Working Paper Series

National and State Impact Analyses of the ACA on Insurance Prices and Enrollment Beyond 2014

May 20, 2014

By: Stephen T. Parente (Professor of Health Finance) and Michael Ramlet (MILI lecturer)

The Need for Estimating the National and State Impacts of the Affordable Care Act Beyond 2014

Earlier this month, the Obama Administration released final reports detailing health insurance exchange and Medicaid enrollment for 2014. These reports provide a snapshot of information regarding the geographic and demographic make-up of Affordable Care Act's first year, but fail to offer a forward-looking estimate of health plan prices and enrollment as insurance companies prepare to submit their health plan offerings for 2015.

Using the 2014 enrollment report data and a microsimulation model funded in part by the U.S. Department of Health and Human Services, we estimate the national and state impact of the ACA on insurance prices and enrollment from 2015-2024.

Estimating the trajectory of health plan prices and enrollment is critical to informing ongoing health care policy debate. Decisions regarding the delayed implementation of the qualified health plan requirements, the delayed enforcement of the employer mandate, and the scheduled termination of the temporary reinsurance and risk corridor programs are estimated to have dramatic impact on insurance prices and enrollment by 2017.

\$1,375 Cost increase of an individual exchange health plan within 5 years (Silver)

\$4,198 Cost increase of a family exchange health plan within 5 years (Silver)

489K Increase in the uninsured within 5 years (2019)

10 State Economic Analyses

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¹ CMS - Medicaid & CHIP Enrollment Report: http://www.medicaid.gov/AffordableCareAct/Medicaid-Moving-Forward-2014/Downloads/March-2014-Enrollment-Report.pdf

² ASPE – Health Insurance Marketplace Summary Enrollment Report: http://aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Apr2014/ib 2014Apr enrollment.pdf

National Enrollment Estimate: Private Insurance, Medicaid and the Uninsured

The ACA offers subsidies in the private individual insurance market and offers states the choice to expand Medicaid coverage with federal support. As a result of varied Medicaid decisions and prior state market conditions, enrollment is expected to vary widely by state. States like California, New York and Pennsylvania are estimated to experience substantial increases in enrollment, while states like Texas, Ohio and Florida are likely to see a steady decline in individual and employer insurance enrollment leading to increase in the uninsured. We have included 10 state economic analyses in this report to provide additional insight into state insurance markets that are expected to experience significant levels of disruption.

Nationally, we estimate an initial decrease in the uninsured with greater use of the private health insurance subsidies, but over time health plan prices are likely to increase faster than the value of the insurance subsidy. As a result of the declining purchasing power of the insurance subsidy, the implementation of the qualified health plan requirements and the end of the reinsurance and risk corridor programs we estimate a significant reduction in the private insurance market in 2017 with steady declines continuing for the rest of the decade. The Medicaid population is estimated to grow substantially in 2015 as more individuals are enrolled in states who have chosen to expand the program. Medicaid enrollment is estimated to slow down to between 2% to 3% each year from 2016 to 2024.

10-Year National Enrollment Estimates (Thousands of People)

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	30,581.3	36,303.0	31,419.5	31,374.5	31,179.4	31,022.0	30,832.5	30,558.2	30,154.2	29,602.1
Employer	153,761.7	153,690.2	150,419.1	149,259.5	148,004.0	146,714.6	145,373.9	143,865.4	141,987.4	139,480.6
Medicaid	45,623.7	46,536.4	48,162.7	49,137.2	50,119.8	51,082.5	52,029.4	52,954.0	53,869.0	54,791.6
Uninsured	36,530.9	30,258.6	36,110.4	36,464.8	37,019.9	37,548.2	38,110.8	38,758.2	39,546.7	40,482.8
Percent Change										
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	12%	19%	-13%	0%	-1%	-1%	-1%	-1%	-1%	-2%
Employer	0%	0%	-2%	-1%	-1%	-1%	-1%	-1%	-1%	-2%
Medicaid	9%	2%	3%	2%	2%	2%	2%	2%	2%	2%
Uninsured	-17%	-17%	19%	1%	2%	1%	1%	2%	2%	2%

Impact of the ACA on Health Plan Costs

The ACA had a significant impact on health plan cost calculations. Under the law, premiums for a given class of insurance plan in the federal exchange cannot vary by more than a 3:1 ratio. In addition, the different plan designs increase the generosity of qualified health plans (QHP) sold in the federal exchange. This leads to an increase in premiums compared to a pre-ACA design. It also leads to higher premiums for less generous plan designs, such as a high deductible health plan (HDHP) than what might have been offered without ACA market regulation.

As noted in the enrollment estimate, the implementation of the qualified health plan requirements and the end of the reinsurance and risk corridor programs will a significant impact on health plan prices beginning in 2017.

Below are the expected premiums nationally over the course of the next 10 years starting in 2015.

10-Year National Insurance Price Estimates (Dollars)

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Family Coverage Average										
Platinum	\$20,627	\$21,757	\$23,088	\$24,499	\$25,996	\$27,583	\$29,266	\$31,050	\$32,942	\$34,948
Gold	\$18,100	\$19,081	\$20,251	\$21,491	\$22,807	\$24,202	\$25,681	\$27,249	\$28,913	\$30,676
Silver	\$16,159	\$17,026	\$18,072	\$19,181	\$20,357	\$21,604	\$22,926	\$24,329	\$25,816	\$27,392
Bronze - Narrow	\$8,640	\$8,810	\$12,861	\$13,252	\$13,654	\$14,069	\$14,496	\$14,936	\$15,389	\$15,856
Bronze - Catastrophic	\$10,382	\$10,593	\$16,112	\$16,944	\$17,820	\$18,740	\$19,708	\$20,726	\$21,795	\$22,920
Single Person Coverage Av	erage									
Platinum	\$7,046	\$7,371	\$7,837	\$8,331	\$8,855	\$9,411	\$10,000	\$10,626	\$11,290	\$11,994
Gold	\$6,182	\$6,458	\$6,868	\$7,303	\$7,765	\$8,254	\$8,774	\$9,324	\$9,907	\$10,527
Silver	\$5,412	\$5,637	\$5,998	\$6,381	\$6,787	\$7,214	\$7,670	\$8,154	\$8,657	\$9,180
Bronze - Narrow	\$2,149	\$2,132	\$4,174	\$4,304	\$4,438	\$4,575	\$4,717	\$4,863	\$5,014	\$5,170
Bronze - Catastrophic	\$2,266	\$2,159	\$4,522	\$4,763	\$5,017	\$5,284	\$5,565	\$5,861	\$6,172	\$6,500





