

Health Law and Policy Update:

March 22, 2013

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What's New

ACA Celebrates 3rd Birthday

March 23 marks the third anniversary of the Affordable Care Act and Colorado is well on its way to full implementation. Kaiser Health News posted a [story](#) on its blog site this week with poll results showing that more than half of Americans do not understand how the health law will impact them. In fact, according to the article: "...the public seems actually to be even less knowledgeable about the health law's more popular provisions than they were three years ago, including tax credits to small business to buy insurance, subsidy assistance for individuals and guaranteed issue of health insurance."

With that in mind, today we publish the [first](#) in an eight part series about the Affordable Care Act and its effect on Colorado. This first publication focuses on the Colorado Health Benefit Exchange which will be the major access point for those coming in to coverage, beginning on October 1st.

Exchanges are intended to help people fulfill one of the ACA's basic requirements - that everyone have health insurance by 2014. Every state is required to have an exchange, but states are able to choose whether to establish their own or defer that responsibility to the federal government.

Exchanges will offer expanded choices of health coverage, foster competition and make available comparative information about insurance benefits, quality and consumer satisfaction. Exchanges will also help many individuals and families access federal premium tax credits so that they can afford to buy insurance. Colorado has emerged as a leader among states developing and implementing state-based exchanges. The Colorado Health Benefit Exchange (COHBE), which will be doing business under the name "Connect to Health Colorado" later in 2013, is well under

development. However, with just over five months until exchanges will go live and begin accepting applications for coverage, there is a lot left to do.

Read the CCLP issue brief on COHBE's progress [here](#).

How well do you know the ACA? Take our ACA Quiz:

Test your ACA knowledge with our birthday quiz! (See the end of our update for answers)

1. What patient protection provision comes into effect on January 1, 2014?
 - A. Insurance companies can no longer increase your rate because of gender.
 - B. Insurance companies cannot turn you down because of a preexisting condition.
 - C. Insurance companies cannot impose annual spending limits on your covered benefits.
 - D. All of the above.
2. True or False. A provision of the ACA requires nutrition labeling in chain restaurants and similar establishments.
3. By 2020 how many Americans will gain insurance coverage because of the ACA?
 - A. 500,000
 - B. 1 billion
 - C. 30 million
 - D. 90 million
4. What factors are insurance companies still allowed to use for rating the cost of insurance for individuals under the ACA?
 - A. Marital status and geography
 - B. Tobacco use, age, and geography
 - C. Age and history of tobacco and drug use
 - D. Family medical history

Protect the ACA

Last night, the United States Senate passed a nonbinding amendment to the Senate Budget for 2014 that would repeal a 2.3 percent excise tax on medical devices. [The vote](#) was 79-20. Colorado Senators Bennet and Udall voted in support of the resolution. The Medical Device Tax was established by the Affordable Care Act and is estimated to raise \$29 billion in revenue over 10 years (2013-2022). While the vote was non-binding, it signals that there is sufficient support in the Senate to repeal the tax. The House of Representatives voted for repeal in June of last year. The House bill

offset lost revenue by requiring low- to middle-income individuals who buy subsidized coverage in the Affordable Care Act's health exchanges to pay back the full amount of any overpayments they may receive. In our opinion, this would discourage people from making use of the credits specifically designed to help them afford health insurance.

There has been a lot of misinformation about the Medical Device Tax. One of the best [pieces](#) about the tax which explains why repeal is not in the interest of consumers is by but the Center on Budget Policy Priorities.

The Affordable Care Act depends on a carefully constructed package of spending cuts and revenue raisers. Every piece of the package is important to the whole, and exempting one piece of the health care industry from the provisions of the Act sets a dangerous precedent.

What you can do:

Let Senators [Bennet](#) and [Udall](#) know that you do not support repeal:

Read more:

[Politico](#)

[Huffington Post](#)

[FoxNews.com](#)

Sequestration Corner:

Low income women and children will lose services under sequestration
The across-the-board cuts in federal spending, known as "the sequester," which took effect March 1st, will have severe impacts on a number of programs that provide health services to Colorado's low income mothers and their children. Important programs like the Maternal Infant and Early Childhood Home Visiting program (MIECHV) and school based health centers have already begun to experience a five percent cut in their funding.

The Maternal Infant and Early Childhood home visiting program (MIECHV) will see significant cuts and fewer low income mom's and their newborn babies will have access to essential health-related counseling from nurses and other professionals. The Office of Management and Budget [estimates](#) that this program will be cut by \$20 million dollars this year. In 2012, Colorado received nearly \$6 million in MIECHV [funding](#).

Colorado's school based health centers will also see their funding cut because of sequestration. Children and their families utilize over [50 school-based health](#)

centers in our state and receive essential primary and other health care at their local schools. The ACA allocated \$200 million from 2010-2013 to improve school based health centers across the country. In December, Colorado received \$1 million to improve health centers in Durango and Denver. These centers may lose an estimated \$50,000 in funding because of these across the board cuts.

U.S. Senate committee considers impact of immigration reform on women and children

On Monday, the U.S. Senate Judiciary Committee heard testimony about how the United States's current immigration system can better meet the needs of women and children.

During her testimony, Jennifer Ng'andu of the National Council of La Raza explained that access to safety net programs can help improve children's health and move immigrants out of poverty. She explained that "children of immigrants who receive SNAP benefits [food stamps] were healthier, less hungry, and more likely to have better nutritional outcomes."

However, "undocumented immigrants are almost entirely banned from most major health and public safety net programs," Ng'andu said. Immigrants often pay more out of pocket for health care, and research shows that immigrant children had emergency room expenditures nearly three times that of citizen children, Ng'andu said.

Ng'andu criticized restrictions barring undocumented immigrants from purchasing health insurance in the health insurance marketplaces, created as part of the health reform law. Approximately 375,000 undocumented immigrants buy their own health insurance, Ng'andu said. In his written statement, Chairman Patrick Leahy (D-VT) said that instead of protecting women and children, "our broken immigration system is instead hurting families."

The testimony and webcast from this hearing are available on the Senate Judiciary Committee's website.

Quiz Answers 1) D 2) True 3) C 4) B