

Health Care Reform: Health Insurance Coverage

ANA believes that health care is a basic human right, and supports the World Health Organization's challenge – originally articulated in 1978, and reaffirmed as late as 2007 – for all nations to provide a basic level of health care to their citizens. The U.S. is the only industrialized country that does not explicitly express a commitment to its people to take care of at least their basic health needs.

As a wealthy nation, there is no excuse to leave more than 45 million people with no health insurance coverage. Without meaningful reform, the number of uninsured will rise to 51 million in 2013 and 54 million by 2019ⁱ. When millions are uninsured, we all pay the price: higher insurance premiums, out of control health care costs, and diminished economic productivity. Bringing everyone into the health care system will help stabilize costs.

In addition to the uninsured population, a growing number of individuals and families are underinsured and have difficulty affording healthcare costs—including premiums, deductibles and copayments—or are not covered for necessary services. According to a study by Harvard researchers published online June 4 by the *American Journal of Medicine*, medical problems caused 62% of all personal bankruptcies filed in the U.S. in 2007. Surprisingly, 78% of those filers had medical insurance at the start of their illness, including 60.3% who had private coverage, not Medicare or Medicaid. These statistics only underscore the reality that covering the uninsured is only part of the answer. To truly provide coverage for all, we must enact insurance reforms that ensure that benefits are meaningful and cannot be arbitrarily revoked or denied.

The health care reform proposals currently under consideration in Congress would build upon our current system to strengthen and preserve the coverage many already enjoy while creating new access to affordable coverage for the millions who are currently left out.

Health Care Reform would expand access to quality affordable health coverage by:

- **Making Premiums Affordable.** Consumers seeking coverage in the individual market and small businesses have limited choices and extremely high costs. Current proposals create a new health insurance marketplace, called the “health insurance exchange,” where individuals and small businesses can purchase quality coverage regardless of age or health status. For those who qualify, subsidies will be offered to help make premiums more affordable.
- **Creating a Public Health Insurance Option.** A public health insurance plan, available as an option for consumers in the health insurance exchange, will ensure guaranteed, affordable coverage, expand choices, and provide much-needed competition to regionally dominant private insurers.
- **Ending Discrimination for Pre-Existing Conditions.** Insurance companies will be prohibited from refusing you coverage because of your medical history. A recent survey estimated that 36% of non-elderly adults were discriminated against because of a pre-existing condition.
- **Ending Exorbitant Out-of-Pocket Expenses, Deductibles or Co-Pays.** Insurance companies will have to abide by annual caps on how much they can charge for out-of-pocket expenses. Americans pay more than ever for health insurance, but get less coverage.

- **Ending Cost-Sharing for Preventive Care.** Insurance companies must fully cover, without charge, regular checkups and tests that help you prevent illness, such as mammograms or eye and foot exams for diabetics.
- **Ending Dropping of Coverage for Seriously Ill.** Insurance companies will be prohibited from dropping or watering down insurance coverage for those who become seriously ill.
- **Ending Gender Discrimination.** Women’s reproductive health requires more regular contact with health care providers. Insurance companies will be prohibited from charging you more because of your gender.
- **Ending Annual or Lifetime Caps on Coverage.** Insurance companies will be prevented from placing annual or lifetime caps on the coverage you receive.
- **Extending Coverage for Young Adults.** Children would continue to be eligible for family coverage through the age of 26.
- **Guaranteeing Insurance Renewal.** Insurance companies will be required to renew any policy as long as the policyholder pays their premium in full. Insurance companies won't be allowed to refuse renewal because someone became sick.

About ANA’s Support for Universal Health Care

ANA’s House of Delegates, our representative policy-setting body democratically elected by our Constituent (state) Member Associations, voted to adopt a stance in support of guaranteed, affordable, high-quality health care for all.

ANA believes that health care is a basic human right, and supports the World Health Organization’s challenge – for all nations to provide a basic level of health care to their citizens.

ANA believes that a system focused on primary care, prevention and chronic disease management can alleviate much of the expensive acute care that currently takes its toll in human suffering, as well as dollars. It is a worthwhile national investment.

We also believe that nursing’s strengths as a profession -- providing holistic care that considers the individual, family and community -- matches the emphasis in current health reform proposals.

ANA’s health reform advocacy is guided by these principles, created by our membership. If proposed legislation did not match ANA’s goals for both nurses and patients, we would not be in support, regardless of the sponsoring political party.

ⁱ Congressional Budget Office, *Preliminary Analysis of the Insurance Coverage Specifications Provided by the House Tri-Committee Group* (Washington: Congressional Budget Office, July 14, 2009), available online at http://www.cbo.gov/ftpdocs/104xx/doc10430/House_Tri-Committee-Rangel.pdf.