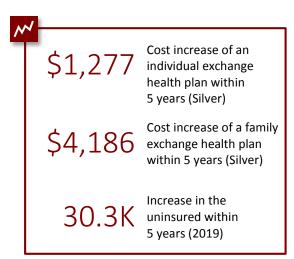
Measuring the Impact of the ACA after 2014 in Arkansas By: Stephen T. Parente (Professor of Health Finance) and Michael Ramlet (MILI Adjunct Professor)

Introduction:

What is the impact of the ACA in the state of <u>Arkansas</u> after 2014?

Using the 2014 enrollment report data and a microsimulation model funded in part by the U.S. Department of Health and Human Services, we estimate the national and state impact of the ACA on insurance prices and enrollment from 2015-2024.

We summarize the impact on Private Insurance (individual and employer), Medicaid and the Uninsured from 2015 to 2024 as well as the changes in health plan costs over the same period.



Private Insurance, Medicaid and the Uninsured:

The ACA offers subsidies in the private individual insurance market and offers states the choice to expand Medicaid coverage with federal support. Below is a ten year enrollment estimate based on each state's Medicaid decision and their respective insurance marketplace.

		10-Ye	ar Enroll	ment Est	imate (T	housand	s of Peop	ole)		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	347.6	394.9	328.0	325.0	319.4	314.6	311.4	310.4	310.9	311.1
Employer	1,224.3	1,222.7	1,199.1	1,189.5	1,179.2	1,168.2	1,156.3	1,142.4	1,125.0	1,101.8
Medicaid	575.3	589.9	608.1	620.9	633.2	644.7	655.6	666.6	677.4	687.9
Uninsured	329.6	274.1	350.1	353.6	359.9	365.7	371.4	376.9	382.4	388.0
Percent Chan	ige									
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	10%	14%	-17%	-1%	-2%	-1%	-1%	0%	0%	0%
Employer	0%	0%	-2%	-1%	-1%	-1%	-1%	-1%	-2%	-2%
Medicaid	8%	3%	3%	2%	2%	2%	2%	2%	2%	2%
Uninsured	-21%	-17%	28%	1%	2%	2%	2%	1%	1%	1%

The ACA had a significant impact on health plan cost calculations. Under the law, premiums for a given class of insurance plan in the federal exchange cannot vary by more than a 3:1 ratio. In addition, the different plan designs increase the generosity of qualified health plans (QHP) sold in the federal exchange. This leads to an increase in premiums compared to a pre-ACA design. It also leads to higher premiums for less generous plan designs, such as a high deductible health plan (HDHP) than what might have been offered without ACA market regulation. Below are the expected premiums for the state over the course of the next 10 years starting in 2015.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Family Coverage Average										
Platinum	\$20,377	\$21,499	\$22,813	\$24,206	\$25,684	\$27,250	\$28,911	\$30,672	\$32,539	\$34,519
Gold	\$17,966	\$18,946	\$20,106	\$21,336	\$22,641	\$24,024	\$25,490	\$27,045	\$28,694	\$30,442
Silver	\$16,099	\$16,970	\$18,011	\$19,115	\$20,285	\$21,526	\$22,841	\$24,236	\$25,716	\$27,284
Bronze - Narrow	\$5,938	\$6,034	\$12,755	\$13,142	\$13,540	\$13,951	\$14,374	\$14,810	\$15,259	\$15,722
Bronze - Catastrophic	\$6,574	\$6,578	\$15,479	\$16,280	\$17,123	\$18,009	\$18,941	\$19,920	\$20,951	\$22,034
Single Person Coverage Av	erage									
Platinum	\$6,416	\$6,720	\$7,143	\$7,591	\$8,066	\$8,571	\$9,106	\$9,674	\$10,276	\$10,914
Gold	\$5,706	\$5,968	\$6,345	\$6,745	\$7,170	\$7,620	\$8,098	\$8,605	\$9,143	\$9,713
Silver	\$4,997	\$5,215	\$5,548	\$5,900	\$6,274	\$6,671	\$7,092	\$7,539	\$8,013	\$8,516
Bronze - Narrow	\$1,088	\$1,048	\$3,740	\$3,856	\$3,976	\$4,099	\$4,226	\$4,357	\$4,492	\$4,631
Bronze - Catastrophic	\$949	\$791	\$4,385	\$4,618	\$4,864	\$5,122	\$5,394	\$5,680	\$5,982	\$6,299





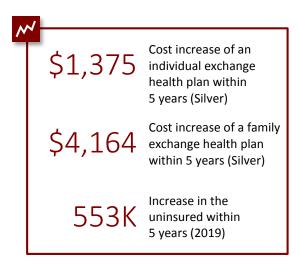
Measuring the Impact of the ACA after 2014 in Florida By: Stephen T. Parente (Professor of Health Finance) and Michael Ramlet (MILI Adjunct Professor)

Introduction:

What is the impact of the ACA in the state of <u>Florida</u> after 2014?

Using the 2014 enrollment report data and a microsimulation model funded in part by the U.S. Department of Health and Human Services, we estimate the national and state impact of the ACA on insurance prices and enrollment from 2015-2024.

We summarize the impact on Private Insurance (individual and employer), Medicaid and the Uninsured from 2015 to 2024 as well as the changes in health plan costs over the same period.



