

NEW CONSUMER PROTECTIONS STARTING SEPTEMBER 23, 2010

- 1. Parents can keep their children on their health plans up to age 26— Insurance plans that are renewed on or after September 23, 2010 are required to allow young adults to remain on their parents' insurance policy until they turn 26. About 32,100 young adults in Pennsylvania will qualify for coverage the next time their parents' plans renew. For more information, click here.
- 2. **Insurers cannot deny coverage to a child because he or she has a pre-existing condition** Employer plans and new plans in the individual market are now prohibited from denying coverage to children with pre-existing conditions. This is a victory for the <u>177,900</u> children in Pennsylvania with such conditions.
- 3. Your health care cannot be taken away by your health insurer if you get sick—Health plans will no longer be able to drop you (rescind your coverage) if you get sick. Health insurance companies will only be able to cancel coverage due to nonpayment or fraud. This will protect the 683,000 Pennsylvanians who purchase health insurance on the individual market.
- 4. **Insurers can no longer place lifetime limits on coverage**—Insurance companies will no longer be able to place lifetime caps on the coverage that an individual receives. This will ensure that the <u>7.4 million</u> Pennsylvanians with private health insurance never have to worry about their coverage running out.
- 5. **Annual limits will be tightly regulated**—Annual limits by employer plans and new plans in the individual market will be tightly restricted, to ensure access to needed care. This will protect <u>6.7 million</u> Pennsylvanians with employer-based insurance, and anyone who signs up for a new insurance plan in Pennsylvania.
- 6. New health plans must provide you with recommended preventive care for free—New plans in the individual and group markets will be required to cover preventive services with no co-payments and with preventive services being exempt from deductibles.
- 7. **New Plans Will Have a New, Independent Appeals Process**—Consumers in new plans will have access to effective internal and external appeals processes to appeal decisions made by their insurance company.
- 8. **New Plans Cannot Discriminate Based on Salary**—New employer health plans will be prohibited from establishing any eligibility rules for health care coverage that have the effect of discriminating in favor of higher wage employees.