

Affordable Care Act Implementation: What Happens Next?



Health Reform Workgroup Webinar Series September 24, 2013



Webinar Overview

- Introductions
- Presentation
- Q & A after presentation
 - You can submit any questions throughout the webinar and after the presentation via the 'Chat' box.
 - The moderator will read the questions after the presentations.
- Survey
 - Please complete our short survey to give us feedback for the next webinar!







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- Overview of coverage expansion
- Exchange/Marketplaces
- Medicaid Expansion
- Consumer Assistance
- Where to find further resources
- UCEDD Involvement



Victories



- Pre-existing conditions
- Lifetime and annual limits
- Cap on our-of-pocket costs
- Preventive care
- Premium control
- Premium equity
- Young adult coverage
- Rescissions



Coverage

Medicaid Expansion

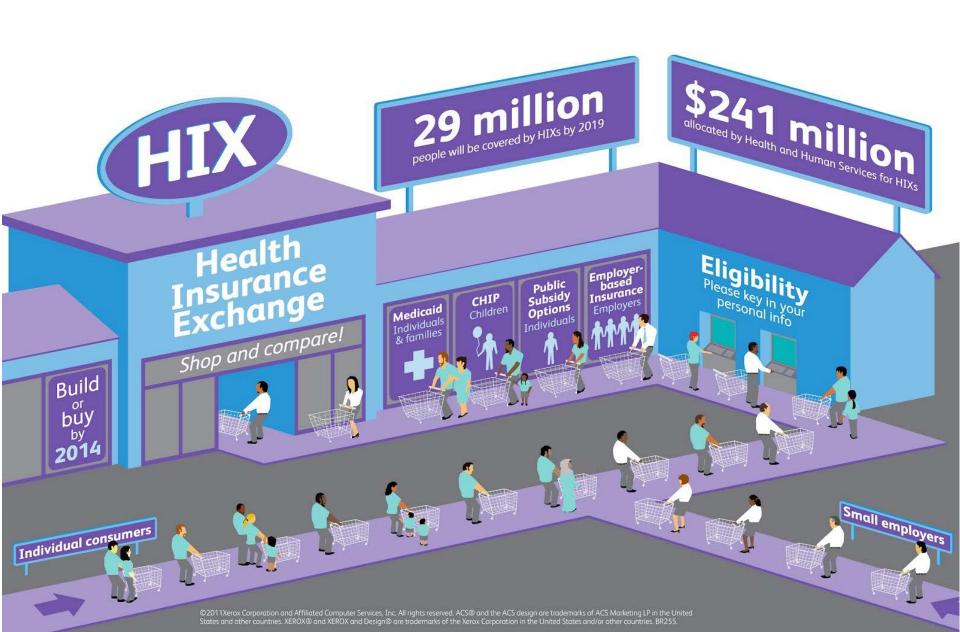


Health Insurance Marketplaces





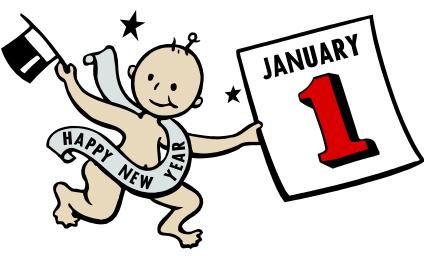
Exchange = Marketplace





Open Enrollment Starts October 1

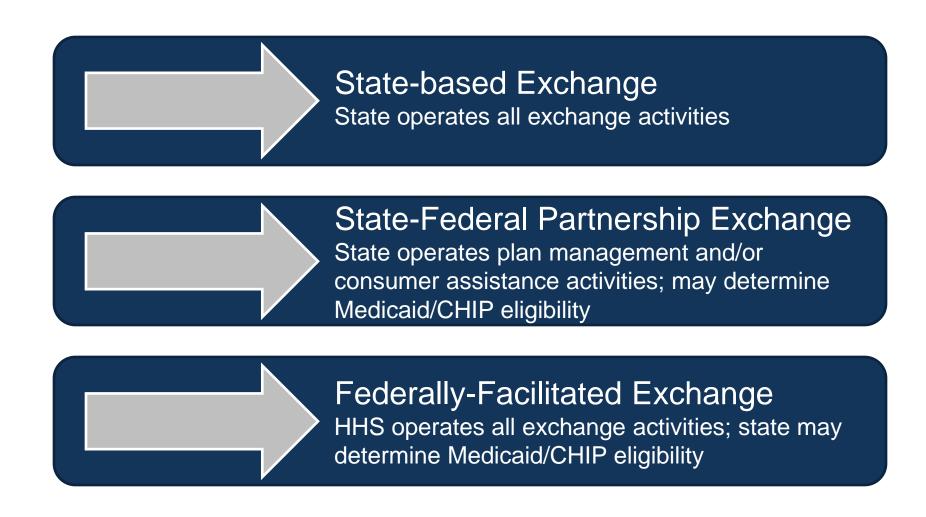
Coverage Starts January 1





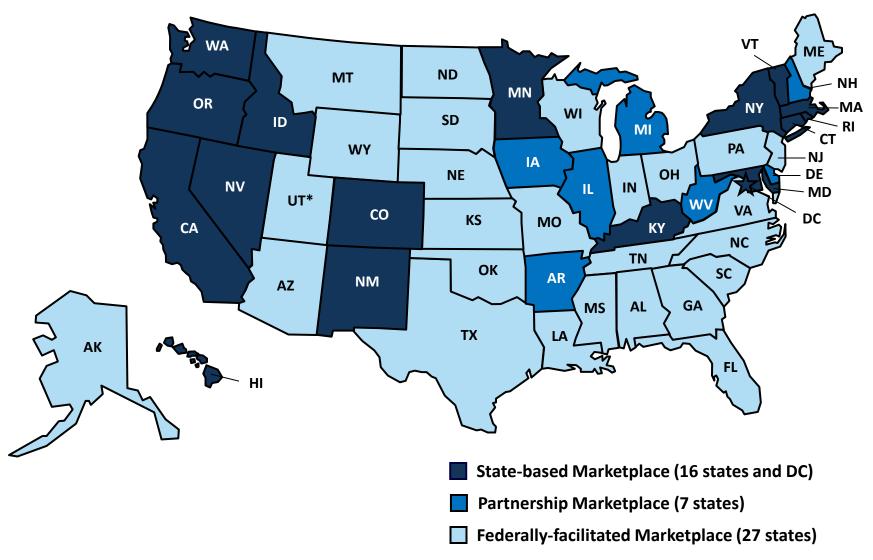
Open Enrollment Ends March 31

Continuum of Exchange Options