Private Insurance, Medicaid and the Uninsured:

The ACA offers subsidies in the private individual insurance market and offers states the choice to expand Medicaid coverage with federal support. Below is a ten year enrollment estimate based on each state's Medicaid decision and their respective insurance marketplace.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	2,739.0	3,016.9	2,314.9	2,321.5	2,313.7	2,306.5	2,296.9	2,280.3	2,257.4	2,230.4
Employer	8,501.0	8,518.7	8,214.8	8,152.5	8,081.0	8,004.8	7,924.9	7,836.1	7,727.6	7,585.0
Medicaid	2,997.5	3,063.3	3,203.8	3,269.3	3,334.1	3,397.5	3,460.2	3,523.1	3,585.7	3,646.7
Uninsured	1,587.0	1,309.1	2,080.5	2,105.0	2,140.0	2,168.8	2,196.5	2,229.4	2,270.0	2,317.4
Percent Chan	ge 2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	7%	10%	-23%	0%	0%	0%	0%	-1%	-1%	-1%
Employer	0%	0%	-4%	-1%	-1%	-1%	-1%	-1%	-1%	-2%
Medicaid	8%	2%	5%	2%	2%	2%	2%	2%	2%	2%
Uninsured	-22%	-18%	59%	1%	2%	1%	1%	1%	2%	2%

The ACA had a significant impact on health plan cost calculations. Under the law, premiums for a given class of insurance plan in the federal exchange cannot vary by more than a 3:1 ratio. In addition, the different plan designs increase the generosity of qualified health plans (QHP) sold in the federal exchange. This leads to an increase in premiums compared to a pre-ACA design. It also leads to higher premiums for less generous plan designs, such as a high deductible health plan (HDHP) than what might have been offered without ACA market regulation. Below are the expected premiums for the state over the course of the next 10 years starting in 2015.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Family Coverage Average										
Platinum	\$20,463	\$21,579	\$22,900	\$24,301	\$25,787	\$27,362	\$29,033	\$30,804	\$32,683	\$34,674
Gold	\$17,868	\$18,831	\$19,987	\$21,212	\$22,512	\$23,890	\$25,351	\$26,901	\$28,544	\$30,286
Silver	\$16,032	\$16,888	\$17,927	\$19,028	\$20,196	\$21,434	\$22,747	\$24,140	\$25,617	\$27,183
Bronze - Narrow	\$6,150	\$6,240	\$12,663	\$13,047	\$13,444	\$13,852	\$14,273	\$14,707	\$15,154	\$15,614
Bronze - Catastrophic	\$7,232	\$7,293	\$16,063	\$16,893	\$17,765	\$18,682	\$19,646	\$20,660	\$21,726	\$22,847
Single Person Coverage Av	erage									
Platinum	\$6,851	\$7,177	\$7,628	\$8,106	\$8,614	\$9,152	\$9,723	\$10,329	\$10,972	\$11,653
Gold	\$6,052	\$6,335	\$6,734	\$7,158	\$7,607	\$8,084	\$8,589	\$9,126	\$9,695	\$10,298
Silver	\$5,374	\$5,613	\$5,970	\$6,348	\$6,749	\$7,175	\$7,627	\$8,106	\$8,614	\$9,118
Bronze - Narrow	\$1,348	\$1,319	\$4,023	\$4,148	\$4,276	\$4,408	\$4,544	\$4,685	\$4,829	\$4,978
Bronze - Catastrophic	\$924	\$737	\$3,942	\$4,154	\$4,377	\$4,613	\$4,861	\$5,122	\$5,397	\$5,686





Measuring the Impact of the ACA after 2014 in Iowa

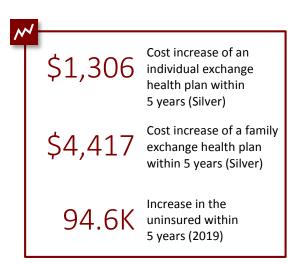
By: Stephen T. Parente (Professor of Health Finance) and Michael Ramlet (MILI Adjunct Professor)

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Private Insurance, Medicaid and the Uninsured:

The ACA offers subsidies in the private individual insurance market and offers states the choice to expand Medicaid coverage with federal support. Below is a ten year enrollment estimate based on each state's Medicaid decision and their respective insurance marketplace.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	310.2	382.5	216.3	217.3	217.4	217.0	214.6	209.8	203.4	197.6
Employer	1,660.4	1,659.9	1,600.7	1,584.0	1,567.7	1,552.3	1,536.9	1,519.7	1,497.9	1,468.1
Medicaid	401.0	403.5	428.3	437.1	445.9	454.5	463.0	471.5	480.1	489.1
Uninsured	309.9	240.4	402.1	402.6	404.5	407.1	411.0	416.5	423.5	430.5
Percent Chang	ge 2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	17%	23%	-43%	0%	0%	0%	-1%	-2%	-3%	-3%
Employer	0%	0%	-4%	-1%	-1%	-1%	-1%	-1%	-1%	-2%
Medicaid	10%	1%	6%	2%	2%	2%	2%	2%	2%	2%
Uninsured	-20%	-22%	67%	0%	0%	1%	1%	1%	2%	2%

The ACA had a significant impact on health plan cost calculations. Under the law, premiums for a given class of insurance plan in the federal exchange cannot vary by more than a 3:1 ratio. In addition, the different plan designs increase the generosity of qualified health plans (QHP) sold in the federal exchange. This leads to an increase in premiums compared to a pre-ACA design. It also leads to higher premiums for less generous plan designs, such as a high deductible health plan (HDHP) than what might have been offered without ACA market regulation. Below are the expected premiums for the state over the course of the next 10 years starting in 2015.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Family Coverage Average										
Platinum	\$21,454	\$22,640	\$24,022	\$25,488	\$27,042	\$28,690	\$30,438	\$32,291	\$34,255	\$36,338
Gold	\$18,462	\$19,472	\$20,664	\$21,927	\$23,267	\$24,688	\$26,194	\$27,792	\$29,485	\$31,281
Silver	\$16,976	\$17,903	\$18,999	\$20,161	\$21,393	\$22,700	\$24,086	\$25,555	\$27,113	\$28,765
Bronze - Narrow	\$7,895	\$8,047	\$13,277	\$13,679	\$14,094	\$14,522	\$14,962	\$15,416	\$15,883	\$16,365
Bronze - Catastrophic	\$9,461	\$9,654	\$16,830	\$17,698	\$18,610	\$19,568	\$20,576	\$21,636	\$22,750	\$23,921
Single Person Coverage Av	erage									
Platinum	\$7,095	\$7,431	\$7,898	\$8,394	\$8,919	\$9,477	\$10,068	\$10,696	\$11,361	\$12,067
Gold	\$5,914	\$6,180	\$6,572	\$6,987	\$7,428	\$7,897	\$8,393	\$8,920	\$9,450	\$10,042
Silver	\$5,118	\$5,335	\$5,677	\$6,039	\$6,424	\$6,832	\$7,237	\$7,695	\$8,095	\$8,605
Bronze - Narrow	\$1,910	\$1,892	\$4,315	\$4,448	\$4,585	\$4,727	\$4,873	\$5,024	\$5,179	\$5,339
Bronze - Catastrophic	\$1,286	\$1,120	\$3,640	\$3,837	\$4,044	\$4,263	\$4,493	\$4,735	\$4,990	\$5,259





