• Mute your phone &/or computer microphone
• Time is reserved at the end for Q&A
• Please fill out the post-webinar survey
• Webinar is being recorded
• Recording will be posted on the SWTRC www.southwesttrrc.org/ and the AzCRH www.crh.arizona.edu/
Arizona State Office of Rural Health Monthly Webinar Series

Focused on providing technical assistance to rural stakeholders to disseminate research findings, policy updates, best-practices and other rural health issues to statewide rural partners and stakeholders throughout the state.
Today’s presenters:

**Alyssa Padilla, MPH**
Arizona Center for Rural Health (AzCRH)
Special Projects Coordinator;
AzCRH Navigator Consortium
Program Co-Manager

**Bryna Koch, MPH**
Arizona Center for Rural Health (AzCRH)
Special Projects Coordinator;
AzCRH Navigator Consortium
Program Co-Manager
Get Covered AZ! Updates on the ACA and Preparing for Open Enrollment

Presented by:
Alyssa Padilla, MPH
Bryna Koch, MPH
Tuesday, October 25, 2016
Arizona Center for Rural Health

Est. 1981, CRH serves AZ through its mission “to improve the health & wellness of rural & underserved populations” & houses the:

1. State Office of Rural Health
2. Rural Hospital Flexibility Program
3. Small Hospital Improvement Program
4. Western Region Public Health Training Center
5. AzCRH Navigator Consortium

http://crh.arizona.edu
Two Navigator Entities:

1. Increase the participation rate of eligible uninsured Arizonans in it’s the Health Insurance Marketplace and Medicaid
2. Facilitate re-enrollment for eligible Arizonans in it’s the Marketplace and Medicaid
3. Facilitate enrollment of eligible children in KidsCare
The project described was supported by Funding Opportunity Number CA-NAV-15-001 from the Centers for Medicare & Medicaid Services Grant number 1 NAVCA150222-01-00. The contents provided are solely the responsibility of the authors and do not necessarily represent the official views of HHS or any of its agencies.

Alyssa Padilla, MPH
Free Assistance

Certified Assisters:

– Navigators & Certified Application Counselors (CACs)
– Provide assistance in a fair, accurate, culturally and linguistically appropriate, and impartial manner

Benefit Coordinators

– CACs
– Identifies, educates and assists tribal patients eligible for health care coverage and alternate resources
Learning Objectives

1. Review where the Affordable Care Act is today and know where to go for assistance.
2. Describe major ACA eligibility components and financial assistance options.
3. Discuss outreach strategies for rural and urban underserved populations.
Background
Patient Protection & Affordable Care Act (PPACA or ACA)

2009
House and Senate Pass the ACA

2010
President signs the ACA
Some provisions begin to go into effect

2012
Judicial branch (US Supreme Court) upholds ACA, but rules that Medicaid expansion is optional for states

2013
Payment reforms continue
First ever open enrollment begins Oct 1

2014
ACA coverage provisions begin Jan 2014, Marketplaces + Medicaid (in states choosing to expand Medicaid)

2015
Supreme Court upholds portion of ACA that provides subsidies to purchase insurance
Second Marketplace open enrollment period, more states expand Medicaid
ACA Aims

1. Expand insurance coverage through employer-based and marketplace health plans, and expanding Medicaid

2. Increase affordability and quality

3. Improve value by addressing quality, spending and accountability

ACA-10 Titles

I. Quality, Affordable Health Care for All Americans
II. The Role of Public Programs
III. Improving the Quality and Efficiency of Health Care
IV. Prevention of Chronic Disease and Improving Public Health
V. Health Care Workforce
VI. Transparency and Program Integrity
VII. Improving Access to Medical Therapies
VIII. Community Living Assistance Services and Supports
IX. Revenue Provisions
X. Reauthorization of the Indian Health Care Improvement Act
ACA Key Components

We focus on enrolling consumers in coverage:

1. **Individual Mandate** – individuals must have health care insurance coverage or pay a penalty
2. **Marketplace** – individuals, families & small business can purchase coverage*
3. **Medicaid Expansion** – covers adults up to 133% (138%) of Federal Poverty Level (FPL)
4. **KidsCare** (Arizona’s CHIP) Reauthorization!!

*Income based financial assistance through Advanced Premium Tax Credits and Cost Sharing Reductions

Bryna Koch, MPH
Benefits for Women
Providing Insurance Options, covering preventive services and lowering costs

Young Adult Coverage
Coverage available up to age 26

Strengthening Medicare
Yearly Wellness visit and many free preventive services for some seniors with Medicare

Holding Insurance Companies Accountable
Providing Insurance Options, covering preventive services and lowering costs
National Outcomes

U.S. Uninsured by Year

14.4% or 48 Million in 2012
13.3% or 42 Million in 2013
10.4% or 33 Million in 2014
09.1% or 29 Million in 2015

Accessed 10/14/16 at: Current Population Reports | US Census Bureau

8.6% or 27 Million Uninsured 2016

National Outcomes

The percentage of uninsured in the U.S. has significantly decreased from an all-time high of ~18%.

