



THE UNIVERSITY OF ARIZONA  
MEL & ENID ZUCKERMAN COLLEGE OF PUBLIC HEALTH  
Center for Rural Health



# Arizona State Office of Rural Health Webinar Series



THE UNIVERSITY  
OF ARIZONA

# Webinar Tips & Notes



- 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  
<http://www.southwesttrc.org>

# AZ 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.



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# Today's presenters



**Daniel Derksen, M.D.**  
Walter H. Pearce Endowed Chair &  
Director Arizona Center for Rural  
Health

# ACA Update: Marketplace Open Enrollment III



Daniel Derksen, MD

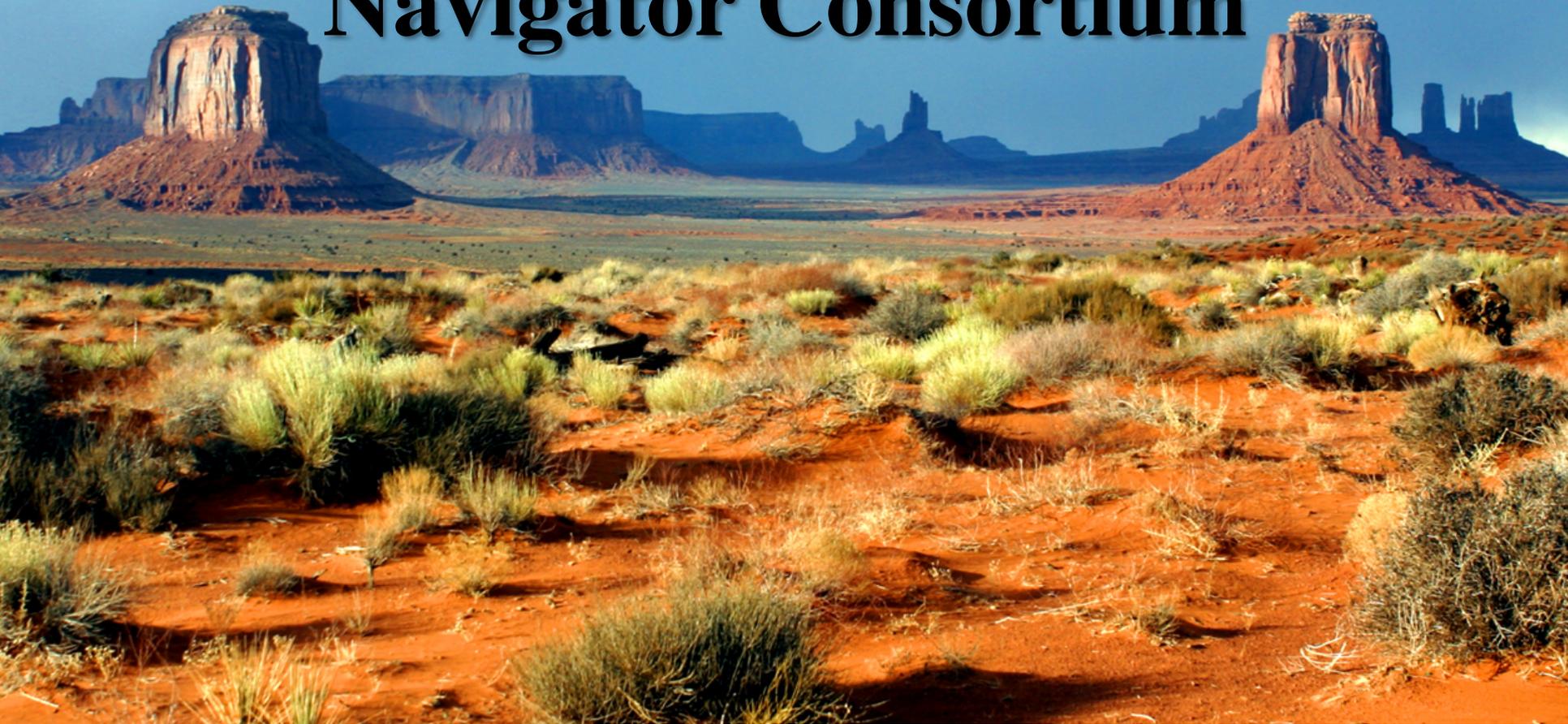


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# ACA Update: Introduction to the Arizona Center for Rural Health Navigator Consortium