Measuring the Impact of the ACA after 2014 in Louisiana

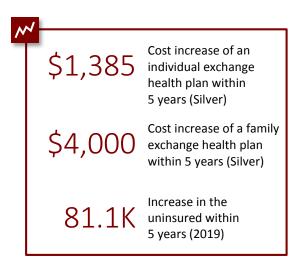
By: Stephen T. Parente (Professor of Health Finance) and Michael Ramlet (MILI Adjunct Professor)

Introduction:

What is the impact of the ACA in the state of <u>Louisiana</u> after 2014?

Using the 2014 enrollment report data and a microsimulation model funded in part by the U.S. Department of Health and Human Services, we estimate the national and state impact of the ACA on insurance prices and enrollment from 2015-2024.

We summarize the impact on Private Insurance (individual and employer), Medicaid and the Uninsured from 2015 to 2024 as well as the changes in health plan costs over the same period.



Private Insurance, Medicaid and the Uninsured:

The ACA offers subsidies in the private individual insurance market and offers states the choice to expand Medicaid coverage with federal support. Below is a ten year enrollment estimate based on each state's Medicaid decision and their respective insurance marketplace.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	774.6	839.7	707.6	703.4	696.1	687.7	677.6	666.2	653.2	635.6
Employer	2,238.9	2,240.9	2,180.9	2,163.8	2,143.8	2,122.2	2,098.8	2,071.6	2,038.6	1,997.1
Medicaid	818.0	835.9	870.9	888.9	906.7	923.4	939.0	954.1	969.0	984.0
Uninsured	400.5	334.8	469.8	473.8	481.6	490.9	502.9	518.0	537.9	564.1
Percent Chang	e									
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	8%	8%	-16%	-1%	-1%	-1%	-1%	-2%	-2%	-3%
Employer	0%	0%	-3%	-1%	-1%	-1%	-1%	-1%	-2%	-2%
Medicaid	7%	2%	4%	2%	2%	2%	2%	2%	2%	2%
Uninsured	-24%	-16%	40%	1%	2%	2%	2%	3%	4%	5%

The ACA had a significant impact on health plan cost calculations. Under the law, premiums for a given class of insurance plan in the federal exchange cannot vary by more than a 3:1 ratio. In addition, the different plan designs increase the generosity of qualified health plans (QHP) sold in the federal exchange. This leads to an increase in premiums compared to a pre-ACA design. It also leads to higher premiums for less generous plan designs, such as a high deductible health plan (HDHP) than what might have been offered without ACA market regulation. Below are the expected premiums for the state over the course of the next 10 years starting in 2015.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Family Coverage Average										
Platinum	\$19,955	\$21,046	\$22,334	\$23,699	\$25,148	\$26,684	\$28,312	\$30,039	\$31,870	\$33,811
Gold	\$17,639	\$18,590	\$19,731	\$20,941	\$22,224	\$23,584	\$25,027	\$26,556	\$28,178	\$29,898
Silver	\$15,410	\$16,228	\$17,227	\$18,286	\$19,410	\$20,601	\$21,865	\$23,205	\$24,626	\$26,132
Bronze - Narrow	\$11,907	\$12,173	\$12,543	\$12,924	\$13,317	\$13,721	\$14,138	\$14,567	\$15,010	\$15,465
Bronze - Catastrophic	\$14,701	\$15,121	\$15,904	\$16,726	\$17,591	\$18,501	\$19,457	\$20,462	\$21,519	\$22,631
Single Person Coverage Av	erage									
Platinum	\$7,092	\$7,420	\$7,889	\$8,385	\$8,912	\$9,472	\$10,065	\$10,694	\$11,362	\$12,070
Gold	\$6,296	\$6,576	\$6,994	\$7,437	\$7,907	\$8,406	\$8,935	\$9,497	\$10,093	\$10,725
Silver	\$5,432	\$5,661	\$6,023	\$6,408	\$6,817	\$7,250	\$7,710	\$8,198	\$8,716	\$9,266
Bronze - Narrow	\$4,075	\$4,111	\$4,239	\$4,371	\$4,507	\$4,647	\$4,791	\$4,940	\$5,093	\$5,251
Bronze - Catastrophic	\$4,245	\$4,269	\$4,495	\$4,733	\$4,984	\$5,247	\$5,525	\$5,816	\$6,124	\$6,447





Measuring the Impact of the ACA after 2014 in Michigan

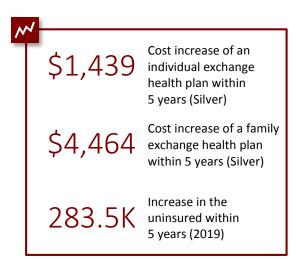
By: Stephen T. Parente (Professor of Health Finance) and Michael Ramlet (MILI Adjunct Professor)

Introduction:

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We summarize the impact on Private Insurance (individual and employer), Medicaid and the Uninsured from 2015 to 2024 as well as the changes in health plan costs over the same period.



