What is the Affordable Care Act?

The Patient Protection and Affordable Care Act, also known as the Affordable Care Act (ACA), was signed into law in March 2010.

Made significant changes to the way health insurance is provided and paid for in the United States:

- No denying coverage based on pre-existing condition
- New requirement that nearly everyone have coverage
- Creation of “marketplaces” for consumers to shop and enroll in health plans
What is Covered California?

• Health insurance marketplace established under the federal Patient Protection and Affordable Care Act

• Individuals and small businesses can compare different health insurance companies and learn whether they qualify for federal subsidies and tax credits

• Individuals are able to find out if they are eligible for low-cost or no-cost health coverage through Medi-Cal

• Part of the state of California and is overseen by an independent board appointed by the governor and the Legislature
Eligibility

Who is eligible?
- All legal residents of California.

Who is not?
- Undocumented immigrants.
- Currently incarcerated individuals.
# Financial Assistance: Premium Assistance

<table>
<thead>
<tr>
<th>Number of People in Your Household</th>
<th>Annual Household Income</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Medi-Cal</strong></td>
</tr>
<tr>
<td>1</td>
<td>$0 - $15,856</td>
</tr>
<tr>
<td>2</td>
<td>$0 - $21,404</td>
</tr>
<tr>
<td>3</td>
<td>$0 - $26,951</td>
</tr>
<tr>
<td>4</td>
<td>$0 - $32,499</td>
</tr>
<tr>
<td>5</td>
<td>$0 - $38,047</td>
</tr>
</tbody>
</table>
## Metal Tiers

<table>
<thead>
<tr>
<th></th>
<th>Paid by Health Plan</th>
<th>Paid by You</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BRONZE</strong></td>
<td>60%</td>
<td>40%</td>
</tr>
<tr>
<td><strong>SILVER</strong></td>
<td>70%</td>
<td>30%</td>
</tr>
<tr>
<td><strong>GOLD</strong></td>
<td>80%</td>
<td>20%</td>
</tr>
<tr>
<td><strong>PLATINUM</strong></td>
<td>90%</td>
<td>10%</td>
</tr>
</tbody>
</table>

Bronze plans have the lowest premiums but highest out-of-pocket costs. This means the consumer will have to pay a higher share of costs when he/she uses services.

People who qualify for a cost-sharing reduction must enroll in a silver-level plan to take advantage of it.

Premiums are higher for plans that pay more out-of-pocket medical costs (Premium, Gold).

Platinum plans have the highest premiums but the lowest out-of-pocket costs. This means the plan will cover more of the costs when a consumer uses services.
## 2015 Standard Benefit Designs by Metal Tier

<table>
<thead>
<tr>
<th>Coverage Category</th>
<th>Bronze</th>
<th>Silver</th>
<th>Gold</th>
<th>Platinum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive Care Copay*</td>
<td>No cost</td>
<td>No cost</td>
<td>No cost</td>
<td>No cost</td>
</tr>
<tr>
<td>Primary Care Visit Copay</td>
<td>$60 for 3 visits</td>
<td>$45</td>
<td>$30</td>
<td>$20</td>
</tr>
<tr>
<td>Specialty Care Visit Copay</td>
<td>$70</td>
<td>$65</td>
<td>$50</td>
<td>$40</td>
</tr>
<tr>
<td>Urgent Care Visit Copay</td>
<td>$120</td>
<td>$90</td>
<td>$60</td>
<td>$40</td>
</tr>
<tr>
<td>Emergency Room Copay</td>
<td>$300</td>
<td>$250</td>
<td>$250</td>
<td>$150</td>
</tr>
<tr>
<td>Lab Testing Copay</td>
<td>30%</td>
<td>$45</td>
<td>$30</td>
<td>$20</td>
</tr>
<tr>
<td>X-Ray Copay</td>
<td>30%</td>
<td>$65</td>
<td>$50</td>
<td>$40</td>
</tr>
<tr>
<td>Generic Medicine Copay</td>
<td>$15 or less</td>
<td>$15 or less</td>
<td>$15 or less</td>
<td>$5 or less</td>
</tr>
<tr>
<td>Annual Out-of-Pocket Maximum</td>
<td>$6,250 individual and $12,500</td>
<td>$6,250 individual and $12,500</td>
<td>$6,250 individual and $12,500</td>
<td>$4,000 individual and $8,000</td>
</tr>
<tr>
<td></td>
<td>Maximum Individual and Family</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*In most situations, this is true for one visit per year.*
**Financial Assistance: Enhanced Silver Plans**