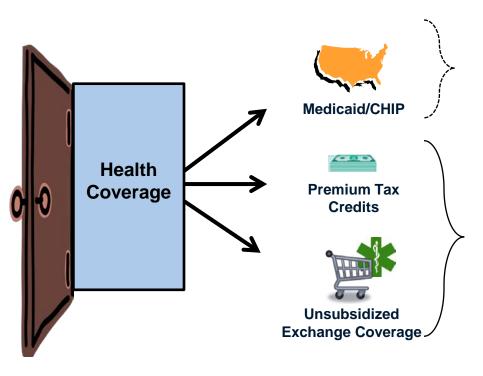
States Health Insurance Marketplace Decisions, May 10, 2013

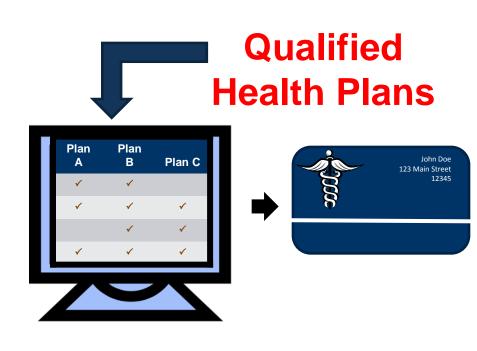


^{*} In Utah, the federal government will run the marketplace for individuals while the state will run the small business, or SHOP, marketplace.



Automated Eligibility Processes Facilitate Enrollment into Coverage Through the Exchange or Public Coverage





Single Door to Health Coverage

Eligibility for Multiple Programs Determined in Real Time Information Provided on Available Plans for Comparison









Enrollment Into Selected Plan





Metal-Level Plans

	P	G	S	B
	Platinum	Gold	Silver	Bronze
Monthly Cost	\$\$\$\$	\$\$\$	\$\$	\$
Cost When You Get Care	\$	\$\$	\$\$\$	\$\$\$\$
Good Option If You	plan to use a lot of health care services	want to save on monthly premiums while keeping your out-of-pocket costs low	need to balance your monthly premium with your out-of- pocket costs	don't plan to need a lot of health care services



Essential Health Benefits

- Ambulatory Patient Services
- 2. Emergency Services
- 3. Hospitalization
- 4. Maternity and newborn care
- 5. Mental health, 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 including oral and vision care



