

- President-Elect Trump and Republican Congressional leaders have indicated support for repealing the Affordable Care Act (ACA) and replacing it with a new program; but, it is still unclear what a replacement would entail.
- President-Elect Trump has indicated that he intends to continue the ban on pre-existing condition exclusions, and Republican lawmakers have agreed.
- It is unclear how quickly a repeal would take effect. One emerging proposal that is becoming more and more likely is an immediate vote for a repeal that would not take effect for at least a year or two, allowing Congress time to draft and pass a replacement. People enrolled in the Marketplace would still have access to their insurance during that time.
- It is crucial that people who need insurance through the Marketplace enroll, regardless of the potential repeal. They must enroll by December 15 for coverage that starts January 1.
- As Congress begins the process to repeal and replace the ACA, the patient advocacy community will work with it to ensure the replacement best suits the needs of people with chronic conditions. The National Health Council continues to support five key principles of health reform, which guided its work during the passage and implementation of the Affordable Care Act:
 - Cover Everyone
 - Curb Costs Responsibly
 - Abolish Exclusions for Pre-Existing Conditions
 - Eliminate Lifetime Caps
 - Ensure Access to End-of-Life Care
- The repeal and replacement of the ACA allows the patient-advocacy community to learn from the successes and shortcomings of the ACA and to use that information in our advocacy efforts. While we will continue to advocate for the patient protections that were included in ACA, we can now get to work on addressing some of the difficulties that people with chronic diseases and disabilities had in accessing care through their Marketplace insurance plans.
 - Notably, Marketplace plans often had limited provider networks, high cost-sharing requirements, and complex utilization management processes. Additionally, premiums have also continually increased, and out-of-pocket cost limits have been frontloaded. We will work with Congress and the administration to ensure that these hurdles to receiving care are limited in a new program.