Delaware’s Health Insurance Marketplace: Update on Activity

Delaware Health Care Commission, October 2, 2014
Secretary Rita Landgraf, Department of Health and Social Services
Agenda

• Medicaid update
• Consumer updates
  • Identity and Income Verification
  • Eligibility and plan renewals
  • Tax filings and the Marketplace
  • Marketplace application for 2015
• SHOP Early Access
• Marketplace Guide update
• Outreach update
• Marketing update
• Plan Management update
• Status Update: QHP Standards for Plan Year 2016
• Key dates
As of September 30, 2014, 8,390 individuals have enrolled in Medicaid through the expansion.

This is an approximately 6% increase since August 31st.

22,787 Delawareans have enrolled in health care coverage through expanded Medicaid and the Marketplace since October 1, 2013.
Identity and Income Verification

- CMS has been contacting consumers with either identity or income verification issues.
- Consumers with identity verification issues who did not submit the requested documents are scheduled to lose Marketplace coverage as of Sept. 30.
- Consumers with income verification issues who did not verify their current income information may see a change in their premium reflected beginning October 1, as the FFM will adjust any tax credits or cost sharing based on the information available to them on Sept. 30.
- If consumers submit documents and their inconsistency is resolved, they can request retroactive coverage.
Eligibility and Plan Renewals

• CMS recently released final guidance and additional materials to clarify the process for renewing Marketplace eligibility and coverage for 2015
  • All qualified individuals that submitted an application to the FFM in 2014 will receive a standard notice with information about the renewal process
  • Consumers with certain special circumstances will receive additional communication from the Marketplace with next steps
Eligibility and Plan Renewals

• Process has been set up to ensure simple, automatic plan renewals, whenever possible, for consumers that wish to remain enrolled in their existing Qualified Health Plans

• Consumers that want to receive an updated eligibility determination will need to return to their Marketplace account in order to do so

• Changes in income, family size/composition, aging out, etc. may all result in adjustments to eligibility and/or tax credits
Eligibility and Plan Renewals

• Even if a consumer’s income remained the same, he/she may qualify for a higher amount of tax credit in 2015 based on updated premiums, a change in age rating and/or the use of 2014 Federal Poverty Levels to calculate subsidies

• IMPORTANT: Consumers enrolled in Marketplace plans should visit the Marketplace to make any necessary updates as they happen. This includes changes to income, family size, contact information and any other items that may impact Marketplace and tax credit eligibility
Eligibility and Plan Renewals

• For plans not being continued, issuers are in the process of sending initial notifications to alert consumers
  • Additional notices will be sent when 2015 plan information is available to inform consumers of new plan options
• Plan renewal notices will be sent prior to open enrollment, in accordance with Federal guidance
• Current enrollees with questions about coverage should first contact the issuer for more information
The IRS recently released draft tax forms and guidance related to the Marketplace. Specific types of consumers that will need to use these forms when filing taxes include:

- Marketplace enrollees receiving Premium Tax Credits and/or Cost Sharing Reductions must complete Form 8965.
- Consumers claiming an exemption from the Individual Shared Responsibility Payment (penalty) must file Form 8962.
- Draft forms are available for viewing at:

Comments on these draft forms can be submitted to the IRS online at [http://www.irs.gov/uac/Comment-on-Tax-Forms-and-Publications](http://www.irs.gov/uac/Comment-on-Tax-Forms-and-Publications)
Delaware is in the process of developing a statewide strategy for assisting consumers with tax filing questions

- The strategy will leverage existing, trusted resources to educate consumers appropriately
- Marketplace Guides will provide information about exemptions, the individual shared responsibility payment (penalty) and other Marketplace-related items, but will not be able to provide tax advice
- Tax preparers will be trained in how to complete the appropriate forms to ensure accurate filing
Penalty

Under the ACA, if individuals do not have minimum essential coverage or receive an exemption, they will be subject to an individual shared responsibility payment—a penalty.

• In 2014, the penalty is $95 per uninsured adult ($47.50 per child) or 1% of household income, whichever is higher. (Only the amount of income above the tax filing threshold, $10,150 for an individual, is used to calculate the penalty.) This will be paid on an individual’s 2014 taxes (filed in 2015).

• In 2015, it’s 2 percent of income or $325 per uninsured adult ($162.50 per child under 18), whichever is higher. This will be paid on an individual’s 2015 tax return (filed in 2016).

• In 2016 and beyond, it will be 2.5% of your income or $695 per uninsured adult in your household ($347.50 per child under 18), whichever is higher.

