LWVIL 2017 Issues Briefing: Healthcare/Reproductive Health
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HEALTHCARE

LWVUS Position: Support for a basic level of quality health care at an affordable cost for all US residents. By 2015 the 2010 Affordable Care Act (ACA) led to a 44% reduction of uninsured Illinois citizens through enrollment in insurance exchanges and Medicaid expansion. In 2016 applicants for Marketplace plans found higher premiums, less choice of providers, including hospitals. Risk adjustment strategies in the Affordable Care Act to provide stability, compensating for the enrollment of less healthy individuals did not meet the goal following congressional changes to the program. 78% of Illinois enrollees in an ACA plan were eligible for a subsidy to cover the premium cost.

In June 2015 the Supreme Court cleared the way for tax subsidies to continue through both federal and state exchanges for more than 6 million people. Illinois subsidies were at risk since the state has a federally administered partnership exchange.

LWVIL supported 2013 Medicaid expansion to cover low-income adults. By 2015 623,000 enrolled, exceeding initial projections. The new Governor’s proposed 2015 budget cut Medicaid by $1.5 billion. Two years later there is no fiscal year budget. Funds have been released by stopgap measures, court order and consent decrees though many other health-related programs have received no state funds and face dissolution.

League Activity 2016

- State Based Health Insurance Exchange (Marketplace) Note: Final effort in 2015 veto session by LWVIL and coalition partners to pass enabling legislation for a state Health Insurance Exchange unsuccessful.
- Letters 2016
  - Support SB 2038 (Emergency stop gap) passed both Houses; not signed by Governor
  - Support For: Stakeholder input on Governor’s Transformation Plan for Health and Human Services; sent to legislators, Governors. No response
  - In mid-December LWV Illinois joined with our HealthCare coalition partners and sent a letter urging Governor Rauner to tell Congress not to repeal the ACA, in part or in whole, without an adequate replacement plan, which should include Medicaid expansion. On January 17, 2017 the Rauner Administration sent a letter to Congress urging them to provide certainty and structure to people covered by the healthcare law. In an interview Governor Rauner expressed doubts about turning Medicaid over to the states in the form of block grants.
  - Became involved with Protect Our Care Illinois Coalition (PoCIL), to advocate for no repeal of the ACA without an adequate replacement.

Outlook:
President-elect Donald Trump’s stands on health policy include repeal of the ACA, with attendant changes to Medicare and Medicaid, prescription drug prices, the Opioid Epidemic, and Reproductive Health.
  - Work with the Protect our Care Illinois (PoCIL) to protect health access gains made through the ACA and Medicaid Expansion in Illinois;
  - Evaluate proposed changes for LWVIL action, such as state block grants for Medicaid;
  - Expect continued efforts to restrict abortion in Illinois.
REPRODUCTIVE HEALTH

Supreme Court Cases

- **Whole Women’s Health v. Cole** challenged a Texas law imposing new medical regulations on abortion clinics potentially closing 75% of facilities. The case is one of the most consequential in decades on the future of access to abortion. In June 2016 the Court ruled 5-3 that Texas cannot place restrictions on the delivery of abortion services that create an undue burden for women seeking an abortion. The decision may impact similar restrictions on abortion access in other states.

- **Zubik et al. v. Burwell.** A group of religious non-profits challenged the HHS accommodation to exempt them from providing contraception in employee health insurance benefits. The contraceptive requirement is not in the ACA but was adopted subsequently by regulation recommended by the Institute of Medicine (LWVIL supported). The 4-4 divided court initially instructed the opponents to negotiate a solution but in May 2016 the case was returned to lower courts for resolution.

League Activity 2016:

- **SB1564 Healthcare Right of Conscience Act** amends Illinois Health Care Right of Conscience Act to ensure a patient’s right to medically accurate and complete information, including a referral even though a provider has religious or moral objections. Passed by Senate 4/22/15; final action 2016, signed into law 7/2016

- **HB5576 Contraceptive Coverage Act** Ensures access to full range of contraception in all insurance plans, and if patient's care provider prescribes a specific medication or method, insurance must provide a 12 month supply without cost sharing. Signed into law 7/2016 Reproductive Health and Access Coalition Meeting 6/20/16 at ACLU to discuss strategies to urge the Governor to sign both bills

- **Reproductive Health and Access Coalition conference call 2/1/17** by ACLU to discuss ways to preserve Reproductive Rights knowing a socially conservative judge will be confirmed for vacancy on the Supreme Court, and request support for ILHB40

- **HB40** Removes a trigger provision in the 1975 Illinois Abortion law that stated if the Supreme Court ever reverses or modifies Roe v Wade, that Illinois will revert back to its pre Roe state, that makes abortion an illegal criminal act. The bill also requires abortion becomes a covered service for women insured by Medicaid or the Illinois State Employees Health Insurance. LWVIL sent a proponent witness slip, and sent TFA to members requesting they ask their Representative to support the bill.

- LWVIL opposed the following bills, similar to others filed in previous years. None came to a vote.
  - **HB3274 ASTC - Pregnancy Termination Centers** requires facilities where 50 or more abortions a year are performed to be licensed as Pregnancy Termination Centers with standards more applicable to Ambulatory Care Centers. Both medication and surgical abortions are covered. The physician is required to have privileges at a hospital that can be reached in 15 minutes, a requirement that would curtail abortion access especially in rural areas.
  - **HB 2701 Ultrasound Opportunity Act** requires an ultrasound and waiting period before a surgical or medication abortion, irrespective of medical judgment. Data on abortions are filed without assurance of confidentiality