Figure 1
Uninsured Rate Among the Nonelderly Population, 1995-2015

Source: CDC/NCHS, National Health Interview Survey, reported in
http://www.cdc.gov/nchs/health_policy/trends_hc_1968_2011.htm#table01 and
National Outcomes

Figure 2

Percentage Point Change in Uninsured Rate among the Nonelderly Population by Selected Characteristics, 2013-2015

<table>
<thead>
<tr>
<th>Poverty Level</th>
<th>Race/Ethnicity</th>
<th>State Medicaid Expansion Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;100% FPL</td>
<td>White</td>
<td>Expanded Medicaid</td>
</tr>
<tr>
<td>100 to 199% FPL</td>
<td></td>
<td>Did Not Expand Medicaid</td>
</tr>
<tr>
<td>≥200% FPL</td>
<td>Black</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hispanic</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Asian</td>
<td></td>
</tr>
</tbody>
</table>

NOTE: Indiana, New Hampshire and Pennsylvania are included as non-expansion states during 2013 and 2014 and as expansion states in 2015.

Arizona Outcomes

AHCCCS – AZ Medicaid
<133% FPL ($32,319 Family of 4)
July-Sep 2013 to Oct 2016 Net Gain
+600,000

AZ MARKETPLACE
133-400% FPL ($32,319-$97,200 Family of 4)
OE-3 Effectuated Enrollment* Mar 31, 2016
+180,000

AZ <26 Parents’ Plan
+70,000

Arizona Total: +850,000

KidsCare/CHIP restored 09/2016: +6,000

Eligible Arizona Children Age <19 years between 133-200% FPL

2. AHCCCS/Medicaid Accessed 10/14/16 at: https://www.azahcccs.gov/Resources/Reports/population.html
3. *Effectuated Enrollment (paid premium). Accessed 10/14/16 at:
# Arizona Residual Uninsured 2016

<table>
<thead>
<tr>
<th>2016 Arizona Uninsured Category</th>
<th>#Uninsured</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligible for Medicaid or CHIP</td>
<td>328,000</td>
</tr>
<tr>
<td>Eligible for Marketplace Subsidy</td>
<td>110,000</td>
</tr>
<tr>
<td>Offered Employer Sponsored Insurance</td>
<td>112,000</td>
</tr>
<tr>
<td>Income &gt;400% FPL</td>
<td>67,000</td>
</tr>
<tr>
<td>Undocumented Immigrants</td>
<td>156,000</td>
</tr>
<tr>
<td><strong>AZ Total Residual Uninsured in 2016</strong></td>
<td><strong>773,000</strong></td>
</tr>
</tbody>
</table>

Source: [Data Note: Estimates of Eligibility for ACA Coverage among the Uninsured in 2016](http://files.kff.org/attachment/Data-Note-Estimates-of-Eligibility-for-ACA-Coverage-among-the-Uninsured-in-2016)
Getting the Uninsured Covered

- Assist rural and vulnerable populations with accessing insurance coverage and care
- Focus on populations with higher than average rates of the uninsured
  - Rural & Urban Underserved
  - Hispanic/Latino and Native American populations
Coverage Options

AHCCCS
<133% FPL
<=$32,319

KidsCare
133-200% FPL
$48,600

Marketplace
To 400% FPL
$97,200

For a Family of Four

Slide Courtesy of: Dan Derksen, MD
Marketplace Eligibility

- Must live in U.S.
- Must be a U.S. citizen/national or a Lawfully Permanent Resident (Green Card)
- Qualified non citizen immigration status
- Valid non immigrant visas (H1, H-2A, H2-B), Student Visas
- Humanitarian statuses (refugee, asylee, victim of trafficking/crime)
- Cannot be currently incarcerated
Financial Assistance

- Based on household size & income

1. Advanced Premium Tax Credits - lowers monthly premium

2. Cost Sharing Reduction - Lowers out of pocket costs (deductible, co-pay, coinsurance)

### The Marketplace

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Household Income* (250% FPL, 2016)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Monthly Income</td>
</tr>
<tr>
<td>1</td>
<td>$2,475</td>
</tr>
<tr>
<td>2</td>
<td>$3,338</td>
</tr>
<tr>
<td>3</td>
<td>$4,200</td>
</tr>
<tr>
<td>4</td>
<td>$5,063</td>
</tr>
<tr>
<td>5</td>
<td>$5,925</td>
</tr>
</tbody>
</table>

*All numbers are approximate. Consumers should apply to healthcare.gov to confirm eligibility or schedule an appointment with a FREE Certified Assister at http://coveraz.org/connector/
AHCCCS Eligibility

- U.S. Citizens or
- Legal Permanent Resident (5 yr. residency)
- Arizona Resident
- Other qualified immigrant
- Refugees
- Cannot be incarcerated
- Must meet income limits

https://www.azahcccs.gov/Members/Downloads/EligibilityRequirements.pdf
KidsCare Eligibility