It’s important for individuals to remember that even if they pay the penalty, they still don’t have any health insurance coverage and are responsible for 100% of the cost of their medical care.
New Marketplace Application for 2015

In September, CMS announced that a new, streamlined Marketplace application would be released for the 2015 open enrollment period

• The shorter application will be used by new consumers who have simple household situations and have not previously applied for Marketplace coverage
• Consumers will be asked a series of initial screening questions to determine if the simple application is appropriate for them
• CMS estimates that 70 percent of new applicants will use the streamlined application
SHOP Early Access

• Delaware is one of five states gaining early access to the online SHOP portal, which will go live nationally on November 15
• This early access will allow employers and agents/brokers to access key portions of the portal starting in late October
• CMS is conducting an outreach and information session in Dover for agent/brokers, small business owners, assisters
• Invitations will be sent in the next week
Marketplace Guide Update

• Marketplace Guides will be available throughout 2015 open enrollment to assist consumers with new enrollments as well as renewals

• Guides will offer enrollment support at over 70 locations throughout Delaware -- daily at some sites and weekly or less frequently at others

• At next month’s meeting, we will provide maps of the various assistance locations across the state

• As always visit www.ChooseHealthDE.com for a full, up-to-date list of enrollment activities and events
Outreach Update

In early September, the Marketplace team conducted regional meetings and invited community partners and other stakeholders.

Five meetings were held across the state – in Rehoboth Beach, Milford, Seaford, Dover and New Castle.

- 82 people attended including providers, agents/brokers, issuers, consumer advocates, and community organizations.
- Another round of meetings is planned for early December.

September 5th, Rehoboth Beach
Open Enrollment Kick-Off Event

The Marketplace will hold a public event to kick-off the open enrollment period

- Friday, November 14th at 11:00am
- Delaware Technical Community College, Stanton Campus
Marketing update

• The marketing team continues to refine messaging for the open enrollment campaign and create materials to support consumer education and awareness
• Messaging will focus on the penalty/law, deadlines, Essential Health Benefits, availability of financial assistance, and Marketplace Guide locations
• The team has met with members of the DE Hispanic Commission to get feedback and insights on culturally-competent Spanish-language marketing and outreach
• We will present the final materials to HCC in November
# Plan Management Update

## QHP Review/Certification Activity

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<thead>
<tr>
<th>QHP Review Processes</th>
<th>Proposed Dates</th>
<th>Status</th>
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<tbody>
<tr>
<td>Deadline for Issuer to submit final QHP Application information to the State via SERFF. <em>(Data lock-down)</em></td>
<td>9/4/2014</td>
<td>Complete</td>
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<tr>
<td>Delaware submits recommendations for QHP certification and associated Issuer/QHP Application information to HHS via SERFF <em>(2nd SERFF-to-HIOS Data Transfer)</em></td>
<td>9/5/2014 – 9/10/2014</td>
<td>Complete</td>
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<tr>
<td>FFM completes re-review of plan data and Delaware recommendations</td>
<td>9/22/2014</td>
<td>Complete</td>
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<td>Issuers review data on FFM web portal and address data errors. Delaware supports CMS during the Limited Data Correction Window. <em>(Data changes must be pre-approved by CMS and the State.)</em></td>
<td>9/24/2014-10/6/2014</td>
<td>On Track</td>
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## QHP Agreement / Final Certification

- QHP Agreements signed;  
- QHP data finalized; and  
- HHS notifies State and all Issuers of QHP Certification decision;  

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## Open Enrollment

- Consumer Open Enrollment period  

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<th>11/15/2014 – 2/15/2015</th>
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Draft 2016 QHP Standards were released to the public on September 4, 2014, beginning a 14-day public comment period

- Received comments from 15 individuals/organizations including: providers, issuers, industry advocates, consumer advocates, a State agency, and a research organization

- Final standards will be presented to HCC in November for a vote in December

- On track to achieve our goal of publishing 2016 standards by the end of 2014
Summary of Comments on 2016 QHP Standards

- Many comments supported efforts to strengthen consumer access and protections
- Received most response on network adequacy standards
  - Comments reflected various perspectives and highlighted the need to balance increased value vs. potential cost increases
- Some comments raised issues that are already reviewed as part of DOI’s Market Conduct QHP monitoring and oversight regarding unfair trade practices, such as
  - Monitoring plan design to ensure that cost-sharing is not structured in a way that would discourage enrollees from using a FQHC as opposed to a PCP
  - Ensuring that hospitals receive reimbursement for the reasonable and customary value for emergency services performed out-of-network
- Some comments will be easily addressed through clarification of language, such as
  - Noting what standards apply to medical plans vs. stand-alone dental plans
  - Clarifying whether licensed and out of state providers could provide telemedicine services
    - DOI verified that the law allows for that

Workgroup is meeting to review all comments and is reaching out to stakeholders for clarification on certain items
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<th>Date</th>
<th>Milestone</th>
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<tr>
<td>November 14, 2014</td>
<td>Open Enrollment Kick-off Event 11:00am Delaware Technical Community College, Stanton Campus</td>
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<tr>
<td>November 15, 2014</td>
<td>Open enrollment for coverage in 2015 begins</td>
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<tr>
<td>December 15, 2014</td>
<td>Deadline to enroll for coverage to begin on January 1, 2015</td>
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<tr>
<td>February 15, 2015</td>
<td>Open Enrollment for coverage in 2015 ends</td>
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Thank you!