Because of Obamacare...
I LOST MY INSURANCE
Messaging Tools

#YourStory

In this Playbook, you’ll find messaging tools to help you communicate in your district about the disastrous Obamacare rollout.

For your one-stop shop on Obamacare, visit www.gop.gov/healthcare.

- YourStory
- Talking Points
- Social Media
- Videos
- Digital Flyers
- Sample Op-Ed
- Fact Sheet

If you have questions, please feel free to contact the Conference Communications Shop at conferencepress@mail.house.gov or by calling (202) 226-9000.
YourStory

Obamacare is much more than a bad website; it’s a bad law. Americans all across the country are already feeling the law’s negative effects, such as rising premiums, limited access, and cancelled policies. This is happening to hardworking Americans in every corner of America – including your own district. When you’re home, highlight the House Republican Conference’s “YourStory” project and encourage your constituents to submit feedback of their own experiences with Obamacare.

Tell Us Your Story

Healthcare.gov continues to malfunction and crash, creating real problems for the American people all across the country. We are eager to hear the story of your experience with the website and encourage you to tell us.

Please see below to submit your story and it will be shared with the proper committee to investigate appropriately.

*All fields are required.

First Name
Last Name
Address
City
Talking Points

Courtesy of the House Ways & Means Committee

Obamacare is increasing costs and forcing employers to reduce hours, eliminate jobs or cut wages. Families and individuals are losing the health insurance they have and like. No wonder a majority of Americans still disapprove of the law.

- **Premiums are increasing:** The administration has abandoned President Obama’s promise to reduce premiums by $2,500, and now acknowledges premiums will increase as a result of Obamacare.
- **Millions of Americans will lose the plan they have and like:** Despite President Obama’s promise that you can keep the plan you have and like, we now know at least 7 million Americans will lose their employer-provided insurance as a result of Obamacare.
- **Obamacare is hurting job creation:** While Minority Leader Pelosi promised that Obamacare would be a “jobs” bill, 70 percent of small businesses now cite Obamacare as a major obstacle to job creation.
- **Billions of dollars in tax hikes:** The size of the individual mandate tax has risen dramatically from the original estimate of $17 billion to $55 billion.
- **Fewer people will get covered:** Despite repeated claims that as many as 30 million plus people would gain insurance through Obamacare, recently the Administration said they hoped that up to 7 million people would enter the health care exchanges.
- **Millions more uninsured:** The number of Americans left uninsured by Obamacare has risen by 8 million from the original estimate.

Courtesy of the House Energy & Commerce Committee

**Keep Your Health Plan Act**

Chairman Upton and all GOP E&C members have introduced the *Keep Your Health Plan Act* to allow health care plans available today on the individual market to continue to be offered so Americans have the option to keep what they have if they like it. The bill also ensures that Americans maintaining their health care plan would not face a penalty under Obamacare.

- NBC News reports that “the Obama administration has know that for at least three years,” the President’s promise would not hold true for millions of Americans.
- CBS News adds, “more than two million Americans have been told they cannot renew their current insurance plans…and this is just the tip of the iceberg.”

**Broken Promises**

The President sold his health care law on two major promises: 1) If you like what you have, you can keep it. Period. And 2) Health care costs will go down for all Americans, and “save a typical family an average of $2,500…” Each of these promises has now been broken.
Accountability

Administration officials and the companies involved with building Healthcare.gov looked the committee in the eye and repeatedly insisted that everything was “on track.” Last week the contractors who built the site explained that they warned the Administration of problems and that the final, end-to-end testing was the Administration’s responsibility.

On October 30th, Secretary of Health and Human Services Kathleen Sebelius testified that the website was not operating at its full functionality and confirmed the rollout was a debacle.

Transparency

What else is the Administration not disclosing? What further problems lay ahead for Healthcare.gov? The Administration boasts its record on transparency, but is refusing to provide enrollment figures. E&C Committee members first wrote to Secretary Sebelius on October 8 requesting these figures.

