

AFFORDABLE CARE ACT: TOP 11 BENEFITS FOR CALIFORNIA CHILDREN AND YOUTH

Just six months after the Affordable Care Act (ACA) law was signed on March 23, 2010, California children gained expanded health coverage and new protections that will ensure that more children have the health care they need to grow up healthy and ready to learn. Health care reform is already helping millions of California children and their families - and even more will benefit once the law is fully in place in 2014.

Children and families are benefiting from the Affordable Care Act in the following ways:

- 1. No-cost preventive care for children.** The ACA focuses on prevention, so we can keep children from getting sick in the first place. The ACA has made it easier for kids and their families to get primary and preventive care. Since September 2010, there are no longer co-payments to receive preventive services, which means children can receive well-child visits, immunizations, and developmental screenings at no-cost. An estimated 1.6 million California children are receiving expanded coverage of preventive services due to plan changes as a result of the ACA.¹ The ACA has also invested over \$85 million to promote wellness and disease prevention in California.² For example, initiatives to address obesity and make healthy foods more available are already under way in communities across California.
- 2. Young adults can now stay insured until age 26.** Since September 2010, over 435,000 California young adults under age 26 have gained coverage by being able to remain on their parents' employer-sponsored health insurance plan.³ Resources for young adults looking for coverage can be found at www.GettingCovered.org.
- 3. No more health insurance discrimination against children with pre-existing conditions.** As a result of the ACA, children under age 19 who have pre-existing health conditions, like asthma or diabetes, can no longer be denied coverage by insurance companies. That means that nearly 600,000 California children with pre-existing conditions and their families no longer have to worry about being denied coverage.⁴ California law now provides for specific enrollment opportunities for children with pre-existing conditions.⁵
- 4. Protection of health coverage programs for low-income children.** Over 4.5 million low-income California children have no or low-cost comprehensive health coverage through Medi-Cal and the Healthy Families Program.⁶ The ACA protects that coverage by preventing eligibility rollbacks or significant premium increases.
- 5. An end to dollar limits on health care coverage.** The ACA bans annual and lifetime dollar limits on health coverage. More than an estimated 3.2 million California children will no longer run out of coverage because of arbitrary lifetime limits on health benefits if they develop a health problem, need a number of health services, or require expensive health services.⁷ Families no longer need to fear that ongoing necessary medical treatments for chronic conditions will be cancelled.
- 6. No more insurance cancellations when people get sick.** As a result of the ACA, California children and their families with private coverage no longer face the risk of having coverage taken away (or rescinded) when they get sick.
- 7. Investments in health care where kids and teens are – in school.** The ACA has already provided more than \$14 million to 35 school-based health centers and clinics in California.⁸ School-based health centers help keep students healthy, which enhances academic success. By addressing health issues early at school, problems are prevented from developing into something more serious.

The Morgans: Already Benefiting From the Affordable Care Act



Michelle and Dustin Morgan of Sacramento County know how important health coverage is for their three children. Her son, Tristan, 4, has asthma and a severe peanut allergy. They applied for private insurance for Tristan, but he was denied because of his pre-existing conditions. While he was uninsured, he was hospitalized twice, and the family had to pay out of pocket for doctors, hospitals, and ambulance fees. The family paid what they could, but eventually had to file for bankruptcy because of the medical fees for Tristan. Fortunately, more than a year ago Michelle was able to get low-cost health coverage for her three children through Healthy Families, a program that has been protected and strengthened under the Affordable Care Act. Now, Michelle and Dustin have not had any trouble getting health care for their children, including care for Tristan's chronic conditions and preventative care for Alycia, 15, and Candon, 19 months. "Healthy Families literally saved my son's life," says Michelle. "I get emotional just thinking about how hard it was before we had it." Fortunately, the next time the Morgan family has to look for private health care, Tristan won't be denied coverage because the Affordable Care Act bars insurance companies from denying coverage to children based on pre-existing conditions.

