Powerpoint Presentation on ACA and Free Clinics

Slide #

1. Omit “our free” and replace with the name of your clinic.
2. Outline of what we are going to cover.
3. Skip over the first two and list the benefits so far. Second last dot point: It has been estimated that if this had been in effect in 2010, insurance companies would have had to rebate $2 billion to their enrollees.
4. Free clinics that have not enrolled in FTCA may want to reconsider, given the expansion in coverage.
5. Lots of uncertainty surrounds ACA. Will it be implemented? In part or in whole? We will not know the outcome of the Supreme Court Case until June. All of the Republican candidates for President have vowed to repeal it. ACA is inadequate in controlling the rising cost of health care.
6. Medicaid eligibility in Michigan is only 35% of FPL. Medicaid is basically a program for Moms and children. Many men are not eligible.
7. An individual who makes more than $3,910/year is too rich to qualify for Michigan Medicaid. Many of our patients have incomes above $3,910 and below $14,856 and will be eligible for Medicaid. Between 133% and 400% of FPL, the exchanges will provide affordable options.
8. Go over timeline.
9. Between 2014 and 2019 patients will gradually be enrolled. By 2019, the numbers of uninsured should have declined, and only those who are not eligible through ACA will be left.
10. 1/3 of those who remain uninsured will be undocumented immigrants. The remaining 2/3rds fall into one of the other categories. Last dot point: it is predicted that many eligible persons will not be able to pull the required documentation to apply. The whole process will require a lot of navigation.
11. Critical issues for free clinics. We need to educate our constituents to be sure that volunteers, donors and partner hospitals do not think the problem is solved and free clinics are no longer needed.
12. Three states expanded coverage, and the experience of their free clinics may predict what we will experience under ACA.
13. This slide lays out the work of a strategic plan for free clinics going through the transition to ACA, including “What if it is not implemented?”

Please feel free to adapt the slides to the circumstances of your state and your free clinic. I hope that you find this a helpful tool. I would be happy to receive your suggestions and critique. Thank you.

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