



# State Chart Book: Comparison of Predicted Premium Differences across Counties under the Affordable Care Act and the American Health Care Act

**State: New York**

## About this Chart Book:

This State Chart Book supplements NASHP's brief, [Health Care is Local: Impact of Income and Geography on Premiums and Premium Support](#). Using data and modeling from the Kaiser Family Foundation, we present estimated premiums and tax credits under current law created by the Affordable Care Act (ACA) and under the American Health Care Act (AHCA) by high and low cost regions and by age and income.<sup>1</sup>

The Kaiser Family Foundation analysis assumes that the majority of states will adopt the AHCA's option to expand the allowable age rating ratio from 3-to-1 to 5-to-1—with the exception of Massachusetts, New York, Vermont and the District of Columbia, which have established separate rating bands lower than the 3-to-1 ratio. The data do not account for the adoption of waivers to provide less comprehensive coverage which could lower premiums, as provided as state option under the AHCA. The Kaiser Family Foundation data account for anticipated non-enforcement of the individual mandate, which the Congressional Budget Office (CBO) predicts could increase premiums by an additional 15 to 20 percent; data also account for the AHCA risk stabilization programs states could adopt to help offset insurance cost. Experts have questioned the adequacy of this fund to significantly address costs.<sup>2</sup>

Note that these estimates *only* consider premium costs – they do not incorporate any analysis of predicted out-of-pocket expenses due to cost-sharing. Thus, this analysis only provides a partial picture of how consumer costs may shift due to changes incurred under the AHCA. The AHCA's proposed elimination of Cost Sharing Reduction payments (CSR) and predicted stimulation of high-deductible health plans, for example, are expected to increase out-of-pocket spending, with especially significant increases predicted for consumers in states that opt to waive Essential Health Benefits requirements under the AHCA.<sup>3</sup>

## Methodology:

NASHP sorted all counties into even groups (usually quintiles) by gross premium rate; counties highlighted in this report are those with the highest population within each grouping. The data identifies 27-, 40- and 60- year olds that, respectively, have annual incomes of \$20,000, \$30,000, \$50,000 or \$75,000 and projects potential total premium, tax credit and premium share paid directly by the consumer in high and low cost counties in the state in 2020.

<sup>1</sup> Kaiser Family Foundation, "Premiums and Tax Credits Under the Affordable Care Act vs. the American Health Care Act: Interactive Maps", accessed June 7, 2017 : <http://kff.org/interactive/tax-credits-under-the-affordable-care-act-vs-replacement-proposal-interactive-map/>.

<sup>2</sup> Hall, J., "High-Risk Pools for People with Preexisting Conditions: A Refresher Course", accessed June 7, 2017, <http://www.commonwealthfund.org/publications/blog/2017/mar/high-risk-pools-preexisting-conditions>;

Capretta, J. and Miller, T., "How to Cover Pre-existing Conditions", accessed June 7, 2017, <http://www.nationalaffairs.com/publications/detail/how-to-cover-pre-existing-conditions>; Politz, K., "High-Risk Pools for Uninsurable Individuals", accessed June 7, 2017, <http://www.kff.org/health-reform/issue-brief/high-risk-pools-for-uninsurable-individuals/>.

<sup>3</sup> Congressional Budget Office, "Cost Estimate H.R. 1628 American Health Care Act of 2017, As passed by the House of Representatives on May 4, 2017", accessed on June 7, 2017, <https://www.cbo.gov/system/files/115th-congress-2017-2018/costestimate/hr1628aspassed.pdf>



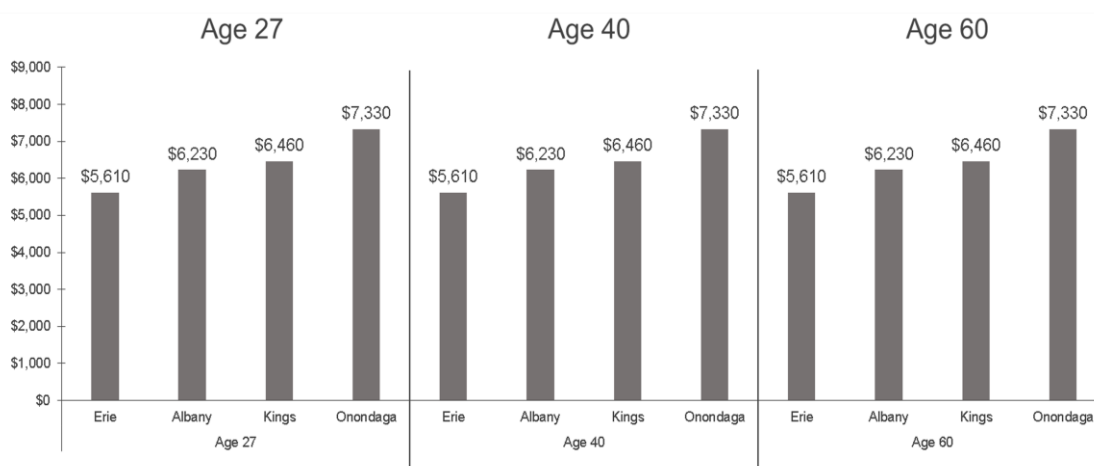
## Comparison of Predicted Premium Differences across Counties under the Affordable Care Act and the American Health Care Act

