

How the Health Care Law Helps your Community

A Fact Sheet for Faith and Community Leaders

“Faith leaders are trusted partners in local communities. You have a unique ability to reach people, especially the most vulnerable, with the tools and information they need to get healthy, stay well, and thrive.”

HHS Secretary Kathleen Sebelius

January 18, 2011, Howard University School of Divinity Spring Convocation

Going without health care and health insurance is a challenge. Being uninsured means having to worry about getting sick. Even with insurance, many Americans worry that they will end up with big medical bills if their insurance company does not cover the expense. The **Affordable Care Act** ensures that more people in your congregation or community will receive the health care they need. The law will help millions of uninsured Americans to get health insurance. People who already have health insurance will have better and more affordable, secure coverage. With health care working better for people already covered and as millions more get covered, everyone in our communities will have the tools for better health.

Enroll in Health Insurance in the Health Insurance Marketplace

At the Marketplace, consumers will compare insurance options based on price, benefits, providers, quality, and other factors. As a result, consumers will have a clear picture of premiums and cost-sharing amounts to help them choose the insurance that best fits their needs. Financial help to lower costs is available for people who qualify. Consumers may be eligible for a free or low cost plan, or savings that lower monthly premiums right away.

KEY DATES AND INFORMATION

- Enrollment begins October 1, 2013 and ends March 31, 2014
- Coverage begins as early as January 1, 2014
- Enroll at www.HealthCare.gov or by calling 1-800-318-2596 starting in October. TTY users should call 1-855-889-4325.

All private insurance plans offered to individuals and small businesses must provide the following essential health benefits:

- ✓ Ambulatory patient services
- ✓ Emergency services
- ✓ Hospitalization
- ✓ Maternity and newborn care (care before Preventive and wellness services and Mental health and substance use disorder behavioral health and care psychotherapy)
- ✓ Prescription drugs
- ✓ Rehabilitative and habilitative services and devices
- ✓ Laboratory services and after your baby is born)
- ✓ Pediatric services, including oral and vision treatment (this includes counseling and care)
- ✓ Chronic disease management services, including

Each state will have one of three types of Marketplaces:

State-Based Marketplace	The state creates and runs its own Marketplace
State Partnership Marketplace	The state partnering with the Federal government to perform some of the Marketplace's functions
Federally-Facilitated Marketplace	The state has a Marketplace established and operated by the Federal Government

To learn about your state's Marketplace, visit <https://www.healthcare.gov/what-is-the-marketplace-in-my-state/>.

Email: ACA101@hhs.gov

Phone: 202-358-3595

www.hhs.gov/partnerships

Community

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Explore the Marketplace:

- Visit www.HealthCare.gov; take a tour of the main webpage and set up an account to prepare for open enrollment and receive email updates about the Marketplace;
- Get answers to your questions by exploring www.HealthCare.gov, clicking on Individuals and Families tab and use the Live Chat;
- Call the Call Center 24/7 at 1-800-318-2596, TTY users should call 1-855-889-4325
- Explore the social media tools such as videos, Twitter, Google + and Facebook at www.HealthCare.gov.

Resources to help promote the Health Insurance Marketplace:

Marketplace.cms.gov provides tools to explain the health care law and to tell others about it, including:

• Fact sheets	• Posters	• Power Point presentations	•
• Brochures	• Widgets and badges	• Frequently Asked Questions	•
• Articles	• Training videos	• Information in other languages	•

The Affordable Care Act has already impacted the lives of many Americans.

Young people are now allowed to stay on a parent's health care plan up to age 26, even if they are married and/or living outside of their parent's home.

Insurers cannot deny coverage or charge more for children with **pre-existing medical conditions**. Beginning in 2014, adults with pre-existing conditions will have the same protection.

Starting in 2014, **women** will no longer be charged higher rates by insurance companies due to gender or health status.

Insurers cannot cancel your coverage if you become **sick or just because of an unintentional mistake** on an application. Insurers also cannot cap the dollar amount they will pay or limit the amount of care you will receive for essential health benefits in your lifetime.

If insurers deny care or payment for services, consumers will have a **new independent appeal process**.

States have new resources to thoroughly **review rate increases** and hold insurance companies accountable for their proposed rate hikes.

The law ensures that insurers must now spend at least 80 percent of your premium on health care services or improving care. If they don't do this, they must provide consumers with a **rebate**.

States have the option to **expand Medicaid** starting in 2014 for individuals and families who have incomes less than 133 percent of the federal poverty level. For individuals, the income level is approximately \$15,282, and for families of four the income level is up to \$31,322.

Seniors receive a 52 percent discount on covered, brand-name medications when in the prescription drug donut hole. In 2020, the donut hole will be closed.

Most health insurance plans must cover **preventive services with no copay or deductible**, such as wellness visits, cancer screenings, vaccinations and other benefits. For more information, go to: <https://www.healthcare.gov/what-are-my-preventive-care-benefits/>.

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