

The Affordable Care Act Helps Asian Americans and Pacific Islanders

For too long, too many hard working Americans paid the price for policies that handed free rein to insurance companies and put barriers between patients and their doctors. The Affordable Care Act gives hard-working families the security they deserve. The new health care law forces insurance companies to play by the rules, prohibiting them from dropping your coverage if you get sick, billing you into bankruptcy because of an annual or lifetime limit, or, soon, discriminating against anyone with a pre-existing condition. And it includes substantial new benefits for Asian Americans and Pacific Islanders across the country.

Historically, Asian Americans and Pacific Islanders have faced significant barriers to accessing affordable health insurance and these barriers have contributed to health disparities:

- Asian American, Native Hawaiian, and other Pacific Islander communities experience high uninsurance rates; 26.7% of Hmong Americans, 22.5% of Bangladeshi Americans, and 17.4% of Micronesians live in poverty; and 35.5% of Korean Americans, 18.3% of Vietnamese Americans, and 17.7% of Indian Americans lack health coverage.
- Cervical cancer incidence rates are among the highest in the US for Laotian American, Samoan, Vietnamese American and Cambodian American women.
- Asian American adults aged 65 years and older were 30% less likely to have ever received the pneumonia shot, compared to white adults of the same age group.
- In Hawai'i, Asians, Native Hawaiians and other Pacific Islanders ages 20 years or older are more than two times as likely to have diagnosed diabetes as white residents of similar age.
- Cancer is the leading cause of death for Asian Americans and Pacific Islanders. Native Hawaiians have the highest rate of deaths due to cancer compared to any other ethnic group in Hawaii and the third highest rate in the country
- Asian Americans are less likely to be tested for HIV/AIDS, and while the total number of reported AIDS cases has generally declined over the past five years for the white population, it has continued to increase for Asian Americans.

Under the new health care law, Americans will have the security of knowing that they don't have to worry about losing coverage if they're laid off or change jobs. And insurance companies now have to cover your preventive care like mammograms and other cancer screenings. The new law also makes a significant investment in State and community-based efforts that promote public health, prevent disease and protect against public health emergencies.

Health reform is already making a difference by:

Creating New Coverage Options for Individuals with Pre-existing Conditions

Under the new law, insurance companies are already banned from denying coverage to children because of a pre-existing condition. In 2014, they are banned from discriminating against anyone with a pre-existing condition such as cancer and having been pregnant. The new Pre-Existing Condition Insurance Plan in every State offers an option to people who have been locked out of the insurance market because of a pre-existing condition like cancer or heart disease. Already, 50,000 Americans who were uninsured due to a pre-existing condition have accessed affordable coverage through the Pre-Existing Condition Insurance Plan.

Covering Preventive Services with No Deductible or Co-pay

Under the new health care law, all Americans joining a new health care plan must be able to receive recommended preventive services, such as cancer, diabetes and blood pressure screenings, with no out-of-pocket costs such as co-pays or deductibles. Already, 2.1 million Asian Americans now have coverage for preventive services without additional cost sharing.

Removing Limits on Health Benefits

The law bans insurance companies from imposing lifetime dollar limits on health benefits – freeing cancer patients and individuals suffering from other chronic diseases from having to worry about going without treatment because of their lifetime limits. Already, approximately 5.5 million Asian Americans and Pacific Islanders are free from worrying about lifetime limits on coverage thanks to the new health care law. The new law also restricts the use of annual limits and bans them completely in 2014.

Providing Better Value for Your Premium Dollar Through The 80/20 Rule

Under the new health care law, insurance companies must provide consumers greater value by spending generally at least 80 percent of premium dollars on health care and quality improvements instead of overhead, executive salaries or marketing. If they don't, they must provide consumers a rebate or reduce premiums.

Providing New Coverage for Young Adults

Insurance companies are now required to allow parents to keep their children up to age 26 on their insurance plans. This means that over 2.5 million young adults have gained coverage because of the new health care law, including 97,000 Asian Americans and 29,000 American Indians / Alaska Natives.

Protecting Patients' Choice of Doctor

Under the law, Asian Americans and Pacific Islanders joining new insurance plans have the freedom to choose from any primary care provider and OB-GYN in their health plan's network, without a referral.

Decreasing Costs and Increasing Coverage to Millions of Asian Americans

Affordable Insurance Exchanges are one-stop marketplaces where consumers can choose a private health insurance plan that fits their health needs. Starting in 2014, they will offer to the public the same kinds of insurance choices members of Congress will have. The new law also provides middle class tax credits to families to help pay for private health insurance. And it expands the Medicaid program to families of four with incomes of up to \$29,000.

Decreasing Costs for Seniors with Medicare

Under the new law, seniors can receive recommended preventive services such as flu shots, diabetes screenings, as well as a new Annual Wellness Visit, free of charge. So far, more than 32.5 million seniors have already received one or more free preventive services, including the new Annual Wellness Visit. That includes more than 500,000 Asian Americans with Medicare. The new law also provides relief for people in the Medicare prescription drug coverage gap or donut hole – the ones with the highest prescription drug costs. As a first step, in 2010, nearly

four million people in the donut hole received a \$250 check to help with their costs. In 2011, 3.6 million people with Medicare received a 50 percent discount worth a total of \$2.1 billion, or an average of \$604 per person, on their brand name prescription drugs when they hit the donut hole. Seniors will see additional savings on covered brand-name and generic drugs while in the coverage gap until the gap is closed in 2020.

Providing Tax Credits for Small Businesses

Tax credits for small businesses included in the Affordable Care Act will benefit an estimated two million workers who get their insurance from an estimated 360,000 small employers who will receive the credit in 2011. In 2014, small business owners will get more relief with tax credits and affordable insurance choices in the new Affordable Insurance Exchanges in every State. For the first time, they will have a marketplace where they can see and compare their health plan options in one place, and insurers will have to actively compete for their business.

Increasing Access to Community Health Centers

The Affordable Care Act increases the funding available to the more than 1,100 community health centers in all fifty states to enable them to double the number of patients they served from 19 million to nearly 40 million by 2015. Health centers have received funding to create new health center sites in medically underserved areas, to enable health centers to increase the number of patients served, to expand preventive and primary health care services, and to support major construction and renovation projects.

Reducing the Health Care Workforce Shortage for the Asian American and Pacific Islander Communities

The law includes new resources that would have boosted the number of doctors, nurses and health care providers in communities where they are needed most, as well as diversified the workforce, so racial and ethnic minorities are better represented. If the law is repealed, we will continue to not have enough health care providers to deliver care in harder-to-reach communities.

Making Important Progress in Reducing Health Disparities

The new health care law invests in increase data collection and research about health disparities, as well as initiatives to increase the racial and ethnic diversity of health care professionals and strengthen cultural competency training among health care providers. It also elevates the National Center on Minority Health and Health Disparities at the National Institutes of Health from a Center to a full Institute, reflecting an enhanced focus on minority health. In fact, in 2011, HHS released our first-ever, department-wide Action Plan to Reduce Health Disparities, and has begun the process of upgrading data collection standards to better understand and ultimately eliminate health disparities.