Fairness

How can the Administration force the American people to buy a product from a system that does not work? The Administration has given businesses a break for one year – what defensible reason do they have to not provide the same fairness to individual Americans? The bipartisan chorus for a delay is growing.

Competence

The Administration now has a serious competence problem. Healthcare.gov is so much more than a website. The website should have been the easy part.
Social Media

It’s important to execute effective messaging across all media, and social media is a crucial component. You should use Facebook, Twitter, YouTube and Instagram to update your constituents daily with posts linking to press releases, photos, video, and graphics that drive our messaging. Below are examples of recent tweets and Facebook posts from House Republicans that communicate our position.

How has #Obamacare impacted you or your family? Tell me here: griffin.house.gov/how-has-obamac... #ar2 #arpx #arkansas #littlerock

Obamacare Costs One Indiana School District $6 Million, so they opt to cut school workers’ hours instead. bit.ly/1apU7S5

Flashback: "Let me be clear: If you like your health care plan, you can keep that too." - Obama in 2009 nypost.com/2013/10/29/oba

Another story about #Obamacare's impact on Americans. How is it impacting you? #ShareYourStory tinyurl.com/llqw5sv

Increased health care costs or losing the coverage you have and like? What has been your ObamaCare experience? Take my survey and share your thoughts. http://1.usa.gov/17nJXDb
Spent the morning visiting with some of the residents and caregivers of Gallatin Health Care & Rehabilitation. I am grateful for this group’s work to provide quality long-term care to seniors in our community. #TN06

Sobering stat: more Americans have lost their insurance in just 3 states than have enrolled in #Obamacare in all 50.

F Forbes

More Americans in 3 States Have Had Their Insurance Canceled Under...

The sad reality of the fumbled roll-out of ObamaCare appeared in two sets of news stories that serve as an ironic juxtaposition this week. Well over 500,000 individuals have seen their insurance...

All across Tennessee and the rest of the country, stories are pouring in about insurance companies canceling coverage in the wake of ObamaCare. Have you been able to keep your coverage? Have your rates gone up? #brokenpromises #obamacare #aca #healthcare #fail

Congress of the United States
House of Representatives

Dear Secretary Sebelius,

We are writing to request information about the number of Tennesseans who have applied for and enrolled in insurance plans on the health insurance exchange prior to October 1, 2013.

Please provide the total number of applications in Tennessee as well as the number of applicants in each Tennessee congressional district. Please also provide the total number of enrollees in Tennessee as well as the number of enrollees in each Tennessee congressional district.

We have received numerous reports from Tennesseans who have been unable to enroll due to website malfunctions as well as complaints from Tennesseans who can no longer afford the plans that were offered for their income level despite their efforts to remain in compliance.

We look forward to receiving the requested information in a timely fashion and appreciate your attention to this matter.

Sincerely,

[Signature]
**A Promise He Could Not Keep**

President Obama repeatedly promised Americans that, “If you like your current health care plan, you can keep it.” Now, millions of Americans are discovering that is a promise the President could not keep.

**Videos**

**Online Chat Help with Healthcare.gov**

Excerpts from a real online chat between a potential customer and a customer service representative for Healthcare.gov.

**Dismantle The Chaos**

The reality of Obamacare is setting in and the American people have taken notice that Washington Democrats passed a health care bill that is driving up costs and cutting jobs.

**Weekly Republican Address**

Chairman Fred Upton (R-MI)

October 26, 2013

The problems with Obamacare are more than just website glitches. From broken promises to special waivers, House Republicans are actively conducting thoughtful oversight of this law, while at the same time crafting patient-centered solutions to improve healthcare for all Americans.
Digital Flyers

Use these digital flyers in your social media posts to point to all the problems with the President’s Affordable Care Act.

The Origins of Obamacare...

“I can’t tell you how little thought was given to that thought other than it sounded good. So they just kind of hatched it on their own. It just happened. It wasn’t like a deep strategic conversation.”

