

Health Care Benefits for Children & Older Adults: The Affordable Care Act

Introduction

On March 23, 2010, President Barack Obama signed The Patient Protection and Affordable Care Act (ACA) into law. This important piece of legislation is designed to ensure that all Americans have access to some form of health care coverage. Because the ACA's reforms are so comprehensive, they are being phased in gradually, most between 2010 and 2014.

The ACA's new provisions and exchanges provide critical health care coverage and support to our youngest and oldest generations—many of whom currently have no health insurance. By 2019, an estimated 32 million uninsured children, youth, and older adults will gain coverage as a direct result of the ACA's reforms.¹ For these reasons, it is crucial that consumers and advocates alike learn about the new benefits available to ensure that the ACA is protected for all generations.

This fact sheet will help explain what you can expect from the health insurance marketplace over the next few years: what changes will take place, when they will take place, and most importantly, how they might affect you.

Ultimate Goal: Affordable Coverage For All

The ACA envisions the establishment of new one-stop-shop marketplaces (called “exchanges”) where Americans can buy health insurance. Beginning in 2014, each state will have its own exchanges to serve the individuals and employers who live or operate a business there—no matter their age or disability.²

Each state-based exchange is designed to:

- provide health care coverage to anyone at any age for equitable, low premiums;
- allow you to choose from among all available health insurance plans;
- increase competition among insurers to drive down costs; and
- make shopping for health insurance easier.³

What You Can Expect From the ACA Expands Coverage & Options

Medicaid

The ACA changes Medicaid eligibility requirements to provide health insurance to more Americans.⁴ Starting in 2014, individuals with incomes of approximately \$14,000 or less and families of four making approximately \$29,000 or less will be eligible to enroll in Medicaid.⁵ In addition, all foster youth under 25, who have spent at least six months in foster care, will be eligible for Medicaid.⁶



Photo by Richard Adler

Ultimately, the ACA's expansion of Medicaid will lead to greater coverage of children and older adults, the two largest groups served by Medicaid.⁷ For these individuals, Medicaid covers far more than traditional health care services. It is the nation's primary payor for long-term care.⁸ In addition, Medicaid pays for services that Medicare won't cover, such as hearing, vision, and dental care.⁹

Children's Health Insurance Program (CHIP)

CHIP provides critical health insurance coverage to children who do not qualify for Medicaid, but whose families cannot afford private coverage.¹⁰ For the nearly 7.5 million children in the United States who are uninsured, options such as Medicaid and CHIP are critical.¹¹ Jointly, Medicaid and CHIP cover one out of every three children in the United States.¹² Health insurance is now available for children in families making up to \$45,000 per year in almost every state.¹³

To ensure coverage of our nation's children, the ACA fully funds CHIP through 2019.¹⁴ It also prohibits states from cutting children from the program or making it more difficult for children to enroll in CHIP or Medicaid through 2019. To find out how to enroll a child in Medicaid or CHIP, visit www.insurekidsnow.gov.

Young Adults to Age 26

Before the ACA, many young adults faced a perilous new challenge upon graduation: finding their own health insurance.¹⁵ Most insurance companies would only allow young adults to stay on their parents' plan until age 19, or a few years longer for full-time students. Often, buying insurance coverage in the individual market was too expensive. If they opted to go without insurance, the combination of medical bills, student debt, and other expenses put them at financial risk.¹⁶ Under the ACA, young adults can now join or remain on their parents' health insurance plan until age 26, even if they are married, living away from home, at school, or financially independent.¹⁷

Kayla Holmstrom was only 9 years old when she contracted chronic osteomyelitis. She has had more than 25 surgeries to treat the disease, but flare ups can occur at any time. At age 24, Kayla would have lost health insurance coverage under her parents' plan had it not been for the ACA. Thanks to the ACA, Kayla, can remain on her parent's insurance plan until age 26 and pursue her dream of a career in nursing.

- Kayla's Story: Courtesy of The White House Voices of Health Reform

Early Retirees

The number of employers offering health benefits to retirees has declined significantly. In fact, in 2010, only 28 percent of employers extended health coverage to retirees.¹⁸ Without coverage from an employer, early retirees, individuals ages 55 and older who are not eligible for Medicare, risk being uninsured at a time when health care coverage is vital to both their physical and financial health.