8. Advancements in important care for infants and young children. The ACA has already invested in important maternal, infant, and early childhood home visitation programs that provide comprehensive and coordinated services for families in at-risk communities. California has received over \$20 million to support state and local early childhood home visitation programs, such as the Nurse-Family Partnership.⁹

When the ACA is fully implemented by 2014, California children and families will gain additional benefits:

9. Strengthened health coverage for low-income children. The ACA will strengthen the no or low-cost comprehensive health coverage California children receive through Medi-Cal and the Healthy Families Program by streamlining eligibility processes, investing in Medi-Cal primary care, providing additional federal funds for Healthy Families, and renewing efforts to sign up the nearly 700,000 uninsured children who are eligible but not yet enrolled.¹⁰

10. One-stop shopping for health insurance. The ACA will make coverage easier for families and children to obtain. California agencies are currently developing an easily accessible online portal where families can apply for, compare, and enroll in the coverage options that fit their individual needs. Coverage will also be available through in-person or telephone access. The ACA will also establish health insurance "navigators," who will help families understand and enroll in the best health coverage options.

11. More affordable health insurance for families. In January 2014, the California Health Benefit Exchange (HBEX) will be a new marketplace where many small businesses and nearly 2.3 million Californians will be able to purchase coverage.¹¹ Many individuals will be able to receive federal premium and cost-sharing subsidies to ensure that coverage is affordable. The federal affordability subsidies for consumers, estimated to be the equivalent of about \$160 per Californian,¹² will help ensure that families can enroll in coverage.

California parents can learn if their child qualifies NOW for free or low-cost comprehensive health coverage through Medi-Cal or Healthy Families by calling 1-877-KIDS-NOW (1-877-543-7669) or they can apply directly online at www.healthapp.net or www.benefitscal.org.

To learn more about the health care and the ACA, visit:
www.healthcare.gov | www.healthcare.ca.gov | www.hbex.ca.gov | www.chhs.ca.gov

This factsheet was prepared in conjunction with the **100% Campaign**, a collaborative effort of **The Children's Partnership**, **Children Now**, and **Children's Defense Fund-California**, working together since 1998 to ensure that all of California's children gain access to affordable, comprehensive health coverage.

¹ "Affordable Care Act extended free preventive services to 54 million Americans with private health insurance in 2011," U.S. Department of Health and Human Services (February 15, 2012), available at www.hhs.gov/news/press/2012pres/02/20120215a.html.

² "The Affordable Care Act's Prevention and Public Health Fund in California" U.S. Department of Health and Human Services (February 14, 2012), available at www.healthcare.gov/news/factsheets/2011/02/prevention/ca.html.

³ "State-Level Estimates of Gains in Insurance Coverage Among Young Adults," Healthcare.gov, (July 19, 2012), available at <http://www.healthcare.gov/news/factsheets/2012/06/young-adults06192012a.html>.

⁴ "Health Reform: Help for Americans with Pre-existing Conditions," Families USA (May 2010), available at www.familiesusa.org/assets/pdfs/health-reform/pre-existing-conditions/california.pdf.

⁵ Under a recent California law, the best time for a parent to apply for private coverage is during the birth month of their child when premiums are the least expensive.

⁶ Analysis of Department of Health Care Services and Managed Risk Medical Insurance Board enrollment data.

⁷ "Under The Affordable Care Act, 105 Million Americans No Longer Face Lifetime Limits on Health Benefits," U.S. Department of Health and Human Services (March 5, 2012), available at <http://aspe.hhs.gov/health/reports/2012/LifetimeLimits/ib.shtml>.

⁸ "HHS announces new investment in school-based health centers," U.S. Department of Health and Human Services (July 14, 2011), available at www.hhs.gov/news/press/2011pres/07/20110714a.html.

⁹ "HHS announces \$224 million to support evidence-based home visiting programs to help parents and children," U.S. Department of Health and Human Services (September 22, 2011), available at www.hhs.gov/news/press/2011pres/09/20110922b.html; and California Home Visiting Program at the Maternal, Child and Adolescent Health division of the California Department of Public Health, available at www.cdph.ca.gov/programs/mcah/Pages/HVP-HomePage.aspx.

¹⁰ Genevieve Kenney, *et al.*, "Who And Where Are The Children Yet To Enroll In Medicaid And The Children's Health Insurance Program?" *Health Affairs*, 29, no. 10 (2010): 1920-1929, content.healthaffairs.org/content/29/10/1920.abstract.

¹¹ "State Progress Toward Health Reform Implementation: Slower Moving States Have Much To Gain," Urban Institute (January 2012), available at www.urban.org/publications/412485.html.

¹² *Ibid.*