

**Continued.**

(Billions of Dollars, by Fiscal Year)

	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2016-2020	2016-2025
Sec. 213 - Repeal of Tax on Prescription Medications	-2.9	-3.9	-4.0	-2.7	-2.7	-2.7	-2.7	-2.7	-2.7	-2.7	-16.1	-29.6
Sec. 214 - Repeal of Medical Device Excise Tax	-1.4	-2.0	-2.1	-2.2	-2.3	-2.5	-2.6	-2.8	-2.9	-3.1	-10.0	-23.9
Sec. 215 - Repeal of Health Insurance Tax	-9.9	-12.0	-12.5	-13.1	-13.8	-14.6	-15.5	-16.4	-17.0	-17.5	-61.2	-142.2
Sec. 216 - Repeal of Elimination of Deduction for Expenses Allocable to Medicare Part D Subsidy	-0.1	-0.2	-0.2	-0.2	-0.2	-0.2	-0.2	-0.2	-0.2	-0.2	-0.8	-1.8
Sec. 217 - Repeal of Chronic Care Tax	-0.6	-2.0	-3.4	-3.7	-4.1	-4.5	-4.9	-5.3	-5.7	-6.1	-13.7	-40.0
Sec. 218 - Repeal of Medicare Tax Increase	-6.4	-8.9	-10.1	-10.9	-11.7	-12.7	-13.8	-14.9	-16.1	-17.6	-48.0	-123.0
Sec. 219 - Repeal of Tanning Tax	-0.1	-0.1	-0.1	-0.1	-0.1	-0.1	-0.1	-0.1	-0.1	-0.1	-0.4	-0.8
Sec. 220 - Repeal of Net Investment Tax	-15.1	-7.7	-20.8	-21.8	-22.9	-24.1	-25.5	-26.8	-28.2	-29.7	-88.4	-222.8
Sec. 221 - Remuneration	*	-0.1	-0.1	-0.1	-0.1	-0.1	-0.1	-0.1	-0.1	-0.1	-0.3	-0.6
Sec. 222 - Economic Substance Doctrine	-0.3	-0.5	-0.5	-0.6	-0.6	-0.6	-0.6	-0.7	-0.7	-0.7	-2.5	-5.8
<b>Total Changes in Revenues</b>	<b>-64.7</b>	<b>-65.0</b>	<b>-97.8</b>	<b>-113.6</b>	<b>-121.0</b>	<b>-129.5</b>	<b>-140.0</b>	<b>-150.3</b>	<b>-160.9</b>	<b>-154.8</b>	<b>-461.9</b>	<b>-1,197.0</b>
<i>On-Budget</i>	<i>-65.4</i>	<i>-67.6</i>	<i>-91.4</i>	<i>-103.3</i>	<i>-110.4</i>	<i>-117.7</i>	<i>-126.8</i>	<i>-135.9</i>	<i>-145.1</i>	<i>-140.8</i>	<i>-438.0</i>	<i>-1,103.6</i>
<i>Off-Budget</i>	<i>0.8</i>	<i>2.6</i>	<i>-6.4</i>	<i>-10.3</i>	<i>-10.6</i>	<i>-11.8</i>	<i>-13.2</i>	<i>-14.5</i>	<i>-15.8</i>	<i>-14.0</i>	<i>-23.9</i>	<i>-93.4</i>
<b>Net Increase or Decrease (-) in the Deficit Without Macroeconomic Feedback<sup>d,e</sup></b>												
<b>Impact on Deficit</b>	<b>32.3</b>	<b>25.5</b>	<b>-27.2</b>	<b>-47.6</b>	<b>-48.0</b>	<b>-47.7</b>	<b>-46.1</b>	<b>-43.2</b>	<b>-40.0</b>	<b>-53.0</b>	<b>-65.2</b>	<b>-295.6</b>
<i>On-Budget</i>	<i>33.1</i>	<i>28.1</i>	<i>-33.0</i>	<i>-56.9</i>	<i>-57.7</i>	<i>-58.5</i>	<i>-56.3</i>	<i>-56.6</i>	<i>-54.7</i>	<i>-65.9</i>	<i>-86.6</i>	<i>-381.3</i>
<i>Off-Budget</i>	<i>-0.8</i>	<i>-2.6</i>	<i>5.8</i>	<i>9.3</i>	<i>9.7</i>	<i>10.8</i>	<i>12.2</i>	<i>13.4</i>	<i>14.7</i>	<i>12.9</i>	<i>21.5</i>	<i>85.7</i>

Sources: Congressional Budget Office; staff of the Joint Committee on Taxation.

Notes: Numbers may not add up to totals because of rounding; \* = an increase or decrease between zero and \$50 million.

This amendment triggers the requirement for a macroeconomic analysis. However, because of the very short time available to prepare this estimate, CBO and JCT have determined that it is not practicable to provide that analysis at this time.

- For outlays, a positive number indicates an increase (adding to the deficit) and a negative number indicates a decrease (reducing the deficit); for revenues, a positive number indicates an increase (reducing the deficit) and a negative number indicates a decrease (adding to the deficit); for the deficit, a positive number indicates an increase and a negative number indicates a reduction.
- The projected savings from the coverage provisions of this amendment are smaller than those that would stem from repealing all of the coverage provisions of the Affordable Care Act (ACA). The amendment would leave in place certain rules established by the ACA that govern health insurance markets, including guaranteed issue and renewability of coverage, the requirement that health insurance cover certain health benefits, and rating rules that limit the extent to which premiums can vary based on individual characteristics. In addition, the amendment retains provisions related to coverage for young adults. CBO and JCT project that repealing the subsidies and mandates established by the ACA while leaving in place the insurance market reforms would result in a less healthy population in the nongroup market and correspondingly higher average premiums. In addition, the market for nongroup insurance, particularly in smaller states, could become unstable, leading to very low to no participation by insurers and consumers. Relative to an estimate of fully repealing all provisions of the ACA related to insurance coverage, leaving the market reforms in place would lead to a reduction in the number of people covered in the nongroup market and an increase in the number of uninsured and people with employment-based insurance. In addition, allowing young adults to remain on their parents' plan would also reduce the number of people in the nongroup market and increase the number of people with employment-based insurance while decreasing the number of people without insurance.
- Estimate is for the combined total of each section where "included in coverage estimate" is noted. CBO and JCT estimate that each section noted as such has a budgetary effect but the agencies are not able to produce unique estimates for each because the provisions interact with each other and their effects are estimated simultaneously.
- Excluding macroeconomic feedback, the agencies estimate that enacting either title I or title II of the amendment would not increase net direct spending or on-budget deficits in any year after 2025 or any of the four consecutive 10-year periods beginning in 2026.
- CBO and JCT estimate that titles I and II would each reduce on-budget deficits by more than \$1 billion over the 2016-2025 period.