexpansion states, eligibility for Medicaid/CHIP does not change, since the additional federal compensation does not count toward eligibility for those programs in any of these scenarios. Without the additional federal compensation, unemployment benefits are not sufficient to keep family incomes above 400 percent of the Federal Poverty Level (FPL) for many; therefore, more workers have incomes low enough to qualify for premium tax credits. This is the case in both expansion and nonexpansion states. However, in nonexpansion states, excluding the federal compensation means that lower income workers (those without as much income from a still-working spouse or other sources) would be more likely to have income below the FPL while unemployed. This places them in the so-called Medicaid eligibility gap – they have too little income to qualify for marketplace subsidies but they are not eligible for Medicaid because their state has not expanded the program under the Affordable Care Act. Consequently, they are ineligible for any help with health insurance costs. The additional workers left ineligible in the Medicaid eligibility gap in these states substantially outnumber the higher income workers who still qualify for marketplace subsidies absent the additional federal compensation. In comparison, the number of workers eligible for assistance in expansion states would be larger; more of them would remain eligible for marketplace subsidies and there is no Medicaid eligibility gap for lower income workers to fall into.

Additional unemployment compensation provided by CARES Act included in marketplace subsidy eligibility determination (as under current law) plus federal compensation extended through 2020

Table 3 and figure 3 show the eligibility picture if the federal unemployment compensation, currently limited to 16 weeks, were extended until the end of 2020. That extension would increase cash income as well as the measure of income used to determine marketplace subsidy eligibility. The significant increase in income would lower overall eligibility for health insurance assistance nationally, from 72 percent of vulnerable workers down to 65 percent. The bulk of the decrease in eligibility would occur among workers in the expansion states, where only 29 percent of the unemployed workers in the most vulnerable industries would be eligible for marketplace subsidies. Eligibility for any assistance with health insurance would fall below levels under current law in these states (64 percent versus 73 percent).

With federal unemployment insurance extended through the remainder of the year, eligibility for assistance with health insurance costs would fall modestly in nonexpansion states as well. The additional income would halve the share of vulnerable workers in these states eligible for both premium tax credits and cost-sharing reductions, since the additional compensation would push more of them over the 250 percent of FPL maximum for the cost-sharing assistance. Most of them would remain eligible for premium subsidies alone, however. Some of those currently eligible for premium tax credits alone would no longer be eligible for assistance, as their household income surpasses the 400 percent of FPL mark. Those pushed over the 400 percent of FPL maximum outnumber those lifted out of the Medicaid eligibility gap in this scenario. In total, 67 percent would be eligible for Medicaid/CHIP or marketplace subsidies in nonexpansion states, compared to 70 percent with the compensation available today.

State and federal unemployment compensation excluded from Medicaid, CHIP, and marketplace subsidy eligibility determination for 2020

Presumably, the additional unemployment compensation provided through the CARES Act is intended to allow those losing their jobs due to the pandemic to meet their basic needs (rent, food, etc.), and is not intended to reduce eligibility for other programs, such as Medicaid/ CHIP and marketplace assistance. If that is the case, and if the current circumstances appear to necessitate even more assistance for families, then future policy decisions to assess workers' eligibility for these health insurance programs may incorporate a disregard of all unemployment compensation from the eligibility determinations. Table 4 and figure 4 do just that, excluding both the traditionally available, extended, and additional unemployment compensation from income calculations.

The results amplify the wedge created between expansion states and nonexpansion states in the wellbeing of workers who lose their jobs and their employer-sponsored health insurance. Nationally, the share of workers eligible for some assistance would not be that different under current law than under a policy that disregarded all unemployment compensation from income calculations. However, the differences between expansion and nonexpansion states are large. Instead of 73 percent of workers in expansion states eligible for assistance under current law, 83 percent would be eligible under a policy disregarding unemployment compensation, with two-thirds of workers eligible for the most generous and comprehensive assistance through the Medicaid program. In contrast, in nonexpansion states, only 52 percent of workers would be eligible for assistance compared to 70 percent under current law, with 13 percent of workers eligible for Medicaid and 39 percent for partial assistance through the marketplace. Again, the much lower levels of eligibility for workers in nonexpansion states is the consequence of lower measured incomes placing a much higher percentage of workers in these states' eligibility gaps, the direct result of not expanding Medicaid under the Affordable Care Act.

