

FACT SHEET ON HEALTH CARE

In an historic vote on Sunday, March 21, 2010, the House of Representatives voted 219 to 212 to pass the Senate health care reform bill, the Patient Protection and Affordable Health Care Act (H.R. 3590). Thirty four Democrats and all Republicans opposed the bill. The bill is expected to be signed into law by President Obama, possibly as early as tomorrow. The non-partisan Congressional Budget Office estimated that the legislation would cost \$940 billion over ten years and reduce the federal deficit by \$130 billion over the first ten years and \$1.2 trillion in the second ten years. The House then took up a budget reconciliation bill (the Reconciliation Act of 2010 H.R. 4872) to make amendments to the health care reform bill to address issues which were problematic to many Members of Congress. The reconciliation bill was passed by a vote of 220 to 211 and must now go to the Senate for passage.

The vote on the House and Senate passed Patient Protection and Affordable Health Care Act was a great victory for the disability community as this bill contains numerous provisions of importance to people with disabilities, including the following:

Coverage

- Prohibiting private health insurance exclusions for pre-existing conditions.
- Eliminating annual and lifetime caps in private insurance policies.
- Restricting the consideration of health status in setting premiums.
- Expanding Medicaid to cover individuals with incomes up to 133 percent of the federal poverty line (approximately \$29,000 per year for a family of four).

Benefits

- Ensuring that minimum covered benefits include products and services that enable people with disabilities to maintain and improve function, such as rehabilitation and habilitation services and devices.

Access to Quality Care

- Improving training of physicians, dentists, and allied health professionals on how to treat persons with disabilities.
- Requiring the Centers for Medicare and Medicaid Services to collect data on beneficiaries with disabilities access to primary care services and the level to which primary care service providers have been trained on disability issues. Ensuring prevention programs include a focus on individuals with disabilities.

Long Term Services and Supports

- Increasing the federal share of Medicaid, known as the Federal Medical Assistance Percentage (or FMAP), for home and community based services (HCBS) and during periods of economic downturn.
- Allowing states to offer additional services under the 1915(i) Medicaid HCBS Waivers State Plan Option.
- Providing spousal impoverishment protections for HCBS Beneficiaries.
- Strengthening long-term services and supports through a two pronged approach:
 - 1) Taking pressure off of the Medicaid program:** The Community Living Assistance Services and Supports (CLASS) Act would create a national long term services insurance program which assists eligible individuals and their families to meet long term needs with a cash benefit and without forcing them into poverty to receive Medicaid benefits.
 - 2) Improving the Medicaid program:** The Community First Choice Option would help to eliminate the institutional bias by encouraging states to cover personal attendant services under the state's optional service plan instead of through the waiver system by offering a 6% increase in the federal share of Medicaid for these services.