The American Health Care Act would leave many older Alaskans without health care.

The American Health Care Act (AHCA) would make it harder for older adults in Alaska to afford the health care they need. Under the AHCA:

Older Alaskans may lose access to nursing home care, home health care, and other services that help them maintain their independence.

- Proposed cuts to Medicaid would slash federal funding by $880 billion, forcing states to cut important services for older adults, such as long term services and supports.
- Medicaid is the primary payer for 79% of nursing facilities in Alaska.
- Approximately 11,296 Alaskans received long-term services and supports through Medicaid.
- About 7.5% of Alaska's Medicaid beneficiaries are older adults; approximately 15,000 people ages 50-64 and 10,000 seniors in Alaska benefit from Medicaid.
- The proposed Medicaid cuts will grow over time, making it hard for Alaska to meet the needs of its growing aging population. By 2025, the number of Alaskans over age 65 is expected to grow by 53.5%. The number of Alaskans over 85, a population that relies on long term services and supports, is expected to grow by 66.5%.

Older adults may not be able to afford to pay their health insurance premiums.

- As of 2016, 7,000 Alaskans ages 50-64 received tax credits to purchase coverage through the Marketplace. Nationwide, one in four people (26%) enrolled in Marketplace plans are ages 55-64.
- For a 60-year-old living in Anchorage, Alaska with an income of $30,000/year, tax credits for paying insurance premiums could drop by 84% in 2020. The ACA tax credit would be $25,240, but the AHCA tax credit would only be $4,000.
- By changing the 3:1 limit on age rating to 5:1 (or higher if state law permits), premiums for older adults would increase relative to younger adults. This "age tax" by itself would raise premiums in Alaska by $5,410 annually for a 60-year-old.
- The proposed bill also rolls back expanded Medicaid coverage, which currently provides affordable health care to 14,400 Alaskans, including many 50- to 64-year-olds.

There would be fewer resources to fund Medicare.

- AHCA includes a huge tax cut, totaling $117 billion, for wealthy individuals that will harm Medicare's financing in the short and long term, putting people with Medicare at risk for benefit cuts.
- AHCA opens the door to premium support (or vouchers) which would likely put the 19% of Alaskans ages 50-64 at risk for paying higher out-of-pocket costs once they enroll in Medicare.
- Older Alaskans can't afford to pay more for health care. The median personal income among Alaskans ages 65 and older in 2015 was $31,700.

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The American Health Care Act would leave many older Arizonans without health care.

The American Health Care Act (AHCA) would make it harder for older adults in Arizona to afford the health care they need. Under the AHCA:

Older Arizonans may lose access to nursing home care, home health care, and other services that help them maintain their independence.

- Proposed cuts to Medicaid would slash federal funding by $880 billion, forcing states to cut important services for older adults, such as long term services and supports.
- Medicaid is the primary payer for 59% of nursing facilities in Arizona.
- Approximately 58,495 Arizonans received long-term services and supports through Medicaid.
- About 7.2% of Arizona's Medicaid beneficiaries are older adults; approximately 198,000 people ages 50-64 and 121,000 seniors in Arizona benefit from Medicaid.
- The proposed Medicaid cuts will grow over time, making it hard for Arizona to meet the needs of its growing aging population. By 2025, the number of Arizonans over age 65 is expected to grow by 64.2%. The number of Arizonans over 85, a population that relies on long term services and supports, is expected to grow by 37.7%.

Older adults may not be able to afford to pay their health insurance premiums.

- As of 2016, 44,000 Arizonans ages 50-64 received tax credits to purchase coverage through the Marketplace. Nationwide, one in four people (26%) enrolled in Marketplace plans are ages 55-64.
- For a 60-year-old living in Tucson, Arizona with an income of $30,000/year, tax credits for paying insurance premiums could drop by 50% in 2020. The ACA tax credit would be $8,010, but the AHCA tax credit would only be $4,000.
- By changing the 3:1 limit on age rating to 5:1 (or higher if state law permits), premiums for older adults would increase relative to younger adults. This "age tax" by itself would raise premiums in Arizona by $3,004 annually for a 60-year-old.
- The proposed bill also rolls back expanded Medicaid coverage, which currently provides affordable health care to 418,400 Arizonans, including many 50- to 64-year-olds.
- Arizona is one of twelve states that improved its Medicaid program to help people dually eligible afford their Medicare premiums and cost sharing, benefiting 204,000 in Arizona who benefit from Medicare Savings Program. The proposed Medicaid cuts put this help at risk.

