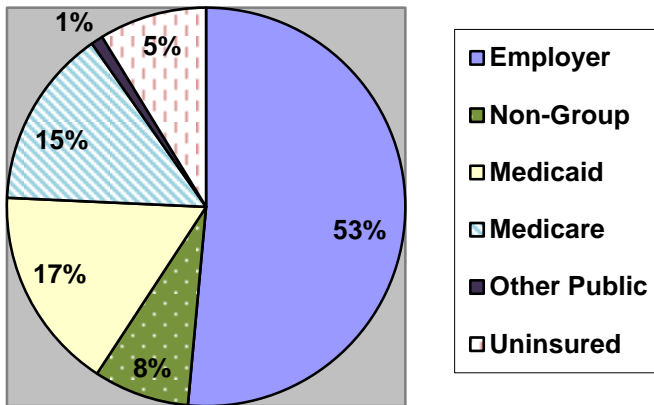


## Coverage Facts for Iowa

Health Insurance Coverage in Iowa, 2015<sup>1</sup>



There were 84,100 more individuals in Iowa with health insurance coverage in 2015 than in 2013.

From 2013 to 2015, the uninsured rate in Iowa fell from 8% to 5%.

### Advance premium tax credits and cost-sharing reductions provide needed assistance to tens of thousands of Iowa residents.

- As of the end of the 2017 open enrollment period, 51,573 individuals selected a Marketplace plan.
  - 7,531 had incomes up to 150% FPL
  - 25,873 had incomes over 150% FPL up to 250% FPL
  - 23,836 were in rural locations based on zip code, as defined by HRSA
  - 14,453 selected bronze plans, which have higher deductibles
- 44,193 people had premiums reduced by the advance premium tax credit (APTC).
- 26,848 people qualified for cost-sharing reductions.
- The average per person premium for all consumers, before the application of any APTC, was \$526. For those receiving APTCs, the average premium was \$132.<sup>2</sup>

### Medicaid helps low-income residents of Iowa access the health care they need.

- As of March 2017, Iowa has enrolled 632,571 individuals in Medicaid and CHIP, a net increase of 28.18% since October 2013.<sup>3</sup>
- 149,300 adults were in the Medicaid expansion group in the first quarter of 2016. These adults are at risk of losing their Medicaid coverage if the AHCA is enacted into law.
- 86% of Medicaid enrollees in Iowa are in working families.

## Medicaid provides the state of Iowa with needed budgetary support.

- Medicaid and CHIP cover 1 in 2 nursing home residents and 2 in 5 people with disabilities in Iowa. The state faces reduced federal funding for dual eligibles if funding is capped.<sup>4</sup>
- To offset the loss of federal funding proposed in the AHCA, the state will need to generate additional revenue to compensate for the increased state funding needed to keep Medicaid spending constant or face tough decisions about whether to save costs by cutting Medicaid eligibility, covered services and/or provider payments or draw funding away from other state priorities such as education or transportation.

## Residents of Iowa need access to meaningful and affordable coverage that covers their health care needs.

- 448,000 non-elderly adults in Iowa have declinable pre-existing conditions under pre-ACA practices - 24% of the population.<sup>5</sup>
- In Iowa, rates of prescription drug deaths have quadrupled since 1999.<sup>6</sup>
- In Iowa, from 2010 to 2014, approximately 198,000 adults aged 18 or older with any mental illness received mental health treatment/counseling within the year prior to being surveyed. The remaining 51.5% of Iowa residents aged 18 or older with any mental illness did not receive mental health treatment/counseling in that time span.<sup>7</sup>

## Iowa's high-risk pool before the ACA left residents of Iowa behind.

- Iowa's high-risk pool membership made up 1.8% of non-group health insurance market participants in 2011.<sup>8</sup> By the end of 2011, there were 3,268 pool participants.
- Premiums in Iowa's high-risk pool were capped at 150% of standard market rates. The deductible of the high-risk pool plan with the most members was \$2,500.
- Iowa's high-risk pool excluded coverage of pre-existing conditions for medically eligible enrollees for six months. It also had a lifetime benefit maximum of \$3 million.
- In 2011, the state high-risk pool had a net loss of approximately \$ 21.9 million.<sup>9</sup>

### SOURCES

<sup>1</sup> [http://kff.org/other/state-indicator/total-](http://kff.org/other/state-indicator/total-population/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D)

[population/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D](http://kff.org/other/state-indicator/total-population/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D)

<sup>2</sup> [https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Marketplace-Products/Plan\\_Selection\\_ZIP.html](https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Marketplace-Products/Plan_Selection_ZIP.html)

<sup>3</sup> <https://www.medicaid.gov/medicaid/by-state/stateprofile.html?state=iowa>

<sup>4</sup> <http://files.kff.org/attachment/fact-sheet-medicaid-state-IA>

<sup>5</sup> <http://kff.org/health-reform/issue-brief/pre-existing-conditions-and-medical-underwriting-in-the-individual-insurance-market-prior-to-the-aca/>

<sup>6</sup> <https://www.public-health.uiowa.edu/iprc/wp-content/uploads/2017/05/OpioidsIowaNEWfinal.pdf>

<sup>7</sup> [https://www.samhsa.gov/data/sites/default/files/2015\\_Iowa\\_BHBarometer.pdf](https://www.samhsa.gov/data/sites/default/files/2015_Iowa_BHBarometer.pdf)

<sup>8</sup> <http://kff.org/health-reform/issue-brief/high-risk-pools-for-uninsurable-individuals/>

<sup>9</sup> [http://www.naschip.org/portal/index.php?option=com\\_content&view=article&id=230](http://www.naschip.org/portal/index.php?option=com_content&view=article&id=230)