

Enrolling in Coverage Through the New Health Insurance Marketplaces



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Providing Legal Support to the
Aging Advocacy Network

- <http://www.nlrc.aoa.gov/>
- Collaboration developed by the Administration for Community Living/ Administration on Aging between the National Consumer Law Center, National Senior Citizens Law Center, American Bar Association Commission on Law and Aging, Center for Elder Rights Advocacy, and the Center for Social Gerontology
- See upcoming trainings, conferences, and webinars
- Request a training
- Request consulting
- Request technical assistance
- Access articles and resources



Presenter – Elaine Saly

- Health Policy Analyst at Families USA, a national non-profit, non-partisan organization dedicated to the achievement of access to high-quality, affordable health care for all Americans.
- At Families USA, Ms. Saly works on policy issues related to implementation of the Affordable Care Act, specializing in access to coverage through health insurance marketplaces, outreach and enrollment assistance, and consumer information.
- Prior to joining Families USA in 2010, Ms. Saly held positions at national and local low-income advocacy organizations in the District of Columbia and NY.

Moderator – Claire McAndrew

- A Senior Health Policy Analyst at Families USA, a national nonprofit, nonpartisan organization dedicated to the achievement of high-quality, affordable health coverage and care for all.
- Ms. McAndrew specializes in private insurance issues, including those related to the implementation of the Affordable Care Act. She has written numerous reports on topics such as health insurance exchanges, private market regulations, and wellness incentive programs. In addition, Ms. McAndrew frequently serves as a source of information for policymakers and members of the media on private insurance and health reform issues.
- Ms. McAndrew provides extensive policy assistance to state-based organizations and participates frequently in speaking engagements around the country. In addition, she serves as Vice-Chair of the Standing Advisory Board to the District of Columbia Health Benefit Exchange.
- Prior to joining Families USA in 2007, Ms. McAndrew held positions in mental health and children's health advocacy organizations.



Claire McAndrew

Senior Health Policy Analyst



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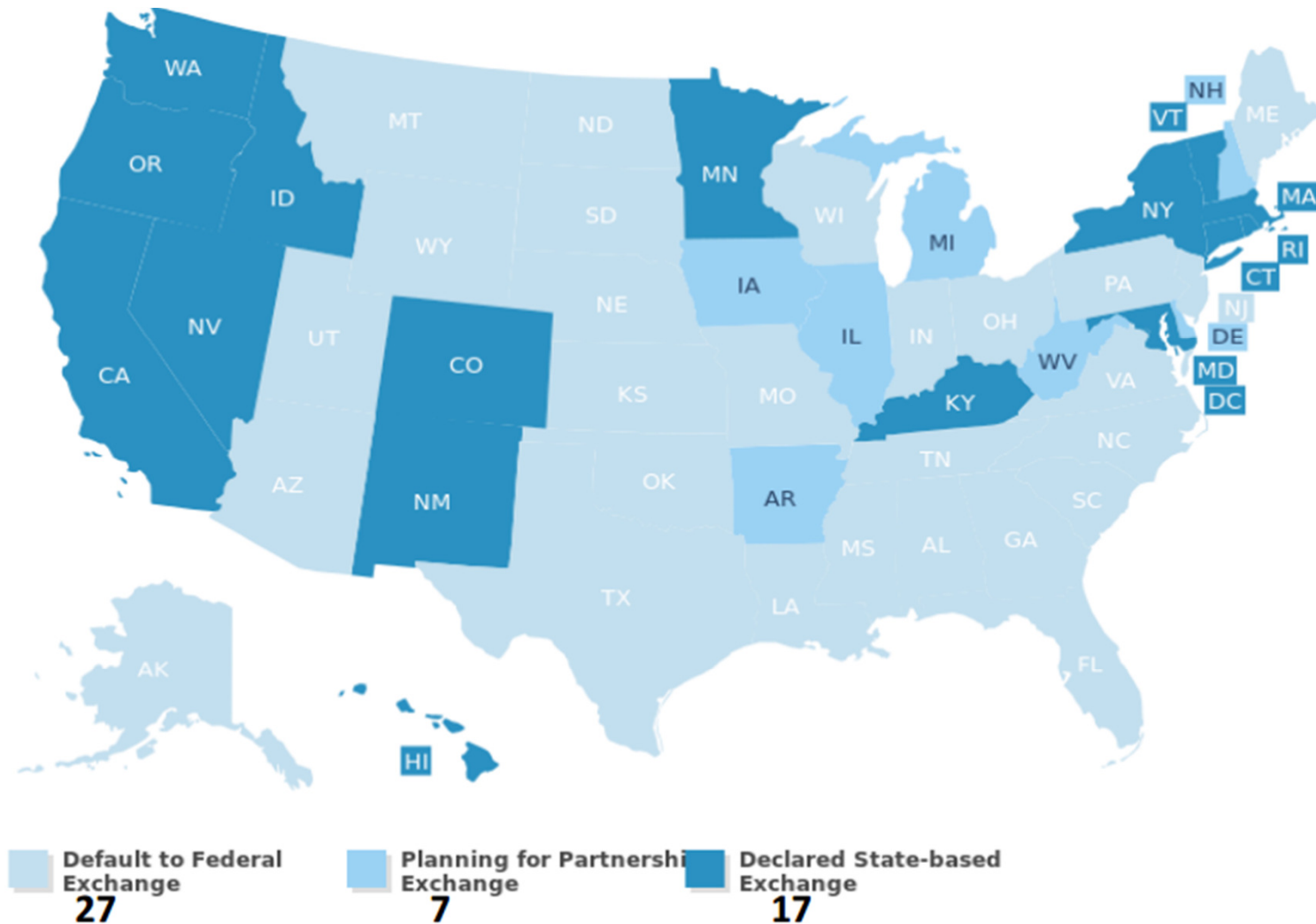
New Consumer Protections

