The Affordable Care Act Helps Rural America

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 and freedoms for rural America.

Americans in rural communities face unique challenges when it comes to getting the health care they need:

- Rural Americans have on average higher rates of chronic conditions, including diabetes, heart disease, and high blood pressure.
- Rural communities face a shortage of primary care doctors and nurses. One fourth of America's population lives in rural areas, but only ten percent of physicians practice there.
- Many rural residents have trouble affording health insurance, which is why rural communities have some of the highest rates of uninsurance in the country.

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 build the health care workforce, 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.

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, 54 million 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, 105 million Americans 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.

Scrutinizing Unreasonable Premium Increases

In every State and for the first time ever, insurance companies are required to publicly justify their actions if they want to raise rates by 10 percent or more. And an increasing number of States have more power to block unreasonable premium increases from taking effect.

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 this provision.

Decreasing Costs and Increasing Coverage

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.

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.

Decreases Costs for Seniors on 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. 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 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% 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.

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. Area Health Education Centers, which are academic and community partnerships that encourage health care providers to work in rural areas and increase access to health care, receive new funding under the Affordable Care Act to continue training health care workers in rural communities.

Reduces the Health Care Workforce Shortage for Rural Communities

The new health care law includes new resources that would have boosted the number of doctors, nurses and health care providers in communities where they are needed most. The new law helps encourage more doctors and nurses to practice in rural communities through additional scholarships, loan repayments, and Medicare payment incentives, among other incentives. In fact, investments in the NHSC program have allowed for nearly three times the number of National Health Service Corps clinicians working in underserved and rural communities across America than were 3 years ago. The law also expands tele-health services, so rural Americans can access specialty care, as well as other innovative ways to help rural residents overcome geographic barriers to accessing the care they need.