Health Insurance Marketplace 101

Find health care options that meet your needs and fit your budget.

January 2015
The Health Care Law

- In March 2010, President Obama signed the Affordable Care Act into law generally requiring
  - Young adults up to 26 can stay on their parents’ plan
  - Additional drug coverage for people with Medicare
  - More preventive services with no cost-sharing
  - Lifetime limits removed from essential health benefits
What Changed on January 1, 2014?

- Discrimination due to pre-existing conditions or gender is generally prohibited
- Annual limits on insurance coverage of essential health benefits were eliminated for most plans
- Advance payments of the premium tax credit are available
- More people are eligible for Medicaid (in some states)
- Coverage through the Health Insurance Marketplace began
What Is the Health Insurance Marketplace?

• Part of the Affordable Care Act
• Where qualified individuals and families directly compare private health insurance options
  – Known as qualified health plans (QHPs)
  – Can directly compare on the basis of price, benefits, quality, and other factors
• Also known as Exchanges
The Marketplace...

• It’s a way to shop for health coverage
  – An individual or family can explore every qualified health plan in their area
  – With one application you can learn all the programs for which you qualify

• Most people receive help paying premiums
  – 90% of people who were uninsured will qualify for savings on health insurance

• It offers clear options with apples-to-apples comparisons
  – All health insurance plans in the Marketplace present their price and benefit information in plain language
Consumers saved nearly $1.2 billion on their premiums
Nearly 7 in 10 are paying $100 a month or less for coverage
The average monthly premium dropped from $346 before tax credits to $82 after tax credits across all plans
   – An average of $69 per month after tax credits for silver plans (the most popular plan type) with a choice of 5 health insurers and 47 plans
266 insurers in the Marketplace by state, offering over 19,000 Marketplace plans across all rating areas
Insurance companies must spend at least 80 cents of each premium dollar on health care, improvements to care, or provide a refund
   – In 2012, 8.5 million consumers received half a billion dollars in refunds (average refund of $100 per family)
Marketplace Establishment

- Each state can decide to
  - Create and run its own Marketplace
  - Engage actively with the federal government in operating certain Marketplace functions
  - Have a Marketplace established and operated by the federal government
Qualified Health Plans Cover Essential Health Benefits

- Essential health benefits include at least these 10 categories:
  - Ambulatory patient services
  - Emergency services
  - Hospitalization
  - Maternity and newborn care
  - Mental health and substance use disorder services, including behavioral health treatment
  - Prescription drugs
  - Rehabilitative and habilitative services and devices
  - Laboratory services
  - Preventive and wellness services and chronic disease management
  - Pediatric services, including oral and vision care (pediatric oral services may be provided by stand-alone plan)
How Qualified Health Plans Can Vary

• Some plans may cover additional benefits
• You may have to see certain providers or use certain hospitals (networks)
• The premiums, copayments, and coinsurance are different
• Quality of care data will be available
• The coverage level can vary within each plan
• Some special types of plans are structured differently
  – Like high-deductible (catastrophic) plans
Health Plan Categories

Lowest Premiums  Highest Premiums
Highest Out-of-Pocket Costs  Lowest Out-of-Pocket Costs

<table>
<thead>
<tr>
<th>Coverage Level</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bronze</td>
<td>60%</td>
</tr>
<tr>
<td>Silver</td>
<td>70%</td>
</tr>
<tr>
<td>Gold</td>
<td>80%</td>
</tr>
<tr>
<td>Platinum</td>
<td>90%</td>
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Covered Percent of Total Cost of Care Covered

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Eligibility in the Individual Marketplace

- Marketplace eligibility requires you to
  - Live in its state or service area, and
  - Be a U.S. citizen or national, or
  - Be a non-citizen who is lawfully present in the U.S. for the entire period for which enrollment is sought
  - Not be incarcerated
    - Can apply for Marketplace coverage if pending disposition of charge
    - Can apply for Medicaid/CHIP at any time
The premium tax credit may be taken as advance payments to lower monthly premium costs, or as a refundable credit on the tax return you file.

Eligibility is based on:

- Household income and family size
  - Household income between 100% to 400% FPL
    - $23,550 – $94,200 for a family of 4 in 2013
    - $23,850 – $95,400 for a family of four in 2014
- Obtaining health insurance through the Marketplace
- Ineligibility for government-sponsored coverage, affordable employer-sponsored insurance, or certain other minimum essential coverage
Who is Eligible for Cost-Sharing Reductions?