There would be fewer resources to fund Medicare.

- AHCA includes a huge tax cut, totaling $117 billion, for wealthy individuals that will harm Medicare's financing in the short and long term, putting people with Medicare at risk for benefit cuts.
- AHCA opens the door to premium support (or vouchers) which would likely put the 18% of Arizonans ages 50-64 at risk for paying higher out-of-pocket costs once they enroll in Medicare.

The American Health Care Act would leave many older Californians without health care.

The American Health Care Act (AHCA) would make it harder for older adults in California to afford the health care they need. Under the AHCA:

Older Californians may lose access to nursing home care, home health care, and other services that help them maintain their independence.

- Proposed cuts to Medicaid would slash federal funding by $880 billion, forcing states to cut important services for older adults, such as long term services and supports.
- Medicaid is the primary payer for 62% of nursing facilities in California.
- Approximately 778,118 Californians received long-term services and supports through Medicaid.
- About 9.7% of California's Medicaid beneficiaries are older adults; approximately 1,541,000 people ages 50-64 and 1,138,000 seniors in California benefit from Medicaid.
- The proposed Medicaid cuts will grow over time, making it hard for California to meet the needs of its growing aging population. By 2025, the number of Californians over age 65 is expected to grow by 39.3%. The number of Californians over 85, a population that relies on long term services and supports, is expected to grow by 24.2%.

Older adults may not be able to afford to pay their health insurance premiums.

- As of 2016, 399,000 Californians ages 50-64 received tax credits to purchase coverage through the Marketplace. Nationwide, one in four people (26%) enrolled in Marketplace plans are ages 55-64.
- For a 60-year-old living in Sacramento, California with an income of $30,000/year, tax credits for paying insurance premiums could drop by 61% in 2020. The ACA tax credit would be $10,320, but the AHCA tax credit would only be $4,000.
- By changing the 3:1 limit on age rating to 5:1 (or higher if state law permits), premiums for older adults would increase relative to younger adults. This "age tax" by itself would raise premiums in California by $1,936 annually for a 60-year-old.
- The proposed bill also rolls back expanded Medicaid coverage, which currently provides affordable health care to 3,541,700 Californians, including many 50- to 64-year-olds.

There would be fewer resources to fund Medicare.

- AHCA includes a huge tax cut, totaling $117 billion, for wealthy individuals that will harm Medicare's financing in the short and long term, putting people with Medicare at risk for benefit cuts.
- AHCA opens the door to premium support (or vouchers) which would likely put the 19% of Californians ages 50-64 at risk for paying higher out-of-pocket costs once they enroll in Medicare.
- Older Californians can't afford to pay more for health care. The median personal income among Californians ages 65 and older in 2015 was $20,580.

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The American Health Care Act would leave many older Floridians without health care.

The American Health Care Act (AHCA) would make it harder for older adults in Florida to afford the health care they need. Under the AHCA:

Older Floridians may lose access to nursing home care, home health care, and other services that help them maintain their independence.

- Proposed cuts to Medicaid would slash federal funding by $880 billion, forcing states to cut important services for older adults, such as long term services and supports.
- Medicaid is the primary payer for 57% of nursing facilities in Florida.
- Approximately 186,607 Floridians received long-term services and supports through Medicaid.
- About 13% of Florida's Medicaid beneficiaries are older adults; approximately 417,000 people ages 50-64 and 563,000 seniors in Florida benefit from Medicaid.
- The proposed Medicaid cuts will grow over time, making it hard for Florida to meet the needs of its growing aging population. By 2025, the number of Floridians over age 65 is expected to grow by 54.5%. The number of Floridians over 85, a population that relies on long term services and supports, is expected to grow by 21.6%.