Advisor to Candidate Obama, Politics Barack Obama’s health-care conversion

Clearly

Higher insurance premiums
Fewer hours
Fewer jobs

#SenateMustAct

ObamaCare is Hitting Home

Since the Obamacare exchanges opened on October 1st, Americans all across the country are feeling the real effects of the Affordable Care Act.

George Pflts
New Mexico
Used to pay $139.63 per month; now his cheapest option costs $431.

Cindy Vinson
California
Will have to pay $1,800 more a year for her individual plan.

Adam Weldzius
Illinois
This single father’s premium of $233 will double while his deductible will triple to $12,700.

Robert Hare
New Mexico
Used to pay $87 per month; now he will be forced into the exchanges and his premium will cost $431.

#FairnessForAll

ObamaCare Broken Promises

- Plans Cancelled, Premiums Rising -

“Recently received notice my current plan will no longer be offered under ACA.”

– John Knudson, Anchorage, AK

“Our current premiums of approx $650 per month; for what we feel is adequate coverage for our family, will go up to $775 per month.”

– Andrea Rood, Omaha, NE

“Received a letter from my health insurance provider terminating my coverage on Jan 1st 2014.”

– Paul Knopfert, Wenatchee, WA

“My Anthem-Blue Cross policy was cancelled due to the ACA. My new ACA compliant plan premium increased to $330 per month. This is $300 a month more than my previous plan.”

– Steve Almquist, Lake Forest, CA

GOP.gov/YourStory

ObamaCare

A Bad Product
That’s Not Affordable

“Premium increase for young males to increase by an average of 200%.”

American Action Forum – 10.2.13

It’s Not Accessible

“Obamacare’s web-site is really bad”

Washington Post – 10.4.13

And You Will Be Fined If You Don’t Buy It

“Promises a punishment if you don’t sign up for Obamacare” — a fine this year of $695

ABC News 10.1.13

#FairnessForAll

For every 3 Americans working, 2 are not even looking for work

The Labor Force Participation Rate remains at its lowest level in 35 years

Over 4 million Americans have been unemployed for 27 weeks

4,000,000

GOP.gov/Jobs
“Only the federal government could come up with a website that's slower than sending something by mail.”
- Jay Leno

“Colorado's Obamacare website is trying to sell Obamacare to college kids by calling it bro'surance. Unfortunately the website wasn't working today because it is bro' broken.”
- Conan O'Brien

**REALITY OF OBAMACARE**

- **IT IS UNAFFORDABLE**
  It will increase health spending by $7,450 for a family of four.

- **IT IS UNWORKABLE**
  President Obama signed seven bills to repeal or defund it.

- **IT IS UNFAIR**
  It could leave up to 300,000 children without coverage.

- **IT IS UNPOPULAR**
  57% of Americans are opposed to all or some of it.

**FREE AMERICA FROM OBAMACARE**

**DOUBLE DOWN.**

Obamacare will increase average individual market insurance premiums by 99% for men, 62% for women.

#DontDoubleMyRate (Health Care Edition)

FOX NEWS

“...reducing the cap on weekly hours for part-time employees from 32 to 28.”

ORLANDO SENTINEL

“SeaWorld is by no means alone in cutting employee hours.”

GOP.gov/YourStory

GOP.gov/YourStory

GOP.gov/YourStory

GOP.gov/YourStory

GOP.gov/YourStory

GOP.gov/YourStory

GOP.gov/YourStory
“If you like your doctor, you will be able to keep your doctor, period. If you like your health care plan, you'll be able to keep your health care plan, period. No one will take it away, no matter what.”
— President Obama

The Washington Post
Obama's pledge that 'no one will take away your health plan'
— First Presidency

OBAMACARE is HITTING HOME
Since the Obamacare exchanges opened on October 1st, Americans all across the country are feeling the real effects of the Affordable Care Act.

Cindy Vinson
California
Will have to pay $1,800 more a year for her individual plan.

