



How they differ

Comparison of the health care overhaul bills before Congress:

	Senate	House
	Patient Protection and Affordable Care Act	Affordable Health Care for America Act
Cost (10-year estimates)	<ul style="list-style-type: none"> • \$871 billion 	<ul style="list-style-type: none"> • \$1.06 trillion
Who's covered	<ul style="list-style-type: none"> • About 94 percent of legal residents under age 65 	<ul style="list-style-type: none"> • About 96 percent of legal residents under age 65
How it's paid for	<ul style="list-style-type: none"> • Cuts to Medicare, Medicaid; increase in Medicare payroll tax for high-income workers; taxes on high-cost insurance; 10 percent sales tax on tanning salons; fees on drug companies, device makers, insurers; fines on employers whose workers get federal subsidies to help pay premiums, noncompliance penalties 	<ul style="list-style-type: none"> • Cuts to Medicare, Medicaid; surtax on couples with incomes above \$1 million, singles above \$500,000; fees on medical device makers; limits on contributions to flexible spending accounts; noncompliance penalties
Requirements for individuals	<ul style="list-style-type: none"> • Almost everyone must have coverage; phased-in \$750 per person penalty for noncompliance; hardship waivers 	<ul style="list-style-type: none"> • Almost everyone must have coverage; penalty of 2.5 percent of modified adjusted gross income for noncompliance; hardship waivers
Requirements for employers	<ul style="list-style-type: none"> • No requirement; firms with more than 50 workers that do not offer insurance must pay \$750 fine per worker if employees get government subsidies to help pay premiums 	<ul style="list-style-type: none"> • Must provide insurance or face penalty of 8 percent of payroll; those with payrolls under \$500,000 are exempt; those with 10 or fewer workers get tax credits
Subsidies to buy coverage	<ul style="list-style-type: none"> • Up to 400 percent of poverty level; tax credits for small employers 	<ul style="list-style-type: none"> • Up to 400 percent of poverty level
Benefit package	<ul style="list-style-type: none"> • Sets four benefit categories; all plans would have to include basic benefits 	<ul style="list-style-type: none"> • Must include essential benefits (hospitalization, doctor visits, drugs, other services) proposed by a committee
Restrictions on insurance companies	<ul style="list-style-type: none"> • Starting in 2014, no denial of coverage or higher premiums for pre-existing conditions; no higher premiums based on gender; limits on premiums based on age or family size; starting upon enactment of law, no lifetime caps; children up to 26 can stay on parents' plan 	<ul style="list-style-type: none"> • Starting in 2013, no denial of coverage or higher premiums for pre-existing conditions; no higher premiums based on gender; limits on premiums based on age
Drugs	<ul style="list-style-type: none"> • Drug companies contribute \$80 billion over 10 years to limit gap in Medicare prescription drug coverage; grants 12 years of market protection to some high-tech drugs 	<ul style="list-style-type: none"> • Phases out gap in Medicare drug coverage by 2019; health and human services secretary to negotiate drug prices for Medicare recipients; grants 12 years of market protection to some high-tech drugs
Antitrust	<ul style="list-style-type: none"> • Maintains industry's antitrust exemption 	<ul style="list-style-type: none"> • Strips industry's antitrust exemption; gives Federal Trade Commission authority to examine industry
Public option (new government-sponsored plan)	<ul style="list-style-type: none"> • No; would set up an insurance exchange run by the office that manages health coverage for federal workers and Congress; would offer plans through private insurers, one of which would have to operate on a nonprofit basis 	<ul style="list-style-type: none"> • Yes, new public plan available through insurance exchange would be set up and run by health and human services secretary
Long-term care insurance	<ul style="list-style-type: none"> • New voluntary program to help people avoid nursing homes 	<ul style="list-style-type: none"> • New voluntary program to help people avoid nursing homes
Expansion of Medicaid (program for the poor)	<ul style="list-style-type: none"> • Eligibility levels standardized to 133 percent of poverty level; now eligibility varies by state 	<ul style="list-style-type: none"> • Expanded to include all those with incomes up to 150 percent of poverty level
Abortion	<ul style="list-style-type: none"> • Tries to keep a strict separation between taxpayer funds and private premiums that would pay for abortions 	<ul style="list-style-type: none"> • Public plan and federally-subsidized private plans offered in the exchange could not cover abortion