



Patient Protection and Affordable Care Act (ACA): Resources for Frequently Asked Questions

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September 19, 2013

Congressional Research Service

7-5700

www.crs.gov

R43215

Summary

The Patient Protection and Affordable Care Act (ACA; P.L. 111-148, as amended) has numerous provisions affecting private health insurance and public health coverage programs. Many of these provisions take effect in 2014. This report provides resources to help congressional staff respond to constituents' frequently asked questions (FAQs) about the law. The report lists selected resources regarding consumers, employers, and other stakeholders, with a focus on federal sources. It also lists CRS reports that summarize ACA's provisions.

The report begins with links to contacts for specific ACA questions, such as Consumer Assistance Programs and state agencies that can answer constituents' questions directly. For example, the federal HealthCare.gov website offers an ACA consumer telephone hotline and online chat assistance. The report also lists sources for congressional staff to contact federal agencies with ACA questions.

The report provides basic consumer sources, including broad overviews of the ACA law. The next sections focus on health coverage: the individual mandate, private health insurance, and exchanges, as well as public health care programs, such as Medicaid and the State Children's Health Insurance Program (CHIP), Medicare, Indian health care, and veterans' and military health care. The report then lists sources on employer-sponsored coverage, including sources on employer penalties, small businesses, federal workers' health plans, and union health plans. The report also provides sources on ACA's provisions on mental health, public health, workforce, quality, and taxes. Finally, the report lists sources on ACA costs and appropriations, and sources for obtaining the law's full-text.

This list is not a comprehensive directory of all resources on the ACA, but rather is intended to address a few questions that may arise frequently.

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This report provides resources to help congressional staff respond to constituents' frequently asked questions (FAQs) about the Patient Protection and Affordable Care Act (ACA). The report lists selected resources regarding consumers, employers, and other stakeholders, with a focus on federal sources. It also lists CRS reports that summarize ACA's provisions. The resources are arranged by topic.

This list is not a comprehensive directory of all resources on the ACA, but rather is intended to address a few questions that may arise frequently.

Contacts for ACA Assistance

Consumer Help (The Center for Consumer Information & Insurance Oversight)
<https://www.cms.gov/CCIIO/Resources/Consumer-Assistance-Grants/>

A directory of Consumer Assistance Programs and other state agencies that can answer constituent questions on ACA and health insurance.

Contact Us (U.S. Department of Health and Human Services, HealthCare.gov)
<https://www.healthcare.gov/contact-us/>

The federal HealthCare.gov website offers a 24/7 consumer hotline (1-800-318-2596) and online chat assistance. For translation assistance in other languages, constituents may also call the HealthCare.gov hotline (1-800-318-2596): <https://www.healthcare.gov/language-resource>.

Find Local Help (U.S. Department of Health and Human Services, Healthcare.gov)
<https://localhelp.healthcare.gov>

A directory of state and local organizations trained to provide enrollment assistance and to help constituents understand their health coverage options. The directory includes navigators, application assisters, certified application counselors, and state and local government agencies.

The U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services has a dedicated phone number for ACA implementation questions from congressional staff: 202-690-8004. This number is exclusively for the use of Members of Congress and congressional staff, not constituents.

CRS Report 98-446, *Congressional Liaison Offices of Selected Federal Agencies*

This CRS report lists congressional liaison offices at federal agencies, including those that work on ACA issues, such as the Internal Revenue Service, the Department of Labor, and the Congressional Budget Office. Congressional liaison offices can answer questions from Members of Congress and congressional staff; they usually do not assist constituents directly.

CRS reports on ACA are at CRS.gov: *Issues Before Congress: Affordable Care Act and Health Policy*.

Each report has author contact information. CRS authors are available to answer questions from Members of Congress and congressional staff. CRS provides research and analysis exclusively to the Congress. CRS authors are unable to assist constituents directly.

Basic Consumer Sources

HealthCare.gov (U.S. Department of Health and Human Services)

<http://www.healthcare.gov>

The official federal portal for Affordable Care Act consumer information. Questions and answers on health insurance under ACA, including options for obtaining coverage, consumer rights and protections, and services that must be covered. A Spanish-language version is at <http://www.CuidadoDeSalud.gov>.

