



Affordable Care Act Helping Ohioans

Several major provisions of the Affordable Care Act are already helping Ohioans and ensuring they have access to more affordable and reliable coverage.

Eliminating Annual and Lifetime Limits—As of September 23, 2010, insurers are no longer allowed to stop paying for care because the insured has reached the policy's lifetime spending limit for health benefits. If a person has already reached a lifetime limit and health coverage ended because of it, the person may be able to rejoin the plan starting on its date of renewal. The Affordable Care Act will eliminate annual spending limits for health benefits gradually through January 1, 2014, when they will be completely eliminated.

Eliminating Rescissions—Rescission occurs when an insurance plan cancels a policy, blaming it on an error in the consumer's application for coverage. Through this practice health insurers deny and cancel coverage to people who have been paying their premiums for years. As of September 23, 2010, insurance companies are no longer able to cancel insurance coverage if the insured made an unintentional mistake filling out the application.

Improving Prevention—Americans use preventive services at about half the recommended rate, most often because of unaffordable costs. The elimination of cost-sharing allows Americans to take advantage of preventive health services, which are proven to reduce health costs, prevent diseases, and keep people healthy. As of September 23, 2010, all new plans are required to offer preventive services (screenings, immunizations, and prenatal health care) without co-payments or deductibles. As of January 1, 2011, these preventive services, with no cost-sharing, are available to seniors enrolled in Medicare.

Protecting Children with Pre-existing Conditions—All children under the age of 19 who apply through their parents' health care coverage will be sold a policy, regardless of their health status or pre-existing condition. This provision will be in effect for adults in 2014.

Ensuring Health Coverage for Young Adults—Approximately three-quarters of people ages 18 to 29 make less than \$40,000 a year, which makes buying coverage too expensive for many young adults. The Affordable Care Act guarantees that young adults up to age 26 are able to stay on their parents' health plans. This supplements Ohio's law which allows young adults through age 28 to stay on their parents' health plans, but does not cover all plans.

Making Prescription Drugs More Affordable for Seniors: Beginning January 1, 2011, seniors who reach the coverage gap—or donut hole—receive a 50 percent discount when buying Medicare Part D covered brand-name prescription drugs.

Holding Insurance Companies Accountable: Starting in 2011, insurers must spend at least 85% of all premium dollars for large employer plans on health care services and health care quality improvement. For plans sold to individuals and small employers, at least 80% of the premium must be spent on benefits and quality improvement. If insurance companies do not meet these goals they must provide rebates to consumers.

These changes, along with many other provisions of the Affordable Care Act that will be phased in between now and 2014, bring peace of mind to thousands of Ohio families who have been struggling to access and afford health care.

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