Discussion

The fact that 15 states have yet to expand eligibility for Medicaid under the ACA complicates federal policy to help workers losing their jobs due to the COVID-19 crisis. It means that federal cash relief provided to unemployed workers will affect these workers' access to financial assistance for health insurance differently by state. As currently legislated, the additional unemployment compensation provided to workers by the federal government for up to 16 weeks is not counted for purposes of determining Medicaid/CHIP eligibility, but it is counted for purposes of determining marketplace subsidy eligibility. Since many nonexpansion state workers whose incomes fall below the poverty level once unemployed would be eligible for no help whatsoever, the additional federal unemployment compensation lifts some of their income enough to give them access to marketplace subsidies. But that same cash assistance for expansion state workers can lift their incomes high enough to exceed marketplace subsidy limits.

Extending the additional federal unemployment compensation amount through the end of the year would reduce the program eligibility for workers in both groups of states; however, the additional workers with incomes above 400 percent of FPL would exceed those gaining income sufficient to climb out of the Medicaid eligibility gap in nonexpansion states.

None of this is to say, however, that extending the federal unemployment compensation would make workers and their families worse off. For example, the gains to workers in nonexpansion states with very low unemployment income receiving large marketplace subsidies and cost-sharing reductions would provide a significantly larger value to them compared to the much smaller partial marketplace subsidies lost by those with higher unemployment income in those same states. Additionally, health insurance is not the only consideration. The additional cash assistance could allow more people sufficient funds to pay their rents and mortgages, reducing homelessness. It could significantly improve food security as well.

This analysis points out, however, that the current limits on marketplace subsidies mean that fewer workers are likely to be eligible for financial assistance in getting or maintaining health insurance coverage while, at the same time, additional funds could help them meet other pressing needs.

Extending eligibility for financial assistance above 400 percent of FPL under current rules would address this problem. Enhancing the subsidies available to those eligible under current rules would help further. It is undeniable, however, that the Medicaid eligibility gap in the 15 nonexpansion states puts adults in those states at a serious disadvantage in accessing affordable, adequate insurance coverage in times of extreme financial distress.[4] This finding is highlighted by our analysis which excludes all unemployment compensation from health insurance program eligibility determination. Marketplace subsidies fill in a portion of the gap created by those 15 states' refusal to expand their Medicaid programs, but until financial assistance is extended to those with lower incomes in those states, many of their residents will be left in highly vulnerable situations when medical needs arise.

Table 1. Eligibility for Health Insurance Programs Given Job Loss, Workers in Vulnerable Industries with Maximum Unemployment Compensation Provided Under Current Law, 2020

Workers covered by Employer-Sponsored Insurance Through a Vulnerable Industry Prior to the Pandemic

Assumes 3 months of actual wages, then unemployment compensation for the pre-crisis maximum duration plus 13 additional weeks, and 4 months of federal additional unemployment compensation

