The Health Care Law and You: How does the ACA help Asian Americans, Native Hawaiians and Pacific Islanders?
Priscilla Huang, JD

Facilitator

Policy Director,
Asian & Pacific Islander
American Health Forum
Kathy Lim Ko
Presenter

President and CEO,
Asian & Pacific Islander
American Health Forum
Mayra E. Alvarez, M.H.A.

Presenter

Director of Public Health
Office of Health Reform at the
Department of Health and Human Services
Tung Thanh Nguyen, M.D.

Presenter

Commissioner

White House Initiative on Asian Americans and Pacific Islanders
ACA Gains for Asian Americans, Native Hawaiians and Pacific Islanders

Kathy Lim, Ko
President & CEO
Profile of Uninsured Asian Americans, Native Hawaiians and Pacific Islanders

• There are nearly 47 million Americans who are uninsured
  – 1 in 7 Americans
  – 1 in 6 Asian Americans, Native Hawaiians and Pacific Islanders

• Individuals who are uninsured are more likely to lack a usual source of care

• AAs and NHPIs are less likely to use or receive preventive services and timely appropriate care
Health Care Coverage for AAs and NHPIs
By Ethnicity

Percent health insurance coverage among Asians and NHPIs in the U.S.

Source: 2009 American Community Survey 1-Year Estimates
Health Care Coverage for AAs and NHPIs

By Age

Percent health insurance coverage among Asians and NHPIs by age in the U.S.

Ages less than 19
Ages 19-26
Ages 27-64
Ages 65+

Asian

Private insurance
Public insurance
Uninsured

Source: 2009 American Community Survey 1-Year Estimates
ACA = Improved Access to Health Coverage

• Expanded coverage in Medicaid
• New state health insurance exchanges
  - Individual Exchange
  - Small Business Health Options (SHOP) Exchange
• Employer responsibility requirements
• Extended family coverage for young adults (through age 26)
• Private market changes
  - New prohibitions to prevent unjustified increases in premiums and denials in coverage
Medicaid Expansion

• Nearly 1 in 10 Asian American adults are likely to benefit from the expansion
  – 1 in 5 Bangladeshis
  – 1 in 6 Hmong

• About 1 in 8 NHPIs are likely to benefit
  – 1 in 5 Tongans
  – 1 in 6 Samoans
Medicaid

MEDICAID GAINS BY RACE

Source: 2009 American Community Survey
Increased Affordability: Subsidies to purchase insurance

• About 10% of AAs and NHPIs are likely to benefit from subsidies to purchase insurance offered through the Exchanges.

• AA and NHPI ethnic groups with the highest uninsurance rates are more likely to benefit
Improved Data Collection: ACA Section 4302

• Requires that HHS population surveys collect and report data on race, ethnicity, sex, primary language, and disability status.

• New race and ethnicity standards:
  - **Asian**: Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, Other Asian
  - **Native Hawaiian or Other Pacific Islander**: Native Hawaiian, Guamanian or Chamorro, Samoan, Other Pacific Islander
Resources

Visit our Health Care Reform Resource Center for more info about the ACA:

www.apiahf.org/hcr

Join our listserv to receive updates:

www.apiahf.org
The Health Care Law and You
Insurance companies could take advantage of you and discriminate against up to 129 million Americans with pre-existing conditions.

Premiums had more than doubled over the last decade, while insurance company profits were soaring.

Fifty million Americans were uninsured, tens of millions more were underinsured, and those that had coverage were often afraid of losing it.
What the Law Means for You: 5 Things to Know

• Protects all American from the worst insurance company abuses

• Makes health care more affordable

• Strengthens Medicare

• Improves access to care

• Reduces health disparities
The Law Stops Insurance Companies from Taking Advantage of You

**Patient’s Bill of Rights**

It is now illegal for insurance companies to:

- Deny coverage to children because of a pre-existing condition like asthma and diabetes.
- Put a lifetime cap on how much care they will pay for if you get sick.
- Cancel your coverage when you get sick by finding a mistake on your paperwork.
- And more...
The Law Makes Health Care More Affordable

**80/20 Rule**

*BECOMING,* many insurance companies spent as much as 40 cents of every premium dollar on overhead, marketing, and CEO salaries.

*TODAY,* we have the new 80/20 rule: in most states, insurance companies must spend at least 80 cents of your premium dollar on health care or improvements to care.

If they don’t, they must repay the money.

**Rate Review**

*BECOMING,* insurance companies could raise your premiums by double digits without justification.

*TODAY,* insurance companies must publicly justify their actions if they want to raise premiums by 10 percent or more.
The Law Strengthens Medicare

- Many free **preventive services** and a free **annual wellness visit**.
- A **50% discount on covered brand-name medications** for those in the prescription drug donut hole. In 2011, seniors save an average of nearly $600. The donut hole will be closed in 2020.
- **Cracks down on fraud** to protect Medicare, including tougher penalties for criminals.
- Makes sure your doctors can **spend more time with you and improve care coordination**.
- Improvements that **extend the life of the Medicare Trust Fund**.
The Law Increases Your Access to Affordable Care

- Young adults under the age of 26 can now stay on their parents’ health plans.

- New plans in every state for people who have been locked out of the insurance market because of a pre-existing condition like cancer or heart disease.

- In many cases, you can get preventive services for free.

- There are thousands of new doctors and nurses in communities around the country and millions more patients getting care due to programs like the National Health Service Corps and community health centers.
The Law Increases Your Access to Affordable Care: Affordable Insurance Exchanges

Starting in 2014, up to 33 million Americans will have access to affordable health insurance:

• Exchanges will make it easy to compare and choose health plans with important rules set up to protect you.

• Significant tax credits will be available on a sliding scale for middle class families with income up to $90,000 for a family of four.

• Medicaid will be available to all Americans living with income below $30,000 for a family of four—including, for the first time ever, single childless adults.
Focus on Prevention: The Prevention and Public Health Fund

• Chronic diseases – such as heart disease, cancer, stroke, and diabetes – are responsible for:
  – 7 out of 10 deaths among Americans each year.
  – 75% of the nation’s health spending.

• The Fund helps tackle the root causes of chronic disease and focus on fighting disease and illness before they happen:
  – control the obesity epidemic
  – reduce tobacco use
  – train the nation's public health workforce
  – modernize vaccine systems
  – improve access to behavioral health services.
97,000 young AAPI adults who would have been uninsured now have coverage under their parent’s plan.

2.7 million AAPI with private insurance have access to expanded preventive services with no-cost sharing.

867,000 AAPI beneficiaries in Medicare have access to a stronger Medicare program.

In 2016, 2.0 million AAPI who would otherwise be uninsured will gain or be eligible for coverage.
Consistent methods for collecting and reporting health data will help us better understand who we serve.

New Standards for HHS-sponsored population surveys include:

- Race
- Ethnicity
- Sex
- Primary Language
- Disability Status

Standards include 9 additional data collection categories for AAPI
5 Things to Remember About the Law

• Protects all Americans from the worst insurance company abuses
• Makes health care more affordable
• Improves access to care
• Strengthens Medicare
• Reduces health disparities
So no matter your circumstances...

If you start a new business, change jobs, move to another state, or retire early...

You’ll have access to affordable health insurance.
Learn More

http://www.healthcare.gov/

Social Networks

http://www.minorityhealth.hhs.gov/
GoToWebinar Housekeeping: Time for Questions

Your Participation

- Please submit your text questions and comments using the Questions Panel

Note: Today’s presentation is being recorded.
Thank you!