Key Features of the Affordable Care Act By Year (U.S. Department of Health and Human Services)

<http://www.hhs.gov/healthcare/facts/timeline/timeline-text.html>

A timeline of major ACA provisions, with links to federal consumer information sources.

CRS Report R41664, *ACA: A Brief Overview of the Law, Implementation, and Legal Challenges*

An 11-page overview of the ACA law, implementation and oversight, and the U.S. Supreme Court decision in *National Federation of Independent Business v. Sebelius*.

Affordable Care Act Tax Provisions for Individuals and Families (Internal Revenue Service)

<http://www.irs.gov/uac/Affordable-Care-Act-Tax-Provisions-for-Individuals-and-Families>

Explanations of ACA tax provisions for consumers, including provisions on premium tax credits, the individual mandate (sometimes called the “individual shared responsibility” provision), Health Care Flexible Spending Arrangements, Health Savings Accounts, medical loss ratio premium rebates, and other tax provisions.

The Affordable Care Act and Your Community (U.S. Department of Health and Human Services, Center for Faith-based and Neighborhood Partnerships)

http://www.hhs.gov/partnerships/aca_act_and_community/

For community organizations, provides educational materials and links to further information on the ACA. Scroll down to links for frequently asked questions.

Glossary (U.S. Department of Health and Human Services, HealthCare.gov)

<http://www.healthcare.gov/glossary/index.html>

Plain language definitions of health care and health insurance terms.

The Individual Mandate

Questions and Answers on the Individual Shared Responsibility Provision (Internal Revenue Service)

<http://www.irs.gov/uac/Questions-and-Answers-on-the-Individual-Shared-Responsibility-Provision>

Basic background on the individual mandate, the requirement that most individuals have minimum essential health coverage or else pay a tax penalty. Describes what counts as minimum essential coverage, who is subject to the mandate, and who is exempt.

CRS Report R41331, *Individual Mandate and Related Information Requirements under ACA*

Beginning in 2014, ACA requires individuals to maintain health insurance coverage, with some exceptions. Most individuals will be required to maintain minimum essential coverage, which includes eligible employer-sponsored coverage, individual coverage, grandfathered health plans, and federal programs such as Medicare and Medicaid, among others. Certain individuals will be exempt from the individual mandate. For example, individuals with qualifying religious exemptions and those whose household income is less than the filing threshold for federal income taxes will not be subject to the penalty. Those who do not maintain minimum essential coverage and are not exempt from the mandate will be required to pay a penalty for noncompliance.

Private Health Insurance

CRS Report R43048, *Overview of Private Health Insurance Provisions in the Patient Protection and Affordable Care Act (ACA)*

[ACA] includes provisions that restructure the private health insurance market by (1) implementing market reforms that impose requirements on private health insurance plans and sponsors of health insurance (e.g., employers); (2) creating marketplaces, ‘exchanges,’ where individuals can shop for and purchase health plans that meet or exceed federal standards; (3) providing financial assistance to qualified individuals who purchase health plans through an exchange; (4) establishing an individual mandate that requires most individuals to either maintain health insurance coverage or pay a penalty; and (5) assessing penalties on certain employers that either do not provide health insurance or provide health insurance that is ‘unaffordable’ or does not provide ‘minimum value.’

CRS Report R42069, *Private Health Insurance Market Reforms in the Patient Protection and Affordable Care Act (ACA)*

Table B-1 shows which private health insurance market reforms apply to which health plans, depending on whether the plans are grandfathered or new; whether the plans are sold in the large group market, small group market, or individual market; and whether group plans are fully insured or self-insured.

Fact Sheets & Frequently Asked Questions (FAQs) (The Center for Consumer Information & Insurance Oversight)

<http://www.cms.gov/CCIIO/Resources/Fact-Sheets-and-FAQs/index.html>

The federal Center for Consumer Information & Insurance Oversight (CCIIO) is charged with implementing ACA's private health insurance reforms. This page provides information for stakeholders, including state officials, health insurance companies, and consumers.

