



**National
Multiple Sclerosis
Society**

**Affordable Care Act:
Impact on People
Living with MS**

Quick Facts

Historically, many people with MS have faced challenges to find adequate, affordable health care.

Coverage

- People with MS are more likely be unemployed.
- 30% of those with MS put off seeking health care because of costs.
- 20% of people living with MS could not fill Rx/skipped doses because did not have access

Cost

- The average annual cost of living with MS is \$70 K.
- The average lifetime cost of living with MS is \$2 M.
- 30% of those with MS put off seeking health care because of costs.
- 20% of people living with MS could not fill Rx/skipped doses because did not have access.



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National MS Society Worked with MS Community to Form Principles

Principles for Health Care Reform

- Accessible health care coverage
- Affordable health care services and coverage
- Standards of coverage for specific treatments
- Elimination of disparities in care
- Comprehensive, quality health care for all
- Increased value of health coverage
- Access to high-quality, long-term supports and services

The Affordable Care Act Passed in March 2010: Implemented Over Time

2010

High risk pool for those with pre-existing conditions

Coverage for people for dependents

Free preventative care

No discrimination based on pre-existing conditions, for children

Lifetime coverage amounts eliminated

2011-13

Implementation of CLASS Program

50% discount on brand-name drugs in Medicare Part D donut hole

A 10% bonus for doctors practicing in rural areas

Nonprofit insurance co-ops will be created to compete with commercial insurance

Insurance paperwork standardized

2014+

Total pre-existing ban

Premium credits

Annual monetary caps on essential benefits prohibited

Medicaid expansion to 133% Federal Poverty Level

State insurance exchanges implemented

Essential benefits required



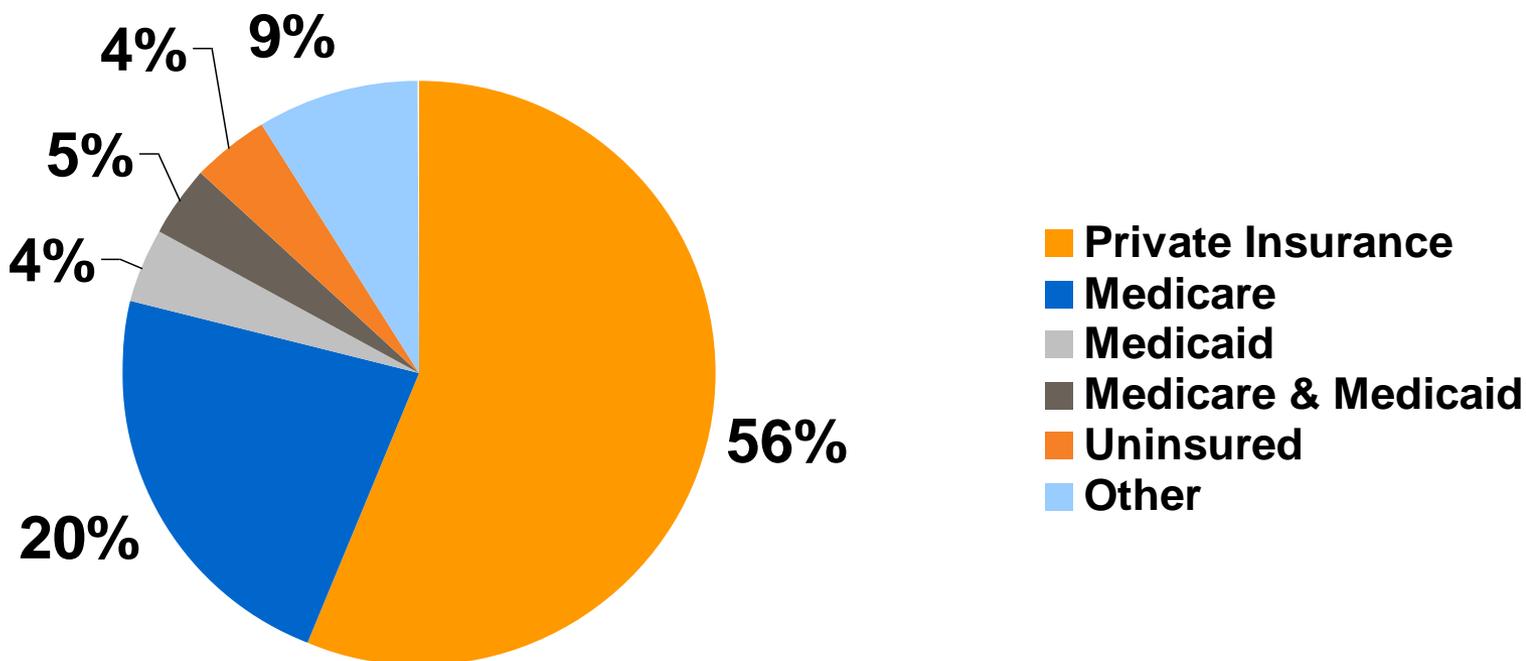
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Key Provisions Will Improve Lives of Those Living with MS