Older adults may not be able to afford to pay their health insurance premiums.

- As of 2016, 454,000 Floridians ages 50-64 received tax credits to purchase coverage through the Marketplace. Nationwide, one in four people (26%) enrolled in Marketplace plans are ages 55-64.
- For a 60-year-old living in Gainesville, Florida with an income of $30,000/year, tax credits for paying insurance premiums could drop by 64% in 2020. The ACA tax credit would be $11,140, but the AHCA tax credit would only be $4,000.
- By changing the 3:1 limit on age rating to 5:1 (or higher if state law permits), premiums for older adults would increase relative to younger adults. This "age tax" by itself would raise premiums in Florida by $1,922 annually for a 60-year-old.

There would be fewer resources to fund Medicare.

- AHCA includes a huge tax cut, totaling $117 billion, for wealthy individuals that will harm Medicare's financing in the short and long term, putting people with Medicare at risk for benefit cuts.
- AHCA opens the door to premium support (or vouchers) which would likely put the 20% of Floridians ages 50-64 at risk for paying higher out-of-pocket costs once they enroll in Medicare.
- Older Floridians can't afford to pay more for health care. The median personal income among Floridians ages 65 and older in 2015 was $20,200.

The American Health Care Act would leave many older Mainers without health care.

The American Health Care Act (AHCA) would make it harder for older adults in Maine to afford the health care they need. Under the AHCA:

Older Mainers may lose access to nursing home care, home health care, and other services that help them maintain their independence.

- Proposed cuts to Medicaid would slash federal funding by $880 billion, forcing states to cut important services for older adults, such as long term services and supports.
- Medicaid is the primary payer for 64% of nursing facilities in Maine.
- Approximately 18,460 Mainers received long-term services and supports through Medicaid.
- Almost 17% of Maine's Medicaid beneficiaries are older adults; approximately 29,000 people ages 50-64 and 63,000 seniors in Maine benefit from Medicaid.
- The proposed Medicaid cuts will grow over time, making it hard for Maine to meet the needs of its growing aging population. By 2025, the number of Mainers over age 65 is expected to grow by 35.5%. The number of Mainers over 85, a population that relies on long term services and supports, is expected to grow by 17.2%.

Older adults may not be able to afford to pay their health insurance premiums.

- As of 2016, 28,000 Mainers ages 50-64 received tax credits to purchase coverage through the Marketplace. Nationwide, one in four people (26%) enrolled in Marketplace plans are ages 55-64.
- For a 60-year-old living in Portland, Maine with an income of $30,000/year, tax credits for paying insurance premiums could drop by 48% in 2020. The ACA tax credit would be $7,760, but the AHCA tax credit would only be $4,000.
- By changing the 3:1 limit on age rating to 5:1 (or higher if state law permits), premiums for older adults would increase relative to younger adults. This "age tax" by itself would raise premiums in Maine by $2,256 annually for a 60-year-old.
- Maine is one of twelve states that improved its Medicaid program to help people dually eligible afford their Medicare premiums and cost-sharing, benefiting more than 88,000 Mainers. The proposed Medicaid cuts put this help at risk.

There would be fewer resources to fund Medicare.

- AHCA includes a huge tax cut, totaling $117 billion, for wealthy individuals that will harm Medicare's financing in the short and long term, putting people with Medicare at risk for benefit cuts.
- AHCA opens the door to premium support (or vouchers) which would likely put the 24% of Mainers ages 50-64 at risk for paying higher out-of-pocket costs once they enroll in Medicare.
- Older Mainers can't afford to pay more for health care. The median personal income among Mainers ages 65 and older in 2015 was $21,000.

The American Health Care Act would leave many older Nevadans without health care.

The American Health Care Act (AHCA) would make it harder for older adults in Nevada to afford the health care they need. Under the AHCA:

Older Nevadans may lose access to nursing home care, home health care, and other services that help them maintain their independence.

