The Affordable Care Act (ACA) has several provisions in it that will affect an STD clinic. In particular, ACA may make it more worthwhile for safety net providers, like STD clinics, to consider initiating or expanding third-party billing. Why? Below is a brief introduction to the ACA provisions that are likely to have an impact on STD clinics.

How is ACA likely to impact STD clinics?

• **The population with Medicaid coverage is likely to increase if your clinic is in a state that expanded Medicaid.** Twenty-six states and the District of Columbia expanded Medicaid. The ACA expanded the minimum income eligibility threshold to 138 percent FPL for non-elderly adults. The newly insured include adults without dependent children. For clinics that serve low income individuals, this means many of your existing uninsured patients are likely to get covered.

• **Private insurance coverage may increase in your clinic’s patient population.** Private insurance is now required for most Americans. For the uninsured who do not qualify for Medicaid, individuals and families may purchase health insurance, and may qualify for subsidies, though the state or federal marketplaces, also called exchanges.

• **More young people who visit your clinic may be covered by their parents’ insurance than before ACA.** If a health plan covers children, they can be added to or kept on a parent’s health insurance policy until they turn 26 years old, even if they married, not living with their parents, attending school, or are not financially dependent on their parents. For STD clinics that serve young people, this could mean more patients with insurance coverage.

• **More health plans may be interested in contracting with you as an in-network provider.** Qualified Health Plans in state and federal exchanges are required to include “essential community providers” meaning 340B-certified safety net providers, like STD clinics, in their networks. This means that private insurance companies have more of an incentive to contract with essential community providers.

• **Several of the preventive health services that are required to be covered without cost sharing by new insurance plans are services regularly offered by STD clinics.** These services include: HIV/STD screenings for certain populations, high intensity behavioral counseling (to prevent STDs), HPV and Hepatitis vaccinations, and high-risk HPV DNA testing. [See: List of Preventative Services]

For more information on ACA, visit: NCSD Policy Updates or healthcare.gov. *STDTAC/Jan. 2014.

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