

## **Healthcare Reform Key Provisions for Seniors**

1. **WELLNESS EXAM**—Starting in 2011, if you are in traditional Medicare, you can get an annual physical for free. *Effective beginning January 1, 2011.*
2. **FREE PREVENTIVE CARE UNDER MEDICARE**—Eliminates co-payments for preventive services and exempts preventive services from deductibles under the Medicare program. *Effective beginning January 1, 2011.*
3. **NO DISCRIMINATION AGAINST CHILDREN WITH PRE-EXISTING CONDITIONS**—Prohibits new health plans in all markets plus grandfathered group health plans from denying coverage to children with pre-existing conditions. *Effective 6 months after enactment.* (Beginning in 2014, this prohibition would apply to all persons.)
4. **HELP FOR UNINSURED AMERICANS WITH PRE-EXISTING CONDITIONS UNTIL EXCHANGE IS AVAILABLE (INTERIM HIGH-RISK POOL)**—Provides access to affordable insurance for Americans who are uninsured because of a pre-existing condition through a temporary subsidized high-risk pool. *Effective in 2010.*
5. **ENDS RESCISSIONS**—Bans insurance companies from dropping people from coverage when they get sick. *Effective 6 months after enactment.*
6. **BEGINS TO CLOSE THE MEDICARE PART D DONUT HOLE**—Provides a \$250 rebate to Medicare beneficiaries who hit the donut hole in 2010. *Effective for calendar year 2010.* (Beginning in 2011, institutes a 50% discount on prescription drugs in the donut hole; also completely closes the donut hole by 2020.)
7. **EXTENDS COVERAGE FOR YOUNG PEOPLE UP TO 26TH BIRTHDAY THROUGH PARENTS' INSURANCE**—Requires new health plans and certain

For more information, please call Charles Clarkson at 732 – 777 – 1940

Jewish Family and Vocational Service  
of Middlesex County

32 Ford Avenue, Milltown, NJ 08850 \* 52 Concordia Shopping Center, Monroe Township 08831



grandfathered plans to allow young people up to their 26th birthday to remain on their parents' insurance policy, at the parents' choice. *Effective 6 months after enactment.*

8. **BANS LIFETIME LIMITS ON COVERAGE**—Prohibits health insurance companies from placing lifetime caps on coverage. *Effective 6 months after enactment.*
9. **BANS RESTRICTIVE ANNUAL LIMITS ON COVERAGE**—Tightly restricts the use of annual limits to ensure access to needed care in all new plans and grandfathered group health plans. These tight restrictions will be defined by HHS. *Effective 6 months after enactment.* (Beginning in 2014, the use of any annual limits would be prohibited for all new plans and grandfathered group health plans.)
10. **FREE PREVENTIVE CARE UNDER NEW PRIVATE PLANS**—Requires new private plans to cover preventive services with no co-payments and with preventive services being exempt from deductibles. *Effective 6 months after enactment.*
11. **COMMUNITY HEALTH CENTERS**—Increases funding for Community Health Centers to allow for nearly a doubling of the number of patients seen by the centers over the next 5 years. *Effective beginning in fiscal year 2011.*
12. **INCREASES THE NUMBER OF PRIMARY CARE PRACTITIONERS**—Provides new investments to increase the number of primary care practitioners, including doctors, nurses, nurse practitioners, and physician assistants. *Effective beginning in fiscal year 2011.*
13. **HEALTH INSURANCE CONSUMER INFORMATION**—Provides aid to states in establishing offices of health insurance consumer assistance in order to help individuals with the filing of complaints and appeals. *Effective beginning in fiscal year 2010.*
14. **HOLDS INSURANCE COMPANIES ACCOUNTABLE FOR UNREASONABLE RATE HIKES**—Creates a grant program to support States in requiring health insurance companies to submit justification for all requested premium increases, and insurance companies with excessive or unjustified premium exchanges may not be able to participate in the new Health Insurance Exchanges. *Starting in plan year 2011.*

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