

- Dependent coverage must be available for dependents up to age 26
- Uninsured individuals with pre-existing conditions can obtain health insurance through a high risk health insurance pool program
- Affordable coverage will be identified by the HHS and a website will be established for residents of any state to locate coverage
- Reinsurance for covering early retirees will provide reimbursement for a portion of the cost of providing health insurance (program will end January 1, 2014)
- Limits on lifetime dollar value of benefits for any individual covered by group or individual health insurance eliminated
- Pre-existing condition exclusions will be eliminated for children
- Group health plans and health insurance issuers offering group or individual health insurance coverage must cover preventive health services
- Rescissions in all new and existing plans will be prohibited in most cases; plan coverage may not be cancelled without prior notice to the enrollee

- Voluntary long-term care insurance options available for adults who become disabled
- Consumer rebates for excessive medical loss ratios
- Employers required to report health coverage costs on form W-2
- "Qualified Medical Expenses will conform to the definition used for the itemized tax deduction
- Simple Cafeteria Plan will be created to provide small businesses an easier way to sponsor a cafeteria plan

- Individuals must obtain health insurance coverage or pay a penalty (some exemptions apply)
- Employers with 50 or more employees must offer coverage to their employees or pay a penalty
- State health insurance exchanges to be established
- Health insurance companies will not be able to discriminate against individuals based on health status
- Individual health care tax credits available for certain individuals
- Second phase of small business tax credit
- Assessment of health insurance provider fee
- No limits on annual dollar value of benefits for any individual covered by group or individual health insurance
- Pre-existing condition health insurance exclusions eliminated for adults

2010 2011 2013 2014 2015-2018

- Fully-insured group health plans must satisfy nondiscrimination rules regarding participation and benefit eligibility
- Employers must improve the appeals process for appeals of coverage determinations and claims
- Small business tax credit available
- Rebates for the Medicare Part D "Donut Hole" sent to eligible enrollees
- States may expand Medicaid eligibility
- Indoor tanning services tax imposed

- Medicare Part D discounts (50% discount on brand name drugs)
- Increase of taxes on withdrawals from HSAs (prior to age 65) and Archer MSAs which are not used for qualified medical expenses
- Free annual wellness visit for Medicare beneficiaries and elimination of cost sharing

- Improvements on electronic exchange on health information to reduce paperwork, administrative burdens and costs
- Annual health flexible savings account (FSA) contributions limited to \$2,500
- Medicare Part D subsidy deduction eliminated
- Income threshold for claiming itemized deduction for medical expenses increased
- Hospital insurance tax for high wage workers increased
- Medical device excise tax established

- Health insurance provider fee imposed in 2015 and increased annually
- High-cost plan excise tax established in 2018