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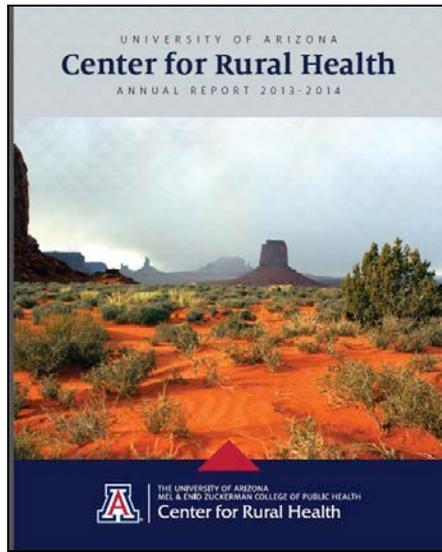
Center for Rural Health

Daniel Derksen MD, Walter H. Pearce Endowed Chair  
Director, Arizona Center for Rural Health

AzSORH Webinar Series | Noon, October 27<sup>th</sup> 2015 | Tucson, Arizona

# Arizona Center for Rural Health

<http://crh.arizona.edu>



The AzCRH mission is to improve the health and wellness of Arizona's rural populations

## Programs Housed in the CRH

- Arizona State Office of Rural Health
- Arizona CRH Navigator Consortium
- Arizona Rural Hospital Flexibility Program
- Western Region Public Health Training Center
- Arizona Small Rural Hospital Improvement Program

# Round III Marketplace Open Enrollment (OE-3) 11/01/15 to 01/31/16

## AzCRH Navigator Consortium



Cooperative Agreement to Support Navigators  
in Federally-Facilitated Marketplaces

Department of Health and Human Services, Centers for Medicare and Medicaid Services,  
Center for Consumer Information and Insurance Oversight



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## AzCRH Navigator

### Project Goals 2015-17

1. Increase the participation rate of eligible uninsured Arizonans in its Federally Facilitated Marketplace Qualified Health Plans
2. Facilitate re-enrollment

