

Partial Repeal of the ACA through Reconciliation

Coverage Implications for Colorado Residents

This fact sheet examines how a reconciliation bill similar to the one vetoed in January 2016 will affect health care coverage in Colorado. The estimates supplement two Health Policy Center reports: Implications of Partial Appeal of the ACA through Reconciliation (Linda J. Blumberg, Matthew Buettgens, and John Holahan) and Partial Repeal of the ACA through Reconciliation: Coverage Implications for Parents and Children (Buettgens, Genevieve M. Kenney, and Clare Pan). Information on data and methods is available in those reports.

FIGURE 1

Health Insurance Coverage for Colorado Residents under Age 65, 2019

Thousands of people

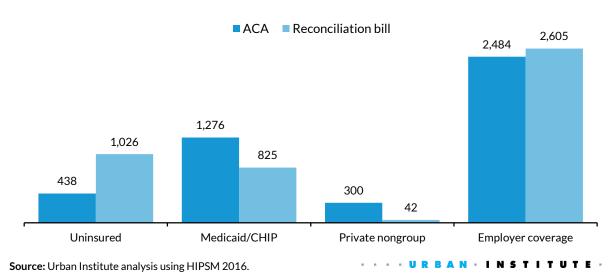


TABLE 1

Distribution of Health Insurance Coverage among Colorado Residents under Age 65, with the Affordable Care Act and under the Reconciliation Bill, 2019

	ACA		Reconciliation Bill		Difference
	Thousands of people	Share of state total	Thousands of people	Share of state total	(thousands of people)
Insured	4,247	91%	3,659	78%	-588
Employer	2,484	53%	2,605	56%	121
Nongroup (eligible for tax credit)	78	2%	0	0%	-78
Nongroup (other)	221	5%	42	1%	-179
Medicaid/Children's Health					
Insurance Program	1,276	27%	825	18%	-451
Other (including Medicare)	187	4%	187	4%	0
Uninsured	438	9%	1,026	22%	588
Total	4,685	100%	4,685	100%	0

Source: Urban Institute analysis using HIPSM 2016.

TABLE 2 Characteristics of Colorado Residents Losing Coverage under a Reconciliation Bill, 2019

	Th	Charact C	11.2	Uninsurance rate
	Thousands of people	Share of state total	Uninsurance rate under ACA	under reconciliation bill
A == (++=====)	от реорге	State total	under ACA	reconcination bill
Age (years)	107	18%	3%	11%
< 18 18-24	106 93	18% 16%		
			11%	30%
25-34 35-44	111 100	19% 17%	17% 12%	32% 26%
	97			
45-54	97 80	16%	10%	24% 19%
55-64		14%	8%	
Total	588	100%	9%	22%
Family income level				
< 100% FPL	154	26%	7%	25%
100-150% FPL	87	15%	7%	29%
150-200% FPL	54	9%	14%	28%
200-300% FPL	74	13%	13%	24%
300-400% FPL	58	10%	8%	18%
> 400% FPL	160	27%	9%	18%
Total	588	100%	9%	22%
Family employment status				
At least one full-time worker	396	67%	8%	19%
Part-time only	94	16%	14%	34%
No worker	98	17%	12%	30%
Total	588	100%	9%	22%
Race and ethnicity				
White, non-Hispanic	380	65%	7%	19%
Black, non-Hispanic	21	4%	8%	19%
Hispanic	149	25%	17%	30%
Asian/Pacific Islander	16	3%	8%	21%
American Indian/Alaska Native	13	2%	10%	24%
Other, non-Hispanic	9	1%	8%	19%
Total	588	100%	9%	22%
Adult education attainment				
Less than high school	50	11%	31%	49%
High school	157	33%	15%	31%
Some college	134	29%	11%	26%
College	92	20%	6%	18%
Graduate school	92 36	20% 8%	6% 4%	49%
Total Source: Urban Institute analysis using F	469	100%	12%	26% NSTITUTE =

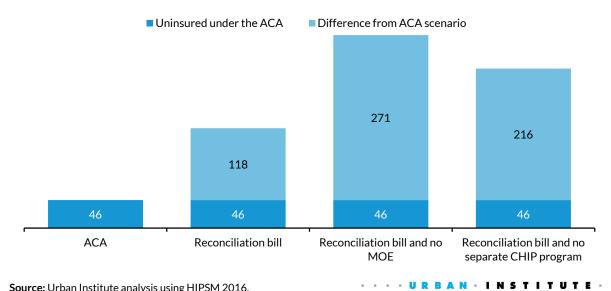
Notes: ACA = Affordable Care Act; FPL = federal poverty level.