Young Adults and the Affordable Care Act: Protecting Young Adults and Eliminating Burdens on Businesses and Families (Employee Benefits Security Administration)
<http://www.dol.gov/ebsa/faqs/faq-dependentcoverage.html>

Questions and answers on the ACA dependent coverage provision. Under ACA, if a health plan provides for dependent coverage of children, the plan must make such coverage available for a child under age 26. This requirement became effective for plan years beginning on or after September 23, 2010.

Private Health Plans Available Inside and Outside of ACA Exchanges (Congressional Research Service Memorandum, August 2, 2013, available to congressional staff upon request)

“This memorandum provides short descriptions of health plans that may be offered inside and outside of exchanges. The descriptions are displayed in a side-by-side format to facilitate comparison of exchange and non-exchange plans.”

Health Insurance Rate Filings by State, 2014 (Congressional Research Service, August 30, 2013, available to congressional staff upon request)

There is no federal requirement for states to release health insurance rate filings to the public. As such, there is wide variation in the information available to the general public regarding health insurance rates (premiums). This document lists summary rate data and access to rate filings, by state.

Exchanges and Subsidies

CRS Report R42663, *Health Insurance Exchanges Under the Patient Protection and Affordable Care Act (ACA)*

Under the ACA, “exchanges” (sometimes called “marketplaces”) will be established to provide eligible individuals and small businesses with access to private health insurance plans.

CRS Report R41137, *Health Insurance Premium Credits in the Patient Protection and Affordable Care Act (ACA)*

To make exchange coverage more affordable, the federal government will subsidize premium costs for certain individuals through “premium credits,” a type of federal tax credit. An individual may be eligible for a premium tax credit if his or her household income is between 100% and 400% of the federal poverty level (FPL), and the individual does not have access to affordable health coverage through another source such as an employer.

Health Insurance Marketplace (U.S. Department of Health and Human Services, Healthcare.gov)
<https://www.healthcare.gov/health-insurance-marketplace>

Plain language questions and answers about the exchanges. For information about the exchange in your state, see “What is the Marketplace in my state?”
<https://www.healthcare.gov/what-is-the-marketplace-in-my-state/>

Getting Lower Costs on Coverage (U.S. Department of Health and Human Services, Healthcare.gov)
<https://www.healthcare.gov/getting-lower-costs-on-coverage/>

FAQs on available subsidies for health coverage, including premium credits and cost-sharing subsidies.

Health Insurance Marketplace (Centers for Medicare and Medicaid Services)
<http://marketplace.cms.gov/>

For professionals assisting consumers with enrollment, this site has federal brochures, training materials, and questions & answers about the exchanges. Includes resources in Spanish: <http://marketplace.cms.gov/getofficialresources/spanish-materials/spanish-materials.html>.

Medicaid and the State Children’s Health Insurance Program

Affordable Care Act (Centers for Medicare and Medicaid Services, Medicaid.gov)
<http://www.medicare.gov/AffordableCareAct/Affordable-Care-Act.html>

Summaries and timeline of major ACA provisions related to Medicaid and the State Children’s Health Insurance Program (CHIP).

CRS Report R41210, *Medicaid and the State Children’s Health Insurance Program (CHIP) Provisions in ACA: Summary and Timeline*

Detailed section-by-section summary of ACA’s Medicaid and CHIP provisions.

Frequently Asked Questions: Medicaid and CHIP Affordable Care Act (ACA) Implementation (Centers for Medicare and Medicaid Services, Medicaid.gov)
<http://www.medicare.gov/State-Resource-Center/FAQ-Medicaid-and-CHIP-Affordable-Care-Act-Implementation/FAQ-Medicaid-and-CHIP-Affordable-Care-Act-ACA-Implementation.html>

For state officials and stakeholders, these sources address questions on the ACA and Medicaid and the State Children’s Health Insurance Program (CHIP).

Each state operates its own Medicaid and CHIP programs within federal guidelines.

- Links to each state’s Medicaid website:
<http://medicaid.gov/Medicaid-CHIP-Program-Information/By-State/By-State.html>
- Links to each state’s CHIP website:
<http://insurekidsnow.gov/state/index.html>

Medicare

Medicare.gov (Centers for Medicare and Medicaid Services)
<https://www.medicare.gov/>

Official federal portal for consumer information on Medicare.

