



Fact Sheet

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Available Online: dpc.senate.gov

October 4, 2010

Senate Democrats Are On Your Side Implementing Health Reform that Works for Middle-Class Americans

Earlier this year, Congress passed and the President signed landmark health insurance reform legislation, the *Patient Protection and Affordable Care Act* (**P.L. 111-148**) and the *Health Care and Education Reconciliation Act* (**P.L. 111-152**), and Americans are already experiencing the benefits. These two laws, together referred to as the *Affordable Care Act*, put control over health care decisions in the hands of the American people, not insurance companies. Senate Democrats are committed to implementing health reform that holds insurance companies accountable, brings costs down for everyone, and provides Americans with the insurance security and choices they deserve. This fact sheet provides an overview of recent health reform implementation activity. Previous updates on health reform implementation and other information are available from the DPC. [[DPC](#)]

Unprecedented, Transparent Insurance Pricing Information

The *Affordable Care Act* enabled creation of a new web portal to facilitate informed consumer choice of health insurance options. [[P.L. 111-148](#); [P.L. 111-152](#)] On July 1, 2010, www.HealthCare.gov launched to help individuals and small businesses identify insurance options in their state. In addition to helping individuals navigate private insurance options in the individual and small group markets, the website assists users in determining if they are eligible for various public programs, including existing high risk pools, the Pre-Existing Condition Insurance Plan created by the *Affordable Care Act*, Medicaid, Medicare, and the Children's Health Insurance Program (CHIP). [HHS, [undated](#)] New to the website as of October 1, 2010 is pricing information on more than 4,000 private health plans offered by over 200 insurers, across all 50 states and the District of Columbia. [HealthCare.gov, [10/1/10](#)] This unprecedented transparency is a result of the *Affordable Care Act's* requirement that consumers have easy access to important insurance pricing information, like premium rates and cost-sharing requirements, to help consumers compare health insurance options.

Planning Health Insurance Exchanges to Create Competitive Insurance Markets

Starting in 2014, the *Affordable Care Act* creates state-based Health Insurance Exchanges where individuals and small businesses can compare and purchase health insurance online at competitive prices and access the same coverage options that Members of Congress will have. [[P.L. 111-148](#); [P.L. 111-152](#)] Exchanges will offer consumers a choice of quality, affordable health insurance plans presented in a consumer-friendly format to ensure individuals and families can choose the right plan for their needs. To make coverage even more affordable, premium and cost-sharing tax credits will also become available through the Exchanges to help middle-class families afford coverage.

The *Affordable Care Act* authorized grants to provide states the funding needed to establish the new Exchanges, and on September 30, 2010, the Administration announced that nearly \$49 million was

awarded to help 48 states and the District of Columbia with the research and planning required to establish an Exchange in each state. [HHS, [9/30/10](#)] Information on the grant program and how states will use this first round of Exchange planning and establishment funding is available from [HealthCare.gov](#).

Also on September 30, 2010, California Governor Arnold Schwarzenegger signed legislation allowing California to begin establishing its Health Insurance Exchange, making it the first state in the nation to pass legislation establishing an Exchange since the *Affordable Care Act* was signed into law last March. [The Sacramento Bee, [9/30/10](#)]

Expanding the Primary Care Workforce

The *Affordable Care Act* includes several programs that invest in our health care workforce to ensure we have the health care providers we need to transform our health care system. On September 27, 2010, the Administration announced \$253 million in funding from the *Affordable Care Act*'s Prevention and Public Health Fund to improve and expand the health care workforce. [HHS, [9/27/10](#)] This funding will facilitate measurable increases in the primary care workforce, specifically:

- Training 889 new primary care resident physicians by 2015, with 500 of these residents having completed their training during this time;
- Training 700 primary care physicians assistants, with more than 600 fully-trained PAs by 2015;
- Fully training 600 primary care Nurse Practitioners and Nurse Midwives by 2015;
- Training more than 900 advanced practice nurses at Nurse Managed Health Clinics, which will also provide access to primary care for approximately 94,000 patients; and,
- Training more than 5,100 Personal and Home Care Aids by 2013 through state training programs.

