

Expansion of Coverage

The Affordable Care Act (ACA, P.L. 111-148) includes coverage expansions that should be retained and as needed improved and expanded – not repealed. Such essential policies include, but are not limited to:

Prohibiting insurance companies from denying, rescinding or charging excessively more to people with pre-existing conditions. Section 1201 of the ACA prohibits health plans from excluding pre-existing conditions from health coverage for children beginning in September 2010 and for all beginning January 2014. Section 1001 of the ACA prohibits rescission of health insurance except in certain cases, beginning September 2010.

Covering young adults up to age 26 on their parents' plans. Beginning in September 2010, Sec. 1001 allows children up to age 26 to enroll in their parent or guardian's health insurance plan.

Helping people up to 400% of the federal poverty level (FPL) afford coverage through sliding scale tax credits linked to income. Beginning in 2014, Sec. 1401 provides refundable tax credits to individuals and families to help them obtain affordable, comprehensive health insurance.

Helping small businesses afford coverage through tax credits and access to lower-cost insurance through state purchasing pools (state health exchanges). Sec. 1421 provides small business tax credits towards the purchase of health insurance for employees and Sec. 1311 establishes health insurance exchanges for small businesses.

Giving families and businesses more choices of insurance through state health exchanges. Sec. 1311 establishes health insurance exchanges for individuals and families.

Requiring insurers to provide coverage for preventive services and other medical interventions that the evidence shows are effective. Sec. 1001 requires coverage of evidence-based preventive services and Sec. 1302 establishes the essential health benefit requirements for qualified health plans offered in 2014.

Establishing a single eligibility standard for Medicaid at 133% of the FPL and providing more federal dollars to the states (initially, 100% of the cost) so that they can afford to enroll more people in the program. Sec. 2001 expands eligibility and provides financing for the Medicaid program.

Requiring individuals and large businesses to participate in the insurance pool and to contribute to coverage instead of shifting costs to others. Sections 1501 and 1513 outline coverage requirements for individuals and large businesses.

ACP's Recommended Improvements to the ACA

Congress should consider giving states an earlier option to design their own systems to cover their residents, as proposed by the bipartisan Empowering States to Innovate Act, introduced in the 111th Congress by Senators Ron Wyden (D-OR) and Scott Brown (R-MA). The legislation would amend Sec. 1332 of the ACA to allow states to apply for a State Innovation waiver beginning in January 2014 rather than January 2017.

Congress should also consider advancing the date by which states can enter into a regulatory agreement to allow the sale of health insurance across state lines. Sec. 1333 would be amended to allow states to establish health care compacts in 2014, rather than 2016.