



Health Policy Priority Brief

Affordable Health Care

What is Affordable Health Care?

Affordable Healthcare: refers to expanding accessibility to healthcare by ensuring that both healthcare insurance and healthcare services are priced so that people, regardless of their income or background, can afford them without facing financial strain. Affordable healthcare increases accessibility and erases health disparities. Addressing health disparities in the South is a critical step to advancing equity for African Americans and low-income groups.

Affordable Health Care in the South

The status of affordable health care in the South leaves much room for improvement. The South has six out of the top ten most expensive states for healthcare but experiences significant negative health disparities, especially their African American population (**North Carolina, Georgia, Texas, Louisiana, South Carolina, Florida**). Out of the top twenty states with the highest rate of uninsured African Americans, ten of them are southern states (**North Carolina, Georgia, Texas, South Carolina, Florida, Mississippi, Alabama, Tennessee, and Arkansas**).^{[2] iv}

How Affordable Health Care Can Advance Equity in the South

Providing affordable healthcare is a critical step to improving equity in the South for African Americans. African Americans have higher infant and maternal mortality rates and higher rates of chronic health conditions such as hypertension, diabetes, obesity, and heart disease compared to their white counterparts. These disparities could be reduced significantly by expanding access to affordable and quality healthcare in the South. Affordable healthcare would also alleviate the economic burden of healthcare cost, lead to early detection of diseases, expand the healthcare infrastructure to rural areas, and help manage chronic conditions.

Affordable healthcare metrics include:

- Insurance Coverage Rates: High rates of insurance coverage within low-income communities.

- **Out-of-Pocket Spending:** Reduce the proportion of income spent on healthcare expenses by low- income individuals.
- **Access to Low-Cost Services:** Increase the presence of community health centers, clinics, and other low-cost healthcare facilities in low-income areas.
- **Preventive Care Access:** Facilitate access to preventive services such as vaccinations, screenings, and regular check-ups.
- **Affordable Prescription Medication:** Expand access to affordable, necessary medications for low- income individuals.
- **Reduce and Eliminate Medical Debt:** reduce the prevalence of medical debt and bankruptcy within low-income communities.

Legislative Efforts Related to Affordable Health Care

1. **Alabama:** Senate Bill 236 would have eliminated the certificate of need requirement for any proposed new or expanded medical facility or health care service to be located in a rural area. Certificates of need programs often serve as a barrier for health care providers to enter new markets. The regulatory processes associated with obtaining a certificate of need can deter smaller healthcare providers, potentially limiting choice and access in areas such as rural locations where access to healthcare is needed.
2. **Alabama:** House Bill 401 would have prohibited surprise billing by setting a minimum rate for health insurers to pay out-of-network ambulance providers, which would be considered a payment in full. This would prevent ambulance services from charging more than the in-network cost sharing amount and eliminate unexpected and/or unanticipated costs being passed on to individuals.
3. **Florida:** House Bill 7089 created the Transparency in Health and Human Services Act, which establishes a 3-year statute of limitations for actions to collect medical debt, and will now require licensed medical facilities to have a consumer-friendly list of standard charges online for at least 300 shoppable health care services, providing people with an opportunity to review and choose where to receive care based upon cost associated with that care. The bill will also require facilities to establish internal grievance processes for patients to dispute charges and prohibits collection activities by licensed facilities.