Dan Derksen MD

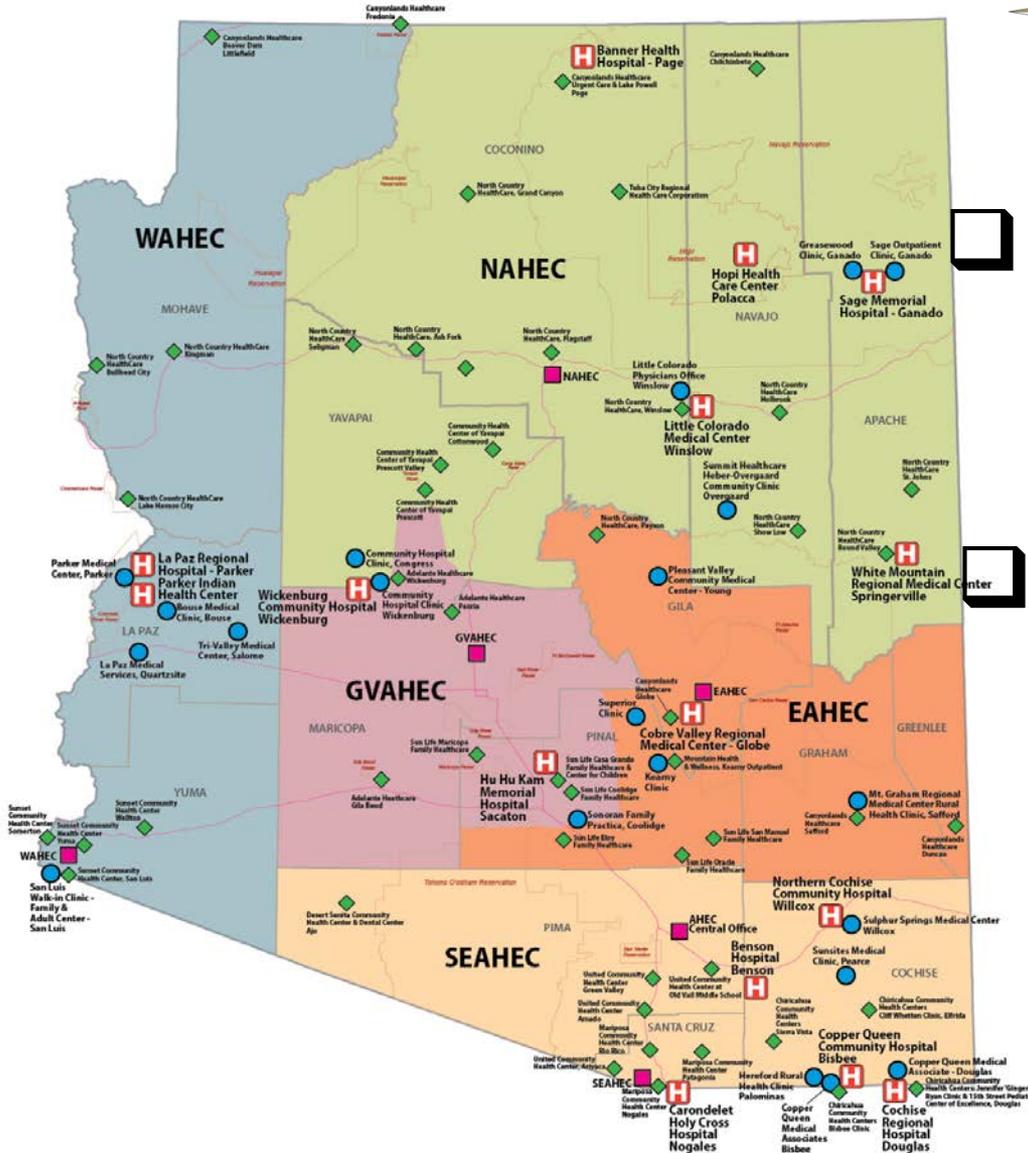
Figure 5. Arizona's Area Health Education Centers, Critical Access Hospitals, Rural Health Clinics, Rural Federally Qualified Health Centers (AHECs, CAHs, RHCs, FQHC):



# Az CRH Navigator Consortium

Connecting Arizonans with Affordable Health Insurance Coverage

■ Critical Access Hospitals  
 ◆ Federally Qualified Health Centers in rural areas  
 ● Rural Health Clinics  
 ■ AHEC Regional Office