To remedy this serious issue, the ACA created the Early Retiree Reinsurance Program (ERRP). Through ERRP, employers can apply for subsidies to offset the costs of providing early retirees with health coverage. The subsidies cover 80 percent of the cost of claims between \$15,000 and \$90,000.¹⁹

In 2014, affordable coverage will be available to early retirees in the new exchanges. Until then, early retirees have a critical role to play in informing employers of the availability of subsidies under ERRP and encouraging their employers to apply. For more information, please visit www.ERRP.gov.

Ensures Coverage for Those with Pre-existing Conditions

Coverage under the New Exchanges

Before the ACA was enacted, if you had a pre-existing condition, insurance companies could deny you coverage altogether, limit your benefits, or charge you much higher premiums. For the 133 million Americans who live with chronic diseases, finding affordable insurance coverage was nearly impossible.²⁰

The ACA stops this practice completely. Since 2010, the ACA has prohibited insurance companies from denying, charging more, or limiting benefits for children under the age of 19 because of a pre-existing condition.²¹ By 2014, this will be the case for every generation. In the new exchanges, insurers will have to charge you the same price they would charge any other person in the market who is your age.²²

Coverage until the New Exchanges Take Effect

Until the provision for pre-existing conditions goes into effect for everyone in 2014, affordable coverage will be available through Pre-Existing Condition Insurance Plans (PCIPs).²³ Created by the ACA, PCIPs provide comprehensive health care coverage and cannot charge you more simply because you have a pre-existing condition.²⁴

Most states have only three basic requirements to sign-up for PCIP. To qualify, you must: be uninsured for at least six months, have a pre-existing condition, and be a U.S. citizen or legal resident.²⁵ To learn about the PCIP plan in your state or to apply for coverage, visit www.pcip.gov.

Reduces Costs to Consumers

Prescription Drugs for Older Adults

Older adults with Medicare Part D pay a lot of money out-of-pocket for prescription drugs if they run into the "donut hole." This is a gap in prescription drug coverage during which the older adult beneficiary must pay for all prescription drugs out-of-pocket, up to a certain dollar amount. Then, Medicare Part D's cost coverage kicks back in.

Luckily, the ACA will gradually close the donut hole altogether by 2020, significantly reducing out-of-pocket prescription drug costs for older adults.²⁶ From now until 2020, those who reach the donut hole will receive an automatic 50 percent discount on the cost of covered brand name drugs and 7 percent off generic drugs.²⁷

Monthly Premiums

In 2014, the ACA will begin to offer tax credits to offset the cost of purchasing health insurance in the new exchanges.²⁸ These credits will be available to individuals making up to about \$43,000 and families of four making up to approximately \$88,000.²⁹ If you qualify, you can use the credits to lower your premiums each month rather than waiting until you file your tax return.

Child-only Policies

Beginning in 2014, the new exchanges will offer child-only health insurance policies. These policies will be available to grandparents raising grandchildren, kinship families, and parents whose employers do not provide health insurance coverage for dependents.³⁰ This option will help reduce the financial burden on these families.

Promotes Prevention

Free Preventive Care Services

Individuals of all ages can now receive recommended vaccinations and health screenings for free because of the ACA.³¹ The ACA requires insurers to provide these services at little or no cost to children,

James Howard was diagnosed with brain cancer in 2010. Unable to find health insurance coverage, he was spending \$10,000 a week out-of-pocket for prescription drugs. "It was a huge struggle," James says. Then, he found out about the ACA's Pre-Existing Condition Insurance Plan. "If it wasn't for the health care act, I wouldn't be talking to you today," he said. "Without the Pre-Existing Condition [Insurance] Plan, I would not have been able to continue my treatments]. I would not have been able to get coverage anywhere."

- James Story: Courtesy of The White House Voices of Health Reform



Photo by Gloria Robinson

youth, older adults, and individuals covered by Medicare, without charging the usual deductible, co-pay, or coinsurance. Visit www.HealthCare.gov for a list of all the free services.

