

What is the Affordable Care Act and what does it mean to you?

The Affordable Care Act is a health care law that aims to improve our current health care system by increasing access to health coverage for Americans and introducing new protections for people who have health insurance.

- ***Young adults can now stay on their parent's health plan up to age 26.¹***

They may qualify even if they don't live with their parents, they are out of school; they are not financially dependent on their parents, they are married (but their spouse or children will not be covered). Young adults can stay on their parent's plan, or enroll again if they've already gone off it.

Group plans that were in place before March 23, 2010 (grandfathered) are a little different. Until 2014, these plans do not have to offer health coverage to young adults who qualify for group coverage outside of their parent's plan.

- ***Insurance companies can't deny health coverage to kids with pre-existing conditions.***

Health plans that cover children can no longer limit or deny benefits for kids up to age 19 because of a pre-existing condition – a health problem, disease or disability that the child developed before their parents applied for health coverage.

The rule does not apply to "grandfathered" individual health insurance plans – plans outside of your employer coverage that were in place on or before March 23, 2010.

- ***Insurance companies can't place dollar limits on the health care they cover in your lifetime.***

Some health insurance plans can no longer put dollar limits on how much care they cover in your lifetime. The rule applies to employer health coverage and individual insurance policies bought after March 23, 2010.

The ban on lifetime limits takes effect with the plan year or policy year that begins on or after September 23, 2010. For many plans, the effective date was January 1, 2011. Health insurance plans can still put an annual dollar limit on non-essential health care services. The law also gradually gets rid of dollar limits on the care that an insurance company will cover in one year. In 2014, there will be no dollar limits on how much care is covered annually.

- ***New health plans must offer preventive and screening services, such as mammograms, at no cost to the patient.***

Health plans must now offer proven services such as screenings, vaccinations and counseling at no cost to the patient. Depending on your age, you may receive preventive services such as screenings for blood pressure, cholesterol, breast cancer, colorectal cancer, diabetes; vaccinations against measles, polio, and meningitis; flu and pneumonia shots; counseling for quitting smoking, losing weight, treating depression and more. You may need to pay some of the cost if the preventive service is not the main reason for the visit or if your doctor bills you for the services separately.

¹ All source of material, except for footnote 2, obtained from HealthCareandYou.org

This part of the law may not apply to “grandfathered” individual health insurance plans. These are plans that you bought for yourself or your family outside of your employer-sponsored insurance on or before March 23, 2010.

- ***Find health insurance in New Mexico²***

Visit <http://finder.healthcare.gov> This website provides a tool that will help you find the health insurance best suited to your needs, whether it's private insurance for individuals, families, and small businesses, or public programs that may work for you. It was created to help consumers under the health insurance reform law, the Affordable Care Act.

- ***Adults who have been uninsured for at least 6 months and have been denied coverage because of a pre-existing condition may now get coverage through the New Mexico Medical Insurance Pool.***

The New Mexico Medical Insurance Pool is available for adults who have been uninsured for at least 6 months and have been denied coverage because of a pre-existing condition. Also, children up to age 19 can't be denied coverage because of pre-existing conditions. (By 2014, insurance companies will not be able to deny coverage to anyone with pre-existing conditions.) **For more information, call (505) 424-7105, Toll Free (866) 622-4711 or visit <http://www.nmmip.org>**

- ***Some small businesses with fewer than 25 employees can get help paying for the cost of providing health insurance.***

New tax credits are helping some small businesses pay for health insurance for their employees. Employers qualify if they provide health care to their workers, have fewer than 25 full-time employees (or the equivalent of 25 full-time employees) and provide average annual wages below \$50,000. In 2011, the tax credit will cover 35 percent of health insurance expenses for small businesses (25 percent for non-profit businesses). The tax credit will increase to 50 percent for small businesses (35 percent for non-profits) starting in 2014. **For more information, contact your local Internal Revenue Service office.**

- ***Those in the Medicare Part D “doughnut hole” get a 50 percent discount on name-brand prescription drugs and a 7 percent discount on generic prescription drugs.***

Before the Affordable Care Act, some people enrolled in Medicare Part D fell into what was called a “coverage gap” or “doughnut hole.” This meant that once their health plan spent a certain amount of money on drugs, these people had to pay the full cost of their prescriptions until they spent enough and their drugs were paid for again. The law gradually closes this gap and will get rid of it completely by 2020. **For more information, call 1 (800) Medicare or visit <https://www.MyMedicare.gov>**

- ***Those in Medicare can get preventive services and screenings, such as mammograms, at no cost to the patient.***

People with Medicare Part B can now receive some proven preventive services at no cost to them. In addition to a yearly wellness exam, Medicare Part B now covers preventive screenings for cholesterol, diabetes, certain types of cancer, and more. **For more information, call 1 (800) Medicare or visit <https://www.MyMedicare.gov>**

² Obtained from HealthCare.gov