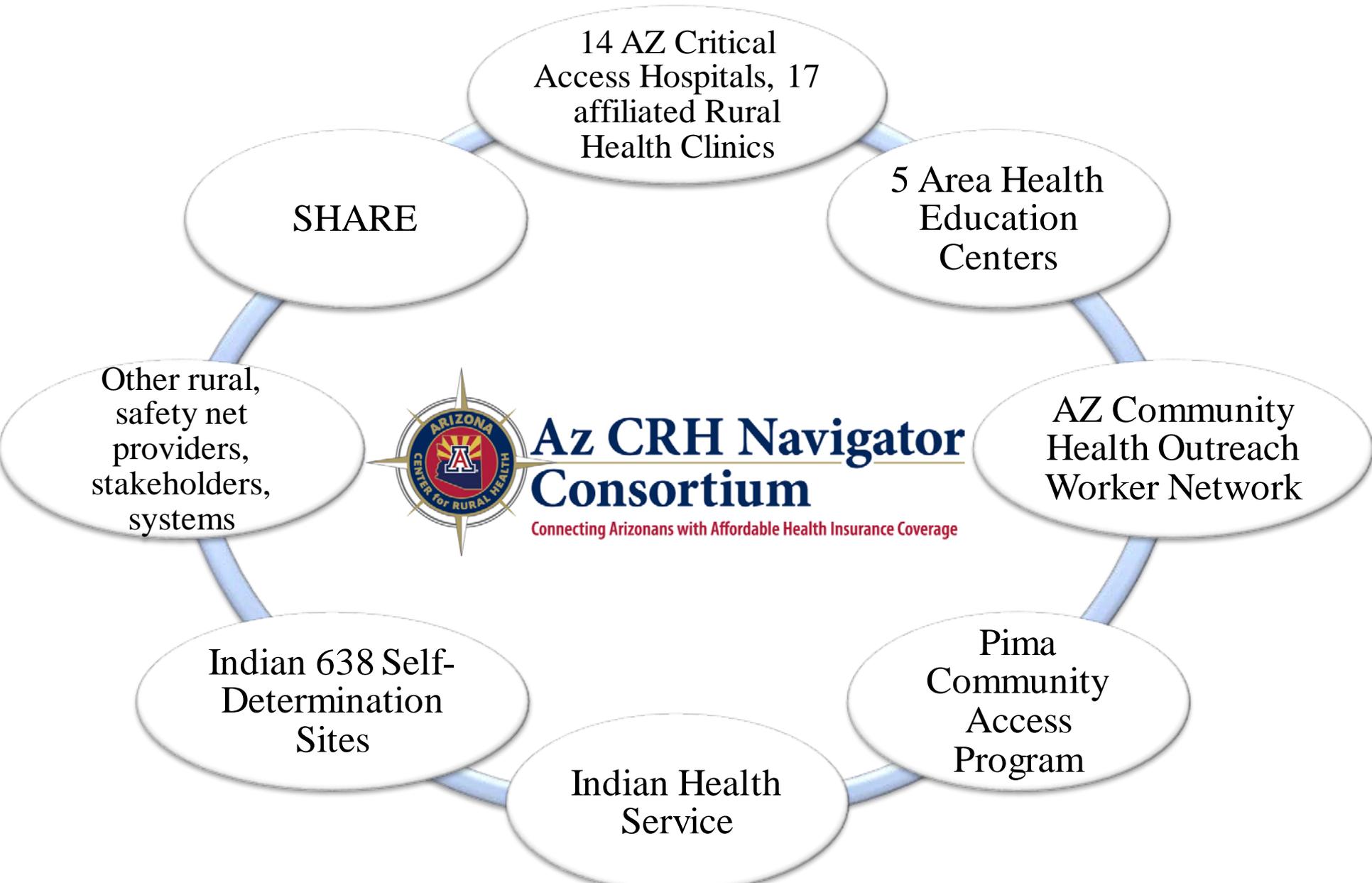
□ Hire 5 full time and 8 temporary Navigators

