The Affordable Care Act (ACA) has been transformative for Washington state and its residents. The ACA’s broad ranging effects have benefitted Washington’s residents, health industry and the state on many levels.

**The Gains...**

**For Washington Residents**

- The total uninsured rate declined by nearly 60 percent (14.0 percent to 5.8 percent) between 2013 and 2015 with adults age 18-64 experiencing the largest decline.
- In more than half of the legislative districts in Washington, over 15.0 percent of adults 19 to 64 gained coverage under the Medicaid expansion. In October 2016, 601,802 adults were enrolled under the Medicaid expansion.
- With increased health coverage, a smaller percent of adults are delaying care due to cost, 11.1 percent in 2015 down from 15.5 percent in 2013.
- The ACA provides affordable health coverage to low and middle-income residents.
- Seventy percent of Qualified Health Plan (QHP) enrollees receive federal advance premium tax credits. These tax credits also shield residents from premium increases.
- In 2016, on average 69,577 people received cost-sharing reductions totaling over $64 million and on average 115,265 people received tax credits totaling over $300 million (dollars are as of November 2016).
- Washington’s Exchange, Healthplanfinder, provides consumers with a single portal for accessing public and private coverage. 1 in 4 Washington residents uses the Healthplanfinder to search for and enroll in coverage.
- In 2014, an estimated 13,993 jobs were saved or created as a result of the ACA Medicaid expansion in Washington. For 2015, the estimate is 51,196.¹

**For the Health Industry**

- Washington state experienced a stabilization of its individual market.
- The Exchange has increased competition with nine insurers offering 98 QHPs in 2017 (up from 8 insurers and 46 plans in 2014). Ninety-five percent of counties have two or more insurers.
- The average monthly premium for the lowest cost Bronze Plan increased an average of $12 (4%) per month and the lowest cost Silver Plan increased $9 (3%) per month between 2016 and 2017.

Overall in the state, average annual premium increases have dropped since the ACA passed and became law from an average of over 18.0 percent for 2008-10 to approximately 6.5 percent for 2015-17.

Uncompensated care as a percent of total revenue dropped approximately 50 percent between 2013 and 2014.

For the State

- Washington receives $400 million per year in federal subsidies to QHP enrollees.
- The state budget will have benefited nearly $1 billion by June 2017 through refinancing health programs that were previously all or partially funded by the State-General Fund (Basic Health, Medical Care Services, Presumptive SSI, state only behavioral health programs, Medically Needy, etc.); and through premium taxes from managed care organizations serving the expansion adult population.

The Future – What’s at Stake?

The ACA will likely face changes over the next several years under the new federal administration. Although the extent of the potential changes to the ACA and the implications of those changes for the state are unclear, some modifications to or repeal of the law could have significant consequences for the state.

- In the absence of the ACA, the uninsured rate would likely have remained close to its 2013 level – projected at 13.5 percent for 2015. Changes to coverage could undo some of the gains made on the uninsured rate.
- The state stands to lose $3.0 billion in FY18 and $3.2 billion in FY19 including loss of subsidies and loss of funding for the Medicaid expansion population. As mentioned previously the state is currently receiving $400 million per year in federal subsidies for tax credits and cost-sharing reductions.
- The total cost to maintain coverage for those individuals covered through the Medicaid expansion will be $2.8 billion in fiscal year 2018 and $3.0 billion in fiscal year 2019. These totals include federal funding of $2.6 billion in FY18 and $2.8 billion in FY19.
- If the mandate is repealed, the state is at risk of experiencing a “death spiral” in the individual market as it did in the mid-1990s.²