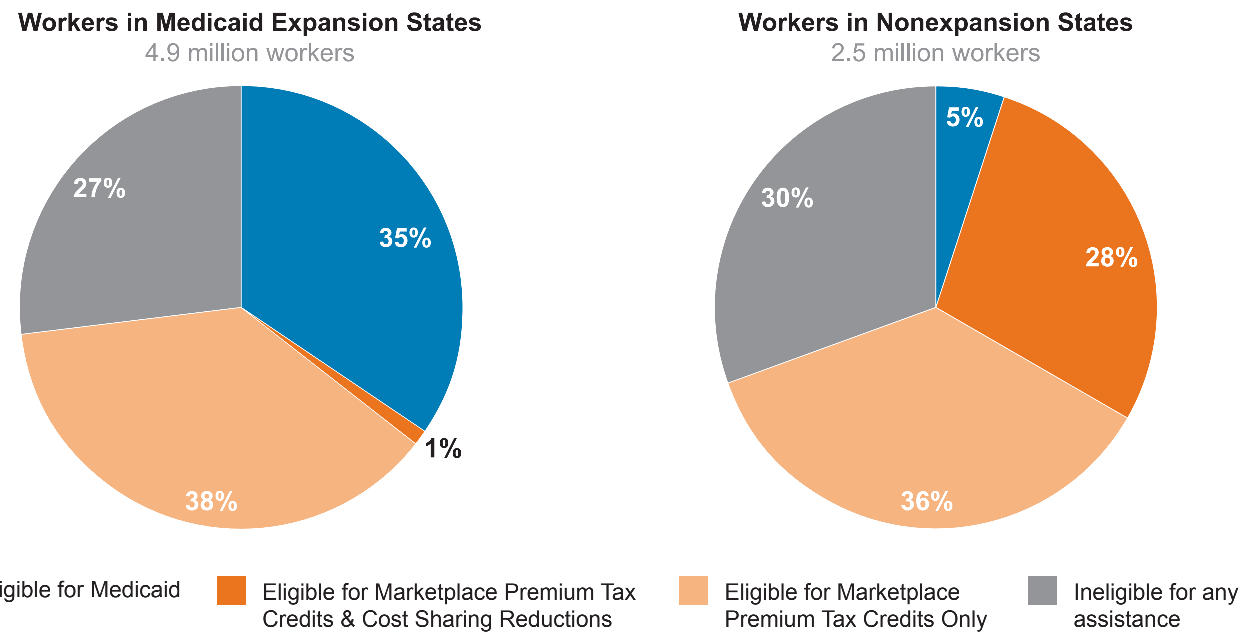
	All States		Expansion States		Nonexpansion States	
	Number *(thousands)*	Percent of Total	Number *(thousands)*	Percent of Total	Number *(thousands)*	Percent of Total
Workers employed and insured through vulnerable industries pre-pandemic	**7,399**	**100%**	**4,937**	**100%**	**2,463**	**100%**
Total Eligible for Assistance	**5,327**	**72%**	**3,614**	**73%**	**1,713**	**70%**
Eligible for Medicaid/CHIP	1,829	25%	1,705	35%	124	5%
Eligible for Premium Tax Credits and Cost Sharing Reductions	734	10%	35	1%	698	28%
Eligible for Premium Tax Credits only	2,765	37%	1,874	38%	891	36%
Total Ineligible for Assistance	**2,072**	**28%**	**1,322**	**27%**	**750**	**30%**
Ineligible for assistance due to another ESI offer in family	432	6%	277	6%	155	6%
Ineligible for assistance due to high income	1,157	16%	842	17%	315	13%
Ineligible for assistance due to immigration status	285	4%	203	4%	82	3%
Ineligible for assistance due to living in a nonexpansion state	199	3%	n.a.	n.a.	199	8%

Source: The Urban Institute, Health Insurance Policy Simulation Model 2020

Notes: Nonexpansion states include: Alabama, Florida, Georgia, Kansas, Mississippi, Missouri, Nebraska, North Carolina, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Wisconsin, and Wyoming. Although Nebraska has passed a ballot initiative to expand Medicaid eligibility, enrollment is not scheduled to begin until October 1, 2020. The following industries are categorized here as highly vulnerable to large increases in unemployment due to the COVID-19 pandemic: automobile dealers; other motor vehicle dealers; furniture and home furnishings stores; health and personal care except drug stores; clothing stores; shoe stores; jewelry, luggage, and leather goods stores; sporting goods, and hobby and toy stores; gift, novelty, and souvenir shops; vending machine operators; taxi and limousine service; home health care services; child day care services; performing arts, spectator sports, and related industries; museums, art galleries, historic sites, and similar institutions; bowling centers; other amusement, gambling, and recreation industries; traveler accommodation; recreational vehicle parks and camps, and rooming and boarding houses; restaurants and other food services; drinking places, alcohol beverages; barber shops; beauty salons; nail salons and other personal care services; dry cleaning and laundry services. PTCs = premium tax credits for marketplace plans; CSRs = cost-sharing reductions for marketplace plans. Workers include both employed and unemployed people in each industry.