□ Assist AzCAHs with trained Certified Application Counselors and Navigators

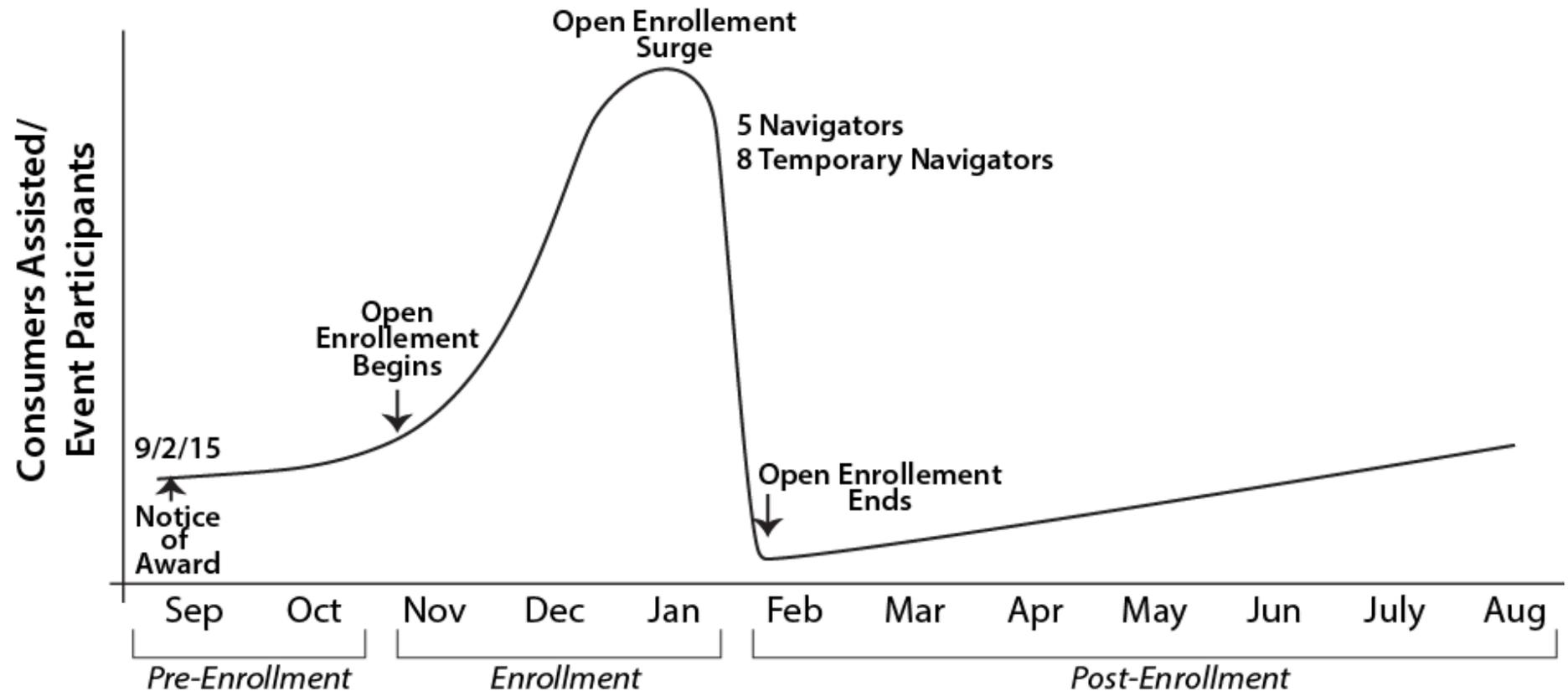


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# Navigator Deployment



# Navigator Certification Modules

- 1) Training Overview
- 2) Health Insurance Basics
- 3) ACA Basics
- 4) Marketplace Basics
- 5) Marketplace Eligibility, Application Assistance
- 6) Marketplace Affordability and Assistance Programs
- 7) Marketplace Enrollment & Appeals Assistance
- 8) Marketplace Exemptions Assistance
- 9) SHOP Marketplace Assistance
- 10) Cultural Competence and Language Assistance
- 11) Serving Vulnerable and Underserved Populations
- 12) Working with Consumers with Disabilities
- 13) Customer Service Standards and Community Outreach
- 14) Privacy, Security and Fraud Prevention Standards
- 15) Advanced Marketplace Issues



Certified Application Counselors (CACs) must complete six modules: 1, 5, 6, 7, 8, 14

# Do You Want to Know More?

The screenshot shows the Kaiser Family Foundation website. The top navigation bar includes the tagline "Filling the need for trusted information on national health issues..." and links for "Trending on KFF", "OPEN ENROLLMENT", "MEDICARE PART D", and "MEDICAID EXPANSION". The main header features the Kaiser Family Foundation logo, a search bar, and social media icons. Below this is a secondary navigation bar with "Health Reform" highlighted, and options for "Search", "Graphics & Interactives", and "Polls". The main content area is titled "Health Reform FAQs" and includes a search box for "Search Health Reform FAQs". The primary article is "Marketplace Eligibility, Enrollment Periods, Plans and Premiums", which lists several frequently asked questions.

**Health Reform FAQs**

To search Frequently Asked Questions about the Affordable Care Act, enter your search terms in the box to the right.

While we have made every effort to provide accurate information in these FAQs, people should contact the health insurance Marketplace or Medicaid agency in their state for guidance on their specific circumstances.

**FAQ Sections**

- Marketplace Eligibility, Enrollment Periods, Plans and Premiums
- Renewing Marketplace Coverage for 2016
- Individual Mandate
- Health Insurance and the 2015 Federal Income Tax Return
- Minimum Essential Coverage
- Help Paying Private Health Insurance Premiums
- Cost-Sharing Reductions
- Tobacco Surcharge for Premiums

**Marketplace Eligibility, Enrollment Periods, Plans and Premiums**

- + What is the health insurance Marketplace?
- + How do I find my state Marketplace?
- + Who can buy coverage in the Marketplace?
- + I live in one state, but drive across the border every day to work in a different state. What Marketplace should I use to buy coverage?
- + I'm eligible for health benefits at work but want to see if I can get a better deal in the Marketplace. Can I do that?
- + Can I buy a plan in the Marketplace if I don't have a green card?
- + When can I enroll in private health plan coverage through the Marketplace?
- + When can I enroll in Medicaid through the Marketplace?
- + When can small employers enroll in coverage through the SHOP Marketplace?