- No denials or exclusions based on health status
- No gender rating
- Ban on unfair coverage recessions
- Ends annual and lifetime limits
- Young adults can stay on family health plan
- External appeal rights
- Free preventive services

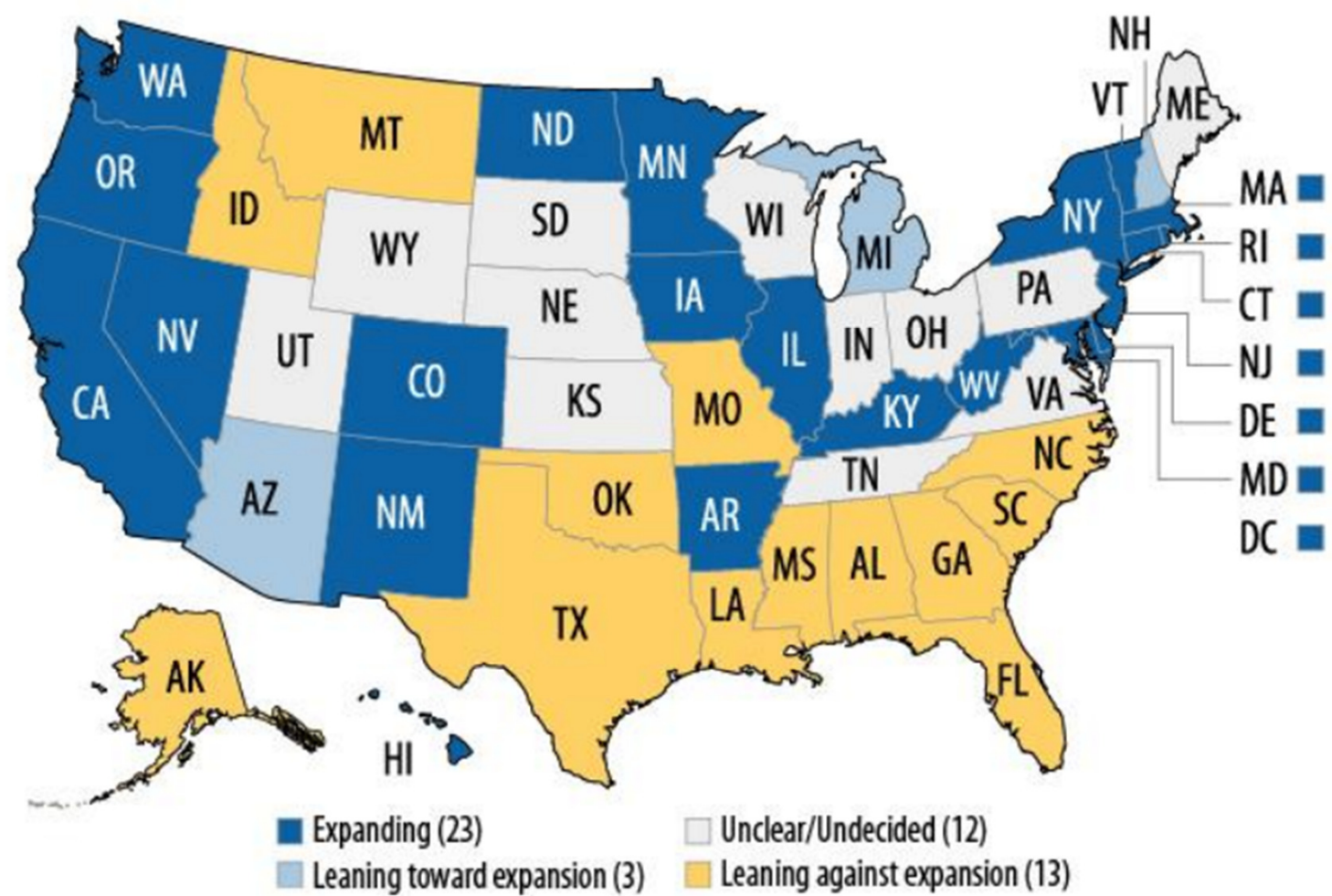
Expands Access to Coverage

- New Marketplaces (“exchanges”)
 - Private “qualified health plans”
 - Comprehensive coverage
 - Clear, comparative plan information
 - Help to lower costs
 - Small business marketplace (SHOP)
- Expansion of Medicaid eligibility
 - Federal funding for eligibility up to 138% FPL
 - State flexibility in defining benefits

Every State Will Have a Marketplace



State Progress on Expanding Medicaid



Source: Center on Budget and Policy Priorities

Making it easier to get and keep coverage

Whether or not a state expands Medicaid, all states will:

- Streamline eligibility requirements to make coverage transitions seamless
- Use electronic data verification
- Automatic renewal annually
- Eliminate in-person interview requirements and asset test for income-based eligibility

Coordination of Public & Private Coverage

One application to apply for:

- Medicaid
- CHIP
- Private coverage and financial assistance

Multiple ways to apply:

- Online
- By phone
- In-person
- By mail

Application for Health Coverage & Help Paying Costs (Short Form)

THINGS TO KNOW



Use this application to see what coverage you qualify for

- Affordable private health insurance plans that offer comprehensive coverage to help you stay well
- A new tax credit that can immediately help pay your premiums for health coverage
- Free or low-cost insurance from Medicaid or the Children's Health Insurance Program (CHIP)



Who can use this application?

Single adults who:

- Aren't offered health coverage from their employer
- Don't have any dependents and can't be claimed as a dependent on someone else's tax return

NOTE: If any of the following apply, you need to fill out a different form to make sure you get the most benefits possible:

- You're married or have dependent children.
- You were in the foster care system, and you're under age 26.
- You have items that can be deducted from your income. If your only deduction is student loan interest, you **can** use this form.
- You're American Indian or Alaska Native.



Apply faster online

Apply faster online at HealthCare.gov.