- Proposed cuts to Medicaid would slash federal funding by $880 billion, forcing states to cut important services for older adults, such as long term services and supports.
- Medicaid is the primary payer for 57% of nursing facilities in Nevada.
- Approximately 23,420 Nevadans received long-term services and supports through Medicaid.
- About 32.8% of Nevada's Medicaid beneficiaries are older adults; approximately 71,000 people ages 50-64 and 35,000 seniors in Nevada benefit from Medicaid.
- The proposed Medicaid cuts will grow over time, making it hard for Nevada to meet the needs of its growing aging population. By 2025, the number of Nevadans over age 65 is expected to grow by 56.4%. The number of Nevadans over 85, a population that relies on long term services and supports, is expected to grow by 49.9%.

Older adults may not be able to afford to pay their health insurance premiums.

- As of 2016, 21,000 Nevadans ages 50-64 received tax credits to purchase coverage through the Marketplace. Nationwide, one in four people (26%) enrolled in Marketplace plans are ages 55-64.
- For a 60-year-old living in Reno, Nevada with an income of $30,000/year, tax credits for paying insurance premiums could drop by 47% in 2020. The ACA tax credit would be $7,510, but the AHCA tax credit would only be $4,000.
- By changing the 3:1 limit on age rating to 5:1 (or higher if state law permits), premiums for older adults would increase relative to younger adults. This "age tax" by itself would raise premiums in Nevada by $1,772 annually for a 60-year-old.
- The proposed bill also rolls back expanded Medicaid coverage, which currently provides affordable health care to 203,900 Nevadans, including many 50- to 64-year-olds.

There would be fewer resources to fund Medicare.

- AHCA includes a huge tax cut, totaling $117 billion, for wealthy individuals that will harm Medicare's financing in the short and long term, putting people with Medicare at risk for benefit cuts.
- AHCA opens the door to premium support (or vouchers) which would likely put the 19% of Nevadans ages 50-64 at risk for paying higher out-of-pocket costs once they enroll in Medicare.
- Older Nevadans can't afford to pay more for health care. The median personal income among Nevadans ages 65 and older in 2015 was $21,600.

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The American Health Care Act would leave many older New Yorkers without health care.

The American Health Care Act (AHCA) would make it harder for older adults in New York to afford the health care they need. Under the AHCA:

Older New Yorkers may lose access to nursing home care, home health care, and other services that help them maintain their independence.

- Proposed cuts to Medicaid would slash federal funding by $880 billion, forcing states to cut important services for older adults, such as long term services and supports.
- Medicaid is the primary payer for 67% of nursing facilities in New York.
- Approximately 423,387 New Yorkers received long-term services and supports through Medicaid.
- About 11.4% of New York's Medicaid beneficiaries are older adults; approximately 712,000 people ages 50-64 and 687,000 seniors in New York benefit from Medicaid.
- The proposed Medicaid cuts will grow over time, making it hard for New York to meet the needs of its growing aging population. By 2025, the number of New Yorkers over age 65 is expected to grow by 22.5%. The number of New Yorkers over 85, a population that relies on long term services and supports, is expected to grow by 12.4%.

Older adults may not be able to afford to pay their health insurance premiums.

- As of 2016, 126,000 New Yorkers age 50-64 received tax credits to purchase coverage through the Marketplace. Nationwide, one in four people (26%) enrolled in Marketplace plans are ages 55-64.
- For a 60-year-old living in Ithaca, New York with an income of $30,000/year, tax credits for paying insurance premiums could drop by 18% in 2020. The ACA tax credit would be $4,850, but the AHCA tax credit would only be $4,000.
- By changing the 3:1 limit on age rating to 5:1 (or higher if state law permits), premiums for older adults would increase relative to younger adults. This "age tax" by itself would raise premiums in New York by $2,661 annually for a 60-year-old.
- The proposed bill also rolls back expanded Medicaid coverage, which currently provides affordable health care to 2,161,100 New Yorkers, including many 50- to 64-year-olds.
- New York is one of twelve states that improved its Medicaid program to help people dually eligible afford their Medicare premiums and cost sharing, benefiting 850,000 New Yorkers. The proposed Medicaid cuts put this help at risk.

