











A Quick Comparison of

Current Efforts to Repeal/Replace Obamacare

	AFFORDABLE CARE ACT [Obamacare]	AMERICAN HEALTH CARE ACT [HR1628]	PATIENT FREEDOM ACT [S191] <small>Senators Collins, Cassidy, Capito, and Isakson</small>	OBAMACARE REPLACEMENT ACT [S222] <small>Senator Rand Paul</small>
EMPLOYER MANDATE	<div>Imposed fines against covered employers who did not offer affordable insurance.</div> <div></div>	<div>Mandate remains; but penalty is changed to \$0, so, effectively, No Mandate. (The employer duty to file paperwork remains in place.)</div> <div></div>	<div>No Mandate, except ... each state will have the option to continue the Obamacare program going forward (maintaining the mandates in place), or to come up with its own system, or to “repeal without replacing at all” ... and except, that a state may adopt a system in which uninsured individuals are automatically enrolled in coverage (a “default health insurance” with a high deductible and childhood immunizations), subject to their opting-out.</div>	<div>No Mandate.</div>
INDIVIDUAL MANDATE	<div>Imposed fines against individuals who do not have insurance.</div>	<div>Mandate remains; but penalty is changed to \$0, so, effectively, No Mandate. However, since individuals are no longer routinely forced to buy insurance, insurers are required to charge a 30% surcharge for one year for new insureds who went uninsured for 63 days.</div> <div></div>	<div>No Mandate, except ... each state will have the option to continue the Obamacare program going forward (maintaining the mandates in place), or to come up with its own system, or to “repeal without replacing at all” ... and except, that a state may adopt a system in which uninsured individuals are automatically enrolled in coverage (a “default health insurance” with a high deductible and childhood immunizations), subject to their opting-out.</div>	<div>No Mandate.</div>
REQUIRED MINIMUM LEVEL OF BENEFITS OF INSURANCE	<div>In order for insurance to be acceptable for purposes of the employer and individual mandates, a specific list of ten types of coverages must be included.</div>	<div>States have the opportunity to apply for a waiver to adopt their own lists of mandatory coverages.</div>	<div>No Mandate, except ... each state will have the option to continue the Obamacare program going forward (maintaining the mandates in place), or to come up with its own system, or to “repeal without replacing at all” ... and except, that a state may adopt a system in which uninsured individuals are automatically enrolled in coverage (a “default health insurance” with a high deductible and childhood immunizations), subject to their opting-out.</div>	<div> No Mandate.</div>
LIFETIME LIMITS ON GROUP POLICIES	<div>No lifetime limits allowed.</div>	<div>No lifetime limits allowed.</div>	<div>No lifetime limits allowed.</div>	<div>No Mandate.</div>
ANNUAL LIMITS ON GROUP POLICIES	<div>No annual limits allowed.</div>	<div>No annual limits allowed.</div>	<div>No annual limits allowed.</div>	<div>No Mandate.</div>
DEPENDENT COVERAGE	<div>Coverage to age 26.</div>	<div>Coverage to age 26.</div>	<div>Coverage to age 26.</div>	<div>Coverage to age 26.</div>
PRE-EXISTING CONDITIONS	<div>Insurer cannot refuse coverage for pre-existing conditions.</div> <div></div>	<div>Insurer cannot refuse coverage for pre-existing conditions, but – States will have the opportunity to apply for waivers from this requirement.</div> <div>If they do, someone who has a pre-existing condition, who has not had insurance in effect for at least 63 days, can be charged a premium based on his medical condition, for one year only.</div>	<div> Insurer cannot refuse coverage for pre-existing conditions, except... if an individual has allowed insurance to lapse for 63 days, insurers can refuse or limit coverage or charge a higher premium for up to 18 months AND are required to charge a penalty which is then remitted to the federal government.</div>	<div>No Mandate Plan allows a period for uninsured individuals to buy coverage; and then returns to pre-Obamacare HIPAA rules requiring portability of coverage for those with coverage.</div>
PREVENTIVE CARE	<div>Preventive care included in coverage at no additional cost.</div>	<div>Preventive care included in coverage at no additional cost.</div>	<div>Preventive care included in coverage at no additional cost.</div>	<div> No Mandate.</div>
TAX ON “CADILLAC PLANS”	<div>Tax scheduled to commence in 2020.</div>	<div>Tax on “Cadillac plans” is deferred to 2026.</div>	<div>Not addressed.</div>	<div> Not addressed.</div>
OTHER PROVISIONS TO NOTE:		<div><ul style="list-style-type: none">• Allows states to impose a work requirement as a condition of eligibility for Medicaid.• Small business tax credit eliminated.• Allows payments for over-the-counter drugs from flexible spending accounts and HSAs.</div> <div></div>	<div> Places a limit on the charges that can be assessed to uninsured patients being provided emergency treatment under EMTALA.</div>	<div><ul style="list-style-type: none">• Provides tax deductions for individuals who directly acquire insurance.• Allows payments for over-the-counter drugs from flexible spending accounts and HSAs.• Allows individuals to join in groups to acquire insurance.• Allows businesses to join together to form groups to acquire insurance.• Allows insurers to sell across state boundary lines.</div>