



*Florida House of Representatives*  
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**LEADER FRANKLIN SANDS TO REPUBLICAN LEADERSHIP:  
DON'T PLAY POLITICS WITH FLORIDIANS' HEALTH CARE**

**TALLAHASSEE** -- Florida House Democratic Leader Franklin Sands (D-Weston) issued the following statement regarding Republican members' votes today in the House Rules & Calendar Council on legislation that seeks to promote Attorney General Bill McCollum's political campaign at the expense of Floridians' health care:

"The landmark federal health care reform legislation that President Obama and Democrats in Congress achieved last month will create a health care system that works for Floridians, not insurance companies," said Leader Sands. "The comprehensive reforms will improve the lives of millions of Floridians by making insurance more affordable and will end discrimination against those who have pre-existing conditions.

"It is ironic and troubling that Republican members in the Florida Legislature boast of harboring great ambition to reduce government spending but are willing to reject federal health care reforms that will put our state and nation's budgets and economies on a more stable path by reducing the deficit and helping rein in waste, fraud and abuse.

"Any attempt to reject federal health care reforms by Republicans in the Florida

Legislature is nothing other than a flagrant and utter disregard of the people's money.

“The legislation that has surfaced to bolster Attorney General Bill McCollum's frivolous lawsuit against federal health reforms is emblematic of an extremist philosophy of the radical right wing that controls the current Republican leadership in the Florida Legislature. Their actions show that they have absolutely no respect for the medical needs of millions of uninsured Floridians and senior citizens.”

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The Patient Protection and Affordable Care Act and the Reconciliation Act of 2010 will offer immediate benefits to millions of Americans through key provisions, including:

1. **SMALL BUSINESS TAX CREDITS**-Offers tax credits to small businesses to make employee coverage more affordable. Tax credits of up to 35 percent of premiums will be immediately available to firms that choose to offer coverage. *Effective beginning for calendar year 2010.* (Beginning in 2014, the small business tax credits will cover 50 percent of premiums.)
2. **BEGINS TO CLOSE THE MEDICARE PART D DONUT HOLE**-Provides a \$250 rebate to Medicare beneficiaries who hit the donut hole in 2010. *Effective for calendar year 2010.* (Beginning in 2011, institutes a 50% discount on brand- name drugs in the donut hole; also completely closes the donut hole by 2020.)
3. **FREE PREVENTIVE CARE UNDER MEDICARE**-Eliminates copayments for preventive services and exempts preventive services from deductibles under the Medicare program. *Effective beginning January 1, 2011.*
4. **HELP FOR EARLY RETIREES**-Creates a temporary reinsurance program (until the Exchanges are available) to help offset the costs of expensive premiums for employers and retirees for health benefits for retirees age 55 to 64. *Effective 90 days after enactment.*
5. **ENDS RESCISSIONS**-Bans insurance companies from dropping people from coverage when they get sick. *Effective 6 months after enactment.*

6. **NO DISCRIMINATION AGAINST CHILDREN WITH PRE EXISTING CONDITIONS**-Prohibits new health plans in all markets plus grandfathered group health plans from denying coverage to children with pre existing conditions. *Effective 6 months after enactment.* (Beginning in 2014, this prohibition would apply to all persons.)
7. **BANS LIFETIME LIMITS ON COVERAGE**-Prohibits health insurance companies from placing lifetime caps on coverage. *Effective 6 months after enactment.*
8. **BANS RESTRICTIVE ANNUAL LIMITS ON COVERAGE**-Tightly restricts the use of annual limits to ensure access to needed care in all new plans and grandfathered group health plans. These tight restrictions will be defined by HHS. *Effective 6 months after enactment.* (Beginning in 2014, the use of any annual limits would be prohibited for all new plans and grandfathered group health plans.)
9. **FREE PREVENTIVE CARE UNDER NEW PRIVATE PLANS**-Requires new private plans to cover preventive services with no copayments and with preventive services being exempt from deductibles. *Effective 6 months after enactment.*
10. **NEW, INDEPENDENT APPEALS PROCESS**-Ensures consumers in new plans have access to an effective internal and external appeals process to appeal decisions by their health insurance plan. *Effective 6 months after enactment.*
11. **ENSURING VALUE FOR PREMIUM PAYMENTS**-Requires plans in the individual and small group market to spend 80 percent of premium dollars on medical services, and plans in the large group market to spend 85 percent. Insurers that do not meet these thresholds must provide rebates to policyholders. *Effective on January 1, 2011.*
12. **IMMEDIATE HELP FOR THE UNINSURED UNTIL EXCHANGE IS AVAILABLE (INTERIM HIGH-RISK POOL)**-Provides immediate access to affordable insurance for Americans who are uninsured because of a preexisting condition through a temporary subsidized high risk pool. *Effective 90 days after enactment.*
13. **EXTENDS COVERAGE FOR YOUNG PEOPLE UP TO 26TH BIRTHDAY THROUGH PARENTS' INSURANCE** - Requires new health

plans and certain grandfathered plans to allow young people up to their 26th birthday to remain on their parents' insurance policy, at the parents' choice. *Effective 6 months after enactment.*

14. **COMMUNITY HEALTH CENTERS**-Increases funding for Community Health Centers to allow for nearly a doubling of the number of patients seen by the centers over the next 5 years. *Effective beginning in fiscal year 2010.*

15. **INCREASING NUMBER OF PRIMARY CARE DOCTORS**-Provides new investment in training programs to increase the number of primary care doctors, nurses, and public health professionals. *Effective beginning in fiscal year 2010.*

16. **PROHIBITING DISCRIMINATION BASED ON SALARY**-Prohibits group health plans from establishing any eligibility rules for health care coverage that have the effect of discriminating in favor of higher wage employees. *Effective 6 months after enactment.*

17. **HEALTH INSURANCE CONSUMER INFORMATION**-Provides aid to states in establishing offices of health insurance consumer assistance in order to help individuals with the filing of complaints and appeals. *Effective beginning in FY 2010.*

18. **CREATES NEW, VOLUNTARY, PUBLIC LONG TERM CARE INSURANCE PROGRAM**-Creates a long term care insurance program to be financed by voluntary payroll deductions to provide home and community-based services to adults who become functionally disabled. *Effective on January 1, 2011.*

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