<table>
<thead>
<tr>
<th>Coverage Category</th>
<th>Enhanced Silver 94</th>
<th>Enhanced Silver 87</th>
<th>Enhanced Silver 73</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligibility Based on Income and Premium Assistance</td>
<td>Covers 94% average annual cost</td>
<td>Covers 87% average annual cost</td>
<td>Covers 73% average annual cost</td>
</tr>
<tr>
<td>Single Income Ranges</td>
<td>up to $17,235 (≤150% FPL)</td>
<td>$17,236 to $22,980 (&gt;150% to ≤200% FPL)</td>
<td>$22,981 to $28,725 (&gt;200% to ≤250% FPL)</td>
</tr>
<tr>
<td>Annual Wellness Exam</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Primary Care Visit</td>
<td>$3</td>
<td>$15</td>
<td>$40</td>
</tr>
<tr>
<td>Specialist Visit</td>
<td>$5</td>
<td>$20</td>
<td>$50</td>
</tr>
<tr>
<td>Laboratory Tests</td>
<td>$3</td>
<td>$15</td>
<td>$40</td>
</tr>
<tr>
<td>X-Rays and Diagnostics</td>
<td>$5</td>
<td>$20</td>
<td>$50</td>
</tr>
<tr>
<td>Imaging</td>
<td>10%</td>
<td>15%</td>
<td>30%</td>
</tr>
<tr>
<td>Generic Drugs</td>
<td>$3</td>
<td>$5</td>
<td>$15 or less</td>
</tr>
<tr>
<td>Annual Out-of-Pocket Maximum Individual and Family</td>
<td>$2,250 individual and $4,500 family</td>
<td>$2,250 individual and $4,500 family</td>
<td>$5,200 individual and $10,400 family</td>
</tr>
</tbody>
</table>
10 Essential Benefits

1. Ambulatory patient services
2. Emergency services
3. Hospitalization
4. Maternity and newborn care
5. Mental health and substance use disorder services, including behavioral health treatment
6. Prescription drugs
7. Rehabilitative and habilitative services and devices
8. Laboratory services
9. Preventive and wellness services and chronic disease management
10. Pediatric services
Health Plans Offered

• Health plans offered and rates are based on region
• California divided into 19 pricing regions

- Anthem Blue Cross of California
- Blue Shield of California
- Chinese Community Health Plan
- Health Net
- Kaiser Permanente
- L.A. Care Health Plan
- Molina Healthcare
- Sharp Health Plan
- Valley Health Plan
- Western Health Advantage
Medi-Cal

- If you earn $15,856 or less, you may be eligible for free/reduced insurance under Medi-Cal.

- Applying at Covered California will allow you to see if you’re eligible for Medi-Cal.
Special Enrollment

Qualifying Life Events

- Marriage or entering a **domestic partnership**.
- Having or adopting a child.
- Changing where you live, giving you access to Covered California health insurance plans.
- Losing your health coverage.
- Change in income
- Gaining citizenship, national or lawfully present **status**. Change of status between any of these will not qualify.
Penalties and Exemptions

- If not enrolled by April 15, 2014, you will owe a penalty of **$95 or 1% of income**, whichever is greater.
- If not enrolled in 2015, the penalty increases to **$325 or 2% of income**, whichever is greater.

Exemptions

• Covered CA does not run the exemption process

• Exemption applications are available from the federal government:
  https://www.healthcare.gov/exemptions/

• 8 ways to qualify for an exemption
• 14 additional hardship exemptions
Sample exemptions

You may qualify for an exemption if:

- You’re uninsured for less than 3 months of the year
- The lowest-priced coverage available to you would cost more than 8% of your household income
- You don’t have to file a tax return because your income is too low
- You were homeless.
- You were evicted in the past 6 months or were facing eviction or foreclosure.
- You filed for bankruptcy in the last 6 months.
Important Dates

Open Enrollment:

Special Enrollment:
- Now- November 14th, 2014
- February 16th, 2015-Next open enrollment (Fall 2015)
Dental Plans

- Dental Plans for children are included in Covered CA health plans as a essential benefit
- The family dental plans are option and intended to offer affordable dental coverage for adults
- Dental Plans will be added in early 2015

<table>
<thead>
<tr>
<th>Optional Family Dental Plans</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access Dental Plan</td>
</tr>
<tr>
<td>Anthem Blue Cross</td>
</tr>
<tr>
<td>Blue Shield of California</td>
</tr>
<tr>
<td>Delta Dental of California</td>
</tr>
<tr>
<td>Dental Health Services</td>
</tr>
<tr>
<td>Premier Access</td>
</tr>
</tbody>
</table>
## Pediatric dental coverage