State: **New York**

### Estimated premium variation, by age, across counties

Estimates indicate there will be gross premium variation within New York, before factoring in any government tax credits. As Figure 1 shows, by 2020 a 40-year-old consumer in Erie County, one of New York’s lowest cost counties, could see prices as low as \$5,610 per year. In contrast, a 40 year old in Onondaga County could see prices as high as \$7,330 per year. New York state law mandates that issuers use a community rating methodology which restricts issuers from rating based on any factor other than geography, including age.<sup>4</sup>

**Figure 1 – Estimated Gross AHCA Premiums by County and Age in 2020**



Counties for this analysis were identified by sorting all counties in the state into even groupings (usually quintiles) based on premiums.<sup>5</sup> The highest populated county in each grouping is represented in Figure 1. Figures 2a-c and Table 1 use data from the counties identified in New York’s highest and lowest cost groupings to provide a comparison of differing effects of the ACA and the AHCA in high and low-premium cost regions of the state.

All data for this report were adapted from analysis conducted by the Kaiser Family Foundation (which contains data for every county).<sup>6</sup> See State Fact Sheet Overview for further details on the data source and limitations.

<sup>4</sup> NY Insurance Law SS. 3231

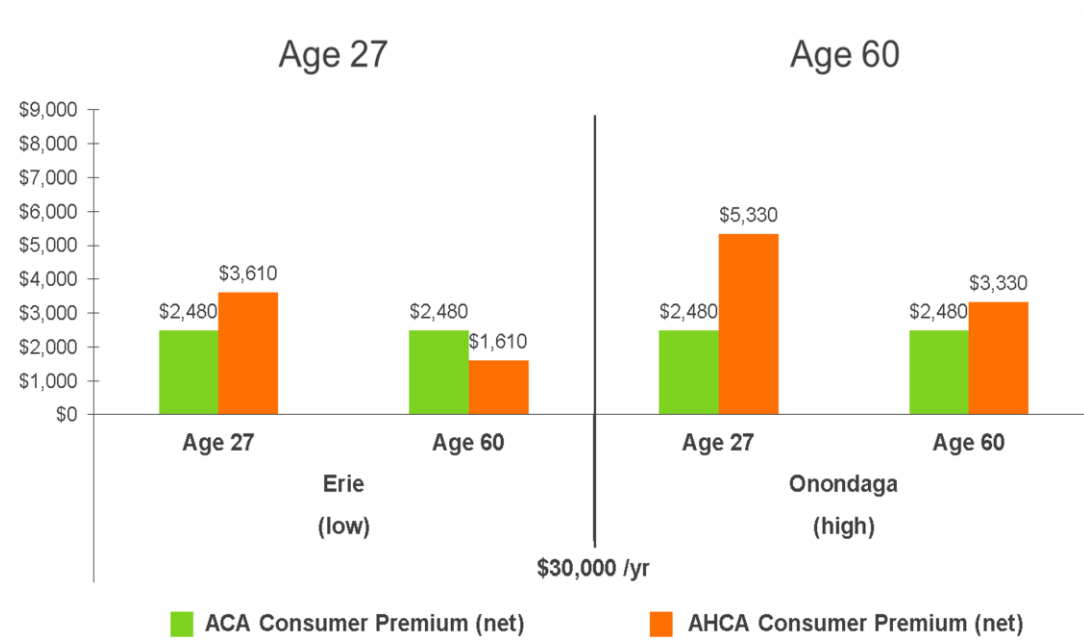
<sup>5</sup> Depending on the degree of premium variation in the state, sometimes quartiles or less were used to ensure even groups.

<sup>6</sup> Kaiser Family Foundation, “Premiums and Tax Credits Under the Affordable Care Act vs. the American Health Care Act: Interactive Maps” (April 27, 2017): <http://kff.org/interactive/tax-credits-under-the-affordable-care-act-vs-replacement-proposal-interactive-map/>.

