

This message is from Ellen Pinnes and The Disability Coalition.

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Health Care Reform Information Series – Bulletin #7

What's Coming in 2014

Part II. – More protections to make insurance work better

** **"Guaranteed issue"** – That's insurance-speak for a requirement that an insurance company has to cover anyone who applies. They can't reject you because you have a disability or a medical condition that might make you expensive to cover.

** **Insurer can't charge higher premiums based on health status** – The insurance company won't be allowed to charge people more because they have a disability or medical condition, even though they might need more services and would be more expensive to cover than healthier people.

** **No exclusion of coverage for pre-existing conditions** – This means that the insurance company can't refuse to cover services you need because they're connected to a condition you had before you got the insurance. They can't issue an insurance policy that covers you generally but refuses to pay for a condition you already have that might make you need services, including both medical conditions like cancer or diabetes and disabilities such as quadriplegia, Down Syndrome, or schizophrenia. This protection is already in place for children (as of 2010) and goes into effect for adults in January 2014.

** **Maximum 90-day waiting period for coverage** – A waiting period is the time between when you're accepted for insurance and when the benefits actually go into effect. As of 2014, this can't be longer than three months.

** **No annual caps on coverage of required insurance benefits** – In 2010, the Affordable Care Act barred insurance companies from putting a cap on what they'll cover over a person's lifetime and required that annual limits be at reasonable levels. In 2014, no annual caps on those required benefits will be permitted.

** **Caps on annual out-of-pocket cost-sharing** – There will be a cap on the amount of money a person with insurance can be required to spend on out-of-pocket costs like co-pays, coinsurance and deductibles. The cap will be lower for people with incomes below 400% of the federal poverty level and there will be additional help for people below 250% FPL. (In 2012, 400% FPL is \$44,680 for a single person and \$92,900 for a family of four; 250% is \$27,925 for an individual and \$57,625 for that four-person family.)

** **Improved benefit package** – To help make sure that an insurance policy isn't "coverage in name only" that doesn't meet people's needs, insurance will be required to cover a set of "essential health benefits". Our next bulletin will look at this in more detail.

Next: What's coming in 2014 – An improved benefit package: "Essential health benefits"