Supports Long-term and Home-based Care

Long-term Care

Almost 70 percent of Americans will, at some point, need help caring for themselves or conducting routine daily activities, such as eating or bathing.³² Such care can be very expensive.

To address that concern, the ACA created a new, voluntary insurance program, available in 2012, as part of the Community Living Assistance Service and Supports (CLASS) Act.³³ Individuals whose employers participate in the program will be automatically enrolled and pay premiums in the form of payroll deductions. Once enrolled, if you later lose the ability to conduct two or three activities of daily living, you will receive an average cash benefit of \$50/day to help pay for services, so you can remain at home, in your community, and independent. For more information, visit the Administration on Aging at www.aoa.gov.

Home- and Community-based Care

Beginning in 2011, states will be able to offer a new Medicaid plan called the Community First Choice Program. This plan will help provide more home and community-based care.³⁴ In addition, it expands eligibility to older adults and children with higher incomes.

Protects Consumers from Insurance Company Abuses

Coverage When You Are Sick

Before the ACA was enacted, insurance companies could rescind your coverage or deny payment for claims because of honest small mistakes or technical errors you may have made on your health insurance application. The ACA prohibits this practice.³⁵

Furthermore, before ACA's enactment, your insurance company could drop you or significantly limit your coverage if you took part in clinical trials, despite no other effective treatments. Starting in 2014, the ACA will prohibit insurers from dropping you or limiting your insurance coverage for participating in a clinical trial.³⁶

Appeals and External Review

Under the ACA, for the first time in history, a vast majority of Americans will have the right to request an external review if a health insurance company denies their claim for payment.³⁷ To get an external review, you must first ask your insurer to reconsider its decision to deny payment. If you are turned down, you have the right to ask for an independent reviewer to examine your case.³⁸

Lifetime and Annual Limits

Before the ACA, your insurer could place a dollar limit on the amount it would spend on your "essential" health care services each year and cumulatively over your lifetime.³⁹ Essential services include emergency services, hospital stays, ambulatory services, and maternity and newborn care.⁴⁰ The ACA prohibits the use of lifetime limits, and starting in 2014, will ban annual limits.⁴¹

Creates Resources to Help Choose and Manage a Health Insurance Policy

New Health Insurance Finder

The ACA offers a user-friendly website to help consumers find, compare, and select health insurance policies for themselves and their families until the exchanges become available in 2014. Visit the site at <http://finder.healthcare.gov>.

Consumer Assistance Offices

The ACA also provides funding to states to set up or expand Consumer Assistance Offices to help you enroll in a health insurance plan, file a complaint or appeal, and answer any other questions you may have about navigating the private health insurance industry. To find out if your state has a Consumer Assistance Office, visit www.healthcare.gov/law/provisions/cap/index.html. If your state does not have one, the website lists other resources available to you.

Determining the Benefits Available to You

This fact sheet highlights many of the reforms that will impact children and older adults directly. For a comprehensive list of benefits, please visit www.healthcare.gov. In addition, it is important to ask your insurance provider specific questions concerning which of the benefits listed above will be available to you on your current plan. Many of the benefits listed above may be applied differently and some may not be available depending on the type of health insurance plan you obtain and the date on which your plan began. Please contact your health insurance provider for more information.

Protecting the Affordable Care Act

As this fact sheet describes, the ACA provides vital health care protections and services to children and older adults. However, these benefits are not yet guaranteed. Since the ACA's provisions are phased in gradually, lawmakers must continue to fund and support the implementation of the ACA for all of its provisions to take full effect. We urge you to contact your legislators, thank them for passing this historic legislation, and ask that they continue to protect the ACA, so that the benefits outlined in this fact sheet will be available to all generations.

For more information on health care, visit <http://www.gu.org/OURWORK/PublicPolicy/HealthCare.aspx>

For further information please contact:

Generations United, 1331 H Street, NW, Suite 900

Washington, DC 20005

(202)289-3979; fax (202)289-3952; email: gu@gu.org

GU's web site, www.gu.org, contains additional information about intergenerational topics.