Figure 1. Eligibility for Health Insurance Programs with Maximum Unemployment Compensation Provided Under Current Law, 2020

Workers covered by employer-sponsored insurance through a vulnerable industry prior to the pandemic



Source: The Urban Institute, Health Insurance Policy Simulation Model 2020

Table 2. Eligibility for Health Insurance Programs Given Job Loss, Workers in Vulnerable Industries with No Additional Federal Unemployment Compensation, 2020

Workers covered by Employer-Sponsored Insurance Through a Vulnerable Industry Prior to the Pandemic

Assumes 3 months of actual wages, then state unemployment compensation for the pre-crisis maximum duration plus 13 additional weeks

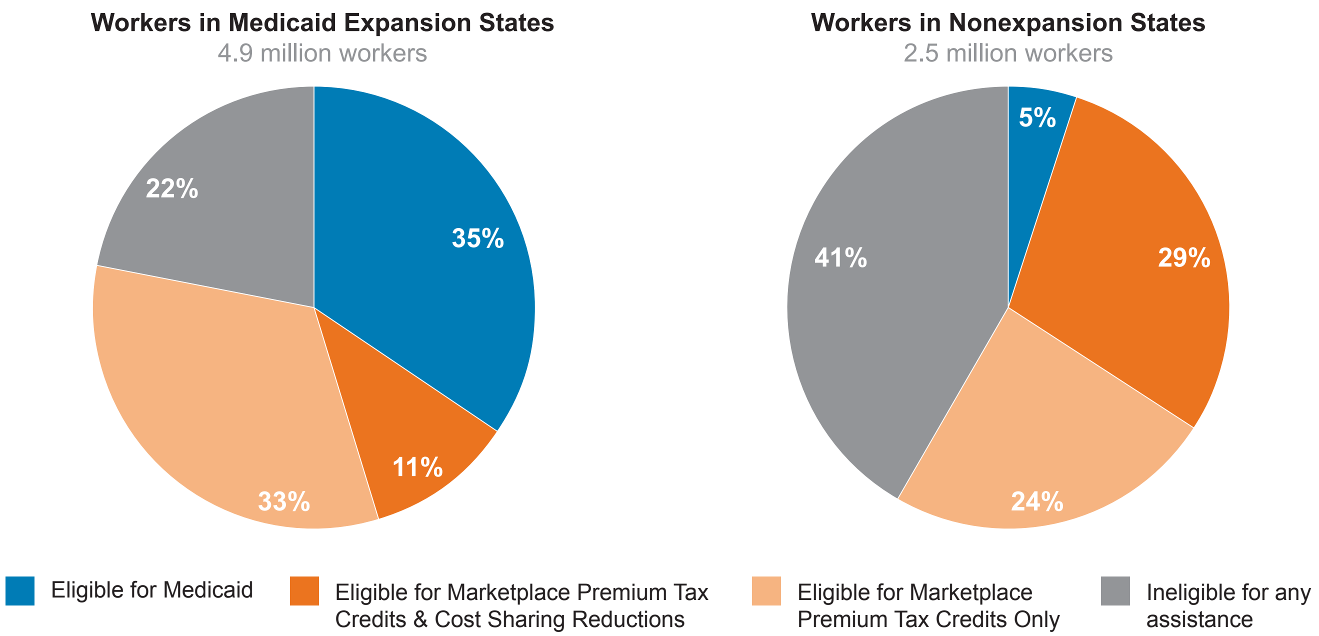
	All States		Expansion States		Nonexpansion States	
	Number *(thousands)*	Percent of Total	Number *(thousands)*	Percent of Total	Number *(thousands)*	Percent of Total
Workers employed and insured through vulnerable industries pre-pandemic	**7,399**	**100%**	**4,937**	**100%**	**2,463**	**100%**
Total Eligible for Assistance	**5,290**	**71%**	**3,847**	**78%**	**1,443**	**59%**
Eligible for Medicaid/CHIP	1,829	25%	1,705	35%	124	5%
Eligible for Premium Tax Credits and Cost Sharing Reductions	1,246	17%	526	11%	720	29%
Eligible for Premium Tax Credits only	2,215	30%	1,616	33%	599	24%
Total Ineligible for Assistance	**2,110**	**29%**	**1,090**	**22%**	**1,020**	**41%**
Ineligible for assistance due to another ESI offer in family	430	6%	275	6%	155	6%
Ineligible for assistance due to high income	845	11%	612	12%	233	9%
Ineligible for assistance due to immigration status	285	4%	203	4%	82	3%
Ineligible for assistance due to living in a nonexpansion state	550	7%	n.a.	n.a.	550	22%

