Young Kim sides with big insurance and pharmaceutical companies over access to affordable health care for people. She supports Congressional Republicans’ health care repeal efforts, which could take health insurance away from 23 million people, cut funding for Medicaid by $834 billion, gut protections for pre-existing conditions, and raise premiums for people over 50 years of age, even during the Coronavirus pandemic.

**Kim Said Obamacare “Has Given Us Nothing But Broken Promises” And Supported Repealing It.** At A Chamber of Commerce forum on March 29, 2018 Kim said [1:09:55] “The intent of Obamacare was to ensure that there is access for all Americans to be insured. But what it did at the end of the day is that it has given us nothing but broken promises. While it may have given a lot Americans access to health care, it has given less than acceptable quality health care. The premiums have gone up and there is a penalty clause if you don’t have the health care. This is an inability to give the original intent of the promise. […] [1:11:05] But I will not ask for a complete repeal unless there is a solution that can be sensible and ensure all Americans by providing good quality care with not, premiums should not be too much for this. […] [1:11:28] Until I see a good replacement, complete repeal is not the way to do it.” [Chamber of Commerce Forum, YouTube, 4/10/18]

**House Republicans Voted More Than 60 Times To Repeal Obamacare.** “In the past few years, the House has voted more than 60 times to repeal or alter Obamacare, but Republicans had no hope a repeal would become law as long as Obama was president and could veto their bills.” [Reuters, 1/13/17]

**Repealing The ACA Would Increase The Cost Of Prescription Drugs By $1,000 Per Year For 5 Million Seniors While Giving Pharmaceutical Companies An Additional $2.8 Billion.** “Striking down the ACA would also transfer billions of dollars from seniors to pharmaceutical companies. Eliminating the ACA’s branded drug fee would cut taxes for pharmaceutical companies by $2.8 billion each year. At the same time, at least 5 million seniors would pay at least $1,000 more per year, on average, for prescription drugs because eliminating the ACA would reopen the Medicare ‘donut hole’: a range of beneficiaries’ drug spending where the Medicare prescription drug benefit initially provided no coverage, requiring beneficiaries to pay 100 percent of the costs.” [CBPP, 11/4/19]

**2019: The ACA Forced Insurance Companies To Pay Back Consumers $743 Million.** “Health insurers are expected to pay out a record $743 million to consumers this month under an Affordable Care Act rule that requires refunds if the companies don’t spend a big enough share of premium dollars on health care. The sum, which will go to about 2.7 million consumers who bought individual health policies from insurers, will be more than four times the amount paid out last year. The payout also dwarfs the next-highest total, $399 million in 2012, the first year of the refunds, according to a new analysis from the Kaiser Family Foundation, which calculated the total rebate payments by reviewing federal filings.” [Wall Street Journal, 9/10/19]

**Repealing The Affordable Care Act Would Eliminate Protections From Insurance Company Payout Caps That Resulted In Individuals Facing Enormous Out-Of-Pocket Costs Once They Reached Their Insurance Cap.** “The 156 million Americans who get coverage through an employer, as well as the roughly 15 million enrolled in Obamacare and other plans in the individual insurance market, are protected from caps that insurers and employers used to limit how much they had to pay out in coverage each year or over a lifetime. Before the A.C.A., people with conditions like cancer or hemophilia that were very expensive to treat often faced enormous out-of-pocket costs once their medical bills reached these caps. While not all health coverage was capped, most companies had some sort of limit in place in 2009. A 2017 Brookings analysis estimated that 109 million people would face lifetime limits on their coverage without the health law, with some companies saying they would cover no more than $1 million in medical bills per employee. The vast majority of people never hit those limits, but some who did were forced into bankruptcy or went without treatment.” [New York Times, 7/9/19]

**Repealing The Affordable Care Act Was Expected To Strip Health Care From 23 Million Americans.** “Tomorrow, the Trump administration and 18 Republican governors and attorneys general will file their opening briefs with the Supreme Court in California v. Texas—the health care repeal lawsuit. The lawsuit, criticized across the political spectrum as a ‘badly flawed’ case, threatens to upend the Affordable Care Act (ACA) and strip 23.3 million Americans of their health coverage, according to new CAP analysis—about 3 million (15 percent) more than was forecast before the coronavirus pandemic.” [Center for American Progress, 6/24/20]
Repealing The Affordable Care Act’s Medicaid Expansion Was Expected To Reduce Medicaid Spending By $834 Billion. “The American Health Care Act (AHCA), which the House passed on May 4, would radically restructure Medicaid’s federal financing and effectively end the Affordable Care Act’s (ACA) Medicaid expansion, reducing enrollment by 14 million people by 2026 and cutting federal spending by $834 billion over ten years. The bill’s other Medicaid changes would cut another $19 billion over ten years. All told, the AHCA would have a devastating impact on health care for over 70 million people who rely on Medicaid, including over 30 million children and millions of seniors, people with disabilities, pregnant women, and low-income adults.” [CBPP, 5/25/17]

The Affordable Care Act Prevented Insurers From Denying Coverage Or Charging More If An Individual Had A Preexisting Condition. “In the old days, insurance companies had ways to avoid selling policies to people who were likely to cost more than insurers wanted to spend. They might deny them coverage outright, or exclude coverage for a known condition, or charge so much that insurance became unaffordable. The Affordable Care Act boxes out the old insurance practices with a package of legal moves. First, it says point-blank that carriers ‘may not impose any preexisting condition exclusion.’ It backs that up with another section that says they ‘may not establish rules for eligibility’ based on health status, medical condition, claims experience or medical history.” [Politifact, 10/17/18]

The American Health Care Act Was A Republican Bill That Repealed Obamacare. “The House on Thursday narrowly approved legislation to repeal and replace major parts of the Affordable Care Act, as Republicans recovered from their earlier failures and moved a step closer to delivering on their promise to reshape American health care without mandated insurance coverage. The vote, 217 to 213, held on President Trump’s 105th day in office, is a significant step on what could be a long legislative road. […] The Republican bill, the American Health Care Act, would make profound changes to Medicaid, the health program for low-income people, ending its status as an open-ended entitlement. States would receive an allotment of federal money for each beneficiary, or, as an alternative, they could take the money in a lump sum as a block grant, with fewer federal requirements. The bill would also repeal taxes imposed by the Affordable Care Act on high-income people, insurers and drug companies, among others. And it would cut off federal funds from Planned Parenthood for one year.” [New York Times, 5/4/17]

AARP: The AHCA “Would Allow Insurance Companies To Charge People Between The Ages Of 50 And 64 (Those Too Young For Medicare) Five Times What They Can Charge Younger Consumers.” “The AHCA would impose an unfair and unacceptable ‘age tax.’ It would allow insurance companies to charge people between the ages of 50 and 64 (those too young for Medicare) five times what they can charge younger consumers. (Insurers are currently allowed to charge older consumers three times as much.)” [AARP, 3/15/17]