



ASSOCIATED PRESS/MIKE HUMPHREY

Moving the Needle

The Impact of the Affordable Care Act on LGBT Communities

By Kellan E. Baker, Laura E. Durso, and Andrew Cray November 2014

Introduction and summary

Neil, an African American gay man living in the South, lost his job—and his health coverage—in 2010. That same year, he was diagnosed with HIV. He struggled for years without the medication he needs, which costs \$3,000 a month and is not covered by public programs available in his home state.

Under the Affordable Care Act, or ACA, however, financial assistance is available to help make coverage more affordable, and plans are not allowed to discriminate against people living with HIV or people who are lesbian, gay, bisexual, or transgender, or LGBT. When the health insurance marketplaces that were established under the law opened in October 2013, Neil found a plan he can afford that covers the medications he needs. “The Affordable Care Act,” he says, “is something that is helping me, so that I can live.”¹

Neil is not alone. The Affordable Care Act makes numerous important changes to the U.S. health system, such as offering millions of people—including millions of LGBT people and their families—an unprecedented opportunity to access affordable, high-quality health insurance coverage, often for the first time in their lives.

In order to better understand the degree to which the Affordable Care Act affects LGBT communities—particularly those who are potentially eligible either for Medicaid coverage or for financial assistance to purchase a plan through a health insurance marketplace—the Center for American Progress conducted research in 2013 that focused on the experiences of LGBT people with incomes less than 400 percent of the federal poverty level, or FPL. Among other findings, this research shows that one in three LGBT people with incomes less than 400 percent of the FPL were uninsured in 2013.²

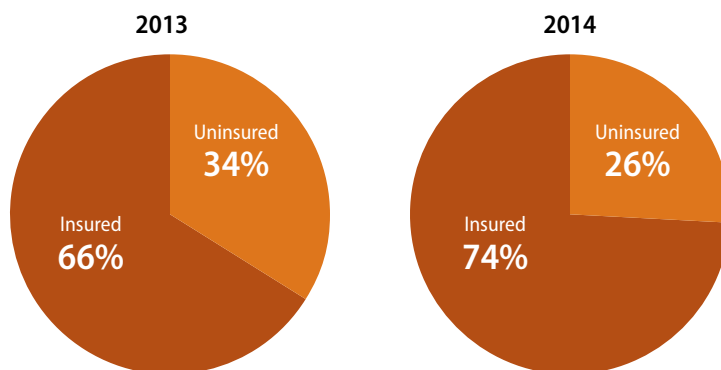
The research survey was updated and refielded in summer 2014 to assess the law’s success in reaching LGBT people who most need help to get coverage. The findings were astounding: By 2014, uninsurance among LGBT people with incomes less than 400 percent of the FPL had dropped from the 2013 rate of one in three—

34 percent—to one in four—26 percent—uninsured. In short, over the single year that encompassed the first open enrollment period under the Affordable Care Act, the rate of uninsurance among LGBT people fell 24 percent.

FIGURE 1

Moving the needle

Change in insurance coverage among LGBT adults with incomes under 400 percent of the federal poverty level, 2013–2014



Source: Research conducted by the Center for American Progress in 2013 and 2014.

This report looks in detail at the health insurance experiences of LGBT people with incomes less than 400 percent of the FPL in 2014, the first year after the full implementation of the ACA's coverage expansion began with the start of open enrollment through the health insurance marketplaces in October 2013. Overall, the survey findings show that LGBT people in this income range have had enormous success in gaining access to new coverage options under the ACA. They also indicate, however, lingering issues that must be priorities for policy and advocacy activities in the 2014 open enrollment period and beyond, including:

- Enforcing LGBT nondiscrimination in access to insurance coverage
- Ensuring quality and comprehensiveness of coverage, especially for transgender people
- Raising awareness of the health reform law in LGBT communities
- Requiring LGBT inclusion in consumer outreach and education activities
- Providing regular LGBT cultural competency training for navigators and other enrollment assisters
- Collecting voluntary LGBT data collection in enrollment
- Strengthening the link between coverage and culturally appropriate care for LGBT people

The Center for American Progress is a nonpartisan research and educational institute dedicated to promoting a strong, just, and free America that ensures opportunity for all. We believe that Americans are bound together by a common commitment to these values and we aspire to ensure that our national policies reflect these values. We work to find progressive and pragmatic solutions to significant domestic and international problems and develop policy proposals that foster a government that is “of the people, by the people, and for the people.”