Source: The Urban Institute, Health Insurance Policy Simulation Model 2020

Notes: Notes: Nonexpansion states include: Alabama, Florida, Georgia, Kansas, Mississippi, Missouri, Nebraska, North Carolina, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Wisconsin, and Wyoming. Although Nebraska has passed a ballot initiative to expand Medicaid eligibility, enrollment is not scheduled to begin until October 1, 2020. The following industries are categorized here as highly vulnerable to large increases in unemployment due to the COVID-19 pandemic: automobile dealers; other motor vehicle dealers; furniture and home furnishings stores; health and personal care except drug stores; clothing stores; shoe stores; jewelry, luggage, and leather goods stores; sporting goods, and hobby and toy stores; gift, novelty, and souvenir shops; vending machine operators; taxi and limousine service; home health care services; child day care services; performing arts, spectator sports, and related industries; museums, art galleries, historic sites, and similar institutions; bowling centers; other amusement, gambling, and recreation industries; traveler accommodation; recreational vehicle parks and camps, and rooming and boarding houses; restaurants and other food services; drinking places, alcohol beverages; barber shops; beauty salons; nail salons and other personal care services; dry cleaning and laundry services. PTCs = premium tax credits for marketplace plans; CSRs = cost-sharing reductions for marketplace plans Workers include both employed and unemployed people in each industry.

Figure 2. Eligibility for Health Insurance Programs with No Additional Federal Unemployment Compensation, 2020

Workers covered by employer-sponsored insurance through a vulnerable industry prior to the pandemic



Source: The Urban Institute, Health Insurance Policy Simulation Model 2020

Table 3. Eligibility for Health Insurance Programs Given Job Loss, Workers in Vulnerable Industries with Additional Federal Unemployment Compensation Extended Through End of 2020

Workers covered by Employer-Sponsored Insurance Through a Vulnerable Industry Prior to the Pandemic

Assumes 3 months of actual wages, then unemployment compensation for the pre-crisis maximum duration plus 13 additional weeks, and federal additional unemployment compensation through end of 2020