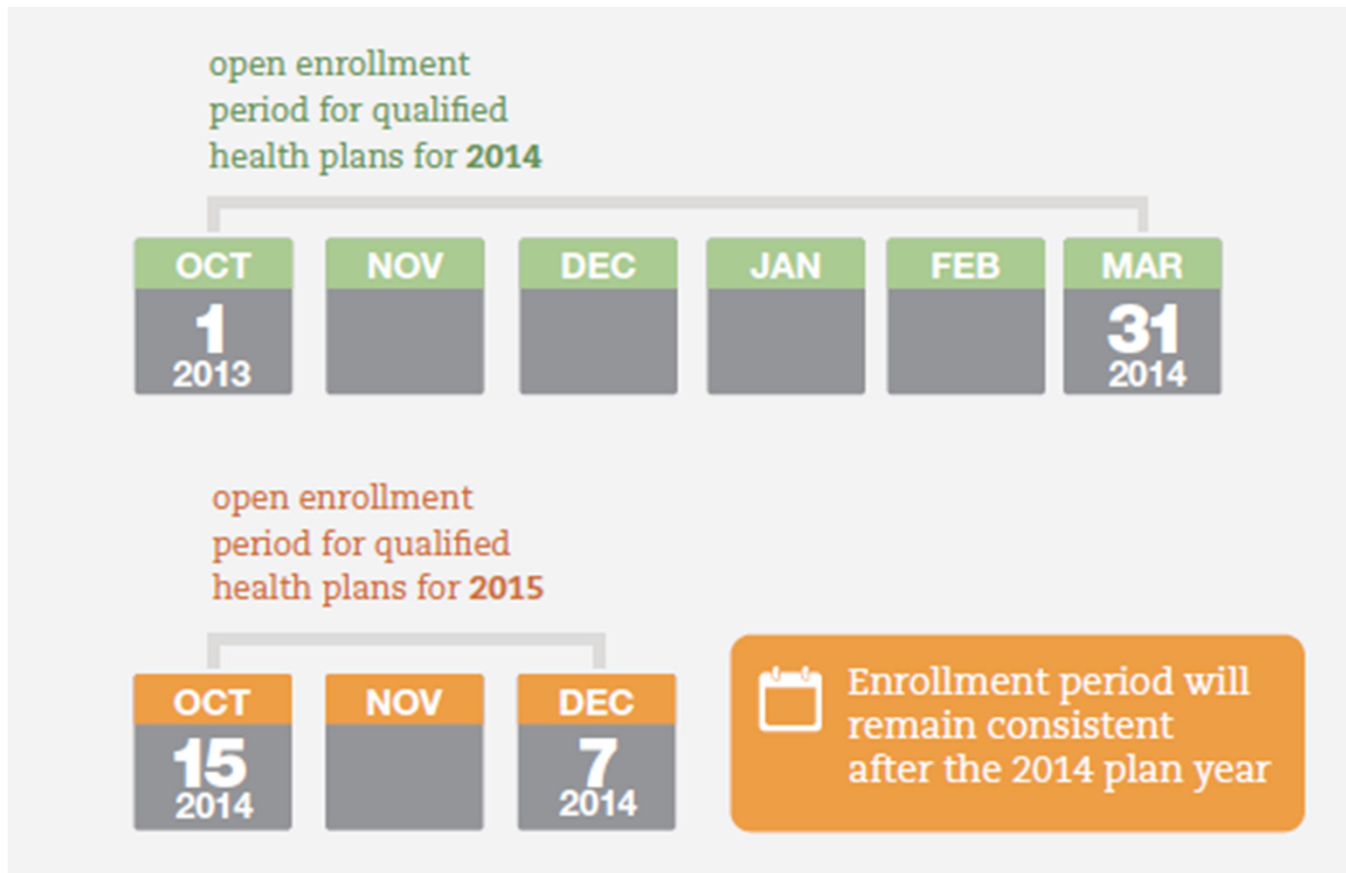


What you may need to apply

- Your Social Security number (or document number if you're a legal immigrant)
- Employer and income information (for example, from paystubs, W-2 forms, or wage and tax statements)

Paper coverage applications: <http://www.cms.gov/CCIIO/>

Enrollment Periods



Consumers who want to enroll outside of an open enrollment period must qualify for a special enrollment period.

Individual Responsibility Payment

- Requirement to have “minimum essential coverage” or pay penalty
- Small penalty in the first year, more in years after
- Can qualify for exemption in a number of circumstances

Q & A on Overview

- New consumer protections
- Introduction to Marketplace
- Medicaid expansion
- New coverage application
- Individual responsibility payment

Next we'll talk about how the ACA makes coverage more affordable.

Making Coverage More Affordable

- Premium tax credits to help lower the cost of premiums based on income
- Cost-sharing reductions to reduce out-of-pocket costs for people with lower incomes
- Caps on annual out-of-pocket costs based on income

Premium Tax Credits

- Size of tax credit is based on annual household income as a percentage of poverty
- Three ways to use the tax credit:
- **Take credit in advance:** Credit goes directly to health plan to lower monthly premium
 - Based on estimation of income and family size at time of enrollment
- **Take credit at tax time:** Receive full annual credit as part of tax refund
 - Must pay full health insurance premiums up front
- **Take some credit in advance, some at tax time:**
 - Take only a portion of credit up front to lower premium