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Because we're stronger together®

Generations United is the only national membership organization focused solely on improving the lives of children, youth, and older people through intergenerational strategies, programs, and public policies. Since 1986, Generations United has served as a resource for educating policymakers and the public about the economic, social, and personal imperatives of intergenerational cooperation. Generations United acts as a catalyst for stimulating collaboration between aging, children, and youth organizations, providing a forum to explore areas of common ground while celebrating the richness of each generation.

¹ Joanne Kenen and Deanna Okrent, The Alliance for Health Reform Sourcebook Covering Health Issues, 6th Edition (2011 Update) Chapter 1 – Health Reform, Accessed June 10, 2011, <http://www.allhealth.org/sourcebookcontent.asp?CHID=117>.

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³ "Health Insurance Exchanges: State Planning and Establishment Grants," U.S. Department of Health & Human Services, Accessed June 13, 2011, <http://www.healthcare.gov/news/factsheets/esthealthinsurexch.html>.

⁴ "How Does Health Reform Expand Medicaid, and Who Pays?," Accessed June 13, 2011, Alliance for Health Reform, http://www.youtube.com/watch?v=qmwF4-UJ-g0&feature=mfu_in_order&list=UL.

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⁶ Bruce Lesley, Lisa Shapiro, and Erwin Bill, The Alliance for Health Reform Sourcebook Covering Health Issues, 6th Edition (2011 Update) Chapter 6 – Children's Health Coverage, Accessed June 10, 2011, <http://www.allhealth.org/sourcebookcontent.asp?CHID=122>.

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¹⁰ Ibid.

¹¹ "Health Insurance Historical Tables: Coverage Status and Type of Coverage by State-Children Under 18, Table HIA-5.," U.S. Census Bureau, Accessed June 15, 2011, <http://www.census.gov/hhes/www/hlthins/data/historical/index.html>.

¹² Ibid.

¹³ "Secretaries Sebelius and Duncan Announce National Coalition to Enroll Uninsured Kids in Health Care," U.S. Department of Health & Human Services, Accessed June 9, 2011, <http://www.ed.gov/news/press-releases/secretaries-sebelius-and-duncan-announce-national-coalition-enroll-uninsured-kid>.

¹⁴ "Implementation Timeline," Children's Defense Fund, Accessed June 10, 2011, <http://www.childrensdefense.org/policy-priorities/childrens-health/health-reform-implementation/implementation-timeline.html>.

¹⁵ "Health Reform for Young Adults to Age 26?" Alliance for Health Reform, Accessed June 10, 2011, http://www.youtube.com/watch?v=DcX80Pg0eHM&feature=mfu_in_order&list=UL.

¹⁶ Ibid.

¹⁷ Bruce Lesley, Lisa Shapiro, and Erwin Bill, The Alliance for Health Reform Sourcebook Covering Health Issues, 6th Edition (2011 Update) Chapter 6 – Children's Health Coverage, Accessed June 10, 2011, <http://www.allhealth.org/sourcebookcontent.asp?CHID=122>.

¹⁸ "2010 Employer Health Benefits Survey: Exhibit 11.1" The Henry J. Kaiser Family Foundation, Accessed June 13, 2011, <http://ehbs.kff.org>.

¹⁹ Paul Fronstin and Bill Erwin, The Alliance for Health Reform Sourcebook Covering Health Issues, 6th Edition (2011 Update) Chapter 4 – Employer-Sponsored Health Coverage, June 13, 2011, <http://www.allhealth.org/sourcebookcontent.asp?CHID=120>.

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²¹ "At Risk: Pre-Existing Conditions Could Affect 1 in 2 Americans." U.S. Department of Health & Human Services. Accessed June 14, 2011. <http://www.healthcare.gov/center/reports/preexisting.html>.

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²⁵ Ibid.

²⁶ OWL Mother's Day Report 2011: The Affordable Care Act: The American Version of Health Care for All (Washington, DC, 2011), 19.

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²⁸ "Provisions of the Affordable Care Act, By Year," U.S. Department of Health & Human Services, Accessed June 10, 2011, <http://www.healthcare.gov/law/about/order/byyear.html>.

²⁹ Ibid.