Private Insurance, Medicaid and the Uninsured:

The ACA offers subsidies in the private individual insurance market and offers states the choice to expand Medicaid coverage with federal support. Below is a ten year enrollment estimate based on each state's Medicaid decision and their respective insurance marketplace.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	1,199.3	1,199.4	1,175.3	1,155.1	1,135.4	1,115.0	1,092.9	1,067.5	1,035.2	991.3
Employer	5,912.8	5,891.6	5,860.5	5,825.7	5,789.2	5,749.7	5,702.8	5,641.0	5,555.4	5,436.4
Medicaid	1,204.3	1,225.4	1,250.1	1,272.2	1,291.8	1,310.5	1,329.1	1,348.2	1,368.4	1,390.1
Uninsured	1,230.8	1,282.9	1,360.1	1,436.2	1,514.3	1,595.4	1,682.1	1,778.9	1,891.9	2,028.1
Percent Chan	ige									
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	5%	0%	-2%	-2%	-2%	-2%	-2%	-2%	-3%	-4%
Employer	0%	0%	-1%	-1%	-1%	-1%	-1%	-1%	-2%	-2%
Medicaid	1%	2%	2%	2%	2%	1%	1%	1%	1%	2%
Uninsured	0%	4%	6%	6%	5%	5%	5%	6%	6%	7%

The ACA had a significant impact on health plan cost calculations. Under the law, premiums for a given class of insurance plan in the federal exchange cannot vary by more than a 3:1 ratio. In addition, the different plan designs increase the generosity of qualified health plans (QHP) sold in the federal exchange. This leads to an increase in premiums compared to a pre-ACA design. It also leads to higher premiums for less generous plan designs, such as a high deductible health plan (HDHP) than what might have been offered without ACA market regulation. Below are the expected premiums for the state over the course of the next 10 years starting in 2015.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Family Coverage Average										
Platinum	\$22,216	\$23,445	\$24,876	\$26,394	\$28,003	\$29,709	\$31,518	\$33,437	\$35,471	\$37,627
Gold	\$19,645	\$20,720	\$21,988	\$23,332	\$24,758	\$26,269	\$27,872	\$29,572	\$31,374	\$33,284
Silver	\$17,171	\$18,098	\$19,208	\$20,386	\$21,635	\$22,959	\$24,363	\$25,852	\$27,431	\$29,105
Bronze - Narrow	\$13,218	\$13,528	\$13,938	\$14,361	\$14,796	\$15,245	\$15,707	\$16,184	\$16,674	\$17,180
Bronze - Catastrophic	\$16,821	\$17,371	\$18,266	\$19,207	\$20,196	\$21,236	\$22,329	\$23,478	\$24,687	\$25,957
Single Person Coverage Av	erage									
Platinum	\$7,369	\$7,711	\$8,197	\$8,713	\$9,261	\$9,842	\$10,458	\$11,112	\$11,806	\$12,541
Gold	\$6,542	\$6,834	\$7,268	\$7,728	\$8,217	\$8,735	\$9,285	\$9,869	\$10,487	\$11,144
Silver	\$5,645	\$5,883	\$6,260	\$6,660	\$7,084	\$7,535	\$8,012	\$8,519	\$9,057	\$9,628
Bronze - Narrow	\$4,377	\$4,425	\$4,562	\$4,703	\$4,849	\$4,999	\$5,154	\$5,313	\$5,478	\$5,647
Bronze - Catastrophic	\$3,466	\$3,430	\$3,615	\$3,810	\$4,015	\$4,230	\$4,458	\$4,697	\$4,949	\$5,214



Measuring the Impact of the ACA after 2014 in New Hampshire

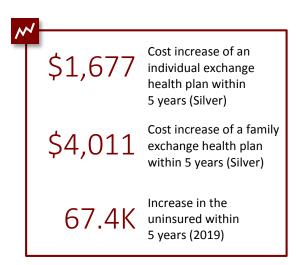
By: Stephen T. Parente (Professor of Health Finance) and Michael Ramlet (MILI Adjunct Professor)

Introduction:

What is the impact of the ACA in the state of <u>New</u> Hampshire after 2014?

Using the 2014 enrollment report data and a microsimulation model funded in part by the U.S. Department of Health and Human Services, we estimate the national and state impact of the ACA on insurance prices and enrollment from 2015-2024.

We summarize the impact on Private Insurance (individual and employer), Medicaid and the Uninsured from 2015 to 2024 as well as the changes in health plan costs over the same period.



Private Insurance, Medicaid and the Uninsured:

The ACA offers subsidies in the private individual insurance market and offers states the choice to expand Medicaid coverage with federal support. Below is a ten year enrollment estimate based on each state's Medicaid decision and their respective insurance marketplace.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	141.2	162.8	98.4	97.8	96.8	96.0	95.6	95.8	96.3	96.6
Employer	828.5	834.2	786.7	781.4	775.5	769.4	763.4	757.0	749.3	739.2
Medicaid	106.2	105.3	118.3	121.3	124.3	127.1	129.7	132.3	135.0	137.6
Uninsured	56.9	39.7	117.0	120.4	124.3	127.1	129.2	130.6	131.6	132.7
Percent Change	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	15%	15%	-40%	-1%	-1%	-1%	-1%	0%	1%	0%
Employer	1%	1%	-6%	-1%	-1%	-1%	-1%	-1%	-1%	-1%
Medicaid	5%	-1%	12%	3%	2%	2%	2%	2%	2%	2%
Uninsured	-34%	-30%	194%	3%	3%	2%	2%	1%	1%	1%

The ACA had a significant impact on health plan cost calculations. Under the law, premiums for a given class of insurance plan in the federal exchange cannot vary by more than a 3:1 ratio. In addition, the different plan designs increase the generosity of qualified health plans (QHP) sold in the federal exchange. This leads to an increase in premiums compared to a pre-ACA design. It also leads to higher premiums for less generous plan designs, such as a high deductible health plan (HDHP) than what might have been offered without ACA market regulation. Below are the expected premiums for the state over the course of the next 10 years starting in 2015.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Family Coverage Average										
Platinum	\$20,061	\$21,143	\$22,440	\$23,816	\$25,275	\$26,822	\$28,463	\$30,203	\$32,047	\$34,003
Gold	\$17,811	\$18,760	\$19,914	\$21,138	\$22,435	\$23,811	\$25,271	\$26,818	\$28,459	\$30,199
Silver	\$15,460	\$16,276	\$17,279	\$18,343	\$19,471	\$20,668	\$21,937	\$23,282	\$24,709	\$26,222
Bronze - Narrow	-\$278	-\$391	\$12,652	\$13,037	\$13,434	\$13,843	\$14,264	\$14,698	\$15,145	\$15,606
Bronze - Catastrophic	-\$991	-\$1,337	\$15,983	\$16,808	\$17,676	\$18,588	\$19,547	\$20,555	\$21,615	\$22,729
Single Person Coverage Av	erage									
Platinum	\$8,312	\$8,700	\$9,248	\$9,830	\$10,447	\$11,102	\$11,797	\$12,534	\$13,316	\$14,145
Gold	\$7,170	\$7,490	\$7,966	\$8,470	\$9,006	\$9,574	\$10,177	\$10,816	\$11,494	\$12,214
Silver	\$6,583	\$6,858	\$7,298	\$7,765	\$8,260	\$8,786	\$9,344	\$9,936	\$10,565	\$11,231
Bronze - Narrow	-\$324	-\$428	\$4,782	\$4,930	\$5,083	\$5,241	\$5,404	\$5,571	\$5,744	\$5,922
Bronze - Catastrophic	\$1,078	\$1,424	\$6,741	\$7,099	\$7,475	\$7,870	\$8,287	\$8,725	\$9,186	\$9,671