## KFF 300 Frequently Asked Marketplace Questions and Answers

# Healthcare.gov – What’s New for 2016 OE-3?

- Starting on Sunday November 1, 2016
- Website 40% faster than OE-2
- Estimates total annual costs
- Not quite ready (but soon):
  - Enter doctor and hospital names to get list of health plans contracted with them
  - Find health plans that cover their prescription drugs



Robert Pear, NYT: <http://www.nytimes.com/2015/10/24/us/politics/health-laws-revamped-site-healthcaregov-to-debut-on-sunday>



# Patient Protection and Affordable Care Act



H. R. 3590

## One Hundred Eleventh Congress of the United States of America

AT THE SECOND SESSION

*Began and held at the City of Washington on Tuesday,  
the fifth day of January, two thousand and ten*

### An Act

Entitled The Patient Protection and Affordable Care Act.

*Be it enacted by the Senate and House of Representatives of  
the United States of America in Congress assembled,*

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the “Patient Protection and Affordable Care Act”.

(b) TABLE OF CONTENTS.—The table of contents of this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—QUALITY, AFFORDABLE HEALTH CARE FOR ALL AMERICANS

## 03/23/10 President Obama signed ACA

Accessed 11/23/14 at: <http://www.gpo.gov/fdsys/pkg/BILLS-111hr3590enr/pdf/BILLS-111hr3590enr.pdf>

# ACA in 2014

---

- **Created health insurance marketplaces**
- **Mandated coverage** (levied a tax penalty)
- **Expanded Medicaid: <138% FPL**
- **Subsidized premiums: 138-400% FPL**
- **Guaranteed issue** (prohibited coverage denial for pre-existing conditions)

**FPL – Federal  
Poverty Level 2015**

Household Size	100%	138%	400%
1	\$11,770	\$16,242	\$47,080
2	\$15,930	\$21,983	\$63,720
3	\$20,090	\$27,724	\$80,360
4	\$24,250	\$33,465	\$97,000

# Affordable Care Act Titles

## TITLE V – HEALTH CARE WORKFORCE

Subtitle B – Innovations in the Health Care Workforce

Sec. 5508. Increasing Teaching Capacity-Teaching Health Centers

H. R. 3590

One Hundred Eleventh Congress  
of the  
United States of America

AT THE SECOND SESSION

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Dan Derksen MD

Senator Jeff Bingaman

Full Disclosure: I researched, drafted health workforce provisions that ended up in Title V of the ACA – including Teaching Health Centers



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Center for Rural Health

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# The Supremes vs Obamacare Act I

"All the News  
That's Fit to Print"

## The New York Times

National Edition

New Mexico: Sunny and hot east. Partly sunny west with an isolated thunderstorm, mainly afternoon and night. Highs 70s mountains to 100s east. Weather map, Page B8.

VOL. CLXI . . . No. 55,817

© 2012 The New York Times

FRIDAY, JUNE 29, 2012

Printed in New Mexico \$2.50

### JUSTICES, BY 5-4, UPHOLD HEALTH CARE LAW; ROBERTS IN MAJORITY; VICTORY FOR OBAMA

#### G.O.P. Vowing To Take Battle Into November

By JEFF ZELENY

WASHINGTON — Mitt Romney and other Republicans who oppose the health care law are looking ahead to one remaining avenue of appeal: the ballot box in November.

Taken aback by the Supreme Court ruling on Thursday that upheld the constitutionality of the law, Mr. Romney and Congressional Republicans pledged to intensify their efforts to repeal it, an argument that will be a crucial element of the party's quest to galvanize conservative activists and win control of the White House and the Senate.

Republicans swiftly sought to turn the court's reasoning against President Obama, recasting the legislation as a tax increase. Mr. Romney, who as governor of Massachusetts signed a similar health care law, was one of the few in his party who did not join in that argument. Instead, he criticized the ruling and called the federal law a job killer that in-

#### 5-4 Individual mandate upheld as a tax.

Voted to uphold mandate under both the commerce clause and as a tax.

Voted to uphold mandate as a tax.



