



‘Trumpcare’ a mystery as insurance battle looms

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Republicans and Democrats have honed their warring Obamacare messages, but there are few clues about what happens after the GOP-controlled Congress and President-elect Donald Trump follow through with their promise to repeal the law by the end of next month.

Democrats, buoyed by a Capitol Hill pep talk yesterday from President Obama, made their position clear: If the repeal sends the health care markets into a tailspin and strips millions of coverage, they will label the fiasco “Trumpcare” and hang it around Republicans’ necks. They also warned that the repeal would imperil other popular bedrock programs, hurting the middle class and rural Americans.

“The president did a great job of reminding everybody of how the ACA, Medicaid, Medicare and Social Security all link,” said Bay State U.S. Rep. Richard E. Neal after the meeting with Obama. “They are all linked in the public’s mind, and subtracting or fracturing any part of that guarantee changes the whole argument.”

Republicans counter that Democrats broke the system with a law that raised premiums, lowered coverage and caused insurers to cut and run – leaving Americans with higher costs and fewer options.

“We are talking about people’s lives. We are talking about families,” said Vice President-elect Mike Pence after huddling with congressional Republicans. “But we are also talking about a policy that has been a failure virtually since its inception.”

What comes after the promised repeal is unknown. Even House Speaker Paul Ryan, who has dedicated years to the cause of devising a plan to replace the law, acknowledged that no plan has been finalized.

“We have plenty of ideas to replace it and you’ll see as the weeks and months unfold,” Ryan said.

Conservative think tanks such as the Heritage Foundation and the Cato Institute have floated replacement proposals including the use of tax-free health savings accounts, allowing cross-state health insurance purchasing, converting federal Medicaid funding to state-controlled block grants and creating high-risk pools to cover patients with pre-existing medical conditions.

But crafting a plan after a repeal is tricky – chiefly because it could spook insurers and destabilize the market before the replacement can be put in place.

“The question is, will insurers stick around in 2018 and possibly even 2017 with no assurances that the situation will be stable?” said Timothy Jost, a Washington and Lee University law professor and health care analyst. “It is very likely that insurers will say, ‘Call us back when they figure out what they want to do.’”