Measuring the Impact of the ACA after 2014 in North Carolina

By: Stephen T. Parente (Professor of Health Finance) and Michael Ramlet (MILI Adjunct Professor)

Introduction:

What is the impact of the ACA in the state of <u>North</u> <u>Carolina</u> after 2014?

Using the 2014 enrollment report data and a microsimulation model funded in part by the U.S. Department of Health and Human Services, we estimate the national and state impact of the ACA on insurance prices and enrollment from 2015-2024.

We summarize the impact on Private Insurance (individual and employer), Medicaid and the Uninsured from 2015 to 2024 as well as the changes in health plan costs over the same period.

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~	\$1,384	Cost increase of an individual exchange health plan within 5 years (Silver)
	\$4,131	Cost increase of a family exchange health plan within 5 years (Silver)
	224.1K	Increase in the uninsured within 5 years (2019)

Private Insurance, Medicaid and the Uninsured:

The ACA offers subsidies in the private individual insurance market and offers states the choice to expand Medicaid coverage with federal support. Below is a ten year enrollment estimate based on each state's Medicaid decision and their respective insurance marketplace.

10-Year Enrollment Estimate (Thousands of People)												
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
Individual	1,560.8	1,562.9	1,538.5	1,508.8	1,470.5	1,437.4	1,413.6	1,392.3	1,371.1	1,349.6		
Employer	4,310.7	4,300.7	4,280.9	4,254.8	4,224.7	4,192.2	4,157.6	4,117.8	4,067.3	3,998.9		
Medicaid	1,492.4	1,517.7	1,549.7	1,582.8	1,616.1	1,647.2	1,675.8	1,702.7	1,728.1	1,752.8		
Uninsured	1,001.6	1,033.7	1,090.5	1,153.4	1,225.7	1,295.4	1,359.4	1,425.0	1,496.9	1,576.9		
Percent Change	e											
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
Individual	4%	0%	-2%	-2%	-3%	-2%	-2%	-2%	-2%	-2%		
Employer	0%	0%	0%	-1%	-1%	-1%	-1%	-1%	-1%	-2%		
Medicaid	1%	2%	2%	2%	2%	2%	2%	2%	1%	1%		
Uninsured	-2%	3%	5%	6%	6%	6%	5%	5%	5%	5%		

The ACA had a significant impact on health plan cost calculations. Under the law, premiums for a given class of insurance plan in the federal exchange cannot vary by more than a 3:1 ratio. In addition, the different plan designs increase the generosity of qualified health plans (QHP) sold in the federal exchange. This leads to an increase in premiums compared to a pre-ACA design. It also leads to higher premiums for less generous plan designs, such as a high deductible health plan (HDHP) than what might have been offered without ACA market regulation. Below are the expected premiums for the state over the course of the next 10 years starting in 2015.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Family Coverage Average										
Platinum	\$20,301	\$21,429	\$22,736	\$24,122	\$25,592	\$27,150	\$28,802	\$30,554	\$32,411	\$34,380
Gold	\$18,060	\$19,057	\$20,221	\$21,455	\$22,764	\$24,151	\$25,623	\$27,183	\$28,837	\$30,591
Silver	\$15,859	\$16,734	\$17,757	\$18,840	\$19,990	\$21,208	\$22,500	\$23,871	\$25,323	\$26,863
Bronze - Narrow	\$7,920	\$8,081	\$12,581	\$12,962	\$13,355	\$13,760	\$14,177	\$14,607	\$15,050	\$15,506
Bronze - Catastrophic	\$9,818	\$10,028	\$16,443	\$17,291	\$18,183	\$19,120	\$20,105	\$21,141	\$22,230	\$23,375
Single Person Coverage Av	/erage									
Platinum	\$7,047	\$7,381	\$7,845	\$8,337	\$8,859	\$9,413	\$10,000	\$10,624	\$11,285	\$11,986
Gold	\$6,080	\$6,360	\$6,762	\$7,188	\$7,640	\$8,120	\$8,629	\$9,169	\$9,741	\$10,349
Silver	\$5,411	\$5,649	\$6,008	\$6,390	\$6,795	\$7,224	\$7,680	\$8,163	\$8,676	\$9,220
Bronze - Narrow	\$1,796	\$1,777	\$4,336	\$4,470	\$4,608	\$4,751	\$4,897	\$5,049	\$5,204	\$5,365
Bronze - Catastrophic	\$926	\$783	\$2,929	\$3,088	\$3,255	\$3,431	\$3,617	\$3,812	\$4,018	\$4,234





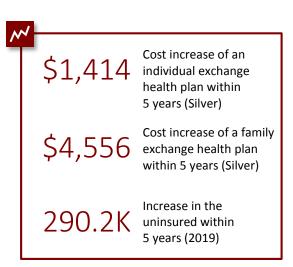
Measuring the Impact of the ACA after 2014 in Ohio By: Stephen T. Parente (Professor of Health Finance) and Michael Ramlet (MILI Adjunct Professor)

Introduction:

What is the impact of the ACA in the state of Ohio after 2014?

Using the 2014 enrollment report data and a microsimulation model funded in part by the U.S. Department of Health and Human Services, we estimate the national and state impact of the ACA on insurance prices and enrollment from 2015-2024.

