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AFFORDABLE CARE ACTS BASICS

These are some of the major changes the law implemented:

- Previously, consumers were responsible for copayments to receive common preventative services. Most health plans are now required to cover preventative services such as annual physicals, vaccines, and mammograms at no cost to consumers.
- Previously health insurance companies could deny health coverage to consumers with pre-existing health conditions. A pre-existing condition is a health problem consumers had before the date that their health coverage started. The ACA prevents health insurance companies from denying coverage to those with pre-existing conditions (e.g. diabetes or cancer).
- The ACA created the new Health Insurance Marketplace. The goal of the Marketplace is to provide a way to compare private health coverage options so that consumers can purchase the most appropriate coverage for their needs and budget. Depending on the consumer's income level, health coverage through the Marketplace may be more affordable because of tax credits that offset the premium costs.
- Previously, most health care plans only allowed children to stay on their parents' policies through age 19 or 24 if they were full-time students. The Affordable Care Act extended this age to 26 for all children, regardless of their student, work or marital status.
- Previously, health insurance companies could cancel consumers' health insurance without reason when they no longer want to provide coverage. The Affordable Care Act strictly limits the circumstances under which companies can cancel policies. It also prohibits lifetime limits on coverage.
- The Affordable Care Act provided temporary federal money to states that wanted to expand Medicaid, but Tennessee's governor decided not to expand its Medicaid program at this time.

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