Provisions	Description
Pre-existing conditions	<ul style="list-style-type: none">■ Temporary high-risk pool until 2014.■ Ban on insurance denials due to pre-ex condition for all under age 19■ In 2014, prohibits discriminating for pre-existing conditions.
Affordability	<ul style="list-style-type: none">■ Lifetime caps on benefits prohibited.■ Premium credits up to 400% FPL.■ Out-of-pocket costs limited.■ Medicaid expansion to 133% FPL.
Long-term supports	<ul style="list-style-type: none">■ A new voluntary, self-funded insurance to help people with severe disabilities remain in their homes and communities.
Benefits	<ul style="list-style-type: none">■ All qualified health plans must provide at least the essential benefits. No cost-sharing for preventive services.
Medicare	<ul style="list-style-type: none">■ Donut hole gradually decreases until eliminated in 2020.
Misc.	<ul style="list-style-type: none">■ Requires plans to cover people who participate in clinical trials.■ Bans rescissions

Benefits Across the Health System

Insurance for People with MS



Source: *lezzoni & Ngo. Health, disability and life insurance experiences of working-age persons with multiple sclerosis. Multiple Sclerosis 2007; 13:534-546.*

ACA Offers Greater Availability of Private Insurance

Private Insurance	
Provision	Effective date
Prohibits discrimination based on pre-existing conditions in all plans	<i>Effective 2010 for children and 2014 for adults</i>
Guarantees renewal of insurance policies	<i>Effective 2014</i>
Prohibits use of rescission except in instances of fraud or non-payment	<i>Effective 2010</i>
Grants premium subsidies and limits out-of-pocket costs for individuals and families up to 400% of FPL	<i>Effective 2014</i>
Limits out-of-pocket costs for all plans sold in the exchange (\$5950 for individuals, \$11,900 for families)	<i>Effective 2014</i>
Bans lifetime caps/ restricts or bans annual caps	<i>Effective 2011</i>

ACA Reduces Costs for Medicare Beneficiaries

Medicare	
Provision	Effective date
No cost-sharing for evidence-based preventive services, annual wellness visit and personalized prevention plan	<i>Effective 2011</i>
No cap on PT/OT until 2011	<i>Effective 2010-2011</i>
Medicare Rx coverage gap phases out by 2010 <ul style="list-style-type: none">• In 2010, \$250 rebate• Starting 2011, brand name drugs cost 50% less during coverage gap	<i>Phased in from 2010</i>

ACA Improves Medicaid Coordination

Medicaid	
Provision	Effective date
Income eligibility becomes standardized across the country.	<i>Effective 2014</i>
'Money Follows the Person' Demonstration grants extended making it easier for some to move back into their communities	<i>Effective 2010-2016</i>
New Federal Coordinated Health Care Office to improve care coordination for people in both Medicare and Medicaid	<i>Formally established by CMS Dec. 30, 2010</i>



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Other Notable Changes in the ACA

Other Important Provisions

Provision	Effective date
CLASS Act -- national voluntary long term care insurance program	<i>HHS announces benefit plan no later than Oct. 1, 2012</i>
FDA is authorized to approve generic versions of biologic drugs	<i>Effective upon enactment</i>
New standards for accessibility for medical diagnostic equipment including exam tables, chairs, scales, X-ray and other 'imaging' technology	<i>Effective March 2012</i>

What Is Not Changing

1. Employers and individual policyholders can keep same plans
2. Individuals can still get COBRA benefits
3. HIPAA/Medical Privacy
4. Family Medical Leave Act (FMLA)

Conclusion

- **Overall, many structural changes in health care system**
 - Some changes may be evident as soon as this year
- **National MS Society will continue to analyze how new provisions will impact people and families living with MS**
 - Look for notifications on our webpage and through our periodicals like *Momentum*.
- **For general questions about health care reform: www.healthcare.gov**
 - The official site of the federal government, provides comprehensive information about the new law, with details on health insurance options for individuals in every state. *In English and Spanish*
- **Specific questions about how ACA will impact your MS treatment: The National MS Society**
 - Call us! 1-800-344-4867
 - Online: www.nmss.org