We summarize the impact on Private Insurance (individual and employer), Medicaid and the Uninsured from 2015 to 2024 as well as the changes in health plan costs over the same period.



Private Insurance, Medicaid and the Uninsured:

The ACA offers subsidies in the private individual insurance market and offers states the choice to expand Medicaid coverage with federal support. Below is a ten year enrollment estimate based on each state's Medicaid decision and their respective insurance marketplace.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	1,271.8	1,421.5	1,030.2	1,045.2	1,055.0	1,065.0	1,075.2	1,086.8	1,099.4	1,103.8
Employer	6,356.5	6,364.8	6,108.4	6,054.7	6,001.1	5,949.0	5,895.5	5,834.2	5,755.8	5,648.9
Medicaid	1,712.4	1,747.4	1,811.3	1,845.0	1,879.3	1,913.2	1,946.2	1,978.5	2,011.0	2,044.9
Uninsured	1,074.5	904.1	1,367.5	1,363.5	1,364.7	1,365.8	1,366.1	1,366.7	1,371.2	1,385.5
Percent Chan	ge									
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	8%	12%	-28%	1%	1%	1%	1%	1%	1%	0%
Employer	0%	0%	-4%	-1%	-1%	-1%	-1%	-1%	-1%	-2%
Medicaid	9%	2%	4%	2%	2%	2%	2%	2%	2%	2%
Uninsured	-20%	-16%	51%	0%	0%	0%	0%	0%	0%	1%

The ACA had a significant impact on health plan cost calculations. Under the law, premiums for a given class of insurance plan in the federal exchange cannot vary by more than a 3:1 ratio. In addition, the different plan designs increase the generosity of qualified health plans (QHP) sold in the federal exchange. This leads to an increase in premiums compared to a pre-ACA design. It also leads to higher premiums for less generous plan designs, such as a high deductible health plan (HDHP) than what might have been offered without ACA market regulation. Below are the expected premiums for the state over the course of the next 10 years starting in 2015.

Premiums										
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Family Coverage Average										
Platinum	\$22,045	\$23,269	\$24,688	\$26,194	\$27,789	\$29,482	\$31,276	\$33,178	\$35,195	\$37,334
Gold	\$19,092	\$20,142	\$21,373	\$22,679	\$24,063	\$25,531	\$27,087	\$28,738	\$30,487	\$32,343
Silver	\$17,497	\$18,461	\$19,589	\$20,785	\$22,053	\$23,398	\$24,824	\$26,335	\$27,938	\$29,638
Bronze - Narrow	\$5,819	\$5,908	\$13,602	\$14,014	\$14,439	\$14,877	\$15,328	\$15,793	\$16,272	\$16,765
Bronze - Catastrophic	\$6,866	\$6,945	\$17,369	\$18,263	\$19,202	\$20,190	\$21,228	\$22,319	\$23,467	\$24,673
Single Person Coverage Av	verage									
Platinum	\$7,359	\$7,716	\$8,199	\$8,712	\$9,255	\$9,832	\$10,443	\$11,092	\$11,780	\$12,509
Gold	\$6,306	\$6,601	\$7,016	\$7,458	\$7,926	\$8,422	\$8,949	\$9,507	\$10,100	\$10,729
Silver	\$5,522	\$5,769	\$6,135	\$6,523	\$6,936	\$7,373	\$7,837	\$8,330	\$8,852	\$9,406
Bronze - Narrow	\$1,224	\$1,194	\$4,480	\$4,618	\$4,760	\$4,906	\$5,057	\$5,213	\$5,373	\$5,538
Bronze - Catastrophic	\$598	\$408	\$3,778	\$3,982	\$4,196	\$4,421	\$4,659	\$4,908	\$5,172	\$5,449





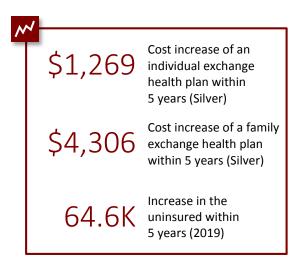
Measuring the Impact of the ACA after 2014 in Oregon By: Stephen T. Parente (Professor of Health Finance) and Michael Ramlet (MILI Adjunct Professor)

Introduction:

What is the impact of the ACA in the state of <u>Oregon</u> after 2014?

Using the 2014 enrollment report data and a microsimulation model funded in part by the U.S. Department of Health and Human Services, we estimate the national and state impact of the ACA on insurance prices and enrollment from 2015-2024.

We summarize the impact on Private Insurance (individual and employer), Medicaid and the Uninsured from 2015 to 2024 as well as the changes in health plan costs over the same period.



Private Insurance, Medicaid and the Uninsured:

The ACA offers subsidies in the private individual insurance market and offers states the choice to expand Medicaid coverage with federal support. Below is a ten year enrollment estimate based on each state's Medicaid decision and their respective insurance marketplace.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	471.8	574.7	419.2	418.3	418.2	419.2	421.2	422.7	422.6	421.0
Employer	1,710.8	1,711.6	1,654.5	1,638.8	1,622.1	1,605.3	1,588.1	1,568.9	1,545.4	1,514.4
Medicaid	651.2	658.1	685.2	698.6	712.1	725.3	738.3	751.3	764.4	777.6
Uninsured	442.8	331.7	496.7	502.0	507.4	511.8	516.0	521.4	529.2	538.7
Percent Chan	ge									
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	17%	22%	-27%	0%	0%	0%	0%	0%	0%	0%
Employer	1%	0%	-3%	-1%	-1%	-1%	-1%	-1%	-1%	-2%
Medicaid	9%	1%	4%	2%	2%	2%	2%	2%	2%	2%
Uninsured	-23%	-25%	50%	1%	1%	1%	1%	1%	1%	2%

