Health Insurance Education: Options for you and your family

The Basics
How we can help

This presentation will provide the facts to

- Clear up confusion.
- Help you comply with the law.
- Understand your health insurance options.
- Help you make informed health insurance decisions.
What you will learn

- What the Affordable Care Act (ACA) is
- Basics of how health insurance works
- Information on the Health Insurance Marketplace
  - Who can enroll?
  - How can you enroll?
  - When can you enroll?
- Options to help pay for insurance
- Health insurance options outside the Marketplace
- Ways to learn more
Affordable Care Act (ACA)

Among other things, the ACA

- Provides new consumer protections.
- Imposes new requirements for businesses.
- Provides tax credits for many consumers who must now have health insurance coverage.
Missouri’s Health Insurance Marketplace

- Marketplace for **Missouri’s private insurance companies** to sell coverage to individuals and employers
- Like a farmers market or online travel site for health insurance
- Allows for side-by-side comparison of plans, which gives information about costs and services covered
- Can enroll during Nov. 1, 2017 – Dec. 15, 2017 Open Enrollment period
Consumer protections

- Children can be on a parent’s plan to age 26.
- Guaranteed coverage: Cannot be denied based on pre-existing conditions.
- Guaranteed renewal: Automatic if you do not choose a new plan.
- No yearly or lifetime coverage limits.
- Cannot be canceled if you get sick.
- No cost to most people for preventive care.
10 benefits health insurance plans must include

1. Care before and after your baby is born
2. Outpatient care — care you get without being admitted to a hospital
3. Trips to the emergency room
4. Inpatient care — treatment during hospital stays
5. Care for mental health and substance use disorders — includes behavioral health treatment, counseling and psychotherapy
6. Prescription drugs
10 benefits health insurance plans must include

7. Services and devices to help you recover if you are injured or have a disability or chronic condition — includes physical and occupational therapy, speech-language pathology and rehabilitation

8. Lab tests

9. Preventive care to keep you healthy — includes counseling, screenings, vaccines and care for managing chronic diseases such as diabetes

10. Pediatric care for children up to age 19 — includes dental and vision care
ACA consumer protection: Free preventive care

Free visits to your doctor to prevent illness or detect a problem at an early stage, when treatment can work best.

Free services include

- Common vaccines such as flu, hepatitis A and B, pneumonia, shingles
- Screenings for cancer and other diseases
- Yearly wellness visits (physicls, well-woman visits)
How does health insurance help you?

Access to health insurance can help you:

- Get quality health care.
- Get free preventive care such as cancer screening.
- Plan your health care costs.
- Avoid a fee or penalty for being uninsured.
- Avoid personal bankruptcy from health care costs from an accident or unexpected illness.
Penalty or fee for not having insurance

- **2014**
  - Whichever is greater:
    - $95 per adult and $47.50 per child
    - (up to $285 flat fee for a family)
  - OR 1% of family income above filing threshold.

- **2015**
  - Whichever is greater:
    - $325 per adult and $162.50 per child
    - (up to $975 flat fee for a family)
  - OR 2% of family income above filing threshold.

- **2016 and beyond**
  - Whichever is greater:
    - $695 per adult and $347.50 per child
    - (up to $2,085 flat fee for a family)
  - OR 2.5% of family income above filing threshold.
You won’t face the penalty if you have

- Insurance through your job or your spouse’s job
- Private insurance
- Medicare
- Medicaid, as long as you qualify
- Military insurance for military personnel and families (VA, TRICARE or CHAMPVA)
- Indian Health Service benefits
- COBRA
Health insurance terms to know

- What you pay to use insurance:
  - Premium
  - Out-of-pocket costs

- Factors affecting cost:
  - Deductible
  - Copayment
  - Coinsurance
  - Out-of-pocket maximum
  - In-network or out-of-network services
Premium

A premium is a fee you must pay for you or your family to have a health insurance plan.

Your premium

- Is usually paid once a month.
- Must be paid to keep your coverage, whether you use it or not.
- Can vary greatly in amount.
Out-of-pocket costs are the dollars you pay for health care services out of your own pocket.

- Usually includes deductibles, copayments and coinsurance.
- Does not include monthly premiums.
Premiums and out-of-pocket costs

Factors:
- Networks
- Coinsurance
- Out-of-pocket maximum
- Copayment
- Deductible
Choosing a plan

1. Consider the medical needs of you and your family.
2. Pick the plan that best provides for your medical needs **AND** has affordable out-of-pocket costs.
3. Pick a premium that works with your monthly budget.
   • If you buy a Marketplace plan, you may be able to get help paying for premiums and out-of-pocket costs.
4. Ask for help if you don’t understand something.
Levels of Marketplace coverage

*Platinum plans are only available in some areas of Missouri.*
Who can buy a Marketplace plan?

You can buy a Qualified Health Plan from Missouri’s Marketplace if you

- Live in Missouri
- Are a U.S. citizen or resident and will be lawfully present in the U.S. during the entire time you have insurance coverage
- Are not in prison.
Who the Marketplace could benefit

- Part-time employees, the under-employed or the unemployed
- The self-employed
- Independent contractors
- Seasonal employees
- Employees of businesses not offering insurance
- Would-be retirees between age 55 and 64
- Anyone with unaffordable or inadequate coverage
- People on COBRA
You do not have to buy insurance through the Marketplace

- You can still buy health insurance outside of the Marketplace
- Big difference between plans sold inside and outside the Marketplace:
  - The only way to get lower costs on monthly premiums based on your income is through the Marketplace
How can you enroll or change plans in the Marketplace?

