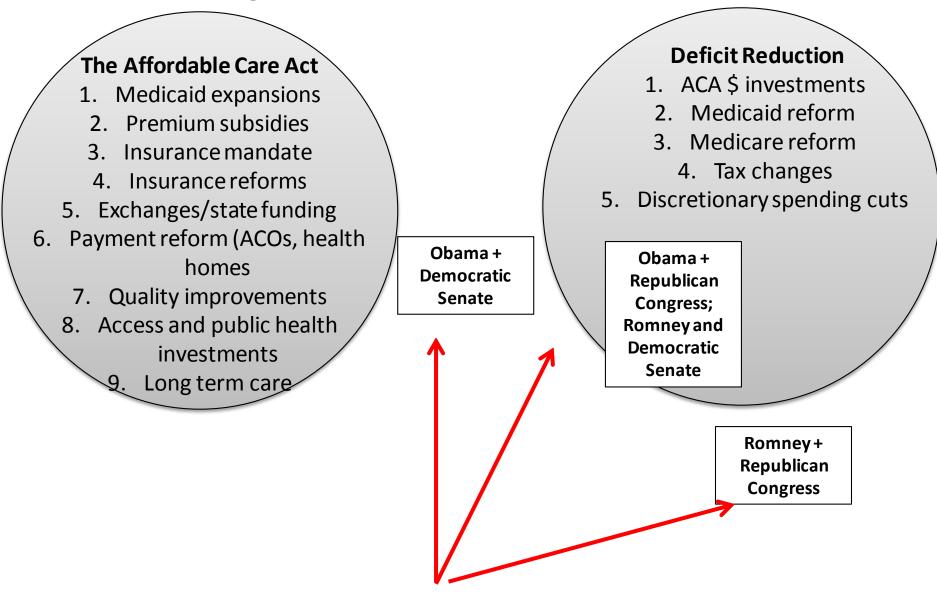
Health Policy in the 2012 Election Aftermath

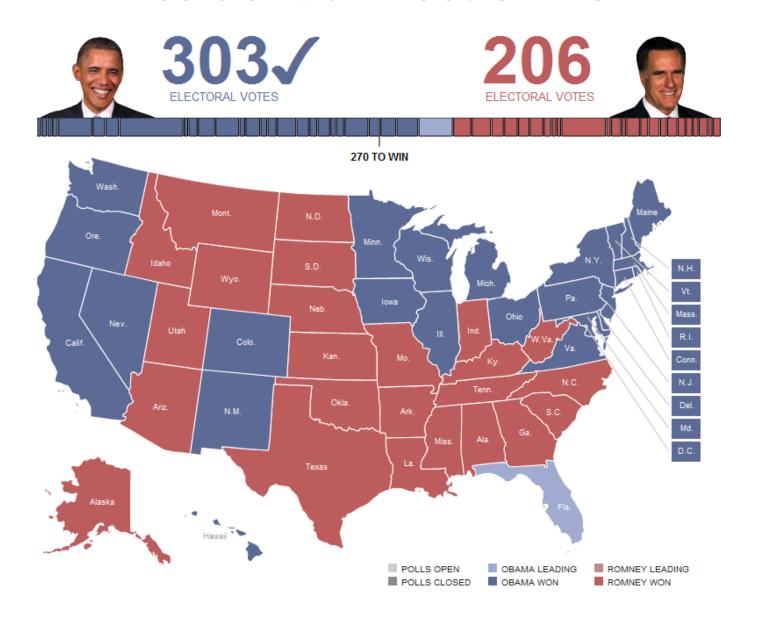
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With enormous thanks to Mark Dorley and Michal McDowell

