

FACT SHEET:

KENNEDY V. BRAIDWOOD MANAGEMENT INC. THREATENS PEOPLE'S ACCESS TO NEEDED PREVENTIVE CARE



UNITED
STATES *of*
CARE

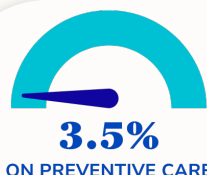
Earlier this year, the U.S. Supreme Court announced it would hear arguments in a case challenging the Affordable Care Act's (ACA) mandate that requires private health plans to provide people with free preventive care services. The lawsuit, known as *Kennedy v. Braidwood Management Inc.* (formerly *Braidwood Management Inc. v. Becerra*), threatens people's access to critical preventive health services, including cancer screenings, mental health evaluations, and HIV prevention medication.

How We Got Here

The Braidwood case was first filed in 2020 and initially challenged the entirety of the ACA's requirement that private plans cover all preventive services recommended by the the United States Preventive Services Task Force (USPSTF), Health Resources and Services Administration (HRSA), and Advisory Committee on Immunization Practices (ACIP). Since then, successive rulings on the District Court and Circuit Court levels have agreed with the plaintiffs but narrowed the scope of their decisions to services recommended by the USPSTF at the time the ACA was passed in March 2010. These decisions left in place HRSA-recommended preventive services for women, infants, and kids and ACIP-recommended vaccines, although the plaintiffs in the case have indicated their interest in pursuing further legal challenges to these services after the upcoming Supreme Court decision, likely expected in late June or early July.

BRAIDWOOD FAST FACTS

- One in three health center visits were primarily for preventive care.



- Approximately 3.5% of all health care spending is on preventive care.

- More than nine in ten people benefit from preventive care services.



- 82% of people support the ACA's no-cost preventive care mandate.

- 66 services are required to be covered cost free by the no-cost mandate.
- If the mandate were overturned in part and access to USPSTF-recommended services were limited,
 - 16 services would no longer be required to be covered cost free.
 - 7 services would revert back to outdated forms of coverage.
 - New recommendations made by the USPSTF would not be covered cost-free.

Impact on People

While people with private insurance coverage continue to have full access to cost-free preventive care today, previous and future legal decisions by the federal court system have introduced significant uncertainty to the more than 151 million people, including 37 million children, who rely on this coverage. As advocates and policymakers consider how to protect people's access to these popular services, they should consider the consequences if the Supreme Court rolls back one of the most popular provisions of the ACA:



- **The ruling could reverse progress in screening rates.** Since the preventive services mandate took effect in 2010, utilization of services such as blood pressure screenings, cholesterol screenings, and colorectal cancer screenings has increased. Restrictions on these free services could lead some conditions to go undetected, worsen health outcomes, and increase costs.



- **Plans could drop coverage of needed services.** Changes to the no-cost preventive services mandate could cause some insurers to revert to standards in place before 2010. Prior to the ACA, only two-thirds of plans covered some maternal care services, and only 6% of plans studied covered maternal care in full, oftentimes with cost-sharing.



- **Improvements in health access could be reversed.** In 2020, preventive health care was the primary reason for 33.4% of health center visits, and 60% of all health center visits included an examination, screening, or form of health counseling that would be considered preventive in nature. Decreased access to these preventive services could reverse the gains made over the past decade.



- **Out-of-pocket costs could deter people from seeking preventive services or cause them to skip care entirely.** Approximately one-third of insured adults have delayed needed care due to costs. More than 40% of people indicated that they would forgo essential health care if they had to pay for some of the most common preventive services, such as cancer screenings.



- **Removing free coverage for preventive services could have a disproportionate impact on communities of color and other marginalized communities.** Prior to the ACA, communities of color had low utilization of preventive services and approximately one-third of low-income Americans report having delayed preventive services due to cost.



- **Restricted access to preventive services and medications could cause an increase in preventable diseases.** Decreased access to HIV prevention medication stemming from the Braidwood decision could lead to more than 2,000 additional HIV infections in the next year.