Steps to defining Essential Health Benefits

- 1. Select a **Benchmark Plan**
- 2. Determine if **Essential Health Benefits** are covered
- 3. Supplements benefits not defined in benchmark
 - a) If **Habilitation** is not defined
 - State can define
 - Plan can provide at parity with rehabilitation
 - Plan can determine services and report to HHS
- 4. Substitute benefits to customize coverage



Habilitation and nondiscrimination in health insurance

ACA bars discrimination in health insurance, but final HHS regulations:

- Unclear on habilitation
 - Plans traditionally use "recover" standard
 - Discrimination that "varies from typical plan"
- Leave monitoring up to the states

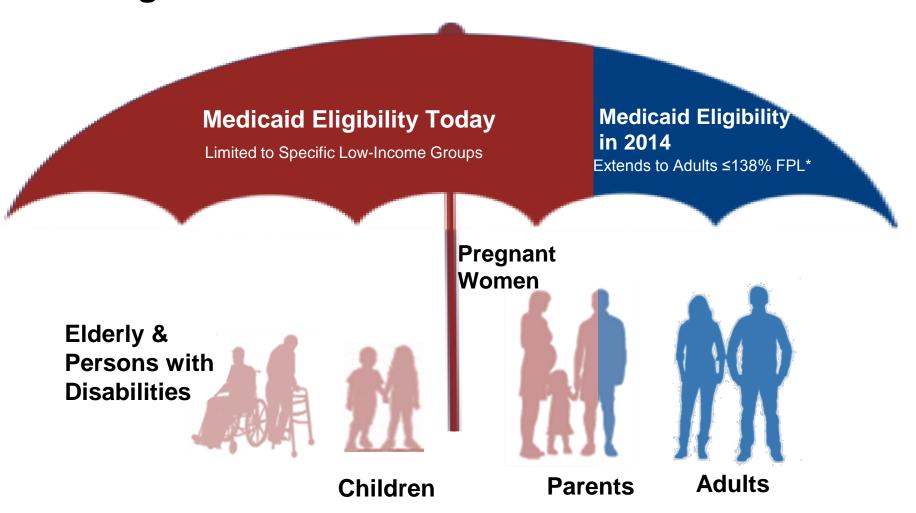


Stuff you should know!

- Your state's EHB benchmark plan
- Your state's habilitation benefit decision
- Your state's antidiscrimination monitoring & enforcement

- ➤ Center for Consumer Information and Insurance Oversight – CMS.gov/CCIIO
- ➤ State Refor(u)m from the National Academy of State Health Policy and RWJF statereforum.org

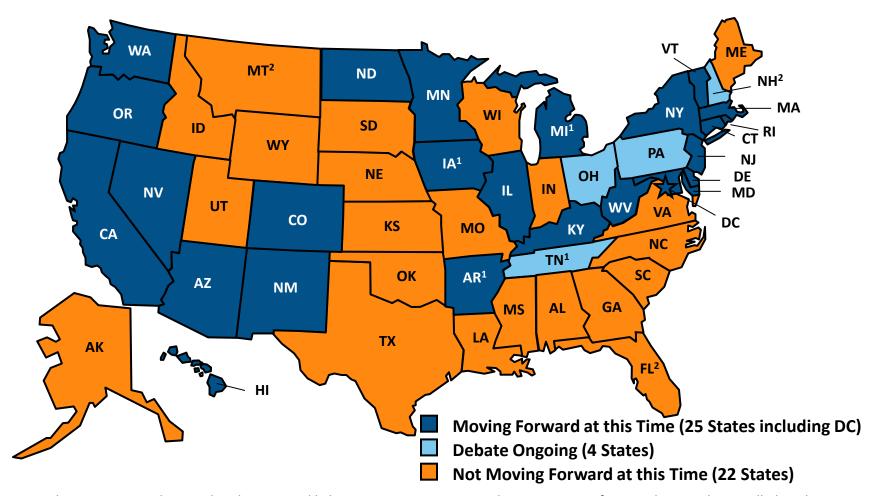
The ACA Medicaid Expansion Fills Current Gaps in Coverage



NOTE: The June 2012 Supreme Court decision in *National Federation of Independent Business v. Sebelius* maintained the Medicaid expansion, but limited the Secretary's authority to enforce it, effectively making the expansion optional for states. 138% FPL = \$15,856 for an individual and \$26,951 for a family of three in 2013.