#FairnessForAll

OBAMACARE is HITTING HOME
Since the Obamacare exchanges opened on October 1st, Americans all across the country are feeling the real effects of the Affordable Care Act.

Tom Waschura
California
Will have to pay nearly $10,000 more per year for insurance for his family of four.

#FairnessForAll

OBAMACARE is HITTING HOME
Since the Obamacare exchanges opened on October 1st, Americans all across the country are feeling the real effects of the Affordable Care Act.

George Pitts
New Mexico
Used to pay $139.63 per month; now his cheapest option costs $431.

#FairnessForAll

OBAMACARE is HITTING HOME
Since the Obamacare exchanges opened on October 1st, Americans all across the country are feeling the real effects of the Affordable Care Act.

Adam Weldzis
Illinois
This single father’s premium of $233 will double, while his deductible will triple to $12,700.

#FairnessForAll

OBAMACARE is HITTING HOME
Since the Obamacare exchanges opened on October 1st, Americans all across the country are feeling the real effects of the Affordable Care Act.

Robert Hare
New Mexico
Used to pay $87 per month; now he will be forced into the exchanges and his premium will cost $431.

#FairnessForAll
“If you like your health care plan you will be able to keep your health care plan. Period.” That was one of the many promises made in 2009 by President Barack Obama to sell the Affordable Care Act, commonly known as Obamacare, to a skeptical nation.

Today, as the federal government works to roll out implementation of the health care law, we see that the president’s promises of 2009 could not be further from the realities of 2013.

Last month, my wife, Jaime, and I received notice that our health care plan would be discontinued Dec. 31. To comply with the myriad new regulations, requirements and mandates of the president’s health care law, my family must find a new health care plan.

When I was elected to Congress, I chose not to enroll in the Federal Employee Health Benefits program that is available to Members of Congress and their staffs. Instead, I purchased insurance from the private market because I wanted to be enrolled in the same health insurance network that all Coloradans have access to. It’s the same type of plan that many of my friends and neighbors in Yuma and across Colorado have.

When I heard my family’s plan was going to be discontinued, I felt blindsided. And I am not alone.

Millions of people are seeing changes to their health care coverage as insurers scramble to come into compliance with the health care law’s thousands of pages of regulations. And these regulations aren’t just forcing changes to health care coverage; they’re driving premiums up at an alarming rate.

Recent analysis has shown that average premiums in Colorado for the individual market will increase between 23 and 25 percent. Moreover, premiums are expected to increase by 17 percent in the small group market. After my current plan is discontinued, the closest comparable plan through our current provider will cost over 100 percent more, going from roughly $650 a month to $1,480 per month.

The president, congressional Democrats led by then-House Speaker Nancy Pelosi and their celebrity allies went out on television, radio and the Internet to insist that the law would lower premiums for average Americans. But for families across Colorado and the United States opening letters from their insurers or employers this week, the shiny veneer of the new law has given way to the ugly realities of higher premiums, reduced work hours and forced changes to coverage.

Choosing a health care plan is a difficult and time-consuming process.

Families like my own try to find coverage that works for them, taking into consideration access to family doctors, affordability and other factors that best fit their family. Those who have been happy with their current health care plans are now being forced to find new plans and must navigate the maze of new regulations in doing so.

As a parent of two children, I want to have the peace of mind that when my children get sick, I am able to take them to our local doctor and make sure they get the treatment they need. The letter I received about my plan being dropped creates a genuine uncertainty about how my health care is going to be administered. Like millions of other Americans, my wife and I are now working to understand what our health care coverage will look like in 2014 and beyond.

The letter I received last month has only served to renew my resolve to repeal this law. We need to ensure that
people have better access to care with lower costs. The president’s health care law expands coverage, but families, small businesses, and young people are already seeing the skyrocketing costs.

I know my family’s situation is not unique. Unfortunately, this is happening to too many families and individuals all over the country, and it is for them and for all Americans that House Republicans remain committed to fighting this law. But we need your help.

