



## Health Care Reform 2009: Proposed Bills Overview

Features	Senate Finance Committee -- Chairman Baucus	Senate Health, Education, Labor & Pension Committee	House Energy and Commerce Committee	Senate Amendments to H.R. 3962, The Patient Protection and Affordable Care Act:
<b>Employer Mandate</b>	Starting in 2013, companies with more than 50 full-time employees that do not offer insurance would pay a fee for every lower-income employee who qualifies for a new tax credit to obtain care.	Requires businesses that do not provide coverage for their workers to contribute to the cost of providing publicly sponsored coverage for their workers; small businesses with 25 employees or less are exempt.	Employers who are currently covering their employees will be able to continue doing so; employers who do not currently cover their employees could choose to cover them or pay a fine; businesses with a payroll under	Requires employers to enroll employees in businesses with 200 or more employees. Will pay \$750 per employee uncovered.
<b>Individual Mandate</b>	Would require almost all Americans to have insurance or pay a penalty; other option is to pay subsidies to help millions of low-income people get coverage through an online exchange.	No American is denied health coverage because of a pre-existing medical condition. The bill would require all Americans to have insurance or they would pay a fine.	No American is denied health coverage because of a pre-existing medical condition; would require all Americans to have insurance or they would pay a fine.	Requires that most Americans obtain minimal coverage in 2014, or they will be penalized. Can keep current plans. Exempts those who cannot afford coverage
<b>Public Option</b>	Does not offer the government insurance program — the "public option" — to compete with private sectors.	Provides Americans with an alternative to for-profit insurance companies; available through the American Health Benefit Gateway, a new way for individuals and small employers to find and purchase health insurance in every state.	Provides Americans with an alternative to for-profit insurance companies through a health care exchange where consumers can select from a menu of affordable, quality health care options: either a new public health insurance option or a plan offered by private insurers.	It creates a new government-run health insurance plan to compete with private insurers; states would be allowed the option of not participating.
<b>Goals</b>	Seeks savings in programs such as Medicare and new taxes; proposes a levy on costly high-end health plans and about \$13 billion in fees on insurers, medical device manufacturers, drugmakers and clinical laboratories.	Reduces healthcare costs through stronger prevention and use of technology.	New marketplace aims to reduce costs and create competition for more quality coverage.	Insurance companies not allowed to deny coverage due to pre-existing conditions or drop coverage of those who become ill; it will provide that no individual, company or issuer would be required to participate in a federal health