- Lower costs on deductibles, copayments, and coinsurance
- To be eligible, you must
  - Have income at or below 250% FPL
    - $58,875 annually for a family of 4 in 2013
    - $59,625 annually for a family of 4 in 2014
  - Receive the premium tax credit
  - Enroll in a Marketplace Silver-level plan
- Members of federally recognized Indian tribes
  - Don’t have to pay cost-sharing if household income is at or below 300% of the federal poverty level (FPL)
    - Up to around $70,650 for a family of 4 ($88,320 in Alaska) in 2013
    - Up to around $71,550 for a family of 4 ($89,460 in Alaska) in 2014
The health care law offers a new opportunity for states to expand Medicaid to
- Adults 19 – 64 with incomes up to 133% FPL
  - $16,105 per year for individual
  - $32,913 per year for family of 4
The law ensures Medicaid coverage for children in families with household incomes up to 133% FPL
A new simplified way of calculating income to determine Medicaid/CHIP eligibility
  - Known as Modified Adjusted Gross Income (MAGI)-based method
Starting in 2014, Everyone Must:

1. Have minimum essential coverage
   - They’re already covered and don’t need to do anything.

2. Have an exemption from the shared responsibility payment (fee)
   - They don’t have to get coverage and won’t have to pay a fee for not having coverage.

3. Pay a fee (shared responsibility payment)
   - They should consider getting coverage. If they don’t, they’ll pay a fee.
When Can You Enroll?

1. Annual Open Enrollment Period
   – November 15 – February 15
   – Coverage can begin as early as January 1 if you enroll by December 15

2. Special enrollment periods (SEP) for certain circumstances during the year

   - Have a change in your job? Loss of job-based coverage
   - Have a change in your income?
   - Turn 26 and leave a parent’s plan?
   - Move to a new residence? Out of your plan’s service area
   - Have a baby or adopt a child?
   - Get married or divorced?

You can apply for Medicaid and Children’s Health Insurance Program coverage at any time.
How the Marketplace Works

Create an account
First provide some basic information. Then choose a user name, password, and security questions for added protection.

Apply
Next you’ll enter information about you and your family, including your income, household size, other coverage you’re eligible for, and more.
Visit HealthCare.gov to get a checklist to help you gather the information you’ll need.

Pick a plan
Next you’ll see all the plans and programs you’re eligible for and compare them side-by-side.
You’ll also find out if you can get lower costs on monthly premiums and out-of-pocket costs.

Enroll
Choose a plan that meets your needs and enroll!
Coverage starts as soon as January 1, 2014.

May apply or change plan during Special Enrollment Period due to certain life changing events.
4 Ways to Get Marketplace Coverage

**Over the phone**
Call the Marketplace Call Center at 1-800-318-2596. TTY users should call 1-855-889-4325. A customer service representative can help you apply and enroll over the phone.

**Online**
Visit HealthCare.gov to apply and enroll on the web.
CuidadoDeSalud.gov for Spanish.

**In-person help**
Get help from people in your community trained and certified to help you apply and enroll in the Marketplace. Visit Localhelp.HealthCare.gov, or call the Marketplace Call Center.

**Paper application**
If you don’t have a computer or time to apply and enroll over the phone, you can fill out a paper application. Call the Marketplace Call Center to get an application or download a copy from HealthCare.gov.
In-Person Assistance

• Marketplace in-person help is available
  – Navigators
  – Non-Navigator assistance personnel
  – Certified application counselors
  – Issuer application assisters
  – Enrollment assistance contractor
  – Agents and brokers
  – To find help in your area, go to Localhelp.HealthCare.gov

Visit Marketplace.cms.gov for information on your organization becoming a Champion for Coverage
From Coverage to Care

Written materials and videos available in English and Spanish

Marketplace.cms.gov/c2c.

January 2015
The Marketplace is a way for qualified individuals and families to find and buy health insurance

- Open enrollment for 2015 coverage is from November 15, 2014 – February 15, 2015
- You may enroll or change plans during a Special Enrollment Period if you have certain life changing events

States have flexibility to establish their own Marketplace

Individuals and families may be eligible for lower costs on their monthly premiums and out-of-pocket costs

There is help available

If you don’t agree with a decision made by the Marketplace, you may be able to file an appeal
Get the latest resources to help people apply, enroll, and get coverage

Welcome to the official Marketplace information source for assisters and outreach partners.

On this site, you’ll find information about assister programs and tools to help existing and new Health Insurance Marketplace consumers.

Access the 5 Steps to Staying Covered Through the Marketplace (for those already covered in the Marketplace)

marketplace.cms.gov/outreach-and-education/5-steps-to-staying-covered.pdf
Want More Information about the Marketplace?

- Stay connected
  - Sign up to get email and text alerts at HealthCare.gov/subscribe
    - CuidadoDeSalud.gov for Spanish
  - Updates and resources for organizations are available at Marketplace.cms.gov
  - Twitter@HealthCareGov
  - Facebook.com/Healthcare.gov