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Health Insurance Reform

CONGRESSWOMAN GABRIELLE GIFFORDS

The Affordable Health Care for America Act will provide security for seniors, guarantee access to health insurance coverage for the uninsured and make health care affordable for the middle class — while responsibly reducing the federal deficit over the next decade and beyond.

Based on our analysis of data for Arizona's 8th Congressional District from the U.S. Census, the Centers for Medicare and Medicaid Services and the Department of Health and Human Services, this bill will:

- Improve employer-based coverage for 447,000 residents.
- Provide tax credits and subsidies to help pay for coverage for up to 176,000 households.
- Improve Medicare for 135,000 beneficiaries, including closing the prescription medication donut hole for 14,100 seniors.
- Guarantee that 10,300 residents with pre-existing conditions can obtain coverage.
- Allow 15,200 small businesses to obtain affordable health care coverage and provide tax credits to help reduce health insurance costs for up to 13,400 small businesses.
- Provide coverage for 40,500 uninsured residents.
- Allow 57,000 young adults to obtain coverage on their parents' insurance plans.
- Protect up to 900 families from bankruptcy due to unaffordable health care costs.
- Reduce the cost of uncompensated care for hospitals and health care providers by \$38 million.

Employer Sponsored Insurance: Some **447,000** district residents receive health care coverage from their employer. Under the legislation, individuals and families with employer-based coverage can keep the health insurance coverage they have now, and it will improve.

- No co-pays or deductibles for preventive care.
- No more rate increases or coverage denials for pre-existing conditions; 10,300 district residents have pre-existing medical conditions that prevents them from buying insurance.
- Guaranteed oral, vision, and hearing benefits for children.

Currently Uninsured: Those without insurance will be able to purchase coverage at group rates through a health insurance exchange.

Affordability: Middle class individuals and families will receive affordability credits to ensure they can pay for the coverage they need.

- There are **176,000** households in the district that could qualify for affordability credits to purchase insurance.
- The bill caps annual out-of-pocket costs at \$5,950 for individuals and \$11,900 for families and eliminates lifetime limits on insurance coverage, ensuring that no citizen will have to face financial ruin because of high health care costs.

Strengthening Medicaid: Expands Medicaid coverage (AHCCCS in Arizona) and dramatically increases federal reimbursement to states for the costs of the program.

Improving Medicare: 135,000 Medicare beneficiaries in the district will see improvements to Medicare through:

- free preventive and wellness care;
- improved primary and coordinated care, improved nursing home quality; and
- strengthening of the Medicare Trust Fund, extending its solvency from 2017 to 2026

More than **14,000** district residents will see the Medicare donut hole reduced by \$500 in 2010, cutting brand-name drug costs in the donut hole by 50%, and completely eliminating the donut hole by 2019.

More Employer Sponsored Coverage: Small businesses with up to 100 employees will be able to join the health insurance exchange, benefiting from group rates and a greater choice of insurers.

- There are 15,200 small businesses in the district that will be able to join the health insurance exchange.
- Businesses with 25 employees or less and average wages of less than \$50,000 will qualify for tax credits of up to 35% of the costs of providing health insurance. There are up to 13,400 small businesses in the district that could qualify for credits.
- Beginning in 2014, the small business tax credits will cover 50% of premiums.

No deficit spending: The Affordable Health Care for America Act is fully paid-for and cuts the deficit.

- No tax increase for 99% of district residents.
- Half of the costs are paid by eliminating waste, fraud, abuse and excessive profits for private insurers in Medicare and Medicaid
- According to the Congressional Budget Office, the bill will cut the deficit by over \$138 billion over the next decade and by \$1.2 trillion in the second ten years.

Timeline: Many aspects of the bill are implemented between now and 2013. Here are the major benefits and when they will be in effect:

2010

- Prohibits insurance companies from using pre-existing conditions to exclude children from coverage
- Provides a \$250 rebate to Medicare beneficiaries who hit the donut hole in 2010
- Offers tax credits of up to 35 percent of premiums to small businesses that choose to offer coverage
- Provides free preventative care under Medicare
- Bans insurance companies from dropping people from coverage when they get sick
- Prevents insurance companies from placing lifetime caps on coverage
- Extends coverage for young people up to 26th birthday through parents' insurance
- Prohibitions on post-retirement reductions of retiree benefits
- Expansions of public health workforce, preventive health services and community health centers
- Eliminates cost sharing for preventative services in Medicaid and Medicare

2011-2012

- Free, annual wellness visit and personalized prevention plan services for Medicare beneficiaries
- Provides a 10 percent Medicare bonus payment for primary care physicians and general surgeons

2014

- Full implementation of all health insurance reforms
- Insurers can no longer exclude coverage based on pre-existing conditions, gender, or other factors
- Start of insurance exchanges
- Start of affordability credits
- Provides a choice of coverage through a multi-State plan, available nationwide
- Implements second phase of small business tax credits (up to 50% of the cost of premiums)

2014 and Beyond

- Expands Health Insurance Exchange to increasingly larger employers
- Completely closes the donut hole for seniors by 2020