

Say “NO!” to AHPs also known as MEWAs (HB 5247)

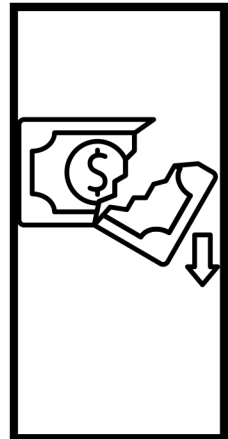
PROPONENTS OF HB 5247 WANT YOU TO BELIEVE PARTIAL TRUTHS. HERE’S THE WHOLE TRUTH:

DID YOU KNOW???



- AHPs are **NOT** health insurance.
- **AHPs DO NOT allow businesses to pool together to purchase insurance.** Rather, they allow businesses to pool their monies from premiums for the purpose of paying claims. Pooling of money is not insurance.
- Since AHPs are not insurance and because the AHP is responsible for paying claims, should an AHP go insolvent, **businesses and employees are not protected by the State Department of Insurance and will be liable for all unpaid claims.**

LOSS OF MARKETPLACE SUBSIDIES



- If an employer offers benefits through an AHP, any employee that rejects coverage through the AHP, will no longer be eligible for subsidies on the exchange (Access Health CT).
- Although employees will still be allowed to purchase coverage on the exchange, they will have to pay the entire cost without the subsidies they’d be eligible for had the employer not belonged to an AHP.

RISKY FOR BUSINESSES



- A major difference between ACA-compliant plans and AHPs is that ACA-compliant plans protect businesses and employees from being held personally liable for outstanding claims.
- AHPs are not protected; if the AHP goes insolvent, the businesses, and in some cases the employees, are responsible for the claims. This has led to **bankruptcy** for too many small businesses in the country, including several small businesses in NJ.

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PROPONENTS OF HB 5247 WANT YOU TO BELIEVE PARTIAL TRUTHS. HERE’S THE WHOLE TRUTH:

AHPs are discriminatory against people of color, women, people with disabilities, and older adults

AHPs do not have ALL the same protections provided by the Affordable Care Act (ACA)

AHPs carry potentially catastrophic risks for small businesses



Proponents of the bill want you to believe that policies offered by AHPs are equivalent to ACA-compliant plans **but they are not.**

As proposed in CT, AHPs will cover essential health benefits, which is beneficial, **but** they can charge small businesses **more** if their employees have **pre-existing conditions.**

Although, AHPs will not set rates at the individual level, they will do so at the group level.

This means that a specific employee will not be singled out and charged more (which is why proponents claim it's not discriminatory).

Instead, the business and all its employees will be **charged more.**



If you or your co-workers have a pre-existing condition, although you won't be denied coverage, you can expect to pay more than employees of another company with fewer risk factors that is part of the same AHP.

Because people of color, women, people with disabilities, and older people disproportionately suffer from higher rates of chronic diseases or expensive conditions (such as pregnancy), **a policy that uses health status to set rates is inherently discriminatory** toward these groups.

