

Background:

TCDD Public Policy staff will provide an overview of the status and implementation of various federal legislative initiatives that impact people with developmental disabilities. Additional information is provided in meeting materials.

Public Policy Committee**Agenda Item 6. E.****Expected Action:**

The Committee will receive an update regarding federal policy matters and provide guidance as needed. No action is anticipated.

Council**Agenda Item 16. C.****Expected Action:**

Update item only.

PATIENT PROTECTION & AFFORDABLE CARE ACT

OVERVIEW

On March 23, 2010, President Obama signed into law the Patient Protection and Affordable Care Act. This is an historic law that will provide access to health insurance for millions of Americans who could previously not afford it or were disqualified from coverage due to a pre-existing condition. This new law is also the capstone to over 50 years of hard fought legislative battles to expand health insurance coverage in the United States.

The new law provides changes in Healthcare Reform for Americans with Disabilities. The Affordable Care Act gives Americans with Disabilities greater control over their own health care.

I. **Greater Choices for Americans with Disabilities**

Expands the Medicaid Program

- Expands the Medicaid program to more Americans, including people with disabilities.

New Options for Long-Term Supports and Services

- Provides a new, voluntary, self-insured insurance program (CLASS Act) that helps families pay for the costs of long-term supports and services if a loved one develops a disability.
- Creates new options for states to provide home and community based services in Medicaid, enabling more people with disabilities to access long-term services in the setting they choose.
- Extends the Money Follows the Person program and makes improvements to the Medicaid Home- and Community-Based Services (HCBS) option.

Eliminates Insurance Company Discrimination

- This year, prohibits insurance companies from denying children coverage based on pre-existing conditions. Going forward, the Act will prohibit insurance companies from denying coverage or charging more to any person based on their medical history, including genetic information.
- This year, provides access to affordable insurance for uninsured Americans with pre-existing conditions through a temporary, subsidized high-risk pool, which will help protect them from medical bankruptcy. This high risk pool is a stop-gap measure that will serve as a bridge to a reformed health insurance marketplace.

More Affordable Choices and Competition

- Creates state-based health insurance Exchanges to provide families with the same private insurance choices that the President and Members of Congress will have, including multi-state plans to foster competition and increase consumer choice.

One-Stop Shopping

- Provides standardized, easy-to-understand information through the Exchange on different health insurance plans so Americans can easily compare health plans to choose the quality, affordable option that is right for them.

Insurance Security

- Ensures that families always have guaranteed choices of quality, affordable health insurance whether they lose their job, switch jobs, move, or get sick, through creation of Exchanges.

Makes Health Care Accessible to Everyone

- Provides access to health insurance through Exchanges to those without job-based coverage and provides premium tax credits to those who can't afford coverage, significantly increasing access to a choice of health insurance plans for individuals with disabilities. This will enable individuals to keep their jobs rather than giving up employment in order to receive Medicaid benefits.

II. Lowering Costs by Rewarding Quality and Cutting Waste

Insurance Industry Reforms that Save Money

- This year, eliminates all lifetime limits on how much insurance companies cover if beneficiaries get sick and bans insurance companies from dropping people from coverage when they get sick. The Act also restricts the use of annual limits in all new plans and existing employer plans this year, until 2014 when all annual limits are prohibited.
- Going forward, plans in the new Health Insurance Exchanges and all new plans will have a cap on what insurance companies can require beneficiaries to pay in out-of-pocket expenses, such as co-pays and deductibles.
- Supports States starting in plan year 2011 in requiring health insurance companies to submit justification for requested premium increases, and insurance companies with excessive or unjustified premium exchanges may not be able to participate in the new Exchanges.
- Cracks down on excessive insurance overhead starting in 2011 by applying standards to how much insurance companies can spend on non-medical costs, such as bureaucracy, executive salaries, and marketing, and provides consumers a rebate if non-medical costs are too high.

III. Assuring Accessible, Quality, Affordable Health Care for People with Disabilities

Preventive Care for Better Health

- This year, requires new plans to cover prevention and wellness benefits at no charge to American families by exempting these benefits from deductibles and other cost-sharing requirements.
- Invests in prevention and public health to encourage innovations in health care that prevent illness and disease before they require more costly treatment. People with disabilities are less likely to receive preventive care and are more likely to be diagnosed with screenable cancers at a later stage.
- Improves access to medical diagnostic equipment so people with disabilities can receive routine preventive care.

Addresses Health Disparities

- Moves toward eliminating disparities by improving data collection on health disparities for individuals with disabilities and improving training of health providers.

Improve Care for Chronic Disease

- Invests in innovations such as medical homes and care coordination demonstrations in Medicare and Medicaid to prevent disabilities from occurring and progressing and to assist one in every 10 Americans who experience a major limitation in activity because of a chronic condition.