

BASIC APPROACH TO COVERAGE AND COST

Federal PPACA 2010	Massachusetts 2006	Connecticut SustiNet (2009 legislation)
<ol style="list-style-type: none"> 1. Individual health insurance mandate 2. Subsidies for the low-income uninsured 3. Medicaid expansion 4. Modest employer responsibility for offering health insurance 5. Health insurance exchange offering health plans to small groups and individuals 6. Pilots/demos of delivery system reforms to improve quality of care and slow cost growth 	<ol style="list-style-type: none"> 1. Individual health insurance mandate 2. Subsidies for the low-income uninsured 3. Medicaid expansion 4. Modest employer responsibility for offering health insurance 5. Health insurance exchange offering health plans to small groups and individuals 	<ol style="list-style-type: none"> 1. Publicly administered plan implements delivery system reforms to improve quality of care and slow cost growth 2. Subsidies for the low-income uninsured – study feasibility 3. Medicaid expansion to the extent permitted under federal law 4. Publicly administered plan available to small groups and individuals 5. May recommend enrolling uninsured into coverage unless they opt out

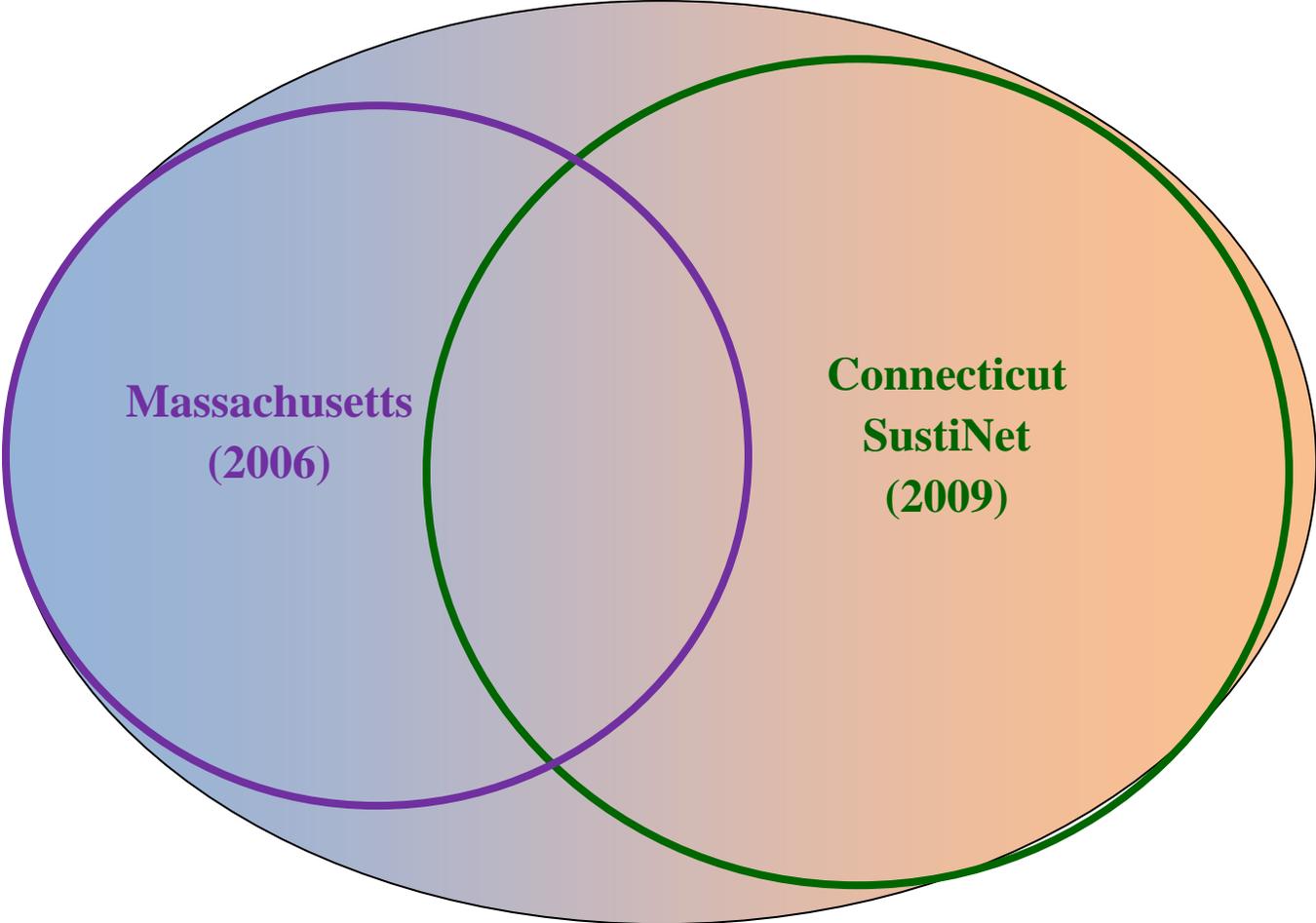
COMPONENTS OF HEALTH CARE REFORM – COMPARISON OF SCOPE

Components	Federal PPACA 2010	Massachusetts 2006	Connecticut SustiNet (2009 legislation)
ACCESS to COVERAGE			
Individual health insurance mandate	✓	✓	
Premium subsidies	✓	✓	✓ (study feasibility)
Medicaid expansion	✓	✓	✓
Employer responsibility for offering health insurance	✓	✓	
Health insurance Exchange	✓	✓	
Individuals may buy in	✓	✓	✓ (to public plan)
Small businesses may buy in	✓	✓ (implemented 2009)	✓ (to public plan)
Insurance market reforms	✓	✓	✓
Covered benefits requirements	✓ General guidance	✓ Minimal Creditable Coverage	✓
QUALITY, COST, INFRASTRUCTURE			
Medical home	✓ Demos/Pilots	(pilot under development)	✓
Quality & safety	✓ Demos/Pilots	(HC Quality & Cost Council established to investigate)	✓
Preventive health	✓ Demos/Pilots	(Connector included minimal standards)	✓
Disparities & equity	✓ Demos/Pilots	(Health Disparities Council established to investigate)	✓
Obesity prevention	✓ Demos/Pilots		✓
Tobacco prevention	✓ Demos/Pilots		✓
Electronic Health Records and Electronic Data Interchange	(addressed in ARRA & HITECH)		✓
Workforce	✓ Demos/Pilots		✓

Color key: Dark shading = Mandated in law. Light shading = Optional or related activity. No shading = no provision.

MASSACHUSETTS HEALTH CARE REFORM VS. SUSTINET – COMPARISON OF SCOPE

**Access to
Coverage**



**Massachusetts
(2006)**

**Connecticut
SustiNet
(2009)**

**Quality, Cost,
Infrastructure**