Current Status of State Medicaid Expansion Decisions, as of September 3, 2013



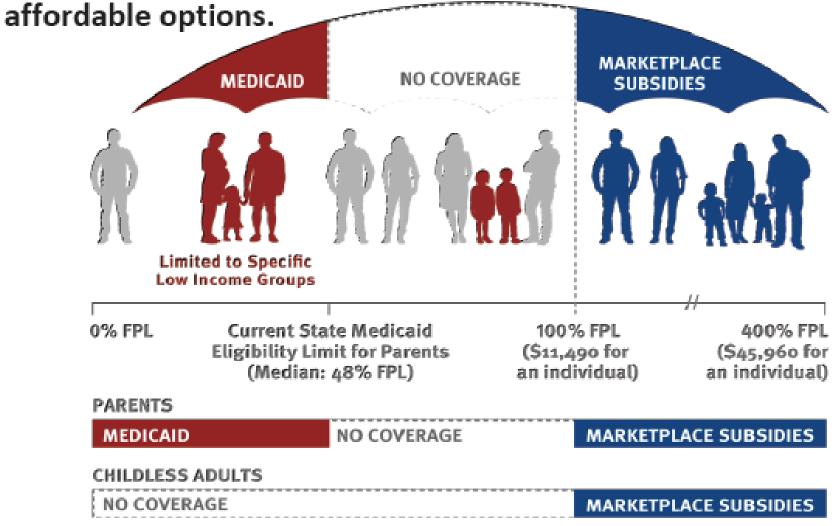
NOTES: 1 - Exploring an approach to Medicaid expansion likely to require waiver approval. 2- Discussion of a special session being called on the Medicaid expansion.

SOURCES: Based on KCMU analysis of recent news reports, executive activity and legislative activity in states. Data reported here are as of September 3. It is important to note that per CMS guidance, there is no deadline for states to implement the Medicaid expansion. Requirements for legislation to implement the Medicaid expansion vary across states.





In states that do not expand Medicaid, there will be large gaps in coverage, leaving millions of low-income adults with no



NOTE: Applies to states that do not expand Medicaid. The current median state Medicaid eligibility limit for parents is 48% FPL in the 21 states that are not moving forward with the Medicaid expansion at this time.





Alternative Benefit Plan

- Created in 2005 as optional Medicaid program
- State option to create a plan similar to commercial insurance
- Certain people are exempt
- ACA mandates that Medicaid expansion be through ABP
- Cover Essential Health Benefits

Options:

- 1. Make ABP look like commercial package
- 2. Make ABP as close as possible to current state plan



Steps to build Alternative Benefit Plan

1. Select Benchmark Plan for ABP

- Federal BC/BS benefits plan
 Largest state employee plan
 Largest non-Medicaid HMO
 Secretary approved coverage
 Similar to Commercial
 Similar to Similar to State Plan Medicaid
- Select benchmark plan for Essential Health Benefits
- 3. Supplement benefits so ABP & EHB are covered
 - If Habilitation is not defined state determines services
- 4. Substitute benefits to customize coverage
 - Likely path for states seeking uniformity with traditional Medicaid / Secretary Approved Coverage



Exemptions from ABP

- Medical frailty is defined by the state but must include:
 - o A disabling mental disorder, including
 - § Children with serious emotional disturbance
 - § Adults with serious mental illness
 - o A chronic substance abuse disorder
 - o Serious and complex medical conditions
 - Physical, intellectual, or developmental disability
 that significantly impairs ability to perform one or more
 activity of daily living
 - o A disability determined by the Social Security criteria, or in states that apply more restrictive criteria than the SSI program, the state criteria.

45 CFR §440.315(f)



Purchase Exchange Plan with subsidies

Purchase Exchange Plan without subsidies Qualified Health Plan

Single Streamlined Application

Medicaid Expansion Group

Traditional Medicaid/CHIP

Alternative Benefits Package

Traditional
Medicaid/CHIP
Benefits



Stuff you should know!

