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Benefits of the Health Care Reform Law in the 1st Congressional District of Utah

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Democratic Staff Report

The landmark Affordable Care Act (ACA) began delivering important new benefits and protections to tens of millions of American families almost immediately after it was signed into law by President Obama. But the largest benefits of the law will become available to consumers on October 1, 2013, when health insurance marketplaces open in all 50 states. These marketplaces will offer individuals, families, and small businesses an efficient, transparent one-stop shop to compare health insurance policies, receive financial assistance, and sign up for high-quality, affordable, and secure insurance coverage.

This fact sheet summarizes new data on the significant benefits of the health care reform law in Rep. Bishop's district. It also provides the first picture of the impacts of the law in districts redrawn or newly created following the 2010 Census. As a result of the law:

- **6,200 young adults** in the district now have health insurance through their parents' plan.
- **More than 4,500 seniors** in the district received prescription drug discounts worth **\$6 million**, an average discount of **\$610 per person in 2011, \$700 in 2012, and \$700 thus far in 2013**.
- **73,000 seniors** in the district are now eligible for Medicare preventive services without paying any co-pays, coinsurance, or deductible.
- **218,000 individuals** in the district – including **72,000 children** and **74,000 women** – now have health insurance that covers preventive services without any co-pays, coinsurance, or deductible.
- **207,000 individuals** in the district are saving money due to ACA provisions that prevent insurance companies from spending more than 20% of their premiums on profits and administrative overhead. Because of these protections, **over 36,600 consumers** in the district received approximately **\$2.2 million in insurance company rebates** in 2011 and 2012 – an average rebate of **\$85 per family in 2011 and \$85 per family in 2012**.
- **Up to 54,000 children** in the district with preexisting health conditions can no longer be denied coverage by health insurers.
- **273,000 individuals** in the district now have insurance that cannot place lifetime limits on their coverage and will not face annual limits on coverage starting in 2014.
- **Up to 91,000 individuals** in the district who lack health insurance will have access to quality, affordable coverage without fear of discrimination or higher rates because of a preexisting health condition.¹ In addition, the **43,000 individuals** who currently purchase private health insurance on the individual or small group market will have access to more secure, higher quality coverage and many will be eligible for financial assistance.

¹ Presently, coverage for many of these individuals – those with incomes below 100% of the federal poverty level – is in doubt. The ACA provides for the fully funded expansion of Medicaid to cover these individuals. However, the Supreme Court has ruled that the decision to take these funds and provide this coverage is at the discretion of the Governor and the Legislature. To date, the Governor and Legislature have not approved the expansion of Medicaid to these individuals, putting their access to affordable coverage in doubt.