In addition, 26 states will receive funding for workforce planning or implementation of programs, estimated to increase the primary care workforce by 10 to 25 percent over the next 10 years. Information in these awards made in each state is available from HHS. [HHS, [undated](#)]

Supporting and Improving the Health Care Workforce

The *Affordable Care Act* establishes a National Health Care Workforce Commission tasked with reviewing the health care workforce and projected workforce needs. [P.L. 111-148; P.L. 111-152] The overall goal of the Commission is to provide comprehensive, unbiased information to Congress and the Administration about how to align Federal health care workforce resources with national needs. Congress will use this information when providing appropriations to discretionary programs or in restructuring other Federal funding sources. The *Affordable Care Act* directed the Comptroller General to appoint the 15-member Commission, and on September 30, 2010, the Government Accountability Office announced the appointment of the first 15 members of the National Health Care Workforce Commission. [GAO, [9/30/10](#)]

Ensuring That, If You Like Your Plan, You Can Keep It

The *Affordable Care Act* is built in the requirement that if you like your current health plan, you can keep it. Health Reform protects the ability of individuals and businesses to keep their current plan; provides important consumer protections to put Americans, and not insurance companies, in control of their health care; and provides stability and flexibility to insurers and businesses that offer insurance coverage during the transition to a more competitive insurance marketplace in 2014.

Earlier this year, the Administration issued a new regulation for “grandfathered” health plans, which are plans in place when health reform was signed into law on March 23, 2010. [Federal Register, [6/17/10](#)] The rule requires all health plans to provide certain, important, and new consumer benefits and protections but also allows plans in existence on March 23, 2010 to make routine changes without losing their grandfather

status. [HHS, accessed [6/17/10](#)] Plans that make changes to significantly decrease consumer protections – such as by cutting or reducing benefits, raising co-insurance, significantly raising co-payments or deductibles, significantly reducing employer contributions, or adding or tightening an annual limit – will lose their grandfather status, and individuals in those plans will gain consumer protections in a new plan. The rule strikes a balance between protecting consumers and allowing plans and employers the flexibility they need to innovate and contain costs.

Last week, Senate Republicans attempted to use the *Congressional Review Act* to disapprove of and nullify this fair, balanced rule through a resolution of disapproval, which the Senate rejected by a vote of 59-40. [[Senate Vote 244](#)] Introduction of the resolution was simply another Republican attempt to return control of patients' health to insurance companies by rolling back critical consumer protections the *Affordable Care Act* ensures Americans have under both grandfathered and new health insurance plans. Senate Democrats remain committed to implementing health reform that holds insurance companies accountable, brings costs down for everyone, and provides Americans with the insurance security and choices they deserve.

Helping Americans Navigate Health and Long-Term Care Options

The *Affordable Care Act* includes several initiatives to help Americans, particularly seniors, Americans with disabilities, and their caregivers, navigate their health care and long-term care options, and successfully transition between care settings. [[P.L. 111-148](#); [P.L. 111-152](#)] On September 27, 2010, the Administration announced it was awarding \$68 million in funding provided by the *Affordable Care Act* for several of these initiatives. [HHS, [9/27/10](#)] These funds are being provided to states, territories and tribes and community-based organizations to help families understand their Medicare and Medicaid benefits, navigate long-term care options, and help with the transition from a nursing home or rehabilitation facility back to home.

Funding to Support Pregnant and Parenting Teens and Women and to Prevent Teen Pregnancy

The *Affordable Care Act* includes a focus on supporting teens and women who become pregnant or are raising children, as well as on preventing unintended teen pregnancies and the spread of sexually transmitted infections. [[P.L. 111-148](#); [P.L. 111-152](#)] On September 28, 2010, the Administration awarded \$27 million in funding provided by the *Affordable Care Act* to support pregnant and parenting teens and women in states and tribes across the country. [HHS, [9/28/10](#)] Of this funding, \$24 million was made available by the *Affordable Care Act's* Pregnancy Assistance Fund, while \$3 million, focused on Tribes, came from the new law's Maternal, Infant, and Early Childhood Home Visiting program, which supports the development of program models targeted at reducing infant and maternal mortality and its related causes by producing improvements in prenatal, maternal, and newborn health, child health and development, parenting skills, school readiness, juvenile delinquency, and family economic self-sufficiency.

On September 30, 2010, the Administration awarded \$155 million in grants to states and non-profit organizations to implement evidence-based teen pregnancy prevention programs in communities across the country. [HHS, [9/30/10](#)] Of this funding, \$55 million comes from the *Affordable Care Act's* Personal Responsibility Education Program to educate teens on preventing pregnancy and sexually transmitted disease while simultaneously developing life skills.

Additional Information

The Democratic Policy Committee has released nine previous updates on health reform implementation, available on the DPC website [here](#). In addition, DPC maintains a centralized listing of health reform implementation resources which is frequently updated and is available [here](#).