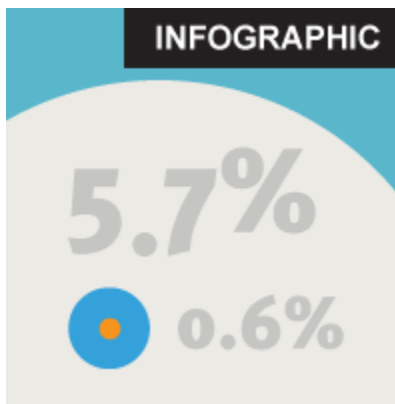


How Does the Affordable Care Act Affect People Who Buy Health Insurance in the Individual Market?

Introduction



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Public debate around the Affordable Care Act (ACA) has focused recently on recipients of private, individual (non-group) insurance whose health plans are being terminated and who fear they may need to pay more for new coverage. This report offers a new perspective on this issue: It estimates the number of consumers who will become eligible for new financial help that will make premiums more affordable, and it looks at the percentage of people in the individual market who stay in that market for more than one year, a portion of whom historically may have had an offer to keep the same plan in this market. An [accompanying infographic](#) also offers a more visual perspective of the issue.

The individual market covers 5.7 percent of the non-elderly population—a small slice of all insured Americans. The overwhelming majority of those people will obtain more affordable coverage under the health care law because they will be income-eligible for financial assistance to help pay for comprehensive insurance at a lower cost. Individuals with household incomes that do not exceed four times the federal poverty level (\$94,200 for a family of four in 2013)¹ are income-eligible for either premium tax credit subsidies to buy coverage in the new health insurance marketplaces² or Medicaid, which charges no premiums for most enrollees.³

Conversely, the number of people at risk of not keeping their current individual health insurance and who also will not be income-eligible for financial help to purchase new coverage under the Affordable Care Act is less than 1 percent of the non-elderly population.

- See more at: <http://www.familiesusa.org/ACA-individual-market/#sthash.c65jkn9m.dpuf>