The ACA had a significant impact on health plan cost calculations. Under the law, premiums for a given class of insurance plan in the federal exchange cannot vary by more than a 3:1 ratio. In addition, the different plan designs increase the generosity of qualified health plans (QHP) sold in the federal exchange. This leads to an increase in premiums compared to a pre-ACA design. It also leads to higher premiums for less generous plan designs, such as a high deductible health plan (HDHP) than what might have been offered without ACA market regulation. Below are the expected premiums for the state over the course of the next 10 years starting in 2015.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Family Coverage Average										
Platinum	\$20,821	\$21,960	\$23,304	\$24,728	\$26,239	\$27,841	\$29,540	\$31,341	\$33,251	\$35,276
Gold	\$18,329	\$19,319	\$20,504	\$21,761	\$23,094	\$24,507	\$26,006	\$27,595	\$29,280	\$31,067
Silver	\$16,576	\$17,465	\$18,538	\$19,676	\$20,882	\$22,162	\$23,519	\$24,958	\$26,483	\$28,101
Bronze - Narrow	\$8,228	\$8,384	\$12,832	\$13,221	\$13,623	\$14,036	\$14,463	\$14,902	\$15,354	\$15,820
Bronze - Catastrophic	\$9,739	\$9,882	\$16,052	\$16,883	\$17,758	\$18,677	\$19,644	\$20,661	\$21,730	\$22,854
Single Person Coverage Av	erage									
Platinum	\$6,465	\$6,751	\$7,180	\$7,636	\$8,119	\$8,632	\$9,176	\$9,754	\$10,366	\$11,016
Gold	\$5,732	\$5,981	\$6,362	\$6,767	\$7,196	\$7,652	\$8,136	\$8,649	\$9,193	\$9,771
Silver	\$5,006	\$5,200	\$5,537	\$5,895	\$6,275	\$6,679	\$7,107	\$7,561	\$8,043	\$8,548
Bronze - Narrow	\$2,079	\$2,055	\$3,772	\$3,890	\$4,012	\$4,137	\$4,266	\$4,399	\$4,536	\$4,677
Bronze - Catastrophic	\$2,000	\$1,925	\$3,944	\$4,153	\$4,373	\$4,605	\$4,849	\$5,106	\$5,376	\$5,661





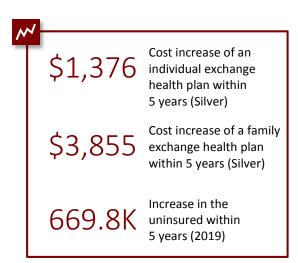
Measuring the Impact of the ACA after 2014 in Texas By: Stephen T. Parente (Professor of Health Finance) and Michael Ramlet (MILI Adjunct Professor)

Introduction:

What is the impact of the ACA in the state of <u>Texas</u> after 2014?

Using the 2014 enrollment report data and a microsimulation model funded in part by the U.S. Department of Health and Human Services, we estimate the national and state impact of the ACA on insurance prices and enrollment from 2015-2024.

We summarize the impact on Private Insurance (individual and employer), Medicaid and the Uninsured from 2015 to 2024 as well as the changes in health plan costs over the same period.



Private Insurance, Medicaid and the Uninsured:

The ACA offers subsidies in the private individual insurance market and offers states the choice to expand Medicaid coverage with federal support. Below is a ten year enrollment estimate based on each state's Medicaid decision and their respective insurance marketplace.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	2,889.5	2,877.2	2,812.7	2,749.0	2,689.7	2,639.8	2,590.2	2,516.7	2,408.4	2,295.1
Employer	11,940.1	11,889.5	11,809.9	11,712.6	11,603.1	11,485.3	11,358.7	11,216.1	11,043.6	10,823.4
Medicaid	3,914.3	3,974.9	4,040.4	4,103.5	4,164.2	4,222.2	4,278.1	4,332.4	4,386.2	4,440.6
Uninsured	3,199.4	3,315.5	3,494.0	3,680.4	3,869.2	4,054.9	4,248.4	4,477.6	4,758.6	5,066.7
Percent Chan	ge									
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Individual	5%	0%	-2%	-2%	-2%	-2%	-2%	-3%	-4%	-5%
Employer	0%	0%	-1%	-1%	-1%	-1%	-1%	-1%	-2%	-2%
Medicaid	1%	2%	2%	2%	1%	1%	1%	1%	1%	1%
Uninsured	-1%	4%	5%	5%	5%	5%	5%	5%	6%	6%

The ACA had a significant impact on health plan cost calculations. Under the law, premiums for a given class of insurance plan in the federal exchange cannot vary by more than a 3:1 ratio. In addition, the different plan designs increase the generosity of qualified health plans (QHP) sold in the federal exchange. This leads to an increase in premiums compared to a pre-ACA design. It also leads to higher premiums for less generous plan designs, such as a high deductible health plan (HDHP) than what might have been offered without ACA market regulation. Below are the expected premiums for the state over the course of the next 10 years starting in 2015.

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Family Coverage Average										
Platinum	\$19,319	\$20,363	\$21,612	\$22,936	\$24,341	\$25,831	\$27,410	\$29,085	\$30,861	\$32,744
Gold	\$16,939	\$17,841	\$18,939	\$20,103	\$21,337	\$22,646	\$24,033	\$25,505	\$27,066	\$28,721
Silver	\$14,865	\$15,646	\$16,611	\$17,635	\$18,720	\$19,872	\$21,092	\$22,387	\$23,760	\$25,216
Bronze - Narrow	\$6,890	\$7,001	\$12,074	\$12,441	\$12,819	\$13,209	\$13,611	\$14,025	\$14,451	\$14,890
Bronze - Catastrophic	\$8,470	\$8,560	\$15,831	\$16,650	\$17,512	\$18,419	\$19,372	\$20,374	\$21,427	\$22,535
Single Person Coverage Av	erage/									
Platinum	\$7,047	\$7,397	\$7,858	\$8,348	\$8,866	\$9,417	\$10,000	\$10,620	\$11,276	\$11,973
Gold	\$6,195	\$6,496	\$6,902	\$7,334	\$7,791	\$8,277	\$8,791	\$9,337	\$9,917	\$10,531
Silver	\$5,355	\$5,607	\$5,960	\$6,334	\$6,731	\$7,152	\$7,599	\$8,073	\$8,509	\$8,982
Bronze - Narrow	\$1,530	\$1,510	\$4,097	\$4,223	\$4,353	\$4,488	\$4,626	\$4,768	\$4,915	\$5,067
Bronze - Catastrophic	\$1,502	\$1,420	\$4,637	\$4,880	\$5,136	\$5,406	\$5,689	\$5,987	\$6,301	\$6,631