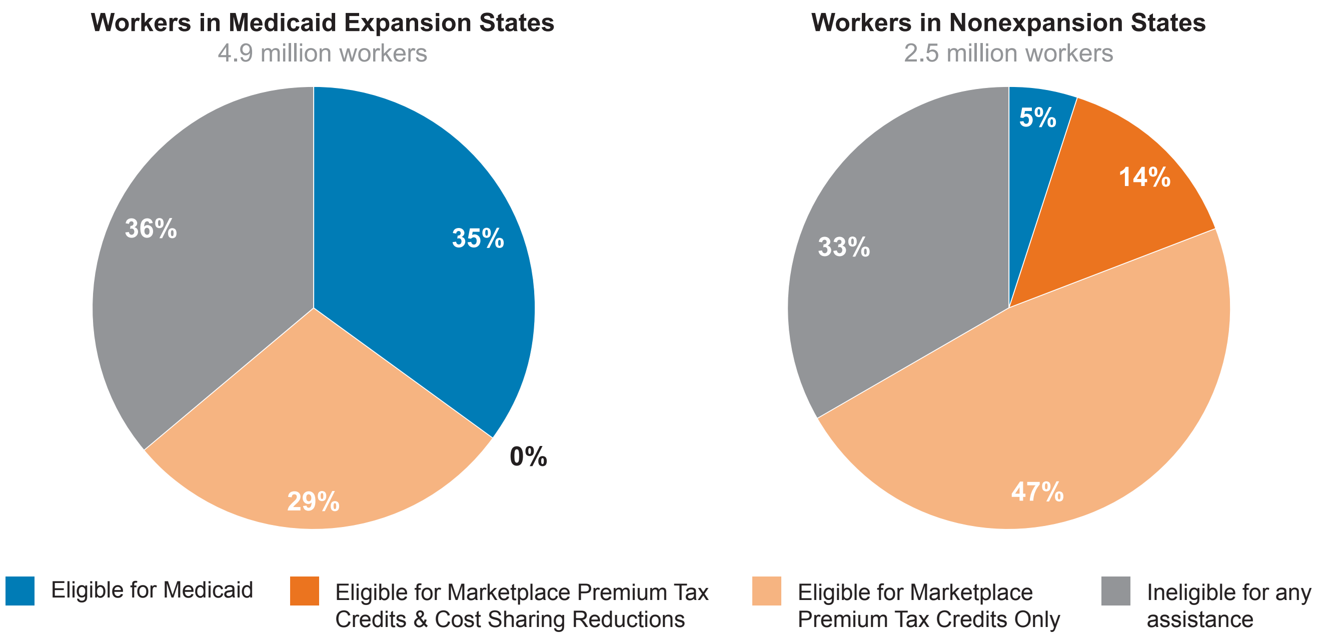
	All States		Expansion States		Nonexpansion States	
	Number *(thousands)*	Percent of Total	Number *(thousands)*	Percent of Total	Number *(thousands)*	Percent of Total
Workers employed and insured through vulnerable industries pre-pandemic	**7,399**	**100%**	**4,937**	**100%**	**2,463**	**100%**
Total Eligible for Assistance	**4,788**	**65%**	**3,142**	**64%**	**1,646**	**67%**
Eligible for Medicaid/CHIP	1,829	25%	1,705	35%	124	5%
Eligible for Premium Tax Credits and Cost Sharing Reductions	365	5%	12	0%	353	14%
Eligible for Premium Tax Credits only	2,594	35%	1,425	29%	1,170	47%
Total Ineligible for Assistance	**2,611**	**35%**	**1,794**	**36%**	**817**	**33%**
Ineligible for assistance due to another ESI offer in family	432	6%	277	6%	155	6%
Ineligible for assistance due to high income	1,825	25%	1,314	27%	512	21%
Ineligible for assistance due to immigration status	285	4%	203	4%	82	3%
Ineligible for assistance due to living in a nonexpansion state	68	1%	n.a.	n.a.	68	3%

Source: The Urban Institute, Health Insurance Policy Simulation Model 2020

Notes: Notes: Nonexpansion states include: Alabama, Florida, Georgia, Kansas, Mississippi, Missouri, Nebraska, North Carolina, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Wisconsin, and Wyoming. Although Nebraska has passed a ballot initiative to expand Medicaid eligibility, enrollment is not scheduled to begin until October 1, 2020. The following industries are categorized here as highly vulnerable to large increases in unemployment due to the COVID-19 pandemic: automobile dealers; other motor vehicle dealers; furniture and home furnishings stores; health and personal care except drug stores; clothing stores; shoe stores; jewelry, luggage, and leather goods stores; sporting goods, and hobby and toy stores; gift, novelty, and souvenir shops; vending machine operators; taxi and limousine service; home health care services; child day care services; performing arts, spectator sports, and related industries; museums, art galleries, historic sites, and similar institutions; bowling centers; other amusement, gambling, and recreation industries; traveler accommodation; recreational vehicle parks and camps, and rooming and boarding houses; restaurants and other food services; drinking places, alcohol beverages; barber shops; beauty salons; nail salons and other personal care services; dry cleaning and laundry services. PTCs = premium tax credits for marketplace plans; CSRs = cost-sharing reductions for marketplace plans Workers include both employed and unemployed people in each industry.