**AHCA would have disproportionate effects across counties, age groups, and income levels**

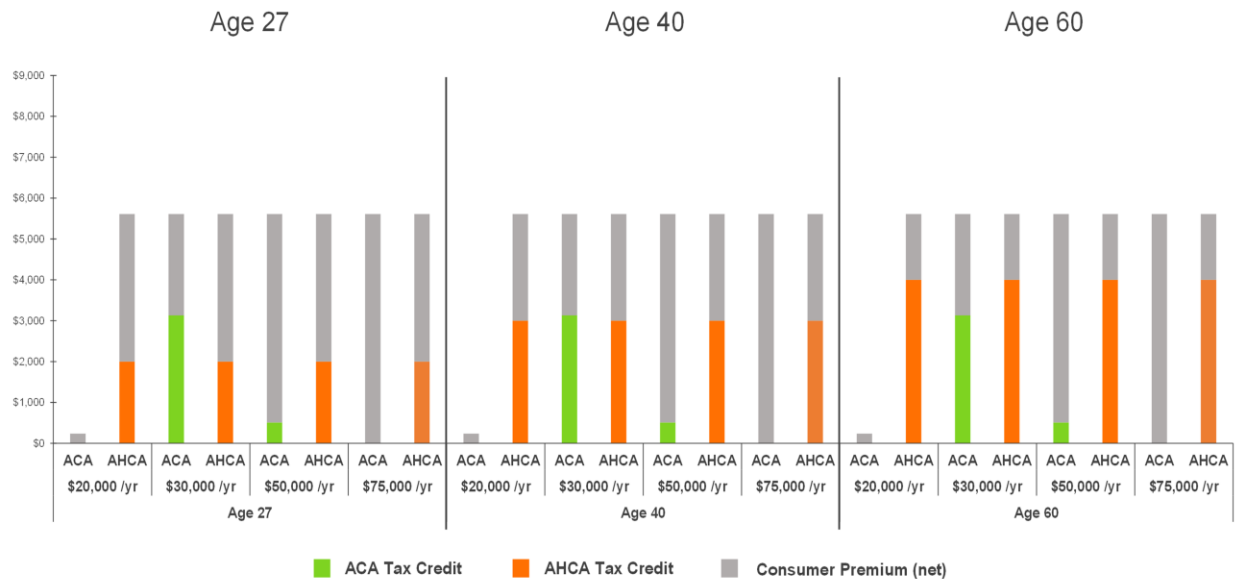
Regional market conditions cause variation in premiums charged across states. The Affordable Care Act's (ACA) tax credit structure is adjusted to reflect differences in region, age, and income. By contrast, the American Health Care Act (AHCA) provides a flat tax credit based on age, and capped for individuals making over \$75,000 per year. The charts below reflect predicted tax credits and consumer (net) premium based on premiums costs estimated by the Kaiser Family Foundation under the ACA and AHCA in 2020.

**Figure 2a – Premium Cost to Consumer after Tax Credit, under the ACA & AHCA, in 2020**  
*(showing counties from New York's lowest and highest cost groupings; estimated for individual earning \$30,000 per year)*