There would be fewer resources to fund Medicare.

- AHCA includes a huge tax cut, totaling $117 billion, for wealthy individuals that will harm Medicare's financing in the short and long term, putting people with Medicare at risk for benefit cuts.
- AHCA opens the door to premium support (or vouchers) which would likely put the 20% of New Yorkers ages 50-64 at risk for paying higher out-of-pocket costs once they enroll in Medicare.
- Older New Yorkers can't afford to pay more for health care. The median personal income among New Yorkers ages 65 and older in 2015 was $21,500.

The American Health Care Act would leave many older Ohioans without health care.

The American Health Care Act (AHCA) would make it harder for older adults in Ohio to afford the health care they need. Under the AHCA:

Older Ohioans may lose access to nursing home care, home health care, and other services that help them maintain their independence.

- Proposed cuts to Medicaid would slash federal funding by $880 billion, forcing states to cut important services for older adults, such as long term services and supports.
- Medicaid is the primary payer for 59% of nursing facilities in Ohio.
- Approximately 196,398 Ohioans received long-term services and supports through Medicaid.
- About 14.2% of Ohio's Medicaid beneficiaries are older adults; approximately 322,000 people ages 50-64 and 203,000 seniors in Ohio benefit from Medicaid.
- The proposed Medicaid cuts will grow over time, making it hard for Ohio to meet the needs of its growing aging population. By 2025, the number of Ohioans over age 65 is expected to grow by 24.9%. The number of Ohioans over 85, a population that relies on long term services and supports, is expected to grow by 7.1%.

Older adults may not be able to afford to pay their health insurance premiums.

- As of 2016, 64,000 Ohioans ages 50-64 received tax credits to purchase coverage through the Marketplace. Nationwide, one in four people (26%) enrolled in Marketplace plans are ages 55-64.
- For a 60-year-old living in Akron, Ohio with an income of $30,000/year, tax credits for paying insurance premiums could drop by 21% in 2020. The ACA tax credit would be $5,050, but the AHCA tax credit would only be $4,000.
- By changing the 3:1 limit on age rating to 5:1 (or higher if state law permits), premiums for older adults would increase relative to younger adults. This "age tax" by itself would raise premiums in Ohio by $1,609 annually for a 60-year-old.
- The proposed bill also rolls back expanded Medicaid coverage, which currently provides affordable health care to 682,900 Ohioans, including many 50- to 64-year-olds.

There would be fewer resources to fund Medicare.

- AHCA includes a huge tax cut, totaling $117 billion, for wealthy individuals that will harm Medicare's financing in the short and long term, putting people with Medicare at risk for benefit cuts.
- AHCA opens the door to premium support (or vouchers) which would likely put the 21% of Ohioans ages 50-64 at risk for paying higher out-of-pocket costs once they enroll in Medicare.
- Older Ohioans can't afford to pay more for health care. The median personal income among Ohioans ages 65 and older in 2015 was $22,100.

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The American Health Care Act would leave many older Pennsylvanians without health care.

The American Health Care Act (AHCA) would make it harder for older adults in Pennsylvania to afford the health care they need. Under the AHCA:

Older Pennsylvanians may lose access to nursing home care, home health care, and other services that help them maintain their independence.

- Proposed cuts to Medicaid would slash federal funding by $880 billion, forcing states to cut important services for older adults, such as long term services and supports.
- Medicaid is the primary payer for 63% of nursing facilities in Pennsylvania.
- Approximately 224,794 Pennsylvanians received long-term services and supports through Medicaid.
- About 10.2% of Pennsylvania's Medicaid beneficiaries are older adults; approximately 320,000 people ages 50-64 and 261,000 seniors in Pennsylvania benefit from Medicaid.
- The proposed Medicaid cuts will grow over time, making it hard for Pennsylvania to meet the needs of its growing aging population. By 2025, the number of Pennsylvanians over age 65 is expected to grow by 25.1%. The number of Pennsylvanians over 85, a population that relies on long term services and supports, is expected to grow by 1.8%.