- ABP Benchmark plan
- EHB Benchmark plan
- Habilitation definition
- State exemption/options process or how people with disabilities in Medicaid expansion will be informed of their options



ACA Consumer Assistance

Navigators

- FlagshipProgram
- All states
- Education & Outreach



In Person Assisters

- Fill in gaps in Navigators
- Target populations or needs



Certified Application Counselors

Build on existing community partners



Consumer Assistance Programs

- Ombudsman
- Advocate and collet information





Navigators



	Federal	Partnership	State
Available	Yes	Yes	Yes (eventually)
Funding	Federal grant	Federal grant	State exchange revenue
Training	Federal (CMS)	Federal (CMS)	State (can use federal training)

In-Person Assisters (Non-Navigator Assistance Personnel)

	Federal	Partnership	State
Available	No	Yes	Optional
Funding	Not applicable	State grants from Exchange Establishment grants	State grants from Exchange Establishment grants
Training	Not applicable	Federal	State (can use federal training)



Certified Application Counselors

	Federal	Partnership	State State	
Available	Yes	Yes	Yes	
Funding	No new federal funding, but other federal grants or Medicaid may fund activities.			
Training	Federal	Federal	State (can use federal training)	

Stuff you should know!

- Consumer assistance available in your state
- Training for consumer assistance

- > Enroll America
- ➤ State Refor(u)m

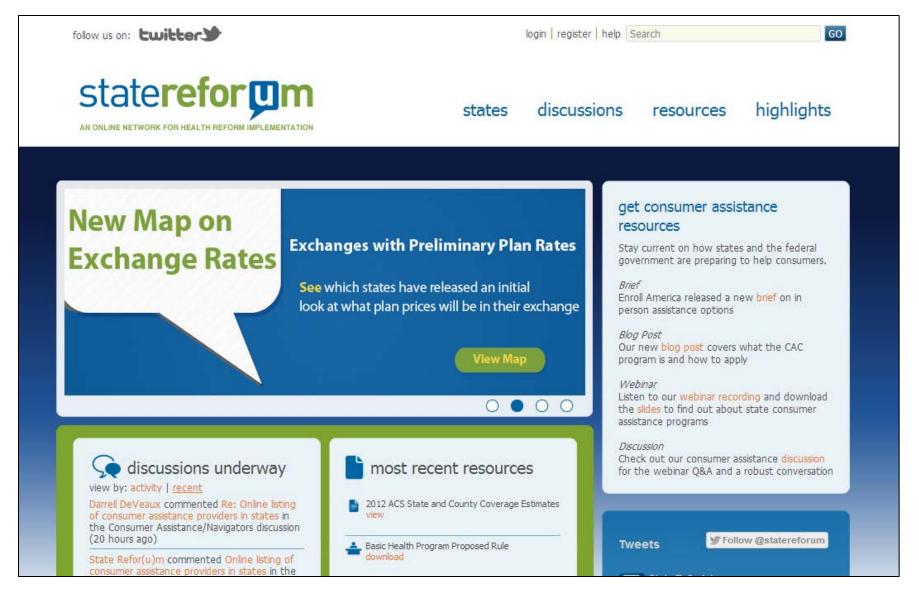


Enroll America State Profiles



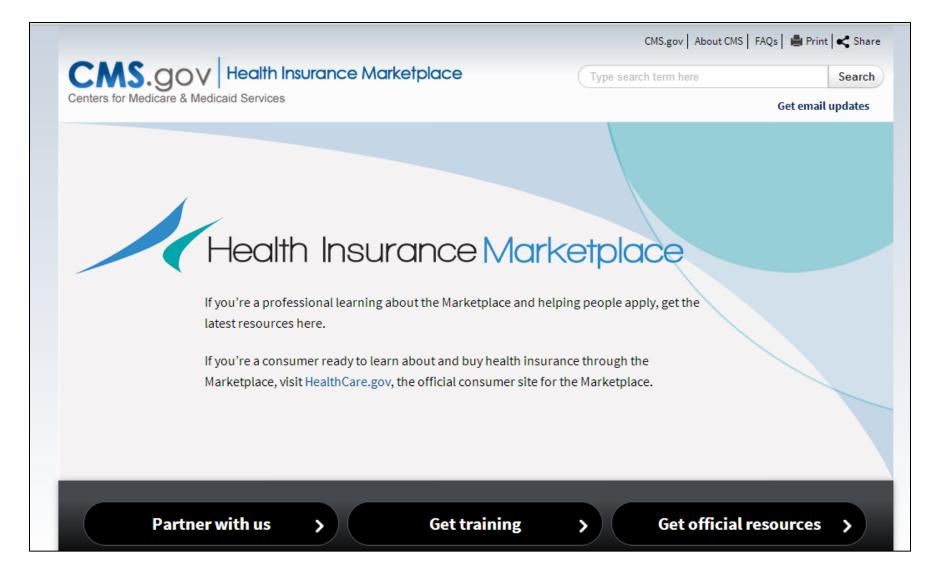


State Refor(um)





