



TOP 10 WAYS HEALTH INSURANCE REFORM WORKS FOR YOU

- 1. ENDS INSURANCE COMPANY DISCRIMINATION**—The Affordable Health Care For America Act will stop insurance companies from denying coverage to Americans with pre-existing conditions such as heart disease, cancer or diabetes and from hiking up rates or dropping coverage for those who get sick.
- 2. MAKES COVERAGE MORE AFFORDABLE**—The House bill will rein in rising health costs for American families and small businesses—introducing competition that will drive premiums down, capping out-of-pocket spending, ensuring no more copays for preventive care, ensuring no yearly caps on what the insurance company will cover, and providing premium subsidies for those who need them. For small businesses, tax credits will help them cover their workers and eliminating health status rating means they won't pay higher premiums based on their employees' health status.
- 3. IMPROVES CHOICE AND COMPETITION**—In most states today, one insurance company controls nearly half the market. To increase competition and keep insurance companies honest, the House bill provides those who must buy their own insurance the choice between private plans and a public health insurance plan. The nonpartisan Congressional Budget Office (CBO) estimates that this public health insurance plan would save taxpayers tens of billions of dollars.
- 4. ENSURES QUALITY COVERAGE FOR 96% OF AMERICANS**—The CBO estimates that the House bill will result in health care coverage for 96% of Americans. This will lead to significantly reducing the current cost of providing uncompensated care for 46 million Americans, and result in lower costs for everyone and savings to the economy.
- 5. DOES NOT ADD ONE DIME TO THE DEFICIT**—According to CBO, the House bill reduces the deficit, while covering 96% of Americans with quality affordable health care.
- 6. IMPROVES OUR FOCUS ON WELLNESS AND PREVENTION**—The House bill will work to change the focus of our health care system from treating sickness to promoting wellness with several provisions such as eliminating out-of-pocket costs for recommended preventive services, strengthening community-based wellness services, and rewarding primary care.
- 7. IMPROVES QUALITY**—The House bill ensures that it is doctors and patients—not insurance companies—making health care decisions. More family doctors and nurses will enter the workforce—helping guarantee access. It moves us toward a system rewarding the quality of care—for instance through accountable care organizations and medical homes.
- 8. STRENGTHENS MEDICARE**—The House bill improves Medicare: extending Medicare's financial solvency by 5 years; improving coordination of care and reducing errors for seniors with conditions like high blood pressure and diabetes; eliminating the prescription drug "donut hole" coverage gap over a period of years; and providing free preventive care and wellness check-ups.
- 9. CUTS DOWN ON FRAUD, WASTE AND ABUSE**—The House bill will strengthen oversight and enforcement measures to cut down on fraud, waste and abuse in the health care system, which is estimated to cost more than \$60 billion every year.
- 10. LOWERS COSTS OVER THE LONG TERM**—The House bill rewards care that prevents hospital readmissions, promotes doctors working together to coordinate your care better, cuts waste and fraud, invests in prevention and wellness, strengthens primary care, and reforms reimbursement to provide incentives for the quality, not the volume, of services.