



## Guest column: Health care act to increase access for Wisconsin residents

### Unfair insurance practices still plague insured adults, children

By Brad Hahn • September 2, 2010



One main goal of the Patient Protection and Affordable Care Act is to increase health care access by offering health [insurance](#) options for the uninsured and decreasing insurance limitations for the insured.

We are doing things right in Wisconsin. We lead the nation in quality and have the second highest rate of insured citizens in the country. In many respects, the act will bring other states in line with what Wisconsin is already providing.

Although we rank well, we still have about 125,000 residents who are considered uninsured. That's a gap we need to fill. There also are residents who currently must restrict their medical treatments or doctor visits because of unfair insurance practices, such as limiting and banning access to coverage to those with pre-existing [health](#) conditions.

How does coverage change because of the act?

- The 60,000 uninsured Wisconsin adult residents awaiting coverage through the BadgerCare Plus Core Plan will be eligible by 2014. These residents have incomes below \$21,660 (individuals) or \$29,140 (couples) and have no disability or dependants.
- Beginning in 2011, the act allows uninsured dependants, up to age 26, to qualify for coverage through their parents' plan.

- Children and adults with pre-existing conditions will no longer be denied coverage, beginning in 2011 (children) and 2014 (adults). Until 2014, adults with pre-existing conditions will have an option for temporary coverage through a state administered risk sharing pool.
- Beginning in 2014, the act requires states to establish insurance exchanges where individuals can purchase private insurance. Tax credits will help [small business owners](#) offset employee health insurance costs.
- [Insurance companies](#) are banned from dropping coverage or imposing lifetime limits for people who get sick.

Now that more individuals will have access, where will they all get care? We believe the future of health care organizations will be modeled after what the act calls Accountable Care Organizations. It's a partnership between physicians, home care, hospitals and others, which seek to increase quality and reduce cost through efficient management and coordination of care. These organizations will have a [financial](#) incentive to keep patients healthy and provide care in the most efficient setting. A collaborative of 40 U.S. health systems will define best practices for Accountable Care Organizations.

For more information, go to the Kaiser Foundation website, [www.kff.org](http://www.kff.org).

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