The Affordable Care Act & Medicaid in Philadelphia

This is what the ACA does for Philadelphia, and what the city will lose if Congress repeals it:

- **220,000** adults with new coverage from the ACA—that’s about **1 in 6** Philadelphia adults
  - **160,000** through Medicaid and **60,000** through the Marketplace—these are parents and single individuals, most of whom are employed, who do not have access to affordable coverage through their employer

- **Almost 25% (nearly 40,000)** of new Medicaid enrollees are using behavioral health services, including critical substance use disorder services

- **1.1 million** Philadelphians with private coverage who have gained these protections:
  - No out-of-pocket costs for all preventive care
  - Ban on pre-existing condition exclusions
  - No annual or lifetime limits on coverage
  - No increased premiums for gender and limits on premium increases based on age
  - Mental health coverage provided equal to physical health
  - Children permitted to remain covered by their parents' policies until age 26

- **20,000** new jobs in the education and healthcare sector in the Philadelphia region since the ACA

This is what the Medicaid Program does for Philadelphia, and what the city will lose if Congress limits Medicaid funding:

- **650,000** of Philadelphia’s most vulnerable residents who receive the health care they need from Medicaid—that includes **270,000** children—that’s about 3/4ths of Philadelphia’s children.

Sources of bolded numbers, by bullet:
- Pennsylvania Department of Human Services (PA DHS) Eligibility Reports 12/2016 and US Census Data 7/2016 (population) and 7/2015 (percent over age 18)
- PA DHS Eligibility Report 12/2016; Centers for Medicare and Medicaid Data as of 2/2016
- City of Philadelphia Community Behavioral Health (CBH) Data
- Pennsylvania Health Funders Collaborative (PHFC) Report 2/2017
- PA DHS Eligibility Reports 12/2016 and US Census Data 7/2016 (population) and 7/2015 (percent over age 18)