

# ACT TO FUND HEALTH INSURANCE OUTREACH AND ENROLLMENT

## Background

For the first time since the passage of the Affordable Care Act (ACA), the rates of people not enrolled in health insurance have stagnated or increased. Some communities have been particularly impacted: for example, from 2016 the uninsured rate for Native Hawaiians rose from 4.7% to 5.5%, Micronesians from 11.5% to 13.1%, Burmese from 12% to 13.2%, and Cambodians from 7.4% to 8.2%.<sup>1</sup>

At the same time, resources for outreach and education to consumers about their opportunity to enroll in (ACA) coverage has been cut. The Navigator program, which funds community organizations to enroll the populations they serve has been slashed by over 80%. Federal investment in ACA marketing has been cut by 90%.

**ASK: Congress must fund these programs. The Senate should act on the House passed ENROLL (H.R. 396) and MORE Health Education (H.R. 987) Acts OR Congress can fund these programs through the appropriations process.**

The Need Exists - Half of the remaining uninsured are eligible for subsidized ACA or Medicaid coverage, meaning free or affordable care, yet have not enrolled.<sup>2</sup>

Consumer Knowledge is Still Low - Many consumers remain unaware of when they can sign up for insurance through the ACA. In one poll, only 24 percent of those people who are uninsured or buy their own insurance could name the correct open enrollment deadline, while the remaining 77 percent either didn't know, gave the wrong date, incorrectly stated there was no deadline, or refused to answer.<sup>3</sup>

Flawed Basis for Cuts - The Government Accountability Office found that HHS justified its cuts for the navigator program using bad data and analysis.<sup>4</sup>

HHS Ignored its Own Analysis - The administration has refused to release an internal HHS report that found that cutting ACA advertising would lead to tens of thousands of fewer people signing up for coverage.<sup>5</sup>

Dollars Matter - The federal government invested just 50 cents of funding per uninsured person on average for navigators in states where it runs the health insurance marketplaces, compared to over \$20 per uninsured in states like Minnesota, New York, and Kentucky.<sup>6</sup>

1 <https://www.apiahf.org/press-release/september-aca-release/>

2 <https://www.commonwealthfund.org/chart/2017/least-half-uninsured-adults-are-likely-eligible-marketplace-subsidies-or-medicaid>

3 <https://www.kff.org/health-reform/poll-finding/kff-health-tracking-poll-november-2018-priorities-congress-future-aca-medicaid-expansion/>

4 <https://www.gao.gov/products/GAO-18-565>

5 [https://www.huffpost.com/entry/trump-verma-obamacare-advertising-cut\\_n\\_5c115061e4b084b082ff8dba?guccounter=1](https://www.huffpost.com/entry/trump-verma-obamacare-advertising-cut_n_5c115061e4b084b082ff8dba?guccounter=1)

6 <https://www.commonwealthfund.org/blog/2018/states-lean-federal-government-cuts-back-navigator-and-advertising-funding>