You can enroll in 4 ways:

1. Online through https://healthcare.gov — only if you have an email address.
2. By phone at 800-318-2596.
3. By mail with a paper application.
4. In person by visiting a trained Navigator, certified application counselor (CAC), or an insurance agent or broker.
How can you enroll online?

Who can help you enroll or change plans in the Marketplace?

- Navigators
- Certified Application Counselors (CACs)
- Insurance agents
- Insurance brokers

You should never be charged for help enrolling in the Marketplace.
What do you need to choose or renew your Marketplace plan?

To enroll, you need this information for every person in your family who will be covered by insurance:

- Social Security number
- W2 or other proof of income — such as 1099 or 1040 forms
- Annual income information from your tax return
- Information about employer insurance plan, if offered
- An email address to apply online
Beware of scams

- Things to watch for
  - Targeting of seniors
  - Medical discount cards
  - Plans outside the Marketplace
  - Selling other unnecessary products with the insurance plan

- Tips for avoiding or dealing with scams
  - Don’t give personal information to anyone you don’t know.
  - Protect Social Security numbers and health insurance cards.
  - Ask for a phone number or identification.
  - Use healthcare.gov

- If it sounds too good to be true, it probably is.
Reporting scams

To identify or report scams

- Missouri Department of Insurance: http://insurance.mo.gov
### When can you choose or change your Marketplace plan?

<table>
<thead>
<tr>
<th>Date you buy a plan</th>
<th>Date your coverage starts</th>
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<tr>
<td>Nov. 1, 2017 – Dec. 15, 2017</td>
<td>Jan. 1, 2018</td>
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<tr>
<td>Please Note – Open Enrollment Period for 2017 has been shortened to 6 weeks</td>
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Special Enrollment Periods in the Marketplace

Enroll or change plans at any time if

- You gain, lose or become a dependent.
- You gain lawful presence in the U.S.
- The Marketplace made enrollment errors.
- Your Qualified Health Plan violates a provision of the plan you have.
- You move to another state or another area of Missouri.
- You gain or lose your eligibility status for premium tax credit or cost-sharing reductions.
- You lose your health insurance due to a job loss.
- You graduate college and lose student insurance.
Will you qualify for financial help?

After applying to the Marketplace, you will learn if you or your family members qualify for:

- A premium tax credit to help pay monthly premiums based on income and family size
- Cost-sharing discounts to lower deductibles, coinsurance and copayments
- MO HealthNet, Missouri’s Medicaid program
- MO HealthNet for Kids, Missouri’s Children’s Health Insurance Program
Spenddown and the ACA

- Individuals who have high Medicaid Spenddown amounts may still qualify for enrollment with ACA

- The ACA requires that most people have Minimum Essential Coverage (MEC) or pay a penalty on their taxes (Shared Responsibility Payment – but this requirement could change)

- When a consumer has MEC from a source outside of the Marketplace, they are not eligible for financial help - Advance Premium Tax Credits (APTC) or Cost-Sharing Reductions (CSR) - through the Marketplace.
Spenddown and the ACA

- If an individual loses MEC, they qualify for a Special Enrollment Period (SEP) to enroll in coverage through the Marketplace.

- Just because a person is eligible for the Spenddown program does not mean they have MEC. Spenddown is considered MEC when a Spenddown-eligible consumer meets their spenddown and receives coverage.

- Simply being eligible for Spenddown does not give someone MEC.
Spenddown and the ACA

- Consumers may choose to review their insurance options under the ACA and enroll, if a plan meets their health insurance needs – and if they do not regularly meet their Spenddown.

- Once a Spenddown-eligible consumer enrolls in Marketplace coverage with APTC and CSR, the Marketplace usually asks the consumer to send in proof that they are not eligible for Medicaid coverage.

- If the consumer does not send in this documentation, then the Marketplace may remove the consumer’s APTC and CSR.
Spenddown and the ACA

- The consumer should send in some proof that they are eligible for the Medicaid Spenddown program.

- This might be their original Spenddown approval letter, or the monthly letter the State sends the consumer to remind them that they need to pay their spenddown in order to get coverage.

- The consumer should also show that they have not met their spenddown.
Spenddown and the ACA

- The Marketplace has accepted consumer attestations of this fact, or a printout from the State showing that they have not met their spenddown.

- For more information on this important topic, you can access the [An Assisters Guide to Helping Adults With Disabilities](http://www.enrollmentloop.org/sites/default/files/helpimages/Missouri_Assisters%20Guide%20Final_Aults%20with%20Disabilities.pdf)
Ways to learn more

- Navigators and Certified Application Counselors
- Consumer call center open 24 hours a day: 800-318-2596 or 855-889-4325 using TTY/TDD
- Agents and brokers
- Cover Missouri: http://covermissouri.org
- MU Extension: http://extension.missouri.edu/insure
Can I get free local help?

Local Navigators, CACs, and agents or brokers can help with Marketplace enrollment.

To find local contact information, see the search tools at

- http://CoverMissouri.org/find/find.php
- Or Call 1(800)466-3213 Cover Missouri Call Center to find assistance in your area
Questions?
Primaris Foundation’s Health Insurance Marketplace Assistance Program

- 573-817-8338
- Email: insurancecounseling@primaris.org
- Website: http://primaris.org/counseling
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