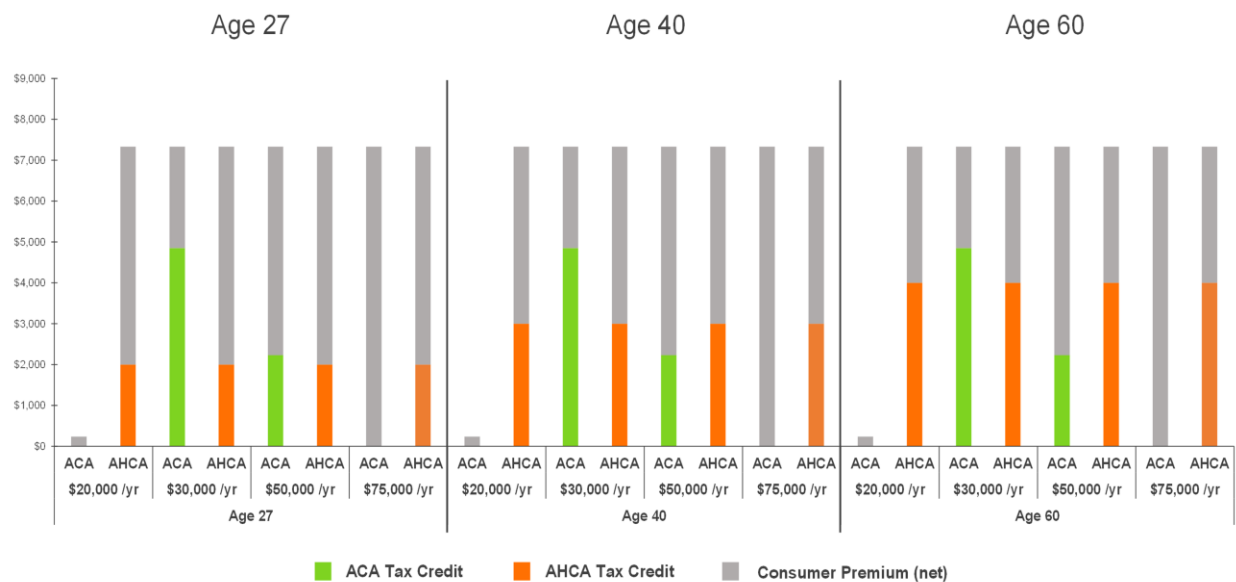


Estimates for the individuals making \$20,000 under the ACA have been omitted, assuming those individuals would qualify for the state's Basic Health Program.

**Figure 2b – Comparing Estimated ACA and AHCA Premiums and Tax Credits, by Age and Income, for a Low Cost Region (Erie County), in 2020**



**Figure 2c – Comparing Estimated ACA and AHCA Premiums and Tax Credits, by Age and Income, for a High Cost Region (Onondaga County), in 2020**



**Table 1 – Comparing Estimated ACA and AHCA Premiums and Tax Credits, by Age and Income, for a High Cost County and a Low Cost County, in 2020**

	TOTAL PREMIUM (\$)			TAX CREDITS (\$)			CONSUMER PAYS (\$)		
	ACA	AHCA	Change	ACA	AHCA	Change	ACA	AHCA	Change
<b>Erie (low)</b>									
Age 27									
\$20,000 /yr	5,610	5,610	0	0	2,000	+2,000	240	3,610	+3,370
\$30,000 /yr	5,610	5,610	0	3,130	2,000	-1,130	2,480	3,610	+1,130
\$50,000 /yr	5,610	5,610	0	510	2,000	+1,490	5,100	3,610	-1,490
\$75,000 /yr	5,610	5,610	0	0	2,000	+2,000	5,610	3,610	-2,000
Age 40									
\$20,000 /yr	5,610	5,610	0	0	3,000	+3,000	240	2,610	+2,370
\$30,000 /yr	5,610	5,610	0	3,130	3,000	-130	2,480	2,610	+130
\$50,000 /yr	5,610	5,610	0	510	3,000	+2,490	5,100	2,610	-2,490
\$75,000 /yr	5,610	5,610	0	0	3,000	+3,000	5,610	2,610	-3,000
Age 60									
\$20,000 /yr	5,610	5,610	0	0	4,000	+4,000	240	1,610	+1,370
\$30,000 /yr	5,610	5,610	0	3,130	4,000	+870	2,480	1,610	-870
\$50,000 /yr	5,610	5,610	0	510	4,000	+3,490	5,100	1,610	-3,490
\$75,000 /yr	5,610	5,610	0	0	4,000	+4,000	5,610	1,610	-4,000
<b>Onondaga (high)</b>									
Age 27									
\$20,000 /yr	7,330	7,330	0	0	2,000	+2,000	240	5,330	+5,090
\$30,000 /yr	7,330	7,330	0	4,850	2,000	-2,850	2,480	5,330	+2,850
\$50,000 /yr	7,330	7,330	0	2,230	2,000	-230	5,100	5,330	+230
\$75,000 /yr	7,330	7,330	0	0	2,000	+2,000	7,330	5,330	-2,000
Age 40									
\$20,000 /yr	7,330	7,330	0	0	3,000	+3,000	240	4,330	+4,090
\$30,000 /yr	7,330	7,330	0	4,850	3,000	-1,850	2,480	4,330	+1,850
\$50,000 /yr	7,330	7,330	0	2,230	3,000	+770	5,100	4,330	-770
\$75,000 /yr	7,330	7,330	0	0	3,000	+3,000	7,330	4,330	-3,000
Age 60									
\$20,000 /yr	7,330	7,330	0	0	4,000	+4,000	240	3,330	+3,090
\$30,000 /yr	7,330	7,330	0	4,850	4,000	-850	2,480	3,330	+850
\$50,000 /yr	7,330	7,330	0	2,230	4,000	+1,770	5,100	3,330	-1,770
\$75,000 /yr	7,330	7,330	0	0	4,000	+4,000	7,330	3,330	-4,000