

ACA Enrollment

Presentation for Healthcare Georgia Foundation

April 23, 2014

What happened in the first open enrollment?

➤ **Consumer Experience**

- When it works, it works well, when it doesn't, it is not pretty
- For those eligible for tax credits, insurance options were affordable and consumers could choose the plan that worked for them
- For those in the coverage gap, there was a lot of confusion, frustration, and anger

➤ **Examples:**

- A family of 4 (35 year old parent and three kids) living in Fulton county making 25,000 a year would be eligible for \$197/mo tax credit and the kids would be eligible for PeachCare. They could get the cheapest silver level plan for \$22/mo with a \$500 deductible and \$750 out of pocket max
- That same family of 4 only making \$20,000 a year is NOT eligible for subsidies and the cheapest bronze plan is \$194/mo with \$6300 deductible and out of pocket max.



What happened in the first open enrollment?

➤ Trends

- My personal experience saw a large number of consumers under 250% FPL which meant that they were eligible for additional cost-sharing benefits of a lower deductible and out of pocket max
- No one family is “typical”—lots of issues with determining house size, which incomes to include and exclude, identity verification
- As with most things, people waited to the last minute
- Overall, people who were eligible for tax credits walked away happy

What happened in the first open enrollment?

➤ **Plan choice and availability in GA**

- Depending on where you lived, your options were dramatically different
 - Going back to the example, the family of 4 living in Fulton county making \$25,000/yr had 58 plans to choose from from 4 insurance providers (Humana, Kaiser, PeachState, BCBS)
 - That same family living in Sumter county only has the choice between 14 plans, all of which are with BCBS with the cheapest silver plan being \$23/mo (compared to \$22) but with a \$418 tax credit vs. \$197 tax credit (because the overall plans cost more in this region)
- Most plans were HMO with the exception of a few Humana and Alliant plans
- Provider networks and capacity are anticipated to be the next big thing to focus on with upcoming enrollment periods



What happens now?

➤ Who can enroll now?

Special Enrollment Period Qualifying Events	
Loss of minimum essential coverage	Material contract violations by Qualified Health Plans
Gaining or becoming a dependent	Gaining or losing eligibility for premium tax credits or cost-sharing reductions
Gaining lawful presence	Relocation resulting in new or different Qualified Health Plan selection
Enrollment errors of the Marketplace	Exceptional circumstances

Without a qualifying event, people will have to wait until the next open enrollment period which will be **November 15, 2014 thru February 15, 2015**

IMPORTANT: There is no special enrollment period for Medicaid—that can happen at any time!



Connecting Georgians to Coverage

Coalition partners were sub-contracted by Seedco	
Center for Black Women's Wellness	Boat People SOS
Mental Health Georgia	Parent 2 Parent
Healthy Mothers Healthy Babies	The Health Initiative with Georgia Equality
GA Refugee Health and Mental Health	Quality Medicare
Urban Health Initiative of Grady Hospital	Spring Creek Health Cooperative
Jewish Child and Family Services	Latin American Association
Georgians for a Healthy Future	Georgia Watch



Government Funded Resources in GA

- Seedco was funded for 21.25 FTE navigators
- University of Georgia was funded for 10 FTE Navigators based out of 10 extension site offices
- HRSA funds supported approximately 63 Certified Application Counselors based out of federally qualified health centers across the state
- CMS funded approximately 20 enrollers