Older adults may not be able to afford to pay their health insurance premiums.

- As of 2016, 97,000 Pennsylvanians ages 50-64 received tax credits to purchase coverage through the Marketplace. Nationwide, one in four people (26%) enrolled in Marketplace plans are ages 55-64.
- For a 60-year-old living in Allentown, Pennsylvania with an income of $30,000/year, tax credits for paying insurance premiums could drop by 69% in 2020. The ACA tax credit would be $12,750, but the AHCA tax credit would only be $4,000.
- By changing the 3:1 limit on age rating to 5:1 (or higher if state law permits), premiums for older adults would increase relative to younger adults. This "age tax" by itself would raise premiums in Pennsylvania by $2,328 annually for a 60-year-old.
- The proposed bill also rolls back expanded Medicaid coverage, which currently provides affordable health care to 702,800 Pennsylvanians, including many 50- to 64-year-olds.

There would be fewer resources to fund Medicare.

- AHCA includes a huge tax cut, totaling $117 billion, for wealthy individuals that will harm Medicare's financing in the short and long term, putting people with Medicare at risk for benefit cuts.
- AHCA opens the door to premium support (or vouchers) which would likely put the 21% of Pennsylvanians ages 50-64 at risk for paying higher out-of-pocket costs once they enroll in Medicare.
- Older Pennsylvanians can't afford to pay more for health care. The median personal income among Pennsylvanians ages 65 and older in 2015 was $21,300.

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The American Health Care Act would leave many older West Virginians without health care.

The American Health Care Act (AHCA) would make it harder for older adults in West Virginia to afford the health care they need. Under the AHCA:

Older West Virginians may lose access to nursing home care, home health care, and other services that help them maintain their independence.

- Proposed cuts to Medicaid would slash federal funding by $880 billion, forcing states to cut important services for older adults, such as long term services and supports.
- Medicaid is the primary payer for 76% of nursing facilities in West Virginia.
- Approximately 37,006 West Virginians received long-term services and supports through Medicaid.
- About 39.3% of West Virginia's Medicaid beneficiaries are older adults; approximately 79,000 people ages 50-64 and 44,000 seniors in West Virginia benefit from Medicaid.
- The proposed Medicaid cuts will grow over time, making it hard for West Virginia to meet the needs of its growing aging population. By 2025, the number of West Virginians over age 65 is expected to grow by 23.9%. The number of West Virginians over 85, a population that relies on long term services and supports, is expected to grow by 8.3%.

Older adults may not be able to afford to pay their health insurance premiums.

- As of 2016, 13,000 West Virginians ages 50-64 received tax credits to purchase coverage through the Marketplace. Nationwide, one in four people (26%) enrolled in Marketplace plans are ages 55-64.
- For a 60-year-old living in Charleston, West Virginia with an income of $30,000/year, tax credits for paying insurance premiums could drop by 70% in 2020. The ACA tax credit would be $13,560, but the AHCA tax credit would only be $4,000.
- By changing the 3:1 limit on age rating to 5:1 (or higher if state law permits), premiums for older adults would increase relative to younger adults. This "age tax" by itself would raise premiums in West Virginia by $2,748 annually for a 60-year-old.
- The proposed bill also rolls back expanded Medicaid coverage, which currently provides affordable health care to 180,500 West Virginians, including many 50- to 64-year-olds.

There would be fewer resources to fund Medicare.

- AHCA includes a huge tax cut, totaling $117 billion, for wealthy individuals that will harm Medicare's financing in the short and long term, putting people with Medicare at risk for benefit cuts.
- AHCA opens the door to premium support (or vouchers) which would likely put the 22% of West Virginians ages 50-64 at risk for paying higher out-of-pocket costs once they enroll in Medicare.
- Older West Virginians can't afford to pay more for health care. The median personal income among West Virginians ages 65 and older in 2015 was $19,800.

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