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Benefits of America's Affordable Health Choices Act In North Dakota

Committee on Energy and Commerce

America's Affordable Health Choices Act would provide significant benefits in North Dakota: up to **18,500 small businesses** could receive tax credits to provide coverage to their employees; **13,800 seniors** would avoid the donut hole in Medicare Part D; **570 families** could escape bankruptcy each year due to unaffordable health care costs; and **58,000 uninsured individuals** would gain access to high-quality, affordable health insurance. Congressman Earl Pomeroy represents the state.

- **Help for small businesses.** Under the legislation, small businesses with 25 employees or less and average wages of less than \$40,000 qualify for tax credits of up to 50% of the costs of providing health insurance. There are up to 18,500 small businesses in the state that could qualify for these credits.
- **Help for seniors with drug costs in the Part D donut hole.** Each year, 13,800 seniors in the state hit the donut hole and are forced to pay their full drug costs, despite having Part D drug coverage. The legislation would provide them with immediate relief, cutting brand name drug costs in the donut hole by 50%, and ultimately eliminate the donut hole.
- **Health care and financial security.** There were 570 health care-related bankruptcies in the state in 2008, caused primarily by the health care costs not covered by insurance. The bill provides health insurance for almost every American and caps annual out-of-pocket costs at \$10,000 per year, ensuring that no citizen will have to face financial ruin because of high health care costs.
- **Coverage of the uninsured.** There are 74,000 uninsured individuals in the state, 12% of the state. The Congressional Budget Office estimates that nationwide, 97% of all Americans will have insurance coverage when the bill takes effect. If this benchmark is reached in the district, 58,000 people who currently do not have health insurance will receive coverage.
- **No deficit spending.** The cost of health care reform under the legislation is fully paid for: half through making the Medicare and Medicaid program more efficient and half through a surtax on the income of the wealthiest individuals. This surtax would affect only 2,000 households in the state. The surtax would not affect 99.3% of taxpayers in the district.

This analysis is based upon the following sources: the Gallup-Healthways Survey (data on the uninsured); the U.S. Census (data on small businesses); the Centers for Medicare and Medicaid Services (data on the Part D donut hole, health care-related bankruptcies (based on analysis of PACER court records), and uncompensated care); and the House Committee on Ways and Means (data on the surtax).