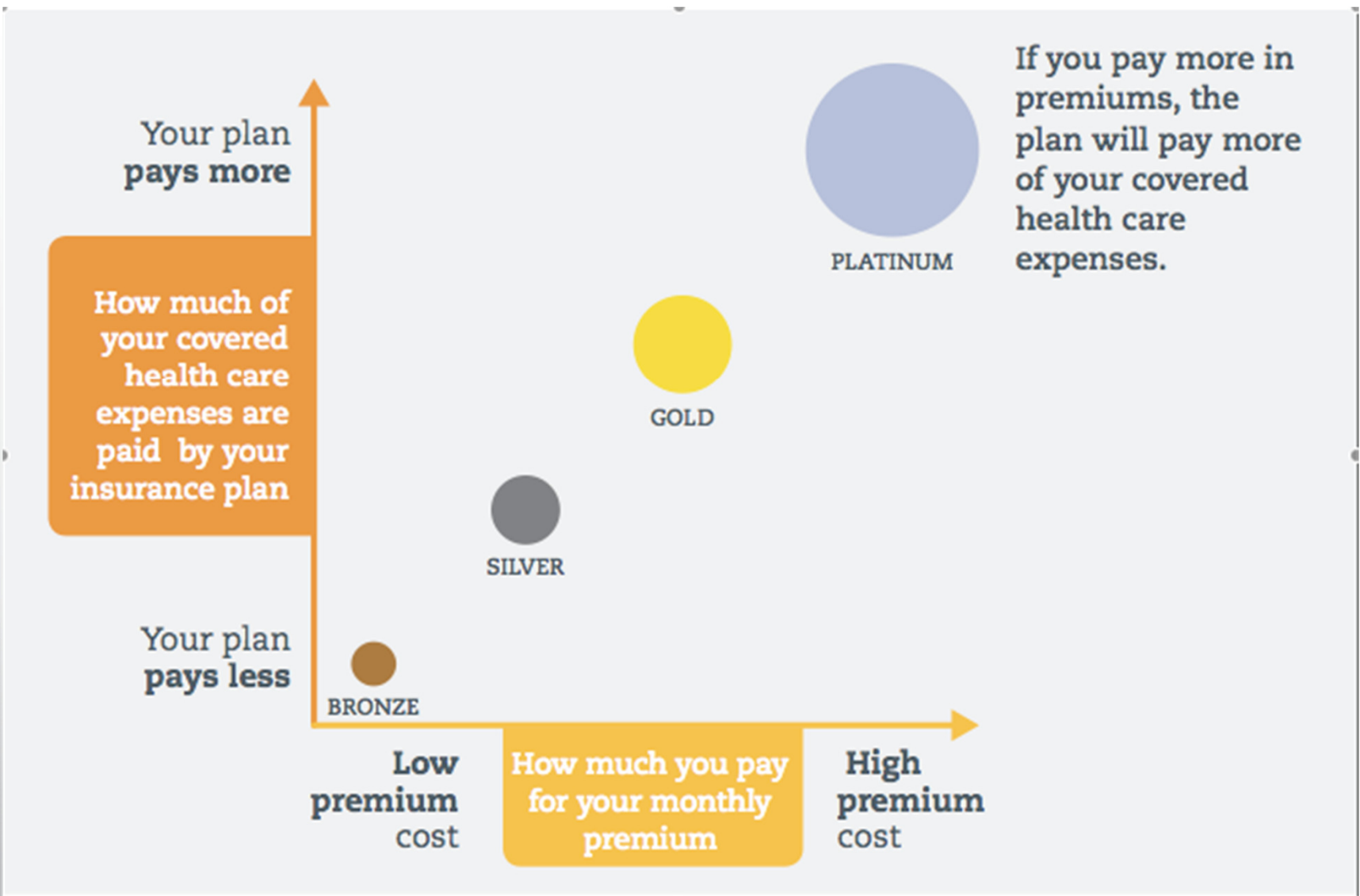
Tax Credit Reconciliation

People who opt to take some or all of their tax credit in advance must recalculate their credit at the end of the year.

Reconciliation:

- IRS recalculates credit based on total annual income and family size *at end of year*
- If too much was taken in advance, people must pay back portion of credit at tax time
- If too little was taken in advance, people get additional portion of credit through tax refund

Levels of Coverage



Cost-Sharing Reductions

People with incomes below 250% of poverty will get extra help paying for medical services in certain plans

- This will reduce the maximum amount that a person with high health care needs would pay out of pocket
- It could reduce the deductible, co-insurance, or copayments in a silver plan, making it more like a gold or platinum plan

Caps on Annual Out-of-Pocket Costs

Income as % of Poverty Level (Shown for a Family of One)	Out-of-Pocket Maximum Cost-Sharing for an Individual (Double for a Family)	Co-Pays/ Co-Insurance/ Deductibles Are Similar to This Metal Level Plan
100-150%	\$2,250	Platinum
150-200%	\$2,250	Gold
200-250%	\$5,200	Silver

Q & A on Coverage Affordability

- Premium tax credits
- Cost-sharing reductions
- Annual caps on out-of-pocket spending

Next we'll talk about eligibility to enroll in coverage through the Marketplace.

