

Promote Full Access to Health Care

A policy action to Close the Health Gap

Issue

Full access to health care in the United States is a social and human rights issue that is essential to both fairness of opportunity and to the collective sense and realization of social equality. While the Patient Protection and Affordable Care Act (ACA) made major strides in closing the gap in coverage, current policies aimed at repeal will not only reverse the gains of the ACA, but further widen the gap and impact the most vulnerable segments of the population, including those living in environments with greatest risk of exposure.

Action

We oppose any repeal of the ACA or policies that would further reduce equity in health care access and quality. We support policies that promote the protection of US residents from the financial burdens of illness and health care needs, as well as the fair distribution of disease and disability-specific health-care services, technologies, and public health investments necessary for the promotion and protection of the functional requisites essential to both the exercise of political citizenship and full equality of opportunity. This can be accomplished through:

- Universal comprehensive health insurance with adequate and equal risk protection
- Amelioration of disparities in health-care access and quality
- Equitable distribution of: (a) preventative, curative, rehabilitative, and adaptive health-care services/technologies specific to health needs and (b) public health investments and interventions
- Compensatory entitlements and investments in health-care services and public health infrastructure/interventions for individuals, groups, and populations adversely affected by health disparities

Evidence

The ACA has led to historic expansions in insurance coverage, which in turn has increased access to primary care, reduced utilization of hospital emergency care, reduced the burden medical debt for low income families, and for the newly insured improved health across a range of measures^{1,2,3} Even with the passage of the ACA, gaps in insurance coverage remained. When the Supreme Court allowed for states to opt-out of Medicaid expansion, only 32 states expanded, leaving millions in a coverage gap without access Medicaid and too poor for private marketplaces.⁴ African Americans and American Indians and Alaska Natives are more likely to reside in states that have not expanded Medicaid, exacerbating within state disparities.^{5,6} The ACA also did not provide an avenue for undocumented immigrants to gain coverage, even without receiving government support.⁷ While these are aspects of the ACA that require change, current efforts to repeal and replace major parts of the ACA would rollback state-by-state expansion of Medicaid, essential services such as maternity and emergency care, and allow states to seek waivers that allow insurers to charge higher premiums for some with pre-existing conditions. These actions would leave millions of low-income people without coverage. These actions are unacceptable to the social work profession, which seeks health equity in access and quality.

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About this policy action

This policy action is one of several proposals emerging from Social Innovation for America's Renewal, a policy conference organized by the Center for Social Development at Washington University in collaboration with the [American Academy of Social Work & Social Welfare](#), which is leading the Grand Challenges for Social Work initiative to champion social progress through a national agenda powered by science.