CRS Report R41196, *Medicare Provisions in the Patient Protection and Affordable Care Act (PPACA): Summary and Timeline*

Detailed section-by-section summary of ACA's Medicare provisions.

CRS Report R41511, *The Independent Payment Advisory Board*

The Board's charge is to "reduce the per capita rate of growth in Medicare spending."

Indian Health Care

CRS Report R41152, *Indian Health Care: Impact of the Affordable Care Act (ACA)*

ACA reauthorized the Indian Health Care Improvement Act (IHCIA), which authorizes many Indian Health Service (IHS) programs and services. This report summarizes major IHCIA changes and other ACA provisions that may affect American Indian and Alaska Native health care.

CRS Report R41630, *The Indian Health Care Improvement Act Reauthorization and Extension as Enacted by the ACA: Detailed Summary and Timeline*

Detailed section-by-section summary of IHCIA provisions in ACA.

Health Reform for American Indians and Alaska Natives (Indian Health Service)
http://www.ihs.gov/newsroom/includes/themes/newihstheme/display_objects/documents/Fact_Sheet.pdf

Three-page overview of ACA provisions, including IHCIA provisions.

Veterans and Military Health Care

CRS Report R41198, *TRICARE and VA Health Care: Impact of the Patient Protection and Affordable Care Act (ACA)*

Frequently asked questions on how ACA affects the veterans' and military health care systems.

The Affordable Care Act, VA, and You: Frequently Asked Questions (U.S. Department of Veterans Affairs)
<http://www.va.gov/health/aca/FAQ.asp>

Answers to veterans' frequently asked questions about the ACA. The website notes that "The health care law does not change VA health benefits or Veterans' out-of-pocket costs."

Employer-Sponsored Coverage

Affordable Care Act (Employee Benefits Security Administration)
<http://www.dol.gov/ebsa/healthreform/>

The federal Employee Benefits Security Administration, part of the Department of Labor, provides information on ACA implementation for employers and employees who receive health coverage through work. Scroll down to "Frequently Asked Questions" for information on grandfathered plans, cost-sharing, and other topics for employer-sponsored health coverage.

Health Care Changes (BusinessUSA.gov)
<http://business.usa.gov/healthcare>

Employers answer multiple-choice questions about their business (e.g., state, number of employees, whether they plan to offer health insurance to employees). An online "wizard" generates a list of ACA resources depending on the answers.

Affordable Care Act Tax Provisions for Employers (Internal Revenue Service)
<http://www.irs.gov/uac/Affordable-Care-Act-Tax-Provisions-for-Employers>

Explanations of ACA tax provisions for employers, such as W-2 reporting requirements, the Small Business Health Care Tax Credit, and potential employer penalties for certain large employers.

Employer Penalties

CRS Report R41159, *Potential Employer Penalties Under the Patient Protection and Affordable Care Act (ACA)*

ACA's "shared responsibility" provision imposes penalties on certain large employers (at least 50 FTEs) if they do not offer affordable health coverage to employees and at least one of their full-time employees obtains a premium credit (subsidy) through the exchanges. This report describes which employers are subject to the provision and describes penalty calculations.

The report also notes that "On Tuesday July 2, 2013, the Obama Administration posted a blog on employer requirements and the Patient Protection and Affordable Care Act (ACA, P.L. 111-148), as amended. Based on the White House blog, (1) the Administration plans to revamp employer reporting requirements, and therefore suspend employer reporting requirements for 2014, and (2) because employer payments are dependent on the reporting requirements, no payments will be collected in 2014."

Questions and Answers on Employer Shared Responsibility Provisions Under the Affordable Care Act (Internal Revenue Service)

<http://www.irs.gov/uac/Newsroom/Questions-and-Answers-on-Employer-Shared-Responsibility-Provisions-Under-the-Affordable-Care-Act>

Updated question and answers on the provision will be posted on this site.

Small Businesses

Health Care (U.S. Small Business Administration)
<http://www.sba.gov/healthcare>

Articles explain ACA provisions for small businesses.

