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President Donald Trump looks at Sen. Rand Paul, R-Ky., at the White House Oct. 12 after signing an executive order that loosens certain regulations in the Affordable Care Act to allow small businesses, trade groups, unions and self-employed individuals to join together and form associations to cheaper bare-bones health insurance plans. (CNS/Kevin Lamarque, Reuters)

Julie Rovner

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Washington — November 2, 2017

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President Donald Trump’s decision last month to cut off payments to insurers for discounts they provide to some low-income people who buy individual health coverage was big news. But it was far from the first time the president and his administration have sought to deter enrollment on the insurance marketplaces set up by the Affordable Care Act.

Enrollment for 2018 plans runs Nov. 1 through Dec. 15. Over the course of the year, the administration has announced a variety of changes that affect sign-ups:

### **Jan. 20, 2017:**

On his first day in office, Trump issues an [executive order](#) to “minimize the unwarranted economic and regulatory burdens” of the health law. It includes instructions to agencies to “exercise all authority and discretion available to them to waive, defer, grant exemptions from, or delay the implementation of any provision or requirement of the Act that would impose a fiscal burden.”

The same day, officials at the Department of Health and Human Services [begin removing](#) information on how to sign up for coverage from the healthcare.gov website, even though enrollment for 2017 policies lasts until the end of the month.

### **Jan. 26, 2017:**

HHS officials abruptly pull funding for [outreach and advertising](#) for the last days of 2017 enrollment. That is usually when healthier people traditionally enroll. Some of the advertising and outreach [continues](#), but that’s largely because it is too late to cancel advertising purchased and scheduled by outgoing Obama administration officials.

One former Obama-era official later estimates nearly a [half a million fewer people](#) enrolled as a result of the cuts to outreach and advertising.

### **Feb. 15, 2017:**

The Trump administration [proposes new rules](#), backed by the insurance industry, cutting the 2018 open enrollment period in half and making it more difficult for people to buy insurance outside that six-week window. Insurers say the rules would

reduce the number of people who “game the system” by waiting until they need care to sign up for coverage. These rules [are finalized](#) in April.

The [Internal Revenue Service](#) also announces it will not reject 2016 tax returns for failure to include information on individual tax filers’ health insurance status. This is a reversal of plans to step up enforcement of the individual mandate, which requires most individuals to demonstrate they have insurance coverage or pay a fine. (In October, that [policy was reversed](#) again for the 2018 filing season; meaning the IRS would be more strictly enforcing the mandate.)

### **March 13, 2017:**

HHS Secretary Tom Price [sends a letter](#) to each state saying the department is eager to help them unleash state innovations for the insurance marketplaces to “alleviate the burdens” of the Affordable Care Act. He says HHS is eager to see ideas from the states for bringing down premium prices through new insurance pools that would help cover the costs of high-risk enrollees.

### **May 4, 2017:**

The House narrowly passes the [American Health Care Act](#), its version of a “repeal and replace” measure for the health law, but the bill has no support in the Senate. Despite that, [Trump says at a celebration in the White House Rose Garden](#) that not only was the House bill “a great plan,” but also, of the underlying health law, “it’s dead. It’s essentially dead.”

### **June 7, 2017:**

HHS launches a series of videos on its [YouTube channel](#) detailing the problems people are having with the Affordable Care Act.

### **July 29, 2017:**

As the Senate heads for its ultimately unsuccessful effort to overhaul the health law, Trump [threatens](#) to stop funding the cost-sharing reduction (CSR) payments. These reimburse insurers for discounts that they are required by the Affordable Care Act to offer to some low-income exchange enrollees to help them afford deductibles and other out-of-pocket costs. The payments were the subject of a [lawsuit filed by the House](#) against the Obama administration, with the House charging that Congress

had not provided a specific appropriation and therefore the administration was making the payments illegally.

**Aug 14, 2017:**

HHS officials make clear that they will [not be working with local groups](#) on enrollment efforts for the sign-up period starting Nov. 1.

**Aug 31, 2017:**

HHS officials [announce](#) that the advertising budget will be cut 90 percent for the coming enrollment season and programs that provide help to people signing up will be cut by 41 percent. Officials tell reporters on a call that the programs are ineffective and people are already aware of the health law logistics, something public opinion polls suggest [is not the case](#).

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**Sept. 22, 2017:**

During a conference call with community groups, HHS officials announce [the federal enrollment website](#) healthcare.gov will be shut down for as much as 12 hours every Sunday except one during the six weeks of open enrollment. Officials say the time is needed for site maintenance, although such maintenance took far fewer hours during the Obama administration.

**Sept. 27, 2017:**

Trump officials instruct HHS regional directors and staff not to participate in state events to promote enrollment. An HHS official tells [BuzzFeed](#) that enrollment events “are organized and implemented by outside groups with their own agendas, not HHS.”

**Sept. 29, 2017:**

Oklahoma [withdraws its request](#) for a waiver from federal rules that would have allowed the state to create a “reinsurance” program that it estimated could have reduced premiums in the state by more than 30 percent. The proposal followed Price’s April letter inviting states to seek changes, and state officials said they had

been led to believe a waiver was forthcoming. But it failed to materialize. State officials say the delay would keep the program from launching in time for the 2018 plan year.

Earlier, Trump administration officials said [Minnesota](#) could institute a similar program, but that the state was also going to lose nearly \$370 million in funding for a separate health law program serving those with low incomes. Other states that are ultimately frustrated by the waiver process include [Iowa](#) and [Massachusetts](#).

### **Oct. 12, 2017:**

During the day, Trump signs an [executive order](#) pushing federal officials to make it easier for people to purchase insurance that does [not meet the regulatory standards](#) of the Affordable Care Act.

Late that night, he follows through on his threat to cut off the cost-sharing reduction payments to insurers. “The bailout of insurance companies through these unlawful payments is yet another example of how the previous administration abused taxpayer dollars and skirted the law to prop up a broken system,” says a statement from press secretary Sarah Huckabee Sanders.

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