

I'm a Woman Who Owns a Small Business: What Does the Health Care Law Mean for Me?

The health care law has many benefits for women, including women like you who <u>owns a small</u> business. Here are some of the ways that the new law will help:

NOW: You May Be Eligible for a Tax Credit to Help You Provide Health Insurance

If your business employs fewer than 25 full-time employees and pays average annual wages below \$50,000.

- Businesses that meet the above criteria and pay at least half of the cost of premiums for their employees are eligible for tax credits to help them afford their company's health insurance costs.
- The tax credits are available on a sliding-scale basis, meaning that the maximum credit goes to the smallest employers. For 2012 and 2013, the credit is worth up to 35% of the premiums paid by the employer (25% for nonprofit businesses).
- In 2014, the credit increases to 50% (35% for nonprofits) for firms that purchase coverage in the new Health Insurance Exchanges that come into operation in 2014 (more information on the Exchanges below). Businesses can claim the Exchange based tax credits for a maximum of two years.

New Rules for Insurers Will Help Keep Premiums Down

- Insurers will have to publicize rate increases and justify unreasonable rates.
- The health care law limits the percentage of your premium dollars that insurance companies can spend on profits, overhead, or marketing—this means they'll spend more on your health care. Health plan enrollees will receive rebates if insurers do not spend enough on actual health care.

New Rules Protect You and Your Employees from Insurance Company Abuses

- Health plans are prohibited from imposing lifetime dollar limits on coverage and, by 2014, plans will no longer be allowed to place any annual dollar limits on coverage.
- Women have direct access to their ob/gyn because health plans are not allowed to require a referral or approval prior to obstetrical or gynecological care.
- All new health plans are required to cover key preventive health services with no cost sharing, including mammograms, cervical cancer screenings, diabetes and blood pressure screenings, depression screenings and vaccinations. To find out if your health plan is new, ask your broker or issuer.
- In August 2012, new health plans will have to provide additional preventive services to women including contraceptive coverage, well woman visits, lactation counseling and supplies, and screening for gestational diabetes.

BY 2014: You May Find Coverage for your Business in New Health Insurance Exchanges

- In January 2014, new voluntary and easy-to-use Health Insurance Exchanges will come into operation in every state and will be open to businesses with fewer than 100 employees (although states may choose to limit this to employers with 50 or fewer employees until 2016).
- New web portals for the Exchanges will provide standardized, user-friendly information to make it easier to enroll employees and compare plan information.
- The Exchanges will allow you to band together with other small businesses so you can provide increased choice to your employees.
- New health plans—including those sold in the Exchanges—will be required to cover a set of essential health services, including maternity care and prescription drugs. They won't be able to charge you more because you employ women or workers with medical conditions.

You will NOT Face Penalties if You're Unable to Provide Coverage to Employees

• While some businesses may face penalties if they do not provide health insurance, this will not apply to small businesses with fewer than 50 employees.

For more information on how you and other women you know will benefit from the new health care law, visit the National Women's Law Center website: www.nwlc.org/lWillNotBeDenied.