HEALTH CARE REFORM AND LABOR

Providing Quality Affordable Health Care is Good for Labor and Good for America

The Patient Protection and Affordable Care Act combined with the Reconciliation Act:

- Bars insurance companies from discriminating based on pre-existing conditions, health status, and gender.
- Provides Americans with better coverage and the information they need to make informed decisions about their health insurance.
- Creates health insurance exchanges competitive marketplaces where individuals and small business can buy affordable health care coverage in a manner similar to that of big businesses today.
- Offers premium tax credits and cost-sharing assistance to low and middle income Americans, providing families and small businesses with the largest tax cut for health care in history.
- Insures access to immediate relief for uninsured Americans with pre-existing conditions on the brink of medical bankruptcy.
- Creates a reinsurance program in support of employers who offer retirees age 55-64 health coverage.
- Invests substantially in Community Health Centers to expand access to health care in communities where it is needed most.
- Empowers the Department of Health and Human Services and state insurance commissioners to conduct annual reviews of new plans demanding unjustified, egregious premium increases.

Two changes included in the reconciliation bill will help American workers:

- To further promote employer responsibility, the Reconciliation Act increases the assessment on firms with 50 or more employees that do not offer coverage, from \$750 per full-time worker to \$2,000 per fulltime worker, when one worker receives premium tax credits through the health insurance Exchange. To reduce disincentives to grow beyond 50 employees, the Reconciliation Act exempts the first 30 workers from this payment calculation. In addition, full-time and part-time employees are considered when determining whether an employer is subject to the employer responsibility policy.
- The Reconciliation Act also reduces the revenues collected by the excise tax in the first 10 years by 80 percent. The revised proposal focuses on the most generous plans, without impairing the tax's ability to slow the growth of health care costs over the long term. It delays the effective date of the excise tax from 2013 to 2018, thereby allowing all health plans additional time to become more efficient and avoid paying the tax. Furthermore, it excludes stand-alone dental and vision benefits from the calculation so people will still get those needed employer-provided benefits.