



ALASKA FACT SHEET

AAFP on Health Reform

The AAFP believes that policies should be adopted to ensure continued progress towards health care for all supported by a payment system that rewards value over volume of service. The health system should promote prevention and wellness, protect patients from financial barriers to needed services and build a primary care physician workforce that can meet the growing demand for care.

Alaska Family Medicine

- There are 438 family physicians in Alaska.
- Alaska has 1 family medicine residency program.
- Alaska has 29 medically underserved areas/populations.
- 6.4% of the residents in Alaska live in a health professional shortage area.

Medicaid in Alaska

- In 2015, 18 percent of people in Alaska were covered by Medicaid/CHIP.
- Medicaid/CHIP enrollment increased by 49,600 between 2013 and 2016.
- Alaska's uninsured rate decreased from 15% in 2013 to 13% in 2015.
- In Alaska, 27 percent of Medicaid spending is for Medicare beneficiaries.¹

Impact of the American Health Care Act

- 62,500 people in the state of Alaska would lose their health coverage.²
- In Alaska, 107,000 non-elderly adults have a declinable preexisting condition.³
- In Alaska, there would be a \$2,400 increase in the annual premium in 2018.⁴
- Total consumer cost-sharing in Alaska:
 - Low income individuals (<250% FPL) would have their net health insurance costs increase by \$18,003 in Alaska by 2020. For older individuals, ages 55-64, the net cost increase would be \$28,761.⁵
- The AHCA would raise employment and economic activity at first (in 2018, 2,200 jobs would be gained) but by 2026, 2,600 jobs – mostly in health – would be lost.⁶
- The AHCA would limit access to substance abuse treatment by cutting Medicaid. In Alaska, 122 people died of overdose deaths in 2015.⁷

¹ *Medicaid State Fact Sheets*. (2017, January 26). Retrieved from <http://kff.org/interactive/medicaid-state-fact-sheets/>

² Gee, Emily. (2017, May 25). *CBO-Derived Coverage Losses by State and Congressional District*. Retrieved from <https://www.americanprogress.org/issues/healthcare/news/2017/05/25/433017/cbo-derived-coverage-losses-state-congressional-district/>

³ Claxton, Gary, Cynthia Cox, Anthony Damico, Larry Levitt, and Karen Pollitz. (2016, December 12). *Pre-existing Conditions and Medical Underwriting in the Individual Insurance Market Prior to the ACA*. Retrieved from <http://kff.org/health-reform/issue-brief/pre-existing-conditions-and-medical-underwriting-in-the-individual-insurance-market-prior-to-the-aca/>

⁴ Gee, Emily and Thomas Huelskoetter. (2017, June 15). *State-by-State Estimates of the AHCA's 2018 Rate Hikes and Age Tax*. Retrieved from <https://www.americanprogress.org/issues/healthcare/news/2017/06/15/434320/state-state-estimates-ahcas-2018-rate-hikes-age-tax/>

⁵ Cutler, David, Emily Gee, and Topher Spiro. (2017, March 16). *The Impact of the House ACA Repeal Bill on Enrollees' Costs*. Retrieved from <https://www.americanprogress.org/issues/healthcare/reports/2017/03/16/428418/impact-house-aca-repeal-bill-enrollees-costs/>

⁶ *American Health Care Act: Economic and Employment Consequences for States*. Retrieved from

<http://www.commonwealthfund.org/publications/issue-briefs/2017/jun/ahca-economic-and-employment-consequences>

⁷ *Drug Overdose Death Data*. (2016, December 16). Retrieved from <https://www.cdc.gov/drugoverdose/data/statedeaths.html>

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