Coming Into the 2012 Election: The Choice

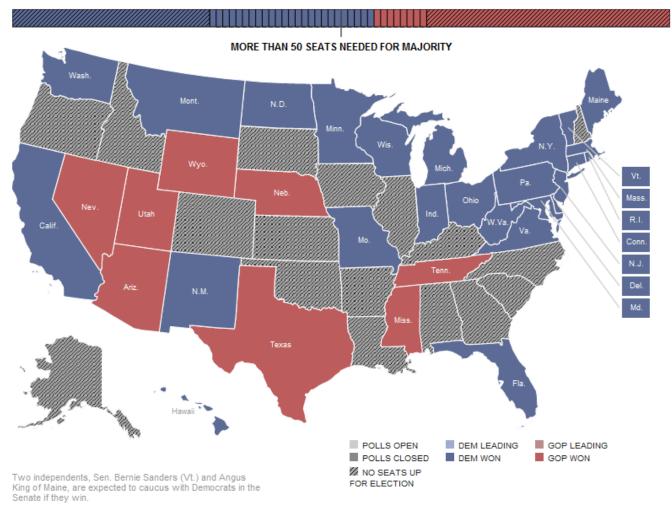


Presidential Election 2012

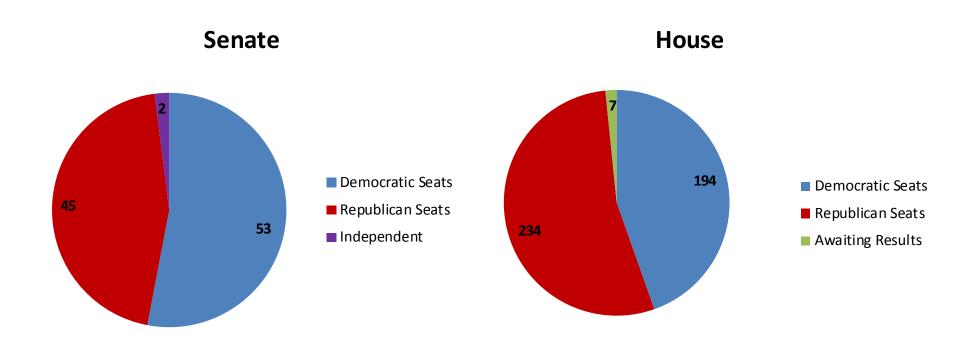


Senate Election 2012





Party Composition of House and Senate, 113th Congress



The Election's Meaning for Health Policy

- ACA implementation proceeds although modification possible
 - Medicaid expansions
 - Premium subsidies and cost-sharing assistance
 - Exchange implementation
 - Payment reforms and system re-design
 - Primary care expansion and public health investments
- The federal programs and policies revised as part of the Affordable Care Act may be further restructured but that restructuring will preserve insurance expansion and market reform
 - Medicaid
 - Medicare
 - Premium tax subsidy policies, including recoupment
 - Federal funding for ACA implementation, including state grants

Medicaid & Medicare: Possible Fiscal Cliff Scenarios

Medicaid

- Per capita cap
- Eligibility streamlining
- Benefit redesign EHBs
- Payment re-design (DSH, FQHC payment rules)
- Annual enrollment periods
- Secondary Medicaid eligibility for persons with disabilities
- Exchange market alignment options: MCOs and QHPs

Medicare

- Further payment reforms (ACOs and medical homes) as well as restructured physician payment system tied to clinical and financial integration
- Further health care institutional payment reductions
- Other spending reductions
- Higher premiums and cost sharing
- Greater incentives to move into global payment arrangements

Possible ACA "Fixes" as Part of a Broader Budget Agreement

- More flexible implementation timeline
- State Medicaid expansion options as a result of NFIB
- State Medicaid benefit, cost sharing, and payment flexibility
- Medicaid as secondary payer for beneficiaries with disabilities whose incomes exceed the Exchange threshold
- Greater state flexibility in relation to SHOP exchanges (plan administration functions, not only marketing and enrollment)

Legislative Pathways to the Grand Bargain

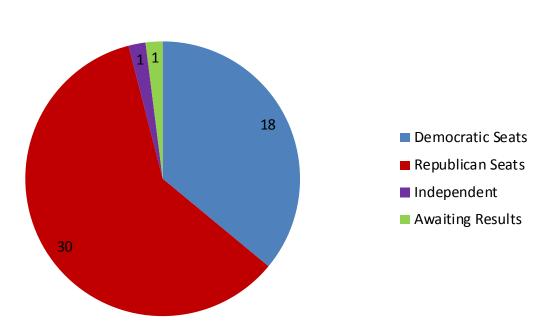
- Reconciliation
 - Simple majority in Senate
 - Strict legislative process rules that preclude amendments that do not affect spending or taxes
- Normal legislative process
 - Supermajority needed to pass legislation
 - Vehicle for altering individual and employer mandates and insurance reforms (already implemented; those that take effect in 2014)
- A "legislative stay" with broader negotiations to follow

HHS Implementation: Issues to Watch

- Federally facilitated exchanges implementing regulations
- Essential health benefits implementing regulations
- Medicaid eligibility and aligned enrollment portal final regulations
- Basic Health Program conditions of participation

Party Composition of State Governors, 2013





Democratic: Arkansas, California, Colorado, Connecticut, Delaware, Hawaii, Illinois, Kentucky, Maryland, Massachusetts, Minne sota, Missouri, Montana, New Hampshire, New York, Oregon, Vermont, West Virginia

Republican: Alabama, Alaska, Arizona, Florida, Georgia, Idaho, Indiana, Iowa, Kansas, Louisiana, Maine, Michigan, Mississippi, Nebraska, Nevada, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, Wisconsin, Wyoming

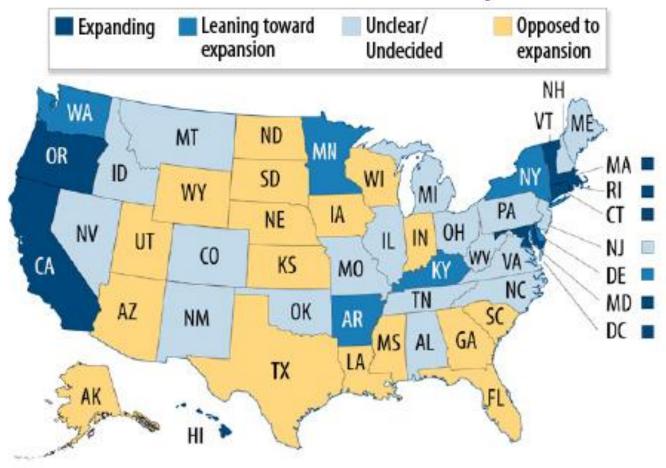
Independent: Rhode Island

Awaiting Results: Washington

ACA State Implementation Issues to Watch

- Medicaid implementation
 - Partial or full eligibility
 - Integrated enrollment
 - Integrated COP for QHPs and Medicaid MCOs
 - Medicaid beneficiaries with incomes > Exchange threshold
 - Payment reform and system transformation both generally and for safety net (including DSH policies)
 - Dual enrollee transformation

Status of Health Reform Medicaid Expansion



Source: CBPP analysis.

ACA State Implementation Issues to Watch

- Exchanges
 - How will states decide? (State administered, partnership, federally facilitated)
 - State administered/partnership decisions
 - QHP standards
 - Active v passive purchasers
 - Navigator selection
 - Access and essential community provider standards
 - Exchange as exclusive individual/small group market
- Basic Health Plan
- EHB benchmark (25 states have chosen)