Eligibility Factors at a Glance

Eligibility Factors	Medicaid	Qualified Health Plan with Premium Tax Credit	Qualified Health Plan without Premium Tax Credit
Household Income	Household income up to Medicaid eligibility level for MAGI group	Household income above 100% and below 400% of poverty	
Citizenship/Immigration Status	Citizen or qualified alien (pregnant women and children under 21 also eligible if lawfully present)	Citizen or lawfully present	Citizen or lawfully present
Residency	State residency	State residency	State residency
Incarceration Status		Not incarcerated	Not incarcerated
Tax Filing Status		Agrees to file taxes (jointly if married)	
Job-Based Coverage		No offer of coverage through employer, family member's employer, or government	

New Rules for Counting Income

- New MAGI (Modified Adjusted Gross Income) rules based on how IRS calculates tax income
- MAGI will be used to determine eligibility for:
 - Most Medicaid recipients—parents/caretaker relatives, children, pregnant women, childless adults aged 21-64—based on current monthly income
 - All individuals applying for private coverage through the Marketplace based on projected annual income

New Rules for Determining Household

- New way of defining household based on who is on the same tax return (if family files taxes)
 - Special rules for certain family situations and families who do not file taxes
- Provide information for everyone who:
 - Is on the same tax return as the person applying (if they file taxes)
 - Lives with the person who is applying

Non-MAGI Medicaid

- Screening questions in application will identify people who might qualify: aged, blind, people with disabilities, individuals who need long-term services and supports, Medically-needy/spend-down beneficiaries
- Information transferred to Medicaid agency for applicants who may qualify
- Because determinations (for example, disability) take longer, applicants can enroll in what their income qualifies them for while they wait

Job-Based Coverage

Job-based coverage must be:

- 1. Minimum value:** plan covers at least 60% of health care expenses on average
- 2. Affordable:** premiums for an individual employee must cost no more than 9.5% of household income

Affordability for family members with offer through employer still based on employee-only coverage

If an offer of job-based coverage does not meet standards, applicant may be eligible for tax credits.

Getting Information from Employers

- Marketplace website will have a form that people can print and ask their employer to fill out with insurance information
- This form should be completed before beginning the coverage application

Q & A on Eligibility

- Eligibility factors
- MAGI and Non-MAGI populations
- Job-based coverage

Next we'll talk about how consumers will get assistance with enrollment.

Consumers Will Need Help

- Lack of awareness
- Many are unfamiliar with or have negative associations with applying for insurance
- Marketplace enrollees will have more diverse needs
- While new eligibility rules help, they also raise new questions
- Individuals with lower incomes experience more frequent changes in circumstance

Help Enrolling in Coverage

- Call center
- Navigator program
- In-person assisters
- Insurance agents and brokers
- Certified Application Counselors
- Community health centers

Navigators and In-Person Assisters

- Trained, community-based experts
- Grant-funded entities that have existing relationships with eligible populations
- Cannot have a conflict of interest
- Information and assistance must be impartial
- Provide culturally and linguistically appropriate, accessible assistance
- Privacy and security requirements
- Make referrals for assistance outside of scope

Certified Application Counselors

- Training and certification to provide application assistance
- No funding through ACA
- Application released for organizations in states with federally-facilitated marketplaces
- Must disclose information on conflicts of interest
- Privacy and security requirement

Information for Medicare Beneficiaries

- The health coverage Medicare beneficiaries have will not change because of the ACA
- Selected preventive services are now free
- “Doughnut hole” will continue to shrink
- Medicare beneficiaries will not have to pay individual responsibility payment

Questions

Contact information

Stateinfo@familiesusa.org

(202) 628-3030

Resources

Families USA: <http://familiesusa.org/>

HHS consumer marketplace website:
<http://www.healthcare.gov/>

HHS marketplace resource website:
<http://marketplace.cms.gov/>