Have you or someone you know lost your health care coverage as a result of the President’s health care law? Share your story with House Republicans at our new website, GOP.gov/YourStory. Stories like yours and mine are more reasons for House Republicans to continue focusing on patient-centered reforms, not government-centered health care.

The president has made a promise that he couldn’t keep. Share your Obamacare story and help us hold the administration accountable.
Fact Sheets

Fast Facts

- No one, not even the Administration, knows the full extent of the technical problems.
- The Administration spent $267 million for the underlying system and a total of $500 million on the online effort, including back-end systems. To put into perspective, Facebook operated for six years before surpassing the $500 million mark; Twitter brought in $360.17 million before getting a boost in 2011. And finally, Instagram generated $57.5 million before Facebook acquired it.
- To date, HHS has awarded approximately $3.8 billion to establish, plan, and innovate exchanges.
- Both GAO and Office of Inspector General issued reports prior to October 1, 2013 highlighting vulnerabilities, particularly for the data hub.
- The Administration knows it needs seven million individuals to enroll in 2014 to be financially sustainable.
- 6200 people completed applications on October 1, 2013.
- During the first week, about 51,000 people completed an online application.
- According to a Washington Post-ABC News poll, fifty-six percent of Americans believe that the website’s flaws “reflect larger problems with the health care law.”

Courtesy of House Ways & Means Committee

Republicans are still committed to full repeal. To date, Republicans have secured numerous repeals and cuts to the law:

Although the Democrat-led Senate still refuses to take up legislation to fully repeal Obamacare, House Republicans have not stopped looking for ways to defund it, resulting in nearly $55 billion being taken out of Obamacare as efforts continue into the 113th Congress and beyond:

<table>
<thead>
<tr>
<th>Obamacare Repeal/Cut Provisions That Are Now Law</th>
<th>Savings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reducing wasteful and fraudulent overpayments of taxpayer-funded subsidies (P.L. 112-9)</td>
<td>$24.9 billion</td>
</tr>
<tr>
<td>Striking the Democrats’ overly-generous eligibility criteria for taxpayer-subsidized health coverage to more closely align eligibility with other federally-means tested programs (P.L. 112-56)</td>
<td>$13 billion</td>
</tr>
<tr>
<td>Slashing funding for Harkin “Prevention” Fund (P.L. 112-96)</td>
<td>$5 billion</td>
</tr>
<tr>
<td>Rebase Medicaid Disproportionate Share Hospital allotments (P.L. 112-96)</td>
<td>$4 billion</td>
</tr>
<tr>
<td>Eliminating funding for the “Louisiana Purchase” (P.L. 112-96)</td>
<td>$2.5 billion</td>
</tr>
<tr>
<td>Cuts to Obamacare Co-Ops (P.L. 112-10)</td>
<td>$2.2 billion</td>
</tr>
<tr>
<td>Obamacare’s so-called “Free-Choice” vouchers (P.L. 112-10)</td>
<td>$400 million</td>
</tr>
<tr>
<td>Rescinds funding for the Democrats’ rationing board in FY 2012 (P.L. 112-74)</td>
<td>$10 million</td>
</tr>
<tr>
<td>Repeal of unsustainable CLASS program (P.L. 112-240)</td>
<td>N/A</td>
</tr>
<tr>
<td>Further rescissions in funding for the “Louisiana Purchase” (P.L. 112-141)</td>
<td>$670 million</td>
</tr>
<tr>
<td>Eliminate remaining funding for Co-Ops (P.L. 112-240)</td>
<td>$2.3 billion</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$54.97 billion</strong></td>
</tr>
</tbody>
</table>
In addition to the provisions above, President Obama also signed into law the repeal of the onerous 1099 IRS reporting provision in his health care law. This will save American businesses countless hours and dollars in compliance costs, freeing up money to hire new workers or retain existing ones during tough economic times. The President also signed the Budget Control Act (P.L. 112-25) into law, which will force the White House Office of Management and Budget to adopt billions of dollars in across-the-board cuts to Obamacare.

