

## **Get the Facts on health care reform efforts!**

The Epilepsy Foundation recognizes that there is a lot of information, research, reports and opinions on health care reform – and this information is only growing as Congress debates this issue and moves further with legislation. **While there may be many areas for disagreement on some aspects of health care reform packages, the Foundation has long supported health care reform that will provide access to affordable insurance products that cover the treatment and care needed for all Americans with epilepsy.**

There are some myths that deserve to be addressed and understood so that everyone can move on to the most important issue – ensuring that health care reform addresses the needs of our nation in a responsible manner. Some of the top myths are discussed below.

### **MYTH 1: Health care reform will result in government control of the health care system and universal health care.**

1. Health care access for all is a principle supported by the Epilepsy Foundation. This means that all people with epilepsy have access to insurance products that do not discriminate against them based on their health status.
2. None of the proposals put forward in the United States Senate or in the House of Representatives or by the President have proposed a government-run health care system in which the federal government is the single payer. The proposals being considered in Congress build on our existing employer-based system and strengthen it by providing the following:
  - a. premium subsidies for lower income families with the subsidy adjusted on a sliding scale based on income so that health coverage is affordable;
  - b. tax credits for small businesses so they can afford to offer health coverage to their employees;
  - c. prohibitions against preexisting condition exclusions and waiting periods;
  - d. and the creation of a marketplace for individuals and businesses to purchase affordable and high-quality health plans from private or public insurers.

### **MYTH 2: Health care reform takes choice and decision-making out of the hands of patients and will lead to euthanasia for senior citizens.**

This is a disturbing myth that has been brought up in debates and media stories. The bills being considered in Congress and the ideas being proposed by the President do not put your health care decision-making authority in the hands of government and will not lead to euthanasia by requiring senior citizens to submit to “end-of-life consultations.”

The Epilepsy Foundation encourages all individuals to plan and discuss living wills and health care proxy (someone appointed to make health decisions in the event that you are unable to do so yourself). The health care reform legislation being considered in Congress preserves choice and decision-making for patients, including the choice for seniors to consult with their doctors about the

care they choose to receive if they have an advanced disease. The bills before Congress would provide reimbursement to cover such advanced care consultations for seniors once every five years, and slightly more often if the patient has a life threatening disease. These consultations are not mandatory, and if chosen, would do nothing to promote euthanasia which is in fact illegal in 48 states. Patients regularly consult with their doctors about end-of-life treatment and this provision in health care reform will simply establish a method of reimbursing physicians so they can be paid for the time they spend consulting with their patients. Some reports have supported this initiative because it helps patients and families preserve their end of life decisions, plan for expected health care changes, and save money on health care costs as patients, families and doctors know the patient's care choices in advance.

### **MYTH 3: Health care reform will provide coverage to illegal immigrants**

None of the health care reform bills would provide any health coverage to the nation's estimated 11 million illegal immigrants. In fact, section 242 of the House health care reform bill, "America's Affordable Health Choice Act," contains explicit language that states that federal payment is prohibited for undocumented aliens and that nothing in the subtitle shall allow federal payments for affordability credits on behalf of individuals who are not lawfully present in the United States.

### **MYTH 4: Health care reform will put private insurance companies out of business**

Many national organizations representing the insurance industry support health care reform. Considering that all of the reform proposals before the Congress are built upon the existing private insurance market, there seems little or no chance that any of the plans would lead to extinction of private insurance companies. The Congressional Budget Office (CBO), Congress' nonpartisan budget analyst, has analyzed the House health care reform plan and found that it will not force out private insurers, contradicting one of the chief criticisms of health care reform.. The vast majority of uninsured Americans will move into some private health insurance plan either offered by their employer or purchased by them in the new health insurance marketplace created by the reform legislation.

### **MYTH 5: Health care reform won't benefit people like me, who have insurance**

While reducing the growing number of the uninsured in the United States is a major goal of health care reform, all Americans will benefit – and not solely from a healthier society. Under health insurance reform, every American will have health coverage they can count on, even if they lose their job, change jobs, move, or get sick. Health care reform will prohibit insurance companies from denying coverage based on preexisting conditions, cap the out-of-pocket spending on health care for individuals and families so that they do not go bankrupt trying to pay for necessary medical care, and provide consumers with more choice and portability in health insurance coverage.

We encourage everyone to learn more about health care reform legislation and to share their health care stories and needs with policy makers. The following resources can be very helpful for education and background:

- <http://energycommerce.house.gov/>
- <http://help.senate.gov/>
- <http://waysandmeans.house.gov/MoreInfo.asp?section=52>
- <http://edlabor.house.gov/>
- [http://www.whitehouse.gov/issues/health\\_care/](http://www.whitehouse.gov/issues/health_care/)