

HEALTH INSURANCE REFORM TO HOLD INSURANCE COMPANIES ACCOUNTABLE

PUTTING YOU AND YOUR DOCTOR BACK
IN CHARGE—NOT THE INSURANCE
COMPANIES—TO GUARANTEE STABILITY,
LOWER COSTS, HIGHER QUALITY AND
MORE CHOICES OF PLANS.

WE URGENTLY NEED REFORM

- ★ Without reform, costs for average family increases \$1,800 each year
- ★ Last year, more than half of Americans postponed medical care or skipped their medications because they couldn't afford it
- ★ Increasing costs also hurt businesses, the economy, and the federal budget

WHAT'S IN IT FOR YOU?

STABILITY, SECURITY, AND QUALITY

- ★ No Discrimination for Pre-Existing Conditions, like diabetes, a heart condition, or cancer
- ★ No Dropping Your Coverage Because You Become Sick
- ★ No Refusal To Renew Your Coverage, if you've paid in full and become ill
- ★ No More Job or Life Decisions Made Based on Loss of Coverage
- ★ No Need to Change Doctors or Plans, if you like the coverage you have
- ★ No Co-pays for Preventive and Wellness Care
- ★ No Excessive Out-of-Pocket Expenses, Deductibles or Co-Pays
- ★ Yearly Caps on What You Pay
- ★ No Yearly or Lifetime Cost Caps on What Insurance Companies Cover

America's Affordable Health Choices Act would provide significant benefits in the 8th District of Ohio:

SMALL BUSINESSES

Up to 11,600 small businesses could receive tax credits to provide coverage to their employees

MEDICARE PART D

7,700 seniors would avoid the donut hole of prescription drug coverage in Medicare Part D

BANKRUPTCY

1,400 families could escape bankruptcy each year due to unaffordable health care costs

HOSPITALS AND PROVIDERS

Hospitals and health care providers would get payment of \$50 million each year in care for the uninsured—costs we all share now

UNINSURED

59,000 uninsured constituents would gain access to quality, affordable health insurance

Answers to the Nancy Pelosi/ White House Talking Points

August 4, 2009

Nancy Pelosi's message: **Hold the insurance companies accountable. Remove them from between you and your doctor. No discrimination for pre-existing conditions. No dropping your coverage because you get sick. No more job or life decisions made based on loss of coverage. No need to change doctors or plans. No co-pays for preventive care. No excessive out-of-pocket expenses, deductibles, or co-pays. No yearly or lifetime cost caps on what insurance companies cover.**

These things only happen if people give up (or lose) their employer plan, enter the Health Insurance Exchange and enroll in the "public" plan.

If people stay in their employer plan (as Obama promised we could) obviously people will lose that coverage whenever they lose their job or switch jobs or retire. In the Exchange, private coverage cannot be guaranteed renewable, since Pelosi and her colleagues expect the public plan will drive all the private plans out of business.

But is enrollment in a public plan a good idea?

- These characteristics describe Medicaid. But who wants to be in Medicaid? In terms of delays in detection and treatment of cancer, studies show that being in Medicaid is only slightly better than being uninsured.
- These characteristics also describe the Canadian system — where people get fewer mammograms, fewer Pap smear tests, and fewer PSA tests and where survival rates from cancer are well below the US.
- These characteristics also describe the British system — where thousands of people die each year because they do not have access to cancer drugs routinely available in America.
- How is Pelosi's comment consistent with Obama's claim that "if you like your health plan you can keep it?"
- Clearly Pelosi intends for us all to be in a different plan — one that she chooses.