Columns may not sum to totals because of rounding.

FIGURE 2

Uninsured Children in Colorado, 2019

Thousands of children



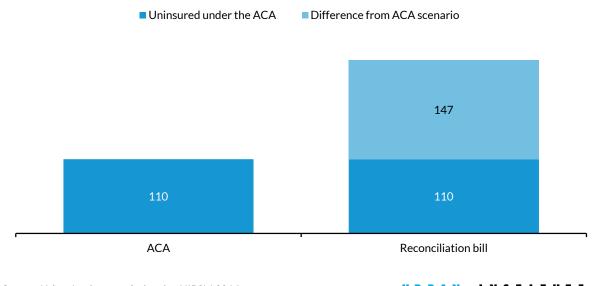
Source: Urban Institute analysis using HIPSM 2016.

Notes: ACA = Affordable Care Act; CHIP = Children's Health Insurance Program; MOE = maintenance of eligibility. Children are ages 18 and younger, following Medicaid/CHIP guidelines. Medicaid/CHIP eligibility under the "no MOE" scenario is at federal minima for all states under the reconciliation bill: 138 percent of the federal poverty level for children younger than 6 and 100 percent of the federal poverty level for children ages 6 to 18. If the MOE provision is eliminated, states would decide whether to reduce eligibility levels for children.

FIGURE 3

Uninsured Parents in Colorado, 2019

Thousands of people



Source: Urban Institute analysis using HIPSM 2016.

Note: ACA = Affordable Care Act.

TABLE 3
Characteristics of Colorado Children Losing Coverage under Reconciliation Bill, 2019

	Losses under Reconciliation		Additional Coverage at Risk under No MOE	
	Thousands of children	Share of state total	Thousands of children	Share of state total
Age				
0-4	23	19%	37	24%
5-18	96	80%	115	76%
Total	119	100%	152	100%
Family income				
< 100% FPL	16	14%	<1	0%
100-150% FPL	13	11%	62	41%
150-200% FPL	13	11%	54	36%
200-300% FPL	22	19%	36	23%
300-400% FPL	15	13%	<1	0%
> 400% FPL	39	33%	<1	0%
Total	119	100%	152	100%
Race and ethnicity				
White, non-Hispanic	67	57%	63	41%
Black, non-Hispanic	4	3%	9	6%
Hispanic	41	34%	71	47%
Asian/Pacific Islander	3	2%	2	1%
American Indian/Alaska Native	2	2%	4	3%
Other, non-Hispanic	2	2%	3	2%
Total	119	100%	152	100%
Family employment status				
At least one full-time worker	95	80%	120	79%
Part-time only	9	8%	15	10%
No worker ´	8	7%	12	8%
No parent at home	6	5%	5	3%
Total	119	100%	152	100%

Source: Urban Institute analysis using HIPSM 2016.

Notes: CHIP = Children's Health Insurance Program; FPL = federal poverty level; MOE = maintenance of eligibility. Columns may not sum to totals because of rounding.

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Children are ages 18 and younger, following Medicaid/CHIP guidelines. Medicaid/CHIP eligibility under the "No MOE" scenario is at federal minima for all states under the reconciliation bill: 138 percent of FPL for children younger than 6 and 100 percent of FPL for children ages 6 to 18. If the MOE provision is eliminated, states would decide whether to reduce eligibility levels for children.

TABLE 4
Characteristics of Colorado Parents Losing Coverage under Reconciliation Bill, 2019

	Thousands		
	of parents	Share of state total	
Age			
19-24	6	4%	
25-34	41	28%	
35-44	59	40%	
45-54	35	24%	
55-64	6	4%	
Total	147	100%	
Family income			
< 100% FPL	34	23%	
100-150% FPL	36	25%	
150-200% FPL	9	6%	
200-300% FPL	17	12%	
300-400% FPL	13	9%	
> 400% FPL	37	25%	
Total	147	100%	
Race and ethnicity			
White, non-Hispanic	92	63%	
Black, non-Hispanic	5	3%	
Hispanic	42	29%	
Asian/Pacific Islander	5	3%	
American Indian/Alaska Natives	2	1%	
Other, non-Hispanic	2	1%	
Total	147	100%	
Employment status			
At least one full-time worker	113	77%	
Part-time only	18	12%	
No worker	16	11%	
Total	147	100%	

Source: Urban Institute analysis using

HIPSM 2016.

Note: FPL = federal poverty level.

Acknowledgments

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Errata: This brief was updated on February 2, 2017, to correct typographical errors in table 2.