



What Comes Next

With the new health care law, more changes are going to roll out in the months and years ahead that will make it easier and less expensive for you and your family to get quality, affordable health care.

We've broken it down for you, so you know what's coming.

Right Now

- A temporary “high-risk pool” provides insurance for those who were denied coverage due to a pre-existing condition and have been uninsured for more than 6 months. This especially benefits the 15 percent of young Americans who suffer from chronic conditions.

Plan-Years Starting After September 23, 2010:

- Adult children will be able to remain on their parent’s health insurance **until their 26th birthday**.
 - Over 2 million previously uninsured young adults will benefit from this provision.
 - Are you a parent? If your adult child is under 26 and uninsured, talk to your employer now about how they can join your plan!
- Health plans no longer able to drop coverage (**no “rescission”**) when you get sick
- Lifetime limits on benefits **banned**.
- Restrictive annual limits on benefits **banned** (all annual limits banned by 2014).

January 1, 2011:

- All plans will have to spend at least **80 percent** (for small/individual plans) or **85 percent** (for large group plans) of premiums on medical services. Those who fail to do so will have to submit rebates to consumers. That means more of your money will be required by law to go to the care you need.

January 1, 2014:

- Medicaid will cover every American earning less than 133 percent of the Federal Poverty Level (FPL), about \$14,400 per year for an individual. This change alone will provide coverage for up to **9 million currently uninsured young adults**.
- Tax credits will be given for purchasing health insurance to those who earn less than 400 percent FPL (about \$43,000 per year for an individual) and lack employer-sponsored insurance.
- Health plans will no longer be able to deny coverage based on **pre-existing conditions**.
- All Americans must have health insurance, however the requirement will be waived due to hardship or lack of affordable health insurance.
- States will create **insurance exchanges to increase market competition** and enforce minimum benefit standards. Consumers will be able to compare prices and plans online and choose the best health insurance package for themselves.