Small Business: Get health insurance for your employees (U.S. Department of Health and Human Services, [Healthcare.gov](http://www.healthcare.gov))
<https://www.healthcare.gov/small-businesses>

Frequently asked questions about the Small Business Health Options Program (SHOP) exchange. For further questions, the federal health insurance call center for small employers is 1-800-706-7893.

CRS Report R42663, *Health Insurance Exchanges Under the Patient Protection and Affordable Care Act (ACA)*

Under the ACA, “exchanges” (sometimes called “marketplaces”) will be established to provide eligible individuals and small businesses with access to private health insurance plans.

CRS Report R41158, *Summary of Small Business Health Insurance Tax Credit Under the Patient Protection and Affordable Care Act (ACA)*

Under the ACA, the small business tax credit is available to qualifying for-profit and nonprofit employers with fewer than 25 full-time equivalent employees with average annual wages of less than \$50,000. To be eligible for the tax credit, employers must contribute a uniform percentage of at least 50% toward their employees’ health insurance.

Federal Employee Health Benefits Program

CRS Report RS21974, *Federal Employees Health Benefits Program (FEHBP): Available Health Insurance Options*

Includes a section on “Affordable Care Act and FEHBP.”

The Affordable Care Act (ACA) and the Federal Employees Health Benefits Program: Questions and Answers (U.S. Office of Personnel Management)
<http://www.chcoc.gov/files/the-affordable-care-act-and-the-federal-employees-health-benefit-program-questions-answers.pdf>

FAQs for federal employees, retirees, and dependents on how ACA affects FEHBP.

Health Care Reform FEHB Fast Facts: How Does the Affordable Care Act's Individual Shared Responsibility Provision and the Requirement to Maintain Minimum Essential Coverage Affect Me? (U.S. Office of Personnel Management)
<http://www.opm.gov/retirement-services/publications-forms/benefits-administration-letters/2013/13-205attachment1.pdf>

FAQs on how the individual mandate affects persons covered by FEHBP.

Changes to Federal Benefits Eligibility Due to Health Reform: Frequently Asked Questions (FAQs) (U.S. Office of Personnel Management)
<http://www.opm.gov/healthcare-insurance/special-initiatives/health-care-reform/>

FAQs for federal employees on the ACA dependent coverage provision, which became effective for plan years beginning on or after September 23, 2010.

Members of Congress and Congressional Staff

CRS Report R43194, *Health Benefits for Members of Congress and Certain Congressional Staff*

A provision in ACA specifically affects Members of Congress and certain congressional staff and their employer sponsored health benefits. This report explains current implementation of this provision, including the Office of Personnel Management proposed rule of August 2013.

Union Health Plans

Multiemployer Health Plans, the Taft-Hartley Act, and the Patient Protection and Affordable Care Act (ACA) (Congressional Research Service Memorandum, June 26, 2013, available to congressional staff upon request)

Unions and multiemployer plan representatives have expressed an interest in allowing union members and multiemployer plans to participate in the health insurance exchanges established by the Patient Protection and Affordable Care Act (ACA, P.L. 111-148), as amended. In light of this interest, this memorandum provides background information about multiemployer plans, ACA, and another relevant federal statute, the Taft-Hartley Act. The analysis considers two related scenarios: (1) an individual who is eligible for a multiemployer health plan applying for a premium tax credit; and (2) a multiemployer health plan being offered in a health insurance exchange.

Mental Health

CRS Report R41768, *Mental Health Parity and Mandated Coverage of Mental Health and Substance Use Disorder Services After the ACA*

ACA extends applicability of federal mental health parity requirements to three new plan types: (1) Qualified Health Plans (QHPs, offered through the state Exchanges); (2) plans offered through the individual market; and (3) Medicaid benchmark and benchmark

equivalent plans that are not managed care plans. The ACA also requires certain plans to offer coverage of mental health and substance use disorder services, by requiring these plan types to cover the Essential Health Benefits (EHB), which are defined to include mental health and substance use disorder services.

CRS Report R42009, *Financing and Delivery of Behavioral Health Services and the Patient Protection and Affordable Care Act*

An overview of ACA provisions that are expected to affect the financing and delivery of behavioral health care services, including mental health and substance abuse services.

