

REPUBLICAN LIES AND MYTHS ABOUT THE AFFORDABLE CARE ACT

MYTH #1: “Obamacare adds trillions to our deficits and to our national debt” (Mitt Romney – 6/28/12).

FACT:

- Health care reform will reduce the deficit by \$124 billion over the next 10 years (2012-2021).

MYTH #2: The ACA a “job-killer.” 800,000 people will lose their jobs.

FACT:

- Since the passage of the ACA in March 2010, private employers have added 4.2 million jobs and the health sector has added 631,900 jobs.
- CBO and the Business Roundtable found that employers will benefit from lower health care costs, freeing funds to hire more workers. According to CBO, premiums will fall by as much as 3 percent in the large group market and 2 percent in the small group market.
- This Republican claim was debunked by factcheck.org. What CBO actually said was “the legislation, on net, will reduce the amount of labor used in the economy by a small amount—roughly half a percent—primarily by reducing the amount of labor that workers choose to supply.” Essentially, the ACA gives people the option to work less or retire early rather than being tied to their jobs for health insurance.

MYTH #3: The ACA is a massive tax increase on the American people.

FACT:

- The ACA is NOT a tax increase on middle class families. This is nothing more than Republican lies, and was recently debunked by the [Washington Post Factchecker](http://WashingtonPost.com).
- Individuals who can afford to purchase insurance but choose not to do so, as well as employers who do not offer coverage to their employees pay a penalty. Only 1.4 percent of Americans are projected to be affected by the individual responsibility penalty.
- The ACA also includes contributions from households earning over \$250,000 (\$200,000 single). Only 3 percent of American families have earnings at this level.
- The ACA is crafted so that the health care sectors most likely to benefit from 30 million newly insured individuals –medical device manufactures, the pharmaceutical industry, health insurance companies, providers – contribute to the cost of providing this coverage. Even with these contributions, these sectors are expected to see significant growth in the coming years.
- The ACA delivers \$1.7 trillion in new benefits, including \$900 billion for the states for coverage expansions for lower income families, over \$20 billion in tax credits for small businesses that provide employee health coverage, and over \$800 billion in tax credits and other subsidies for families for health insurance premiums.

MYTH #4: “Obamacare is devastating to small businesses” (Freedom Path ad supporting Senator Orrin Hatch).

FACT:

- Businesses with fewer than 50 employees are not required to offer insurance to their employees, but the ACA provides many of them with a tax credit to help pay for their workers’ coverage.
- Thanks to the ACA, 360,000 small businesses are already receiving tax credits to help with the cost of providing coverage to their workers.
- Small businesses will also benefit from the insurance exchanges that come into effect in 2014. These exchanges will deliver lower premiums for small businesses through lower administrative costs, increased competition among insurers, increased transparency of costs, and better risk pooling.

MYTH #5: Employers will drop insurance for their employees.

FACT:

- Employer-sponsored insurance is the backbone of our country’s health insurance system, and the ACA builds upon this model.
- 94 percent of employers with 50+ employees already voluntarily provide coverage to their workers, evidence that they will continue to do so.
- CBO and other nonpartisan experts estimate that there will be only a modest reduction in employer sponsored insurance as people lose or choose to leave their employer coverage. These individuals will have access to coverage via the new exchanges or Medicaid.

MYTH #6: 20 million Americans will lose health insurance coverage.

FACT:

- This is patently false.
- This claim is the result of an unrealistic Republican-created alternative scenario that CBO was directed to analyze and which CBO then criticized as highly unlikely.
- CBO and other nonpartisan experts estimate that there will only be a modest reduction in employer sponsored insurance.
- Any drop in employer coverage is more than offset by the 30+ million who will newly gain coverage via the exchanges and Medicaid.

MYTH#7: The ACA cuts Medicare.

