



Comparing the Health Care Reform Bills: A Summary of the Major Components within the Senate Baucus Plan and the House Tri-Committee Plan

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House Tri-Committee Plan

*Most Provisions Would Be Effective in 2013 except where noted

Medicaid Coverage

Expands Medicaid Coverage for Low Income Individuals and Families up to 133 percent of the Federal Poverty Level or an income of \$24,352 per year for a family of three. The expanded eligibility is fully Federally Financed in the first year, declining to 90 percent federally financed in following years. Effective in 2013

Insurance Reforms

Prohibits insurers from denying coverage based on pre-existing conditions and prohibits increases in insurance due to health status. Insurance rating is limited to a 2:1 ratio only for age.

Also restricts out of pocket costs to \$5,000 for an individual and \$10.000 for families.

Insurance Exchange & Public Option

Establishes a health insurance exchange in each state allowing individuals and businesses to select coverage from a pool of options. The insurers in the exchange would be required to provide minimum benefits. One health insurance option would include a public plan.

Premium Assistance

Establishes sliding scale premium assistance for people earning between 100 and 400 percent of the federal poverty level (\$73,240 for a family of three). Premiums start at 1.5 percent of income, increasing to 11 percent of income for those at 350 percent poverty and above.

Senate Baucus Plan

*Most Provisions Would Be Effective in 2013 except where noted

Medicaid Coverage

Expands Medicaid Coverage for Low Income Individuals and Families up to 133 percent of the Federal Poverty Level or an income of \$24,352 per year for a family of three. Effective on January 1 2014. The expansion of eligibility is financed through an enhanced FMAP formula that varies by state. State contribution amounts would change over several years.

Insurance Reforms

Prohibits insurers from denying coverage based on pre-existing conditions and prohibits increases in insurance due to health status. Insurance rating could vary by 5:1 for age and can vary based on location, family size and tobacco use by up to 7.5:1.

Also restricts out of pocket costs to \$5,950 for an individual and \$11,900 for families in 2010.

Insurance Exchange & Non Profit Co-Ops

Establishes a health insurance exchange in each state allowing individuals and businesses to select coverage from a pool of options. The insurers in the exchange would be required to provide minimum benefits. Does not include a public plan option but authorizes a non-profit, member run insurance option (referred to as a Co-Op).

Premium Assistance

Establishes sliding scale premium assistance for people earning between 100 and 400 percent of the federal poverty level (\$73,240 for a family of three). Premiums start at 3 percent of income, increasing to 13 percent of income for those at 300 percent poverty and above.

Tax Credits for Small Businesses

Small businesses would be provided with tax credits to help offset the costs of providing insurance coverage.

Mandatory Coverage

All individuals and employers will be required to secure insurance or provide it to their employees, with the exception of individual cases of hardship and small employers under \$250,000 in annual payrolls.

Businesses who do not provide insurance will pay a payroll penalty of 2 percent salary for companies with annual payrolls up to \$250,000; increasing to 8 percent of salary for companies at or above \$400,000 salary. Those with salaries under \$250,000 are exempt.

Individuals- except in cases of hardship -are required to have health insurance coverage. Those who do not will have a 2.5 percent of modified adjusted gross income.

Medicare Part D

Reduces the Medicare Part D donut hole by \$500 in 2011, with a complete phase out by 2023.

Tax Credits for Small Businesses

Small businesses would be provided with tax credits to help offset the costs of providing insurance coverage.

Mandatory Coverage

All individuals and employers will be required to secure insurance or provide it to their employees, with the exception of individual cases of hardship and small employers with less than 50 workers.

Businesses that do not provide insurance will pay a penalty assessment based on the number of employees who receive premium assistance through the exchange.

Individuals- except in cases of hardship -are required to have health insurance coverage. Those who do not will pay a penalty of \$750 per year for an individual and up to \$1,500 per year for a family if their income is between 100 and 300 percent of poverty. Above 300 percent of poverty, the penalty increases to \$950 per year for an individual and \$3,800 for a family.

Medicare Part D

Beginning in 2011, pharmaceutical companies would be required to offer brand name prescription drugs at a 50 percent discount for Medicare Part D enrollees who fall into the donut hole.

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