Health Insurance and Mental Health Services (U.S. Department of Health and Human Services, MentalHealth.gov)

<http://www.mentalhealth.gov/get-help/health-insurance/index.html>

Frequently asked questions about private health insurance, Medicare, and Medicaid coverage of mental health benefits.

Public Health, Workforce, Quality, and Related Provisions

CRS Report R41278, *Public Health, Workforce, Quality, and Related Provisions in ACA: Summary and Timeline*

Detailed section-by-section summary of ACA's provisions on public health, the health workforce, quality improvement, health centers, prevention and wellness, maternal and child health, nursing homes and other long-term care providers, comparative effectiveness research, health information technology, emergency care, elder justice, biomedical research, FDA and medical products, 340B drug pricing, and malpractice reform.

Tax Provisions

Affordable Care Act (ACA) Tax Provisions (Internal Revenue Service)

<http://www.irs.gov/aca>

Briefly summarizes ACA's tax provisions. In the left navigation bar are links to sources tailored for "Individuals and Families," "Employers" and "Other organizations." For a more comprehensive list, click "List of Tax Provisions"; for many of the provisions, there are links to "Questions and Answers."

Present Law And Background Relating To The Tax-Related Provisions In The Affordable Care Act (Joint Committee on Taxation, JCX-6-13, March 4, 2013)

<https://www.jct.gov/publications.html?func=startdown&id=4511>

Summarizes ACA's revenue (tax) provisions.

ACA Cost Estimates and Spending

Affordable Care Act (Congressional Budget Office)
<http://www.cbo.gov/topics/health-care/affordable-care-act>

A collection of Congressional Budget Office (CBO) analyses and cost estimates on the ACA and proposals to amend or repeal ACA.

CRS Report R41390, *Discretionary Spending in the Patient Protection and Affordable Care Act (ACA)*

“The Patient Protection and Affordable Care Act (ACA) reauthorized funding for numerous existing discretionary grant programs and other activities. ACA also created multiple new discretionary grant programs and provided for each an authorization of appropriations. Funding for all these discretionary programs is subject to action by congressional appropriators. This report summarizes all the discretionary spending provisions in ACA.”

CRS Report R41301, *Appropriations and Fund Transfers in the Patient Protection and Affordable Care Act (ACA)*

Summarizes ACA’s mandatory appropriations. Appendix B summarizes ACA-related authorizing legislation in recent congresses. Appendix C summarizes ACA provisions in recent appropriations bills.

Tracking Accountability in Government Grants System: Search Affordable Care Act Awards (U.S. Department of Health and Human Services)
<http://taggs.hhs.gov/SearchACA.cfm>

Database of U.S. Department of Health and Human Services ACA grant awards, searchable by geographic location, grant program name, grantee name, and keyword. The database does not include already existing programs that received ACA funding in addition to their regular funding. The database includes grants only, not other types of assistance such as contracts.

ACA Statute

The following resources can help with constituent requests for the text of the ACA statute.

Compilation of the Patient Protection and Affordable Care Act (U.S. House of Representatives, Office of the Legislative Counsel)
http://legcoun.house.gov/members/HOLC/Resources/comps_alpha.html

The Patient Protection and Affordable Care Act compilation is listed under “P” on this web page. The House Office of the Legislative Counsel compiled the text of the ACA (P.L. 111-148), consolidated with amendments made by subsequent laws. This compilation is unofficial. It is updated periodically. As of this writing, the compilation is current through P.L. 112-240, enacted January 2, 2013.

This House Office of the Legislative Counsel web page is intended for the use of House members and committees; the link may not work outside of congressional offices. To email a compilation to a constituent, download the PDF and send as an attachment.

P.L. 111-148, Patient Protection and Affordable Care Act (Government Printing Office, March 23, 2010, 124 Stat. 119)
<http://www.gpo.gov/fdsys/pkg/PLAW-111publ148/pdf/PLAW-111publ148.pdf>

Unlike the unofficial compilation above, this is the official publication of the ACA as it passed on March 23, 2010. However, this does not reflect current law, as ACA has since been amended by several subsequent laws, including P.L. 111-152, Health Care and Education Reconciliation Act of 2010, <http://www.gpo.gov/fdsys/pkg/PLAW-111publ152/pdf/PLAW-111publ152.pdf>.

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