Myths and Facts about the Affordable Care Act

The Affordable Care Act is the greatest advance for women’s health in a generation and is a badly needed law. It will help the millions of women without insurance (roughly 19 million in 2010) and the millions more who are underinsured or face discrimination in the market place. Unfortunately, there is still a tremendous amount of misinformation and negative messaging being circulated by opponents. It’s time to set the record straight.

Myth: The Affordable Care Act (ACA) is a government take-over of health care.

Fact: Nothing could be further from the truth. The private insurance market remains in place under the ACA and, with millions more Americans now eligible for coverage, it’s likely that there will be better choices of insurance plans. What the ACA does do is hold insurance companies accountable and end the discriminatory practices that have prevented millions of Americans from getting or keeping insurance coverage.

Myth: The ACA is nothing more than a tax increase.

Fact: Actually, it’s more like tax relief. While it is true that Americans who choose not to buy insurance will pay a modest penalty, for the rest of us it will mean an end to hidden taxes. That’s because with millions more people covered by insurance, we will no longer be paying the “extra” costs often built into our own insurance premiums to cover the health care costs incurred by those without insurance.

Myth: The ACA does nothing for me since I already have insurance.

Fact: The health reform law is the most significant health care improvement for women in decades. It eliminates discriminatory insurance practices like denying you or your family coverage because of a pre-existing condition, preventing insurers from dropping or limiting coverage when you need it most, making you pay more simply because you are a woman, and ensuring that you can protect your children by keeping them on your insurance policy until they are age 26. The law makes many recommended preventive services – like mammograms, pap smears, and contraception – available without copays and it closes the “do-nut” hole for women in Medicare. The new law also makes it easier to shop for insurance through new exchanges, and provides tax credits to make insurance more affordable.
Myth: The health care reform law will drive up the deficit and bankrupt the nation.

Response: The Congressional Budget Office has estimated that the health reform law is actually reducing the deficit by $210 billion over the next ten years. The law will also reduce spending by cracking down on waste, fraud and abuse in Medicare, and by expanding preventive care so doctors can detect illnesses early, before they become more expensive to treat.

Myth: The ACA makes health coverage less secure.

Fact: The ACA actually makes health care coverage more secure by making sure that families can’t be denied coverage due to a pre-existing condition, or lose their coverage when someone gets sick. It also requires that members of Congress get their health care coverage from the same plans as millions of Americans. If it’s good enough for members of Congress, then it will be good enough for working families.

Myth: The health care reform law interferes with the doctor-patient relationship.

Response: By focusing on prevention, providing access to affordable coverage, changing the way health care services are delivered and improving the quality and cost of care, the health law strengthens the relationship between patients and their doctors. It puts control of people’s health care back in their own hands, rather than the hands of insurance companies.

Myth: The health care reform law takes benefits away from Medicare enrollees.

Fact: Just the opposite. The new law actually provides some additional benefits and protections for Medicare beneficiaries including an annual wellness visit, preventive care without copays, and a gradual closing of the donut hole in Medicare’s prescription drug benefit.

Myth: The health care reform law rations care.

Fact: The law includes several important new protections that help ensure you have access to coverage including: preventing insurers from retroactively cancelling your insurance coverage; requiring all new individual and small employer health plans to offer a core set of essential health benefits including maternity care; and giving you the right to appeal adverse benefit decisions. The law also creates a non-partisan Independent Payment Advisory Board made up of experts who will make recommendations to keep Medicare strong for the future. The Board is not allowed to cut or change benefits or to do anything that would limit access to care.

Myth: The health care law penalizes small employers.

Fact: The majority of people who are uninsured work full- or part-time, many of them for small businesses that can’t afford coverage. Women are more likely to own small businesses. Many of these employers want to provide their workforce with health care
coverage, but simply cannot afford to do so. The ACA helps make coverage more affordable to small businesses by giving them tax credits to help them purchase insurance and by allowing them to band together to get the same lower rates as big corporations.

**Myth:** The health care reform law is going to drive up the cost of insurance premiums.

**Fact:** In the decade before the ACA was enacted, the cost of insurance for American families more than doubled and millions of people lost coverage due to those increases. The health law makes insurance companies accountable for their premium increases, bringing unprecedented transparency to industry practices that have long been cloaked in secrecy. That has already begun to slow the growth in insurance costs, saving America’s employers and workers millions of dollars. The ACA also makes sure you get more value for every premium dollar spent by requiring that insurers spend at least 80 percent of premiums on patients.

**Myth:** The new law requires all employers, including some with religious affiliations, to cover birth control free of cost to patients.

**Fact:** Investments in prevention pay huge dividends in improved health and lower costs. For women, this includes critical services like mammograms, cervical and colon cancer screenings, well-woman visits, domestic violence screening and counseling, and contraception. Medical professionals, including the Institute of Medicine, confirmed that access to all of these services without costly copays and deductibles will improve the health and lives of women and their babies. The Administration has taken steps to address the concerns of religious organizations while continuing to ensure all women will have access to these needed services.

**To learn more and get involved, go to www.NationalPartnership.org/ACA.**