The House has also voted to cut or repeal a number of Obamacare provisions that the Senate refuses to consider, including:

- Reducing wasteful and fraudulent overpayments of taxpayer-funded subsidies even further (H.R. 3630)
- Additional cuts to the Harkin Fund (H.R. 1217 and H.R. 3630)
- Repealing the Democrats’ rationing board (H.R. 5)
- Eliminating a new entitlement program that Obama Administration officials agree is unsustainable (H.R. 1173)
- Ensuring that the long standing Hyde amendment is applied consistently, prohibiting the use of taxpayer money in the expanded Medicaid program and the new health insurance exchanges (H.R. 3 and H.R. 358)
- Allowing physician-owned hospitals to grow and expand to meet the needs of patients in their area (H.R. 3630)
- Repealing funding for health insurance exchanges (H.R. 1213)
- Repealing funding for SBHC construction (H.R. 1214)
- Converting funding for graduate medical education in qualified teaching health centers to an authorization of appropriations (H.R. 1216)
- Delaying the arduous individual and employer mandates from Obamacare (H.R. 2667 & 2668)

**Obamacare Timeline**

<table>
<thead>
<tr>
<th>Date</th>
<th>Provision</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Higher Costs and Taxes - 2013</strong></td>
<td></td>
</tr>
<tr>
<td>January 1, 2013</td>
<td>Limitation on flexible savings account contributions to $2,500 per year (indexed to CPI). Employers may adopt retroactive amendments to impose the $2,500 limit before December, 2014.</td>
</tr>
<tr>
<td></td>
<td>Imposition of a 0.9 percent Medicare Part A wage tax and a 3.8 percent tax on unearned, non-active business income for those earning over $200,000 or $250,000 for families (not indexed to inflation)</td>
</tr>
<tr>
<td></td>
<td>Imposition of a 2.3 percent excise tax on medical devices</td>
</tr>
<tr>
<td></td>
<td>Increase in the income threshold for claiming tax deductions for medical expenses from 7.5 percent to 10 percent</td>
</tr>
<tr>
<td></td>
<td>Elimination of the existing deduction for employers who maintain prescription drug plans</td>
</tr>
<tr>
<td></td>
<td>Increase in Medicaid payment rates to primary care physicians for primary care services to 100 percent of the Medicare payment rate for 2013 and 2014</td>
</tr>
<tr>
<td>July 1, 2013</td>
<td>Mandated Consumer Operated and Oriented Plan (CO-OP) nonprofit, member-run health insurance companies go into operation.</td>
</tr>
<tr>
<td>Date</td>
<td>Provision</td>
</tr>
<tr>
<td>-------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>October 1, 2013</td>
<td>Cuts to Medicare payments to hospitals for treating low-income seniors&lt;sup&gt;1&lt;/sup&gt;</td>
</tr>
<tr>
<td></td>
<td>Start of open enrollment in Health Insurance Marketplace</td>
</tr>
<tr>
<td>November 15, 2013</td>
<td>The Administration indicated it will roll out enrollment data.</td>
</tr>
<tr>
<td>December 15, 2013</td>
<td>Deadline for enrollment in order to be covered on January 1, 2014.</td>
</tr>
</tbody>
</table>

