Healthcare Reform in Florida

Jim O’Loughlin
Chief Executive Officer
The Affordable Care Act
Employer-Sponsored Health Care
Government-Sponsored Health Care

To provide coverage for the elderly as well as poor women and children, Congress enacted Medicare & Medicaid in the mid-1960s.
The Emergency Medical Treatment and Active Labor Act (EMTALA) of 1986 requires hospitals to screen and stabilize (treat) every patient who comes to the hospital ED seeking care, regardless of the patient’s ability to pay and regardless of what it costs the hospital to provide the care.
Policy Decisions Have Left a Gap in Coverage for Florida

- 7.7 million have employer-based health insurance
- 6 million rely on government-sponsored programs for coverage
- 920,000 have coverage purchased in the open market
- 3.9 million Floridians have no coverage

Source: Kaiser State Health Facts.Org
Who are the Uninsured?

- Majority are low-income working families
- 38% of the uninsured are below the poverty level (poverty level for a family of 4 was $23,050)
- 90% are in low- or moderate-income families, meaning they are below 400% of the poverty level
- Over 60% have at least one full-time worker in the family and 16% have a part-time worker
- Most of these workers are either self-employed or work for small companies where benefits are not offered or they are low wage earners and can’t afford their share of the premium
- Children are least likely to be uninsured because they are more likely to qualify for Medicaid

Source: Kaiser Family Foundation
Medicaid Expansion

• By 2014, states must extend Medicaid eligibility to all legal residents up to 133% of poverty and under 65 years old.
• 133% FPL is $14,404 for individual and $29,327 for family of 4.
• Feds will cover 100% of states’ costs from 2014-2016 and the following portions after 2016:
  2017 – 95%
  2018 – 94%
  2019 – 93%
  Beyond – 90%
Additional Insurance Reforms

• No annual limits on coverage
• No denial of coverage for adults with pre-existing conditions
• No higher premium based on gender or medical history
• Insurers required to report share of premium income spent on medical care
• Limits on out-of-pocket costs

2014
Individual Mandate

- Beginning Jan. 1, 2014, US citizens and legal immigrants must have coverage or pay a penalty when they file their federal tax returns.
  - **Individual penalties**
    - $95 per person in 2014
    - $325 per person in 2015
    - $695 per person in 2016
  - **Household penalties**
    - 1% of household income in 2014
    - 2% of household income in 2015
    - 2.5% of household income in 2016
  
  *Exemptions for hardship*
Pay or Play for Large Employers

• Large employers (more than 50 workers) not offering coverage will pay $2,000 per year per worker minus first 30 full-time employees.

• Employers with 50 or fewer employees are exempt.