



Issue	ACA	House Bill	Senate Bill
Individual Mandate	Requirement to buy coverage unless exempted for income, alternative coverage, or other reasons. Those required that don't purchase are subject to a tax penalty of \$695 or 2.5% of household income, whichever is greater.	Reduces the mandate penalty to \$0, but does not repeal the mandate due to reconciliation limitations. Insurers able to charge people 30% more in premiums for a full year if they did not have insurance for 63 days or more in the previous year.	Reduces the mandate penalty to \$0, but does not repeal the mandate due to reconciliation limitations. Currently no alternative mechanism to encourage coverage, but a lock-out period is reportedly being discussed.
Employer Mandate	Requires all businesses with 50 or more full-time employees to provide health insurance, with some exceptions, or pay a penalty.	Reduces the mandate penalty to \$0, but does not repeal the mandate due to reconciliation limitations.	Reduces the mandate penalty to \$0, but does not repeal the mandate due to reconciliation limitations.
Coverage Under Parents	Allows dependent coverage up to age 26.	Allows dependent coverage up to age 26.	Allows dependent coverage up to age 26.
Tax Credits	Available to individuals and families between 138% and 400% of poverty. Adjusted based on age, income and geography. Set based on cost of a "silver plan," which has an actuarial value of approximately 70%.	Maintains ACA credit structure for 2018-2019. Beginning in 2020, age-based credit available to everyone below \$115,000 that does not have an offer of employer-based coverage.	Maintains ACA credit structure for 2018-2019. Beginning in 2020, new credits available to individuals and families below 350% of poverty. Adjusted based on age, income and geography. Set based on cost of a plan with an actuarial value of 58%.



Issue	ACA	House Bill/AHCA	Senate Bill/BPCA
Cost-Sharing Reduction and Stabilization Funding	<p>Authorized but did not appropriate funding to insurers to reduce the amount certain low-income beneficiaries pay for deductibles, copayments, and coinsurance.</p> <p>Established risk-corridor, risk adjustment and reinsurance programs to stabilize markets.</p>	<p>Would repeal cost-sharing subsidies in 2020.</p> <p>Provides \$138 billion over 9 years for states to use to reduce premiums, fund risk-sharing pools, and offer maternity, mental health, and substance abuse services.</p>	<p>Would repeal cost-sharing subsidies in 2020.</p> <p>Provides \$112 billion over 9 years (\$50 billion in short-term reinsurance, \$62 billion in longer-term reinsurance, high-risk pools, payments to providers and cost-sharing subsidies).</p>
Pre-Existing Conditions	<p>Prohibits health insurance plans from refusing to cover individuals due to a pre-existing condition.</p>	<p>Maintains guaranteed issue requirements, but allows insurers in states receiving a waiver to charge individuals more based on pre-existing conditions if they had a lapse in coverage. Provides \$8 billion over 5 years for states to help people impacted by pre-existing conditions.</p>	<p>Maintains ACA prohibition on plans refusing to cover individuals due to a pre-existing condition and community rating requirements.</p>
Age Rating Bands	<p>Requires no more than a 3:1 premium differential based on age.</p>	<p>Starting in 2018, sets the federal standard at 5:1, but permits states to increase or decrease the standard.</p>	<p>Starting in 2019, sets the federal standard at 5:1, but permits states to increase or decrease the standard.</p>



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Essential Health Benefits	Requires coverage of 10 categories of benefits, e.g. physician services, hospital care, Rx drugs, mental health, maternity, and others	Starting in 2020 would allow states achieving a waiver to change the definition of what services are “essential.”	Creates more flexibility through ACA’s 1332 waivers for states to change the definition of what services are “essential.”
Other Insurance Market Rules	Prohibits annual/lifetime limits, sets actuarial value standard, prohibits cost-sharing for preventive services, sets medical loss ratio (MLR) standards, among other things.	Maintains ACA’s annual/lifetime limits, prohibition on cost-sharing for preventive services, MLRs. ACA’s Actuarial value standards repealed starting in 2020.	Maintains prohibition on cost-sharing for preventive services. States can use 1332 waivers to adjust annual/lifetime limits, AV standards. States determine MLR requirements starting in 2019.
Medicaid Expansion	States have the option to expand Medicaid to all non-elderly adults making up to 138% of the federal poverty level, and the federal government would cover 100% of the cost through 2016 down to a minimum of 90% in 2020 and beyond.	For states that expanded as of March 1, 2017, ACA’s enhanced match is maintained until 2020. Enhanced match only maintained after 2020 for “grandfathered” enrollees that do not have a break in eligibility for more than one month.	For states that expanded as of March 1, 2017, ACA’s enhanced match is maintained until 2020 and then phased down to traditional match by 2024.
Medicaid Reform	Maintained traditional federal-state matching program adjusted based on state income levels.	Beginning in 2020, converts Medicaid funding to a per capita allotment for 5 separate groups and based on 2016 spending. Growth is capped by CPI-medical+1 or just CPI-medical depending on the group. Also offers states the option of a block grant.	Beginning in 2020, converts Medicaid funding to a per capita allotment for 5 separate groups and based on 2014-2017 spending. Growth is capped by CPI-medical+1 or just CPI-medical depending on the group until 2024 and CPI-urban from 2025 onward. Also offers states the option of a block grant.



Issue	ACA	House Bill	Senate Bill
Taxes	Increased Medicare payroll tax, and imposed new 3.8% investment tax, health insurance tax, pharmaceutical tax, medical device tax, over the counter (OTC) drug tax, Cadillac tax and others.	<p>Repeals, effective January 1, 2018, taxes on health insurers, medical devices, pharmaceuticals, tanning beds, and OTC drugs.</p> <p>Repeals, effective January 1, 2023, the Medicare payroll tax and, effective January 1, 2017, the 3.8% investment tax.</p> <p>Repeals through 2025 the Cadillac tax on higher-cost health plans.</p>	<p>Repeals, effective January 1, 2017, the tax on health insurers, medical devices, pharmaceuticals, tanning beds, and OTC drugs.</p> <p>Repeals, effective January 1, 2023, the Medicare payroll tax and 3.8% investment tax.</p> <p>Repeals through 2025 the Cadillac tax on higher-cost health plans.</p>
Planned Parenthood	Receives Medicaid funding, but federal funding cannot go towards the cost of abortion services.	Prohibits Medicaid funding for one year.	Prohibits Medicaid funding for one year.
Other Issues		<p>Increases HSA contribution limits and makes other pro-HSA changes.</p> <p>Repeals the Prevention and Public Health Fund.</p>	<p>Increases HSA contribution limits and makes other pro-HSA changes.</p> <p>\$2 billion for substance treatment.</p> <p>Repeals the Prevention and Public Health Fund.</p> <p>Creates new Association Health Plan Option for small businesses.</p>