Figure 3. Eligibility for Health Insurance Programs with Additional Federal Unemployment Compensation Extended Through End of 2020

Workers covered by employer-sponsored insurance through a vulnerable industry prior to the pandemic



Source: The Urban Institute, Health Insurance Policy Simulation Model 2020

Table 4. Eligibility for Health Insurance Programs Given Job Loss, Workers in Vulnerable Industries with No Unemployment Compensation Counted Toward Program Eligibility, 2020

Workers covered by Employer-Sponsored Insurance Through a Vulnerable Industry Prior to the Pandemic

Assumes 3 months of actual wages for 2020

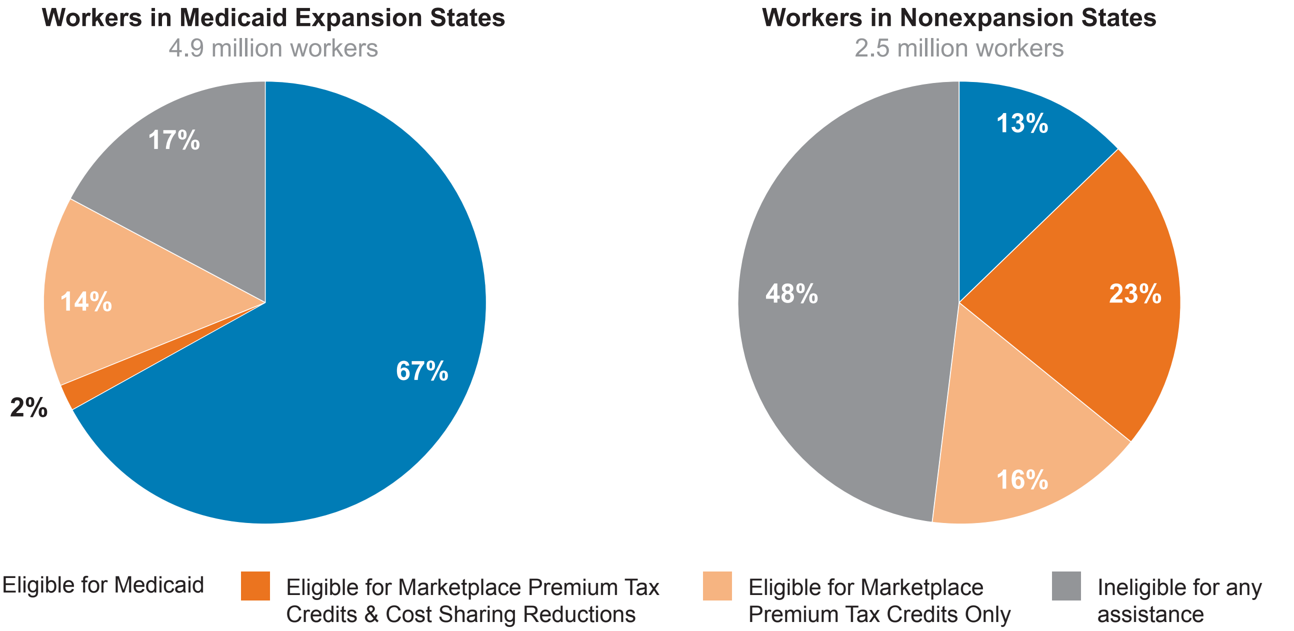
	All States		Expansion States		Nonexpansion States	
	Number *(thousands)*	Percent of Total	Number *(thousands)*	Percent of Total	Number *(thousands)*	Percent of Total
Workers employed and insured through vulnerable industries pre-pandemic	**7,399**	**100%**	**4,937**	**100%**	**2,463**	**100%**
Total Eligible for Assistance	**5,378**	**73%**	**4,104**	**83%**	**1,275**	**52%**
Eligible for Medicaid/CHIP	3,648	49%	3,330	67%	319	13%
Eligible for Premium Tax Credits and Cost Sharing Reductions	649	9%	85	2%	564	23%
Eligible for Premium Tax Credits only	1,081	15%	689	14%	392	16%
Total Ineligible for Assistance	**2,021**	**27%**	**833**	**17%**	**1,188**	**48%**
Ineligible for assistance due to another ESI offer in family	383	5%	241	5%	142	6%
Ineligible for assistance due to high income	552	7%	389	8%	163	7%
Ineligible for assistance due to immigration status	285	4%	203	4%	82	3%
Ineligible for assistance due to living in a nonexpansion state	801	11%	n.a.	n.a.	801	33%