- Children’s Health Insurance Program
- Low-cost health insurance for children not eligible for AHCCCS
- For low income children 18 & under <200% FPL (household income)
- Monthly Premium $10-$70 (income based)
- www.healthearizonaplus.gov

https://www.azahcccs.gov/Members/GetCovered/Categories/KidsCare.html
Challenges

- Changes in insurer participation in the Arizona marketplace
- Majority of consumers on marketplace plans will see their plan change
- Marketplace consumers should make an appointment with a Certified Assister to review their options/new plan
Open Enrollment (OE) Period 2 vs. 4

AZ Marketplace 2014-15 (OE-2)

AZ Marketplace 11/1/16-01/31/17 (OE-4)

Maricopa County
Pima County

13 Other AZ Counties

Slide Courtesy of Dan Derksen, MD
### Average Premium Increase

**25 y.o. Non-Smoker, Silver Plan AZ**

<table>
<thead>
<tr>
<th>AZ County</th>
<th>2016</th>
<th>2017</th>
<th>Avg. Monthly Rate Increase</th>
<th>Avg % Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maricopa</td>
<td>$206</td>
<td>$386</td>
<td>$180</td>
<td>87%</td>
</tr>
<tr>
<td>Pima</td>
<td>$190</td>
<td>$274</td>
<td>$84</td>
<td>44%</td>
</tr>
<tr>
<td>Gila, Pinal</td>
<td>$219</td>
<td>$453</td>
<td>$234</td>
<td>107%</td>
</tr>
<tr>
<td>Apache, Navajo, Coconino, Mohave</td>
<td>$275</td>
<td>$501</td>
<td>$226</td>
<td>82%</td>
</tr>
<tr>
<td>Yavapai</td>
<td>$294</td>
<td>$586</td>
<td>$292</td>
<td>99%</td>
</tr>
<tr>
<td>Yuma, La Paz</td>
<td>$261</td>
<td>$593</td>
<td>$332</td>
<td>127%</td>
</tr>
<tr>
<td>Santa Cruz</td>
<td>$190</td>
<td>$395</td>
<td>$200</td>
<td>108%</td>
</tr>
<tr>
<td>Cochise, Graham, Greenlee</td>
<td>$238</td>
<td>$486</td>
<td>$248</td>
<td>104%</td>
</tr>
</tbody>
</table>


Focus for OE4

- The levels of income based financial assistance remain the same
- Consumers with marketplace plans should make appointments
- Insurer and plan structures will change for the majority of consumers
  - PPO to HMO
  - New networks, new providers, new formularies
  - Some special conditions (e.g., pregnant women in 3rd trimester)
Questions about health insurance? Getting answers is easy.

- Community Health Centers
- Consumer Call Center 1-800-318-2596
- Health Insurance Navigators
- HealthCare.gov CuidadoDeSalud.gov
- Real-time web chats
- Trained In-Person Assistance
- Community Groups
- Small Business Health Options Program (SHOP) Call Center 1-800-706-7915

Reliable information is just a call, click or conversation away.

HealthCare.gov Health Insurance Marketplace
Outreach Strategies for Rural & Underserved Communities

- Collaborate with Rural Mobile Clinics:
  - University of Arizona Mobile Health Program
  - Department of Economic Security Mobile Clinics

- Work with Local AHEC’s

- Team up with IHS & Benefit Coordinators
  
  Train Benefits Coordinators as Certified Application Counselors
Outreach Strategies for Rural & Underserved Communities

- Train CHWs and CHRs
- Enroll at Community Colleges
- Train staff on Health Insurance 101
- Establish Faith-based outreach and partners

Alyssa Padilla, MPH
Faith-based Outreach Strategies

- Make announcements during & after mass
- Train faith leaders about healthcare
  - Pastors, Priests, Class or Contact Leaders, Administration
  - Class/Contact Leaders identify parish attendees’ needs & refer them to local resources

Faith-based Outreach Strategies

- Attend church events
- Publish in church newsletters
- Post on church bulletin boards
- Use Social media
  - #GetCovered #StayCovered
  - #Coverage2Care
- Announce information on religious radio stations

How can we work together?

- Join county and statewide enrollment coalitions to coordinate and reduce duplication:
  - Pima County Enrollment Coalition
  - Cover AZ Coalition
- Know your countywide Certified Assisters and Benefit Coordinators
- Coordinate event staffing
- Refer to each other
- Forward resources and trainings
Resources for Assistance

- Meet with a FREE Assister at http://coveraz.org/connector/
- Ask your Community Health Center
- Review coverage at https://www.healthcare.gov/
Major Due Dates

- **Tuesday, November 1, 2016:** Enroll in the Health Insurance Marketplace on [https://www.healthcare.gov/](https://www.healthcare.gov/)

- **Thursday, December 15, 2016:** Last day to enroll in the Marketplace for Coverage to begin January 1, 2017

- **Tuesday, January 31, 2017**
  Last day to enroll in or change plans on the Marketplace.

Thank you
Questions?
Your opinion is valuable to us
Please participate in this brief survey:

https://uarizona.co1.qualtrics.com/SE/?SID=SV_80t2WRUEU3W9QEd

This webinar is made possible through funding provided by Health Resources and Services Administration, Office for the Advancement of Telehealth (G22RH24749). Arizona State Office of Rural Health is funded granted through a grant from US Department of Health and Human Services. Grant number H95RH00102-25-00
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