**More Government, Higher Costs**

<table>
<thead>
<tr>
<th>Date</th>
<th>Provision</th>
</tr>
</thead>
<tbody>
<tr>
<td>January 1, 2014</td>
<td>Implementation of Health Insurance Marketplace (Exchanges) — 17 states plus DC will implement their own exchanges, 7 in partnership with federal government, remaining 26 states will be run by the federal government</td>
</tr>
<tr>
<td></td>
<td>Prohibition on annual limits or coverage restrictions on pre-existing conditions (guaranteed issue/renewability).</td>
</tr>
<tr>
<td></td>
<td>Extension of prohibition on excessive waiting periods (90 days) to existing health plans</td>
</tr>
<tr>
<td></td>
<td>Imposition of modified community ratings: family versus individual; geography; 3:1 ratio for age and 1.5:1 for smoking</td>
</tr>
<tr>
<td></td>
<td>Imposition of government-defined “essential benefits” and coverage levels on insurance plans</td>
</tr>
<tr>
<td></td>
<td>Limitation on out-of-pocket cost sharing (tied to limits in HSAs). Limits are $6,250 for individuals and $12,700 for families (indexed for COLA)</td>
</tr>
<tr>
<td></td>
<td>Implementation of premium subsidies for insurance purchased in the Health Insurance Marketplace -- amounts of subsidies are dependent on income and available up to 400 percent of the federal poverty line</td>
</tr>
<tr>
<td></td>
<td>Requirement that federal government offer at least two multi-state plans in every state</td>
</tr>
</tbody>
</table>

**Higher Taxes**

<table>
<thead>
<tr>
<th>Date</th>
<th>Provision</th>
</tr>
</thead>
<tbody>
<tr>
<td>January 1, 2014</td>
<td>Imposition of new health insurance industry tax (increase will be $8 billion in 2014, $11.3 billion in 2015 and 2016, $13.9 billion in 2017, and $14.3 billion in 2018 and indexed to medical cost growth afterwards</td>
</tr>
<tr>
<td></td>
<td>Imposition of individual mandate. Individuals who fail to obtain acceptable insurance will incur a penalty tax of the greater: $695 or 2.5 percent of income. For families without approved coverage, penalties are capped at $2,250 until 2016 and then indexed for inflation</td>
</tr>
</tbody>
</table>

**Higher Costs/Lost Coverage/Lost Jobs/Employer Mandates**

<table>
<thead>
<tr>
<th>Date</th>
<th>Provision</th>
</tr>
</thead>
<tbody>
<tr>
<td>January 1, 2014</td>
<td>Imposition of the Employer mandate. Employers with 50 full time employees or more who fail to offer “affordable” coverage must pay a $3,000 penalty for every low-income employee that receives a subsidy through the Exchange, even if coverage is already provided</td>
</tr>
<tr>
<td></td>
<td>Imposition of $2,000 tax penalty on employers who employ more than 50 full time employees and don’t provide insurance coverage. Penalty assessed for every full time employee. Up to 30 full time employees are exempt when calculating penalty</td>
</tr>
<tr>
<td></td>
<td>Require employers with more than 200 employees to auto-enroll employees in health coverage, with opt-out options</td>
</tr>
<tr>
<td>Date</td>
<td>Provision</td>
</tr>
<tr>
<td>-----------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>January 1, 2014</td>
<td>Continued cuts to Medicare home health reimbursement</td>
</tr>
<tr>
<td></td>
<td>Cuts to Medicare payments to Disproportionate Share Hospitals</td>
</tr>
<tr>
<td></td>
<td>Expansion of Medicaid coverage to 22 million childless adults up to 138 percent of the federal poverty line – diminishing resources for vulnerable populations. States will receive 100 percent of the FMAP 2014-2016, 95 percent in 2017, 94 percent in 2018, and 90 percent after January 15, 2014 Submission of IPAB recommendations. The IPAB annual report on system-wide healthcare costs is submitted on July 1. IPAB submits recommendations to slow the growth of health care expenditures January 1, 2015.</td>
</tr>
<tr>
<td>January 1, 2015</td>
<td>Implementation of payments tied to quality of care</td>
</tr>
<tr>
<td></td>
<td>Continued cuts to Medicare reimbursements for home health care</td>
</tr>
<tr>
<td>January 1, 2016</td>
<td>Healthcare Choice Compacts go into effect.</td>
</tr>
<tr>
<td>January 1, 2017</td>
<td>States may allow businesses with more than 100 employees to purchase insurance in the exchange</td>
</tr>
<tr>
<td>January 1, 2018</td>
<td>Imposition of the “40 percent” excise tax on “high value” or “Cadillac plans”</td>
</tr>
</tbody>
</table>