Source: The Urban Institute, Health Insurance Policy Simulation Model 2020

Notes: Notes: Nonexpansion states include: Alabama, Florida, Georgia, Kansas, Mississippi, Missouri, Nebraska, North Carolina, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Wisconsin, and Wyoming. Although Nebraska has passed a ballot initiative to expand Medicaid eligibility, enrollment is not scheduled to begin until October 1, 2020. The following industries are categorized here as highly vulnerable to large increases in unemployment due to the COVID-19 pandemic: automobile dealers; other motor vehicle dealers; furniture and home furnishings stores; health and personal care except drug stores; clothing stores; shoe stores; jewelry, luggage, and leather goods stores; sporting goods, and hobby and toy stores; gift, novelty, and souvenir shops; vending machine operators; taxi and limousine service; home health care services; child day care services; performing arts, spectator sports, and related industries; museums, art galleries, historic sites, and similar institutions; bowling centers; other amusement, gambling, and recreation industries; traveler accommodation; recreational vehicle parks and camps, and rooming and boarding houses; restaurants and other food services; drinking places, alcohol beverages; barber shops; beauty salons; nail salons and other personal care services; dry cleaning and laundry services. PTCs = premium tax credits for marketplace plans; CSRs = cost-sharing reductions for marketplace plans Workers include both employed and unemployed people in each industry.

Figure 4. Eligibility for Health Insurance Programs with No Unemployment Compensation Counted Toward Program Eligibility, 2020

Workers covered by employer-sponsored insurance through a vulnerable industry prior to the pandemic



Source: The Urban Institute, Health Insurance Policy Simulation Model 2020

ENDNOTES

1 Blumberg LJ, Simpson M, Holahan J, Buettgens M, Pan C. Potential eligibility for Medicaid, CHIP, and marketplace subsidies among workers losing jobs in industries vulnerable to high levels of COVID-19-related unemployment. Urban Institute. 2020. https://www.urban.org/sites/default/files/publication/102115/potential-eligibility-for-medicaid-chip-and-marketplace-subsidies-among-workers-losing-jobs-in-industries-vulnerable-to-high-levels-of-covid-19-related-unemployment_0.pdf. Accessed May 15, 2020.

2 U.S. Congress. House. *Making emergency supplemental appropriations for the fiscal year ending September 30, 2020, and for other purposes*. (HEROES Act) 2020. HR 6074. 116th Cong., 2nd sess. Introduced in House March 4, 2020. https://docs.house.gov/billsthisweek/20200511/BILLS-116hr6800ih.pdf. Accessed May 12, 2020.

3 Blumberg LJ, Simpson M, Holahan J, Buettgens M, Pan C. Potential eligibility for Medicaid, CHIP, and marketplace subsidies among workers losing jobs in industries vulnerable to high levels of COVID-19-related unemployment. Urban Institute. 2020. https://www.urban.org/sites/default/files/publication/102115/potential-eligibility-for-medicaid-chip-and-marketplace-subsidies-among-workers-losing-jobs-in-industries-vulnerable-to-high-levels-of-covid-19-related-unemployment_0.pdf. Accessed May 15, 2020.

4 Voters in Nebraska passed a ballot initiative in November of 2018, but the state delayed expansion as it sought a waiver for state specific provisions. CMS will not complete the waiver before the planned start date, so enrollment will begin without the state provisions on October 1, 2020, with enrollment applications beginning on August 1.

ABOUT THE AUTHORS & ACKNOWLEDGMENTS

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