Marketplace.CMS.gov





HealthCare.gov

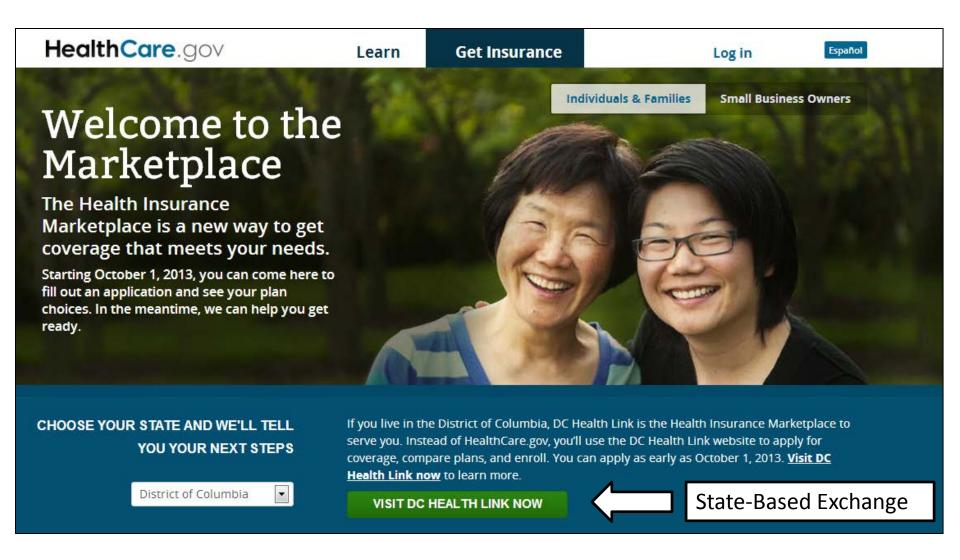




CuidadoDeSalud.Gov



Find your State-Based Exchange



Sign up for updates from your Federally Facilitated Exchange





OPEN ENROLLMENT STARTS OCTOBER 1

HealthCare.gov

1-800-318-2596

Cuidado De Salud.gov

TTY: 1-855-889-4325

UCEDDS AND THE ACA

David Deere

Partners for Inclusive Communities

Arkansas UCEDD/LEND

September 24, 2013

A Case Study of One UCEDD

- Wrote original planning grant for state Marketplace
- Staff member recruited to head state planning
- Served on Marketplace Steering Committee
- UCEDD gathered stakeholder engagement (2011)
- Key informant interviews, 47 community meetings, state-wide survey on ideas

for design of Marketplace

Efforts in Second Year

- Dropped pursuit of state Marketplace
- First state approved for a federal-state partnership
- Conducted community meetings via interactive videoconference that reached 8 communities
- Definition of habilitative services
- Served on Consumer
 Assistance Advisory
 Committee and
 Navigator Committee



Activities in Third Year

- State adopted "Private Option" for Medicaid Expansion
- State-wide conference for small businesses
- Town hall meetings in all 75 counties
- Seven trainings for insurance agents and brokers
- Held hour-long, call-in programs on
 PBS affiliate (2 programs)



UCEDD Received Navigator Grant

- Coordinating work of navigators with state's In-Person Assisters
- Subcontracting with 7 agencies
- Directly employing 13 additional navigators and collaborating with 15 other organizations for connections with uninsured
 - (a total of 8 DD agencies are contracting or collaborating)

Community First Choice Option

- Staff member is on planning committee and another staff member attends as her direct support person
- CFCO is slated to eliminate waiting list for Home and Community-Based Waiver



Ways UCEDDs and LENDs Can Engage in ACA Activities

- □ Train staff on ACA
- Disseminate information
 to constituent groups
 (families of individuals
 with disabilities are a



key demographic group for enrollment in coverage)

 Meet with navigator and IPA programs to find out how to become involved

More Ways to Be Involved



- Evaluate accessibility of Marketplace services
- Evaluate experience of individuals with disabilities and their families
- Become part of the conversation for future changes to plans and services

Contact

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Questions Or Comments?





Visit the Websites

- AUCD Website: http://www.aucd.org
- Health Reform Hub: http://www.aucd.org/projects/health_reform
- Join the Health Reform Workgroup Listserv:
 http://www.aucd.org/template/news.cfm?news_id=8723
- Questions about the Health Reform Workgroup
 - Rachel Patterson: rpatterson@aurcd.org
 - Dawn Rudolph: <u>drudolph@aucd.org</u>

Please take a few minutes to complete our survey!