

## How Will the Government Enforce the Requirement to Buy Insurance?

The enforcer of health reform is the Internal Revenue Service.

## Will I Be Able to See a Doctor?

With millions of newly insured people trying to obtain more care, Medicare actuaries predict that you may not be able to see a doctor when you need help.



In Massachusetts, with a similar health reform:

- New patients in Boston wait an average of 63 days to see a family doctor.
- More people than ever are seeking care at hospital emergency rooms.

Another problem: Giving everyone all of the newly promised free preventive services would leave every family doctor in America with no time to do anything else that doctors do!

## What If I Am on Medicare?

According to Medicare's chief actuary:

- Medicare Advantage members will lose \$1,267 in Medicare payments in 2014 — resulting in lower benefits and higher premiums.
- One of every two Medicare Advantage members (7.4 million) will lose their plan entirely.
- One in seven hospitals may go out of business, and doctors may not take new patients because of cuts in their fees.

There are a number of new promised benefits, including:

- Medicare will pay for an annual checkup.
- Deductibles and copayments will be eliminated for many preventive services.
- If you are in the prescription drug “doughnut hole” and you are not getting other drug subsidies, you may qualify for a \$250 rebate.
- Eventually (in 2019), the doughnut hole will be eliminated.

However, for each \$1 in new benefits, there will be \$10 in reduced Medicare spending. Also, there is no funding to make sure all the promised services will be available. If everyone on Medicare took advantage of a free annual checkup, for example, we would need 23,000 extra doctors just to meet the demand.



## Cuts in Medicare Spending per Person

	<u>Conventional Medicare</u>	<u>Medicare Advantage</u>
2011	\$ 22	\$ 195
2012	112	585
2013	201	877
2014	290	1,267

Sources: National Center for Policy Analysis and the Congressional Budget Office.

## How Will Medical Care Change?

Some insurers are already offering plans that keep premiums down by restricting which doctors you can see.

Also, the new law encourages doctors to form Accountable Care Organizations (ACOs) — a new type of HMO that rewards doctors for meeting government guidelines. In an ACO:

- Doctors and nurses will practice in teams, and you will not necessarily see the same ones on each visit.
- You will not be allowed to get care from doctors outside of the ACO.
- Although care is supposed to be higher quality, the ACOs will get to keep any money they save by giving you fewer tests and services.

## What Can I Do?

Visit [www.ncpa.org/HealthReform](http://www.ncpa.org/HealthReform) today to:

- Order more copies of this pamphlet and share them with others.
- Learn more about the new health care law by reading a more detailed analysis with links to sources.

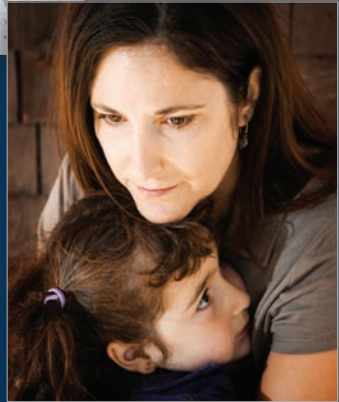


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# What Does Health Reform Mean for You?



# The Patient Protection and Affordable Care Act (ObamaCare)

## A Better Health Care System?



- You will be required by law to have health insurance and to attach proof of insurance to your tax return.
- If you fail to insure, you will be fined — up to \$695 (\$2,085 per family) in 2016 or 2.5% of your adjusted gross income, whichever is greater.
- If your employer doesn't offer insurance, your employer can be fined as much as \$2,000 per employee per year.
- A government agency, rather than you and your employer, will decide what kind of health coverage you must have.

## Where Will I Get Health Insurance?

You may get it in the same place you get it today — through an employer, or through Medicare or Medicaid. However, your coverage and benefits probably won't be the same. If you must buy your own insurance, you will have to obtain it through a government-regulated exchange, where competing insurers will offer the required insurance benefits.

## Will I Be Able to Keep the Insurance I Now Have?

Possibly not.

Employers can drop your coverage altogether and pay a fine that costs as little as one-seventh the cost of insuring you and your family.



- Fourteen million employees will lose their employer plan, according to Medicare actuaries.
- Although some plans may avoid costly regulations because they are “grandfathered,” up to 80% of small businesses won't be able to keep their current plan.
- Within three years, more than 100 million people will be forced into a health plan more costly and more regulated than the one they have today.

## How Much Will My Health Insurance Cost?

Coverage in 2016 will average about \$5,800 for an individual (\$15,200 for a family of four), according to the Congressional Budget Office.

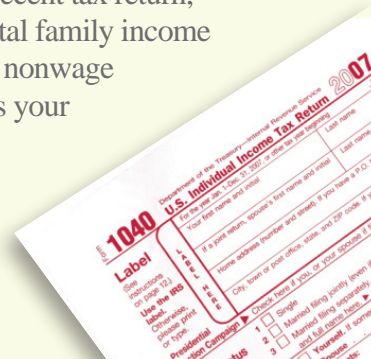
In the government-regulated exchange, the out-of-pocket premium will be limited to a percent of your income up to about \$43,000 (\$88,000 for a family of four). If you earn more, you will have to pay the full premium yourself.

There will be no new subsidies if you get insurance at work, but your premium may be limited to a percent of your income.



## So, How Will My Employer or Health Insurer Know What My Income Is?

The government will require you to show them your most recent tax return, revealing your total family income — including any nonwage income as well as your spouse's income.



## What Benefits Can I Expect?

- Starting this year, all new health plans must provide mammograms, Pap smears and many other preventive services, with no copay or deductible.
- Starting in 2014, many people will get government subsidies to buy insurance they could not otherwise afford.
- If you have a pre-existing condition, you will be able to buy insurance for the same premium people in good health pay.
- If you have a very expensive, chronic health problem, there will be no lifetime limits on your health insurance coverage.
- As many as 34 million people will become newly insured.

## What Other Costs Can I Expect?

- More than half the costs of the reform will be paid for by reduced spending on the elderly and disabled on Medicare.
- There will be new taxes on drugs and on such medical devices as wheelchairs, crutches, pacemakers, artificial joints, etc.
- A 40% tax on the extra coverage provided by expensive “Cadillac” plans will apply to about one-third of all private health insurance in 2019, and it will eventually reach every health plan.
- Scores of other items will be taxed, ranging from tanning salons to the sale of your home, in some cases.



There are also hidden costs:

- Health insurers will have to raise premiums for everyone in order to charge those with pre-existing conditions less than the expected cost of their care.
- Most employers will have to reduce what they pay in wages and other benefits in order to afford the required coverage.
- The extra burden on employers could cost as many as 700,000 jobs by 2019.



For a more detailed analysis, go to [www.ncpa.org/HealthReform](http://www.ncpa.org/HealthReform)

