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January 9, 2017

Oppose Defunding of Planned Parenthood and Repeal of the Affordable Care Act and the Medicaid Expansion

Dear Senator:

On behalf of The Leadership Conference on Civil and Human Rights, a coalition charged by its diverse membership of more than 210 national organizations to promote and protect the civil and human rights of all persons in the United States, we urge you to oppose any repeal of the Affordable Care Act (ACA) and the Medicaid expansion. A repeal of these laws without first enacting a comprehensive replacement will potentially deprive 20 million people of access to health care.¹ We also strongly oppose reconciliation instructions to bar Planned Parenthood health centers from being reimbursed through Medicaid.

The ACA and Medicaid are critical sources of health coverage for America's traditionally underserved communities, which are the individuals and communities our organizations represent, including individuals and families living in poverty, people of color, women, immigrants, LGBTQ individuals, individuals with disabilities, seniors, and individuals with limited English proficiency. The ACA has reduced the number of people without insurance to historic lows, including a reduction of 39 percent of the lowest income individuals.² The gains are particularly noteworthy for Latinos, African Americans, and Native Americans. The nation and our communities cannot afford to go back to a time when they did not have access to comprehensive, affordable coverage.

The ACA has reduced health care costs for individuals and employers while also reducing uncompensated care by more than \$7.4 billion.³ Further, the ACA included critical provisions ensuring full and equitable access to essential services without discrimination. The ACA has also been instrumental in covering a wide range of preventive services, ensuring that individuals have access to life-saving cancer screenings and treatment and women have access to birth control without any co-payment, ensuring access by low-income families to this critical health service. It is irresponsible to repeal the ACA, especially without knowing whether a replacement plan would offer comparable coverage, affordability, and services.

¹ U.S. Department of Health and Human Services, New Report Details Impact of the Affordable Care Act (Dec. 13, 2016), available at <https://www.hhs.gov/about/news/2016/12/13/new-report-details-impact-affordable-care-act.html>.

² U.S. Department of Health and Human Services, Affordable Care Act Has Led to Historic, Widespread Increase in Health Insurance Coverage, pp. 2, 4 (Sept. 29, 2016), available at <https://aspe.hhs.gov/sites/default/files/pdf/207946/ACAHistoricIncreaseCoverage.pdf>.

³ U.S. Department of Health and Human Services, New Report Details Impact of the Affordable Care Act (Dec. 13, 2016), available at <https://www.hhs.gov/about/news/2016/12/13/new-report-details-impact-affordable-care-act.html>.

Medicaid coverage, including the Medicaid expansion, is particularly critical for underserved individuals and especially people of color, because they are more likely to be living with certain chronic health conditions, such as diabetes, which require ongoing screening and services. People of color represent 58 percent of non-elderly Medicaid enrollees.⁴ They are more likely than White non-Hispanics to lack insurance coverage and are more likely to live in families with low incomes and fall in the Medicaid gap. As a result, the lack of expansion disproportionately affects African Americans. Women also make up the majority of poor uninsured adults in states that did not expand Medicaid.

The reconciliation instructions blocking all Medicaid patients from receiving care at Planned Parenthood health centers will have a disproportionate effect on poor families and people of color and could further jeopardize women's access to preventive health care. One and a half million Planned Parenthood patients use Medicaid or other publicly funded programs annually to secure basic health services.⁵ In 2014, about 40 percent of Planned Parenthood patients were people of color.⁶ Seventy-five percent of Planned Parenthood patients are at or below 150 percent of the federal poverty level and half of their health centers are located in rural or underserved areas.⁷ The Congressional Budget Office estimates that 390,000 women would lose access and up to 650,000 could face reduced access to preventive health care within a year if Congress were to block all Medicaid patients from seeking care at a Planned Parenthood health center.⁸

We urge you to oppose defunding of Planned Parenthood and any repeal of the Affordable Care Act and the Medicaid expansion, especially since no replacement plan has been offered that would provide as many people coverage that is as comprehensive and affordable as the ACA and Medicaid. If you have any questions, please feel free to contact June Zeitlin, Director of Human Rights Policy at 202-263-2852 or zeitlin@civilrights.org.

Sincerely,



Wade Henderson
President & CEO



Nancy Zirkin
Executive Vice President

⁴ Kaiser Family Foundation, Medicaid Coverage Rates for the Nonelderly by Race/Ethnicity: 2015, available at <http://kff.org/medicaid/state-indicator/rate-by-raceethnicity-3/?currentTimeframe=0>

⁵ Planned Parenthood Action Fund Press Release, "Volunteers Rally Around Planned Parenthood As Congressional Defund Fight Nears" (Jan. 5, 2017), available at <https://www.plannedparenthoodaction.org/pressroom/volunteers-rally-around-planned-parenthood-as-congressional-defund-fight-nears>

⁶ Planned Parenthood, This is Who We Are, (July 11, 2016), available at https://www.plannedparenthood.org/files/6814/6833/9709/20160711_FS_General_d1.pdf

⁷ Planned Parenthood, The Urgent Need for Planned Parenthood Health Centers (Dec. 7, 2016), available at https://www.plannedparenthood.org/files/4314/8183/5009/20161207_Defunding_fs_d01_1.pdf

⁸ Figures extrapolated from Congressional Budget Office, Estimate: H.R. 3134 Defund Planned Parenthood Act of 2015 (Sept. 16, 2015), available at <https://www.cbo.gov/sites/default/files/114th-congress-2015-2016/costestimate/hr3134.pdf>