³⁰ Bruce Lesley, Lisa Shapiro, and Erwin Bill, The Alliance for Health Reform Sourcebook Covering Health Issues, 6th Edition (2011 Update) Chapter 6 – Children's Health Coverage, Accessed June 10, 2011, <http://www.allhealth.org/sourcebookcontent.asp?CHID=122>.

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³⁹ "Eliminating Lifetime and Annual Limits on Your Benefits," U.S. Department of Health & Human Services, Accessed June 13, 2011, <http://www.healthcare.gov/law/provisions/limits/limits.html>.

⁴⁰ "Essential Health Benefits," U.S. Department of Health & Human Services, Accessed June 13, 2011, <http://www.healthcare.gov/glossary/e/essential.html>.

⁴¹ "Eliminating Lifetime and Annual Limits on Your Benefits," U.S. Department of Health & Human Services, Accessed June 13, 2011, <http://www.healthcare.gov/law/provisions/limits/limits.html>.

How The Affordable Care Act Benefits Children

Year Benefits Begin	Description of Benefits in Coverage, Services, & Affordability
2010	<ul style="list-style-type: none"> • Children Can No Longer Be Denied Health Insurance Because Of A Pre-Existing Condition: Insurers cannot deny or refuse to cover a child under 19 because of a pre-existing medical condition, such as asthma or diabetes. • Your Child Can Keep Coverage When Sick: If covered by an insurance plan, the provider may not rescind coverage or deny payment for healthcare services for any child based on an “application error” or “technical mistake.” • Insurers Can No Longer Put Lifetime Limits On What They Will Pay For Essential Services And Treatments For Your Child: This includes hospital stays, emergency room services, and ambulatory care. • Insurers Can No Longer Use Absurdly Low Annual Limits To Avoid Paying For Your Child’s Care: Due to ACA restrictions, providers can no longer set a low maximum dollar limit on what it will spend yearly for your child’s essential healthcare services and treatments. By 2014, they are prohibited. • You Have The Right To Appeal Insurance Company Denials For Your Child’s Care To An Independent Reviewer: If your insurance company refuses to pay for a service or treatment for your child that you believe is covered, you now have a right to appeal. If the appeal is denied, you may seek a review of your claim by an independent reviewer who does not work for your insurance company. • Children Can Now Receive Free Vaccinations, Screenings, & Tests At Their Doctor’s Office: Children can receive recommended vaccinations, vision screenings, blood pressure screenings, and many more covered preventative services at no additional cost. • Young Adults Can Stay On Their Parent’s Health Insurance Plan Longer: Children can now stay on their parent’s plans until 26.
2011	<ul style="list-style-type: none"> • Children With Disabilities Will Be Able To Remain In Their Home And Communities While Receiving Care: A greater number of disabled children who are covered by Medicaid will be able to remain in their homes and communities, rather than in an institutional facility, while they receive care due to the ACA’s Community First Choice Medicaid State Plan Option.
2012	<ul style="list-style-type: none"> • Working Young Adults Can Enroll In New Insurance Program To Help Pay For Future In-Home Assistance Costs: In the event of an unexpected illness, disease, or disability, those enrolled receive about \$50 per month to offset the cost of hiring home care aides, etc.
2014	<ul style="list-style-type: none"> • Insurers Cannot Put Any Annual Limits On The Amount They Will Pay For Your Child’s “Essential” Services: This includes hospital stays. • Your Child Can Participate In Clinical Trials Without Losing Coverage: Insurers cannot drop or reduce benefits due to participation. • Your Family May Get A New Tax Credit To Lower Premiums: A family of four with an income less than \$88,000 per year may be eligible. • Families And Caregivers Can Purchase Health Insurance For Children In New Affordable, Centralized Marketplaces: States are creating these one-stop-shop “exchanges” for consumers and employers to compare and shop for affordable health insurance. • All Children Must Have Health Insurance Coverage: The ACA requires that families and caregivers purchase or provide health insurance to the children they care for unless they meet an exception, such as financial hardship. • Grandfamilies, Kinship Families, And Parents Without Employer-Sponsored Insurance Can Purchase Child-Only Coverage: This option will be available to caregivers in the new “exchanges” this year. • More Children Will Be Covered Under Medicaid: ACA expands eligibility for Medicaid to cover more low-income and disabled children. Those who are not eligible, may be eligible for coverage under the Children’s Health Insurance Program (CHIP). • All Foster Children Under 25 Can Now Gain Health Insurance Coverage Through Medicaid: ACA expands Medicaid to cover foster kids.