FACT:

- The ACA strengthens Medicare’s financing while improving seniors’ benefits.
- The ACA slows the rate of growth in Medicare and extends its solvency by 8 years.
- The ACA ended unjustified and unaccountable overpayments to private health insurers that increased beneficiaries’ premiums and drained the Medicare trust fund.
- These payment changes helped fund Medicare modernizations and improvements, including free preventive benefits, closing the prescription drug donut hole, and implementing delivery system reforms to improve quality and reduce costs.
- Republicans attack these savings even though they have voted TWICE to retain them in the 2011 and 2012 Republican budgets, which simultaneously repealed the ACA’s Medicare improvements.

MYTH #8: The ACA will increase the cost of health insurance premiums.

FACT:

- CBO and JCT estimate that the ACA will decrease premiums in the individual market for same-service health insurance by 7-10 percent.
- Consumers will receive \$1.1 billion in rebates this summer from private health insurers as a result of the ACA's requirements that insurance companies provide more health care value for premiums paid.
- Insurance companies can no longer arbitrarily raise health insurance premiums. Thanks to the ACA, proposed rate increases greater than 10 percent are reviewed, approved, or denied at the state or federal level.

MYTH #9: A board of unelected bureaucrats (the Independent Physician Advisory Board, or IPAB) will ration care.

FACT:

- The ACA explicitly prohibits IPAB from making any changes that ration care or increase seniors' Medicare premiums or cost sharing.
- In contrast, nearly every House Republican voted for the Republican Budget to convert Medicare into a voucher program, ending Medicare's guaranteed benefits and leaving seniors at the mercy of private health insurers.
- The Republican voucher plan rations care by putting private insurance companies back in charge and making coverage unaffordable for our nation's seniors.

MYTH #10: The ACA allows federal funding to be used for abortions.

FACT:

- Current law states that **no** Federal funds will be used for abortion, except in the case of rape, incest, or when the life of the woman is in danger. Individuals may purchase additional abortion coverage with their own funds if such coverage is made available. No federal dollars may be used for this purpose.
- No private insurance company is required to provide abortion coverage. If they chose to do so, private dollars paid by subscribers for the coverage must be segregated in a separate account. No private dollars for abortion coverage may be co-mingled with any public dollars.

MYTH #11: "This is government taking over the entire health insurance industry" (John Boehner - 7/1/12).

FACT:

- The ACA maintains the existing network of private insurers, private doctors, private hospitals, private medical device companies, and private pharmaceutical manufacturers. That's hardly a government takeover.
- This oft-repeated phrase is nothing but a scare tactic. The real scary thing is that Republicans want to take away individual freedom and control over health care choices, and return power to insurance companies that deny or charge more for insurance because an individual is unfortunate enough to be a cancer patient, elderly, or simply born a female.

MYTH #12: “Obamacare puts the federal government between you and your doctor” (Mitt Romney – 6/28/12).

FACT:

- The ACA strengthens the doctor-patient relationship by providing physicians with new tools, such as research on the relative effectiveness of various treatments, that will help patients and physicians make informed health decisions. Contrary to Republican claims, the ACA specifically prohibits the Patient-Centered Outcomes Research Institute (PCORI) from dictating practice guidelines or coverage, payment, or policy recommendations.
- The ACA puts patient well-being above insurance company bottom lines by implementing necessary – and long overdue – consumer protections that limit the insurance industry’s control over health care access.

MYTH #13: The IRS will pursue and jail Americans who do not purchase insurance.

FACT:

- This is nothing but fear mongering, plain and simple.
- The ACA explicitly prohibits the IRS from seizing property or putting anyone in jail for failure to meet the individual responsibility requirement.

MYTH #14: Health care reform was the result of a “closed drafting process.”

FACT:

- Health care reform was the product of one of the most open legislative processes in history. The House held nearly 100 hours of hearings and 83 hours of committee markups. The House heard from 181 witnesses, both Democrat and Republican. The original House bill was posted online for **30** days before the first Committee began marking it up, and 239 amendments were considered in the three committees, of which 121 were adopted.

MYTH #15: The final version of health reform was rushed through the House.

FACT:

- The bill was available for 72 hours before any Members were asked to vote on it on the floor.
- In the days leading to final passage, then-Republican Minority Leader John Boehner said on Fox News on Thursday, March 18th, “We’re talking about a bill that’s been out there for three months.”