Technology for Coordination and Data Collection

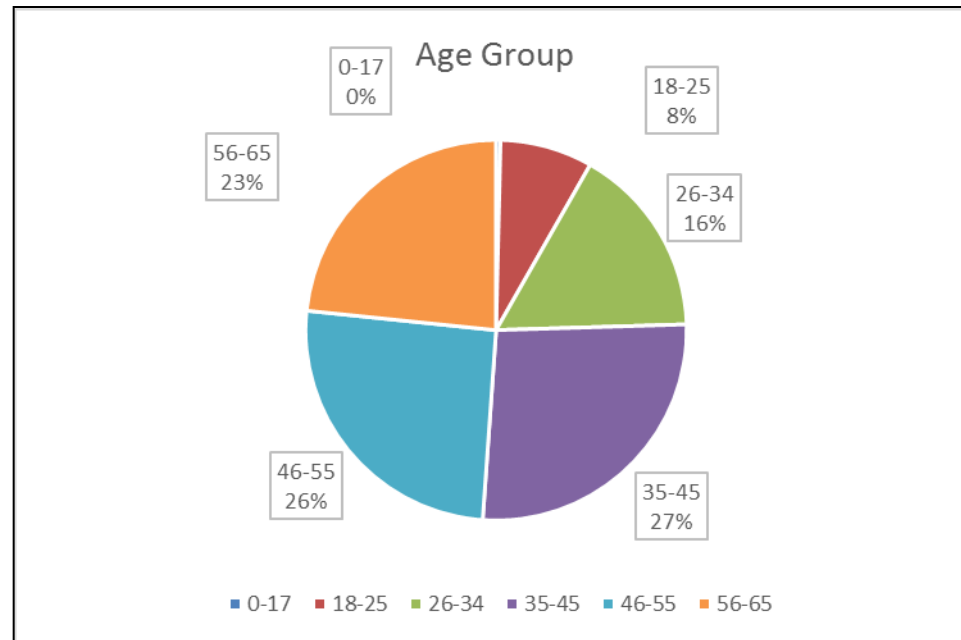
Resources:

- ✓ Salesforce
- ✓ Wiggio Calendar
- ✓ Google email group

Challenges:

- ✓ Restrictions placed upon Navigators by HHS regarding data that could be collected
- ✓ No detailed information sharing from healthcare.gov or HHS

Highlights from Open Enrollment



Highlights from Open Enrollment

First 3 digit zip code	% of total
300- Atlanta East	36.9%
303-Atlanta Main	22.3%
301- Atlanta Northwest	13.9%
307- Chatanooga South	4.1%
317- Albany	4.1%
315- Waycross	3.9%
304- Swainsboro	2.5%
398- Albany West	2.3%
302- Atlanta South	2.2%
310- Macon Vicinity	2.2%
314-Savannah Main	1.7%
305- Gainesville	1.6%
316- Valdosta	1.0%
306- Athens	0.6%
313- Savannah Vicinity	0.4%
309- Augusta Main	0.2%
308- Augusta West	0.1%
318- Columbus East	0.1%
311- Atlanta Main 2	0.1%
319- Columbus Main	0.04%
312- Macon Main	0.00%



Highlights from Open Enrollment

Previous Health Condition?	% of total
Yes	22%
No	78%

Qualified for tax credit/ subsidy?	% of total
Yes	71%
No	29%

Consumers assisted whose primary language is not English	% of total
English	81%
Spanish	7%
Other	12%

Race	% of total
Black or African American	55.3%
White	32.2%
Vietnamese	8.6%
Other Asian	1.7%
Asian Indian	1.2%
Chinese	0.4%
American Indian or Alaska Native	0.3%
Filipino	0.2%
Korean	0.1%
Native Hawaiian	0.0%
Other Pacific Islander	0.0%



Focus for Navigators Currently

- Special event enrollment
- Health literacy education
- General education and outreach
- Medicaid referrals
- Preparing strategy, establishing event schedules and preparing for the next open enrollment

Spring Creek Health Cooperative

Rural Perspective:

Getting Up & Running In SW Georgia

- Slow start but that was expected
- Territory was large so planning was very important to successfully cover 16 counties
- Concentrated on Outreach during the first 3 months with flyers, emails, Facebook, community meeting, colleges
- Finally enrolled 1st consumer the last week of December



Challenges in Rural Georgia

- Of course- Healthcare.gov
- Verifying Identity was our biggest challenge and this was due to the large number of self-employed consumer in our region (Farmers, small businesses, etc.)
- Consumers had to make multiple appointments to complete enrollment so they had to be dedicated to enrolling
- BCBS is the only insurance option and the costs were high, especially the out of pocket expense for Bronze plan

Challenges

- Consumer's did not understand health insurance so Navigator spent a lot of time explaining how insurance works
- Consumers has a lack of urgency since the penalty was only \$95 they would rather pay the fine
- Consumers said they wanted to wait and see what happens during the 2015 enrollment
- People did not vote for this law

Successes in Rural Georgia

- Gaining the trust of the hospital
- Having the hospital sponsor large events in their communities
- Running ads in the local newspapers with the Navigator's direct phone number
- Partnering with Family Connection & their community partners gave us an instant connection with consumers
- Our staff lives in Rural Georgia
- Word of Mouth – best advertisement no cost