

Expand Access to More Affordable Coverage

An Act Expanding Affordable Coverage through ConnectorCare (HD.3361/SD.1950)

Lead Sponsors: Rep. Driscoll and Sen. Cronin

Why is legislation needed?

For many people in Massachusetts (MA) who do not have insurance through their job, health care costs can be a significant struggle. People with incomes just over the eligibility level for ConnectorCare, the state's subsidized health insurance program, often face premiums, deductibles and co-pays that squeeze their budgets and put care out of reach.

- Despite high levels of coverage in MA, [41%](#) of residents struggled to afford health care this past year.
- Massachusetts' consumer costs – co-pays, deductibles and premiums – continue to [rise](#) year after year, growing [twice as fast](#) as overall health costs in several years.

Why is this a health equity issue?

- Health care affordability is fundamentally a health equity issue. In MA, [75%](#) of Black adults and 68% of Hispanic/Latino adults face affordability challenges, such as rationing a prescription or being uninsured due to cost, compared with only 46% of white adults.
- Racial disparities in affording care are most significant among middle-income residents above 300% of the federal poverty level (FPL), with Hispanic/Latinx residents one and a half times as likely to [report](#) unmet health care needs due to cost as white residents.

What does this legislation do?

- **ConnectorCare expansion pilot program:** Expands ConnectorCare for five years to give more MA families access to coverage with lower premiums, copays and deductibles.
 - The ConnectorCare program would be expanded for five years to cover residents between 300% and 500% FPL, so they have access to plans with lower premiums and out-of-pocket costs, similar to current ConnectorCare plans.
 - The costs of the program would be covered by using state savings from recently enhanced federal subsidies, leveraging them for their intended purpose – to make health care more affordable for more residents.

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