WHAT THE HEALTHCARE BILL MEANS FOR YOU AND YOUR FAMILY

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The Patient Protection and Affordable Care Act was signed into law in 2010, amid much controversy. At the end of June 2012, the Supreme Court of the United States released its decision regarding the constitutionality of a portion known as the individual mandate, further dividing the gap between supporters and opponents alike. Regardless of decision, the debate continues over the mandate that will require an applicable individual and dependents to obtain and maintain minimum insurance coverage for each month starting in 2013, or else be subjected to a penalty.

This bill encompasses a great deal of verbiage for hospitals, healthcare providers, and insurance companies, as well as individuals. The Act also sets into effect labeling requirements for food through restaurants and vending machines, patient-centered outcomes research, and much more. Most Americans either have been or will be affected in some way by this law. Due to its length, complexity, and inclusion of amendments to dozens of other government rulings, many people do not understand it.

A few sections of the law have been enacted, such as the requirement that insurance providers cover dependent children in a household until age 26, and that an individual cannot be excluded from coverage due to pre-existing disease or condition. For many, these two provisions offer insurance benefits that were previously too expensive or unavailable.

Another aspect under debate mandates that insurance companies will be required to use no less than 80% of the premiums paid for actual patient healthcare. Insurance companies argue that they have to use more than 20% of the premiums they collect to pay for the administrative costs of their businesses. While the premise seems valid, I suspect that the result will be an overall increase in healthcare premiums to cover that change in percentage.



As I read through this, I see multiple government agencies attempting to coordinate proof and oversight and penalties, including the Internal Revenue Service and the Secretary of Health and Human Services. Sharing information may become far more cumbersome than expected, causing delays affecting the already clogged bureaucracy.

The Act also elaborates on how "health insurance and healthcare services are a significant part of the national economy. National health spending is projected to increase from \$2.5 trillion in 2009 to \$4.7 trillion in 2019." Furthermore, the authors acknowledge that the Act, along with other provisions, will "add millions of new consumers to the health insurance market, increasing the supply of, and the demand for, health care services." The consequence to this, it is concluded, is that by requiring insurance coverage, the Act will "broaden the health insurance risk pool to include healthy individuals, which will lower health insurance premiums." As a nurse, I fear that this will overload the existing healthcare services before personnel and facilities can be expanded to include these added millions of people.

However, to this requirement of insurance is an exemption for "religious conscience," which states that the Act will not include "any individual for any month if such an individual has in effect an exemption ... which certifies that such an individual is a member of a recognized religious sect or division..." This section concerns me, not because of the exemption itself and how it will be put into effect, but because of the verbiage regarding "a recognized religious sect or division." Who will decide what religion is or is not "recognized" to qualify as exempt? Who gets "certified" as a member of a religion?

There are hundreds of other topics that can be debated, and I ask that you learn how these changes will affect you—both financially and medically—then get involved in the politics of supporting it or repealing it. Either way, each citizen needs to offer a voice to how healthcare changes. Contact your legislators and be active. It is time to hold responsible those few who are making healthcare reform decisions for everyone but themselves. I believe one of most important rights you have as a patient is the right to vote, so please exercise it.



Valerie Conrad is the author of *Surviving American Healthcare*. She is a nurse and former paramedic, and has worked in numerous healthcare settings including emergency medical services, hospitals, doctor's offices, and urgent-care clinics. She has cared for thousands of patients who required healthcare in their later years. This work showed her how important it is for patients to have someone who will advocate for them.