The America's Healthy Future Act Consumer Protection: Insurance Industry Reforms

Today, the insurance market can often be unfair and unpredictable for small business owners and Americans shopping for coverage without the help of their employer. Under the Chairman's Mark, the insurance industry will be subject to new laws for those Americans shopping in what's known as the individual and small group insurance markets. These new regulations will ensure that every American has access to stable, meaningful health insurance that cannot be taken away.

- No More Discrimination Today, insurance companies can deny coverage or hike up rates for Americans with pre-existing conditions like heart disease, cancer or diabetes. The America's Healthy Future Act will put an end to insurance company discrimination and forbid companies from denying coverage to any American who has the means to buy it.
 - The America's Healthy Future Act will also stop insurance companies from denying coverage or hiking up rates for those with pre-existing conditions and from dropping coverage or reducing benefits for those who get sick.
 - It will stop insurance companies from charging different premium rates based on gender, health status, family history or occupation. And it will limit the amount insurance companies can vary premiums based on other factors such as smoking and age.
 - Additionally, the America's Healthy Future Act will stop insurance companies from putting limits on how much coverage you can use over your lifetime or how many benefits you can use each year.
- Quality and Stability There are 46 million Americans without health insurance in this country today. Just as troubling, 25 million more don't have enough insurance to prevent medical bankruptcy. All too often, those American's don't know they aren't properly covered until they get sick by then it is often too late. The America's Healthy Future Act will guarantee every American has access to meaningful, quality coverage and the peace of mind of knowing their benefits will be there when they need them.

Under the America's Healthy Future Act insurance plans must cover the following services:

- primary care, such as routine check-ups;
- preventive services, such as cancer screenings;
- emergency services;
- medical and surgical care;
- physician services;
- hospitalization;
- outpatient services;
- day surgery and related anesthesia;
- diagnostic imaging and screenings such as x-rays and CAT Scans;
- maternity and newborn care;
- pediatric services including dental and vision care;
- prescription drugs;
- radiation and chemotherapy; and
- mental health and substance abuse services.

- Transparency and Accountability The America's Healthy Future Act requires insurance companies to provide every customer in the individual and small group markets with an outline of their coverage, presented in a simple and standard format that does not exceed four pages or contain any print smaller than 12-point font literally eliminating the fine print. And the bill will require insurance companies to publish how much of their profits from premiums go toward administrative expenses and not toward providing and improving medical benefits.
- Choice and Competition In most states today, one insurance company controls nearly half the market, putting insurance companies in control and leaving Americans with little choice and few consumer protections. The America's Healthy Future Act protects consumers from harmful practices like denial of coverage based on pre-existing conditions. It creates state-based web portals called "insurance exchanges" where American families, individuals and small businesses can shop for health insurance plans in a competitive and transparent market. And by requiring all insurance companies to provide basic benefits, the bill ensures Americans have meaningful options to choose from when deciding which plans to buy.
- Affordability Along with other consumer protections, the America's Healthy Future Act works to ensure all Americans have access to meaningful coverage at a price they can afford. In addition to providing tax credits and subsidies for small businesses and Americans buying health insurance without the help of an employer, the bill limits out-of-pocket costs, like co-pays. It also ensures these Americans can renew their coverage without a price increase and limits how much insurance companies can charge in premium costs for Americans living at up to 400 percent of the federal poverty level or \$88,200 a year for a family or four.

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