Embedded with Covered CA’s health insurance plans

<table>
<thead>
<tr>
<th>Health Insurance Plan Selected</th>
<th>Pediatric Dental Coverage Embedded into Health Insurance Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anthem Blue Cross of California</td>
<td>Anthem Blue Cross</td>
</tr>
<tr>
<td>Blue Shield of California</td>
<td>Blue Shield of California</td>
</tr>
<tr>
<td>Chinese Community Health Plan</td>
<td>Delta Dental of California</td>
</tr>
<tr>
<td>Health Net</td>
<td>Dental Benefit Providers</td>
</tr>
<tr>
<td>Kaiser Permanente</td>
<td>Delta Dental of California</td>
</tr>
<tr>
<td>L.A. Care Health Plan</td>
<td>Liberty Dental Plan</td>
</tr>
<tr>
<td>Molina Healthcare</td>
<td>California Dental Network</td>
</tr>
<tr>
<td>Sharp Health Plan</td>
<td>Access Dental Plan</td>
</tr>
<tr>
<td>Valley Health Plan</td>
<td>Liberty Dental Plan</td>
</tr>
<tr>
<td>Western Health Advantage</td>
<td>Premier Access</td>
</tr>
</tbody>
</table>
Renewal Process

- In August, members who did not provide consent to verify household income received:
  - A letter asking for authorization to verify household income with the Federal government (NOD 11, code in lower left corner)
  - With consent, Covered California will be able to automatically determine eligibility (Covered California or Medi-Cal) and federal premium assistance amount (APTC)
Renewal Process (cont.)

• Starting in October: Covered California members will be receiving a series of letters specific to renewing their health insurance coverage.

• Members who take no action will be automatically renewed into the same health plan and metal tier for calendar year 2015.

• Members who take no action within 30 days of receipt of the Covered California renewal letter will have their eligibility and premium assistance amount recalculated.
Renewal Process (cont.)

- Five (5) letters specific to renewing coverage for calendar year 2015 include:

  1. Early October - Time to Renew letter
     - Instructions on how to renew coverage
     - Member’s 2014 plan selected and 2014 premium assistance amount
     - Certified Enrollment Counselor or Certified Agent who assisted the member last year

  2. November 1 - Co-branded renewal letter from the health plan
     - Member’s 2014 and 2015 premium amounts and description of difference
     - Member’s 2014 premium assistance amount
     - Directions to the Shop and Compare tool at CoveredCA.com to see the full range of 2015 plans, rates and to calculate net premium
Renewal Process (cont.)

3. Mid-November - 2015 Welcome letter
   • Confirmation of member’s eligibility
   • 2015 premium assistance amount

4. Mid-November - 2015 Congratulations letter
   • Confirmation of the health plan selected
   • Member’s 2015 premium amount and 2015 premium assistance amount

5. Late December - Invoice from the health plan
   • Member’s 2015 monthly net premium
   • Instructions: Premium payments go to the health plan not Covered California
Resources

- Covered CA 101 Deck for presentations
- Job Aid: Contacts and Resources
- Job Aid: Glossary of Terms
Shop and Compare Tool: (website or mobile app) http://www.coveredca.com/shopandcompare/#calculator

Update your mobile application to ensure most updated 2015 rates are utilized
Resources listed under F - I

G) Covered California – FAQs
1. Immigration – FAQs
2. Immigration Spanish – FAQs
3. Student - FAQs
4. Special Enrollment - FAQs
5. Special Enrollment Spanish - FAQs
6. Lawfully Present FAQ

H) Welcome to Answers
1. Young Adults and Students
2. Immigration Status
3. Immigration Status (Spanish)

I) Consumer Resources
1. Covered California FAQs
2. FAQs-Transitions, Conversions, Cancellations
3. FAQs on Application Status
4. Enrollment Deadlines and Payment Dates
5. How do I start using my coverage?
6. Health Plan Reference Guide
7. Medi-Cal Managed Care Health Plan Directory
8. Programs for People living with HIV and AIDS
9. Programs for People living with HIV and AIDS

F) Covered California - Job Aids
1. Guide for creating an Individual Application
2. Job Aids for CEE
3. Job Aids for CEC
4. Report change - Remove a Household member
5. Effect Enrollment date for Applications
6. Add New Individual Link Screen flow
7. Special Enrollment Processing
8. Delegating and Removing Delegation
9. Logging into CoveredCA.com
10. Income pages in CalHEERS
11. Identity Proofing in CalHEERS
12. General immigration notice
13. Citizenship & Lawful Presence - Talking Points
14. Categories of Lawful Presence Documentation
15. Commonly Used Immigration Documents
16. Job Aid: Create an Individual Account
17. Job Aid: Uploading Verification Documents
Outreach Strategies & Tips

• Two person tabling method: one person seeks consumers and sends to other person manning table

• Engage consumers by asking questions that cannot be answered with a yes or no
Data-gathering

- **Upcoming events** (not mandatory)
- **Reporting Activities** (mandatory for CSHA subcontractors)
Questions?
Thank you!