



A New Patient's Bill of Rights

On September 23, critical new consumer protections in the new law—a Patient's Bill of Rights—took effect. The Patient's Bill of Rights puts an end to some of the worst insurance company abuses, and puts consumers, not insurance companies, in control of their health care. These new protections include:

Ban on Discriminating Against Kids with Pre-Existing Conditions

✓ Before reform, tens of the thousands of families had been denied insurance each year for their children because of an illness or condition. Starting September 23rd, plans cannot discriminate against kids with pre-existing conditions. In 2014, no one seeking coverage can be discriminated against because of a preexisting condition. Up to 72,000 uninsured children are expected to gain coverage by banning insurers from refusing them coverage due to a pre-existing condition. Coverage for up to 90,000 children will no longer exclude benefits because of a pre-existing condition.

Ban on Insurance Companies Dropping Coverage

✓ Before reform, insurance companies could cancel your coverage when you got sick and needed it most because of a simple mistake on your application. Starting September 23rd, insurance companies are banned from cutting off your coverage due to an unintentional mistake on your application. Approximately 10,700 people's coverage, whose coverage is dropped each year because they get sick or make a technical mistake on their application, will be protected under the new law.

Ban on Insurance Companies Limiting Coverage

✓ Before reform, individuals suffering from serious and chronic diseases were often forced to limit or go without treatment because of an insurer's lifetime limit on their coverage. Now, insurance companies can no longer put a lifetime limit on the amount of coverage they provide, so families can live with the security of knowing that their coverage will be there when they need it most. Up to 20,400 people who typically hit their lifetime limits on the dollar amount that can be spent on coverage, along with the nearly 102 million enrollees who have policies with lifetime limits, will no longer have to worry about hitting their benefits caps. The use of annual dollar limits will be restricted, and in 2014 will be banned completely. By 2013, up to 3,500 people will gain coverage as a result of the ban on annual limits that insurers impose on nearly 18 million people today.

Ban on Insurance Companies Limiting Choice of Doctors

✓ Before reform, insurance companies could decide which doctor you could go to. Starting September 23rd, if you purchase or join a new plan you have the right to choose your own doctor in your insurer network. Up to 88 million people will benefit from the provision that protects primary care provider choice by 2013.

Ban on Insurance Companies Restricting Emergency Room Care

✓ Before reform, insurance companies could limit which emergency room you could go to or charge you more if you went out of network. Starting September 23rd, if you purchase or join a new plan, those plans are banned from charging more for emergency services obtained out of network. Up to 88 million people will benefit from this provision.

Guarantee You a Right to Appeal

- ✓ Before reform, when insurers denied you coverage or restricted your treatment, you were left with few options to appeal. Starting September 23rd, if you purchase or join a new policy, you will be guaranteed the right to appeal insurance company decisions to an independent third party. Up to 88 million people will benefit from the new appeals process provisions by 2013.

Covering Young Adults on Parent's Plan

- ✓ Starting September 23rd, young adults will be allowed to remain on their parent's plan until their 26th birthday, unless they are offered coverage at work. Up to 2.4 million young adults, up to 1.8 million who are uninsured and nearly 600,000 who purchase coverage in the individual market, could gain coverage through their parents.

Covering Preventive Care With No Cost

- ✓ Starting September 23rd, if you join or purchase a new plan, you will receive recommended preventive care with no out-of-pocket cost. Services like mammograms, colonoscopies, immunizations, pre-natal and new baby care will be covered and insurance companies will be prohibited from charging deductibles, co-payments or co-insurance. Up to 88 million people will have access to preventive care with no out of pocket costs.