



**TIMELINE: HEALTH CARE REFORM PROVISIONS IMPACTING CHILDREN'S HOSPITALS
FINAL BILL (INCLUDING RECONCILIATION)**

CURRENT BIENNIUM
2010
<p>Insurance Provisions Prohibits health plans from denying coverage to children for pre-existing conditions). Prohibits health plans from setting lifetime caps on coverage. Prohibits new health plans from setting unreasonable annual limits on coverage. Prohibits health plans from rescinding coverage when people get sick. Requires health plans to provide (without cost-sharing) certain prevention services. Creates a temporary reinsurance program for employers providing coverage to retirees over age 55. Creates an interim high-risk pool for individuals without insurance due to pre-existing conditions. Provides tax credits to small employers.</p> <p>Medicaid and CHIP Provisions Requires states to maintain eligibility standards, methodologies and procedures. Allows children to receive hospice services without waiving rights for treatment of terminal illness. Requires states to cover tobacco cessation services for pregnant women. Increases drug rebates and extends rebates to managed care. Authorizes demonstrations for up to 5 states for global payments.</p> <p>Other Provisions Creates loan repayment program for pediatric specialists and subspecialists. Creates National Health Care Workforce Commission to review workforce supply and evaluate education and training. Creates Prevention and Public Health Fund. Creates Maternal, Infant and Early Childhood Home Visiting Program. Provides Epidemiology and Lab Capacity Grants. Creates Patient-Centered Outcomes Research Institute. Expands AHRQ demonstrations through Pediatric Quality Improvement Collaboratives and Learning Networks. Requires AHRQ to implement a national ICU improvement project for adult, pediatric and neonatal patients.</p>
2011
<p>Insurance Provisions Requires health plans to provide rebates related to medical loss ratios.</p> <p>Medicaid and CHIP Provisions Prohibits Medicaid payment for hospital-acquired conditions. Offers a one percentage increase in FMAP for preventive services and recommended immunizations. Offers state option to provide coordinated care through a health home for individuals with chronic conditions. Creates Center for Medicare and Medicaid Innovation.</p> <p>Other Provisions Redistributes 65% of vacant Medicare residency positions in favor of primary care and general surgery. Requires chain restaurants and vending machine operators to post caloric content (regulations set within 1 year of enactment). Provides demonstration grants to states for alternative medical liability laws.</p>
NEXT BIENNIUM
2012
<p>Medicaid and CHIP Provisions Creates pilot program for pediatric Accountable Care Organizations. Authorizes demonstrations for up to 8 states to make bundled payments for episodes of care that include hospitalization.</p> <p>Other Provisions Requires hospitals to conduct community needs assessment at least every 3 years.</p>



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2013
<p>Medicaid and CHIP Provisions Requires states to pay at least 100% of Medicare rates for evaluation and management services.</p>
FUTURE YEARS
2014
<p>Insurance Provisions Requires citizens and legal residents to have insurance coverage, enforced through tax penalties. Creates state-based exchanges for purchasing insurance. Provides tax credits for premiums and cost-sharing for low-income individuals. Requires employers with over 50 workers to offer coverage or pay penalties. Prohibits all health plans from using annual limits on coverage. Requires guarantee issue and renewability. Limits rate variation related to age (3:1 ratio), premium rating area, family composition and tobacco use (1.5:1).</p> <p>Medicaid and CHIP Provisions Expands coverage to nonelderly individuals up to 133% of the Federal Poverty Level (FPL). Provides 100% federal funds for Medicaid expansion population. Requires states to provide coverage to individuals who have been in foster care at least 6 months up to age 25. Requires states to use modified adjusted gross income for eligibility and eliminate asset tests and income disregards. Requires states to pay at least 100% of Medicare rates for evaluation and management services. Reduces Disproportionate Share Hospital funding by \$500 million.</p>
2015
<p>Provides 100% federal funds for Medicaid expansion population. Reduces Disproportionate Share Hospital funding by \$600 million. Increases CHIP federal match rate by 23 percentage points, effective 10/1/15 to 10/1/18. Requires Secretary to study exchange benefits and cost-sharing and certify plans comparable to CHIP.</p>
2016
<p>Provides 100% federal funds for Medicaid expansion population. Reduces Disproportionate Share Hospital funding by \$600 million.</p>
2017
<p>Provides 95% federal funds for Medicaid expansion population. Reduces Disproportionate Share Hospital funding by \$1.8 billion.</p>
2018
<p>Provides 94% federal funds for Medicaid expansion population. Reduces Disproportionate Share Hospital funding by \$5 billion. Imposes tax on policy issuers for coverage values exceeding \$10,200 for single policies and \$27,500 for family policies.</p>
2019
<p>Provides 93% federal funds for Medicaid expansion population. Reduces Disproportionate Share Hospital funding by \$5.6 billion.</p>
2020
<p>Provides 90% federal funds for Medicaid expansion population. Reduces Disproportionate Share Hospital funding by \$4.0 billion.</p>