## United States Senate

## WASHINGTON, DC 20510

June 23, 2022

The Honorable Charles E. Schumer United States Senate Majority Leader U.S. Capitol Building, S-221 Washington, D.C. 20510

The Honorable Nancy Pelosi Speaker of the House of Representatives U.S. Capitol Building, H-222 Washington, DC 20515 The Honorable Mitch McConnell United States Senate Minority Leader U.S. Capitol Building, S-230 Washington, D.C. 20510

The Honorable Kevin McCarthy House Republican Leader U.S. Capitol Building, H-204 Washington, D.C. 20515

Dear Leader Schumer, Speaker Pelosi, Leader McConnell, and Leader McCarthy:

I write to urge you to ensure that Congress pass legislation immediately, including through the budget reconciliation process if necessary, to extend emergency provisions of the American Rescue Plan Act (ARPA). These emergency provisions expanded the Affordable Care Act's (ACA) premium tax credits (PTCs) that have made private coverage through the marketplace more affordable and improved health coverage for millions of Americans. ARPA's provisions to expand the PTCs, which are set to expire in the coming months, spurred increased enrollment in 2022 with a record-breaking 14.5 million enrollees, including nearly 5.8 million people newly enrolled in marketplace coverage between November 1, 2021 and January 15, 2022. Americans deserve a stable health care market that provides access to high-quality care and affordable coverage for all, and ARPA's expansion of the PTC must be extended to ensure that we can maintain our progress on closing the coverage gap.

The pandemic prompted declines in health insurance coverage as people lost their jobs and saw incomes plunge. Coverage losses would have exacerbated declines in health care access without Congress' action to enact relief legislation to stabilized health insurance coverage and increase affordability, ARPA made several temporary changes to the ACA's PTCs in response to the economic and public health impacts of the COVID-19 pandemic. Immediately before the pandemic, national marketplace enrollment after the 2020 open enrollment period was an estimated 11.4 million people. After the ARPA increases in subsidy and large pandemic-induced losses of employer-sponsored insurance, enrollment increased to an estimated 12.0 million people in 2021 and 14.5 million people in 2022. Nationally, ARPA subsidies decreased average marketplace premiums by approximately 40% during a period in which there was both a transmissible and potentially lethal disease requiring rapid testing and early treatment and large declines in employment.<sup>2</sup>

<sup>&</sup>lt;sup>1</sup> https://www.cms.gov/newsroom/press-releases/biden-harris-administration-announces-145-million-americans-signed-affordable-health-care-during

 $<sup>^2 \</sup>underline{\text{https://jamanetwork.com/journals/jama/fullarticle/2792737\#:$\sim$:} text=After\%20the\%20ARPA\%20increases \%20in,14.5\%20million\%20people\%20in\%202022.$ 

ARPA saved families thousands on their premiums, but the expanded tax credits that powered those savings will expire at the end of 2022 and, as a result, premiums for next year's plans will rise dramatically for millions who buy insurance on their own. In a number of states, 2023 premiums will be public starting in July, with official notices in all states sent to enrollees starting in the early fall. Open enrollment for 2023 plans begins on November 1st 2022.

If Congress does not act, news of premiums skyrocketing will be front and center just as Americans begin signing up for coverage in November. Across the United States, about 2.9 million individuals are projected to become uninsured if ARPA is allowed to expire. In New York State, for example, an estimated 49,000 New Yorkers will lose coverage and become uninsured and an estimated 94,000 New Yorkers will keep their marketplace coverage, but be forced to pay higher premiums.<sup>3</sup> A New York family of four with a household income of \$120,000 could see a monthly premium increase of \$851, back to pre-ARPA levels. Premiums were eliminated on the exchanges for people earning up to 150 percent of the federal poverty level (roughly \$20,000 for a single person and \$41,000 for a family of four).<sup>4</sup> If premium tax credits are not extended, low wage workers across the country will once again be forced to decide between paying for health coverage and life's other necessities.<sup>5</sup>

ARPA improved coverage affordability and if these subsidies are not extended premium payments will rise sharply for nearly all marketplace enrollees. We must not lose momentum in our work to close the coverage gap. Achieving universal coverage is particularly critical as we continue managing the COVID-19 pandemic and work to address long-standing inequities in health care access and disparities in health outcomes.

Thank you for your attention to this matter and I look forward to working together to enact critical legislation to ensure hardworking families can continue to access the health care they need.

Sincerely,

Kirsten Gillibrand
United States Senator

<sup>&</sup>lt;sup>3</sup> arp-ptc-sunset-impacts-03-22-22 Final.pdf (hhs.gov)

<sup>&</sup>lt;sup>4</sup> <u>Health Provisions in American Rescue Plan Act Improve Access to Health Coverage During COVID Crisis | Center on Budget and Policy Priorities (cbpp.org)</u>

<sup>&</sup>lt;sup>5</sup> https://cbcny.org/research/narrowing-new-yorks-health-insurance-coverage-gap