How The Affordable Care Act Benefits Older Adults

Year Benefits Begin	Description of Benefits in Coverage, Services, & Affordability
2010	<ul style="list-style-type: none"> • You Can Keep Coverage When Sick: If you are covered by an insurance plan, the provider may not rescind coverage or deny payment for services you receive while sick based on an “application error” or “technical mistake.” • You Have The Right To Appeal Insurance Denials To An Independent Reviewer: If your insurance company refuses to pay for a service or treatment you believe is covered, you now have a right to appeal. If the appeal is denied, you may seek a review of your claim by an independent reviewer who does not work for your insurance company. • Insurers Can No Longer Put Lifetime Limits On What They Will Pay For Your Care: Insurance companies can no longer put lifetime limits on the amount of money that they will expend for your essential sick care, such as hospital stays and emergency care. • Insurers Can No Longer Put Absurdly Low Annual Limits On What They Will Pay For Your Medical Treatments And Services: Insurance providers can no longer use very low annual limits to avoid paying for essential services for older adults. By 2014, they are prohibited. • Drug Costs Are Cheaper For Those In The Medicare Part D Coverage Gap: If you reach the “donut hole,” you receive a \$250 rebate check. • You Can Now Receive Free Preventative Care Screenings, Tests, & Vaccinations At Your Physician’s Office: Older adults can receive cholesterol screenings, mammograms, colonoscopies, and many more covered services from their physician at no additional cost. • Early Retirees May Be Able To Stay On Their Employer’s Insurance Longer: If the employer participates in the new ACA created Early Retiree Reinsurance Program, you may be able to stay on their employer’s plan longer. • You Can Get Affordable Insurance, Even With A Pre-Existing Condition: If you have a pre-existing condition, you may be eligible for the ACA’s Pre-Existing Condition Insurance Plan (PCIP). You will not be charged a higher premium because of your medical condition.
2011	<ul style="list-style-type: none"> • You Get An Automatic Discount On Prescription Drugs If You’re In The Medicare Part D Coverage Gap: If you’ve reached the Medicare Part D drug coverage gap, you get an automatic 50% discount on covered-name brand drugs and 7% off generic drugs at your pharmacy. • If You Are Covered By Medicare, You May Be Eligible For Free Preventative Services: This includes yearly wellness exams & screenings for prostate cancer, cervical cancer, cholesterol levels, cardiovascular health, diabetes, and HIV. • The Community First Choice Medicaid State Plan Option Will Cover More Home And Community-Based Care: More older adults covered by Medicaid will be able to remain in their homes and communities while they receive care, rather than seek institutional care.
2012	<ul style="list-style-type: none"> • Working Older Adults Can Enroll In New Insurance Program To Help Pay For Future In-Home Assistance Costs: In the event of an unexpected illness, disease, or disability, those enrolled receive about \$50 per month to offset the cost of hiring home care aides, etc.
2014	<ul style="list-style-type: none"> • Insurers Can No Longer Refuse to Cover You Or Renew Your Policy Because Of A Pre-Existing Medical Condition • Insurers Can No Longer Put Any Annual Limits On The Amount They Will Pay For “Essential” Services: This includes hospital stays. • You Can Participate In Clinical Trials Without Fear Of Losing Coverage: Insurers cannot drop you or reduce benefits due to participation. • You May Be Eligible For A New Tax Credits To Lower Your Premiums Each Month: Individuals making approximately \$43, 000 and families of four with an income of \$88,000 per year may be eligible. • There Will Be A New Centralized Marketplace For Everyone To Buy Insurance Coverage: States are creating these one-stop-shop marketplaces for consumers and employers to compare and shop for affordable health insurance. • More Older Adults Will Have Access To Long-Term Care Assistance Under Medicaid: ACA requires Medicaid to cover more individuals.