

THE AFFORDABLE HEALTHCARE ACT EXPLAINED AKA OBAMACARE

The following is a simplified list of the major provisions of the new healthcare law passed by Congress in 2010 and put into effect in 2013.

Insurance Companies Regulations

- cannot deny people coverage because of a pre-existing condition
- cannot set a life-time cap on someone's coverage
- cannot remove a child from a parent's healthcare plan until the age of 26 years old.
- must be using 80% of the money they generate to provide patient coverage or a rebate must be given to every customer.
- All plans are required to cover certain services (list is on the first page)

Employer Regulations

- All businesses that have 50 or more full-time employees must provide health insurance or risk a fine for each employee not covered but only if that employee receives federal subsidies to help them purchase health insurance.
- The government will however subtract the first 30 employees not covered when calculating the fines.
- Any businesses with under 50 employees are not subjected to this regulation.

Individual Mandate

- Every person in the U.S. must obtain health insurance either through their employer or they must purchase it through online "exchanges" or shop places. If you fail to purchase insurance you are fined 2.5% of your income when you file your taxes.
- People making under \$88,000 for a family of four can qualify for federal tax subsidies to help them purchase health insurance.

Medicaid

- All states have the option of expanding this program to anyone that makes 138% of the federal poverty level (about \$32,000 for a family of four). If the state "opts-in" the federal government will cover 100% of the cost and then 90% for every year after that.

The Funding of A.C.A

- A new 3.8% Medicaid tax on capital gains (income earned through stocks or the sale of prop-

WHY REPUBLICANS HATE IT

- Call it Socialism
- Raises taxes on certain individuals
- Believe the individual mandate is unconstitutional.

WHY DEMOCRATS LIKE IT

- It insures more people
- Keeps insurance companies in check
- Creates higher quality plans

US Healthcare System Questions

Directions: Answer the following questions honestly. They are opinions and have no right answers.

1. Should Health insurance companies be able to deny someone coverage for a pre-existing condition? Why or why not?

2. Should Health insurance companies be able to put a life-time cap on Health Insurance? Why or why not?

3. Should children be allowed to stay on their parent's health insurance plans until they are 26 years old? Why or why not?

4. Should all people be REQUIRED to purchase a health insurance plan?

5. Would you be willing to see the rich pay a higher tax if it helped to cover the uninsured? Why or why not?

6. Examine the list below. Should an insurance company be forced to cover all of these things? YES or NO
 - A) Outpatient medical care: _____
 - B) Emergency care: _____
 - C) Hospitalization: _____
 - D) Maternity and newborn: _____
 - E) Mental health and substance use services: _____
 - F) Prescription drugs: _____
 - G) Rehabilitation services and devices: _____
 - H) Lab tests: _____
 - I) Preventive and wellness services and chronic disease management: _____
 - J) Pediatric services, including dental and vision care: _____