Sotomayor

Ginsburg

Kagan

Breyer

Roberts

#### Majority opinion by Chief Justice Roberts

*"The Affordable Care Act's requirement that certain individuals pay a financial penalty for not obtaining health insurance may reasonably be characterized as a tax. Because the Constitution permits such a tax, it is not our role to forbid it, or to pass upon its wisdom or fairness."*

Rejected mandate entirely.



Kennedy

Alito

Scalia

Thomas

#### Congress's Taxing Powers Cited — Medicaid Growth Limited

By ADAM LIPTAK

WASHINGTON — The Supreme Court on Thursday upheld President Obama's health care overhaul law, saying its requirement that most Americans obtain insurance or pay a penalty was authorized by Congress's power to levy taxes. The vote was 5 to 4, with Chief Justice John G. Roberts Jr. joining the court's four more liberal members.

The decision was a victory for Mr. Obama and Congressional Democrats, affirming the central legislative achievement of Mr. Obama's presidency.

"The Affordable Care Act's requirement that certain individuals pay a financial penalty for not obtaining health insurance may reasonably be characterized as a tax," Chief Justice Roberts wrote in the majority opinion. "Because the Constitution permits such a tax, it is not our role to forbid it, or to pass upon its wisdom or fairness."

At the same time, the court rejected the argument that the administration had pressed most vigorously in support of the law, that the individual mandate was

with the loss of existing federal payments.

Justice Anthony M. Kennedy, who had been thought to be the administration's best hope to provide a fifth vote to uphold the law, joined three more conservative members in an unusual jointly written dissent that said the court should have struck down the entire law. The majority's approach, he said from the bench, "amounts to a vast judicial overreaching."

The court's ruling was the most significant federalism decision since the New Deal and the most closely watched case since Bush v. Gore in 2000. It was a crucial milestone for the law, the Patient Protection and Affordable Care Act of 2010, allowing almost all — and perhaps, in the end, all — of its far-reaching changes to

Continued on Page A12



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# Act I: Supreme Court Upholds ACA June 2012

	Medicaid Expansion	Tax Mandate
Alito	No	No
Breyer	Yes	Yes
Ginsburg	Yes	Yes
Kagan	Yes	Yes
Kennedy	No	No
<b>Roberts</b>	<b>Yes</b>	<b>Yes</b>
Scalia	No	No
Sotomayor	Yes	Yes
Thomas	No	No
<b>Total Y/N</b>	<b>5-4</b>	<b>5-4</b>

**Tax Mandate  
UPHELD**

**Medicaid Expansion  
UPHELD\***

*\*States can choose not to expand Medicaid – ‘unduly coercive’ to lose all Medicaid funding if a state doesn’t choose to expand Medicaid*

# The Supremes vs Obamacare: Act II

## King vs Burwell

**THE WALL STREET JOURNAL.**

**Plug and Play**  
Wi-Fi makes for the perfect family vacation

**Whit Ayres**  
**Meet the GOP's 2016 Nightmare**

OPINION | A13

THURSDAY, MARCH 5, 2015 - VOL. CCLXV NO. 52

WSJ.com

★★★★ \$3.00

5.90 ▼ 106.47 0.6% NASDAQ 4967.14 ▼ 0.3% NIKKEI 18703.60 ▼ 0.6% STOXX 600 390.61 ▲ 0.8% 10-YR. TREAS. ▲ 1/32, yield 2.121% OIL \$51.53 ▲ \$1.01 GOLD \$1,200.60 ▼ \$3.40 EURO \$1.1081 YEN 119.69

### Justices Spar Over Health-Law Case

**What's News**  
Business & Finance

Lowered its economic growth forecast to about 0.5%, ushering in what have dubbed a "new era" of slower growth. AI signaled that it will lift price controls for pharmaceutical market. A9

Liberals grill plaintiffs, conservatives tough on government; focus turns to Kennedy, Roberts

By JESS BRAVIN AND BRENT KENDALL

WASHINGTON—The Supreme Court sparred Wednesday over a lawsuit that could gut the Affordable Care Act across most of the nation, going overtime in arguments that suggested the law's fate likely rests with two justices.

The outcome of the case, a challenge to the insurance subsidies in the 2010 health law, appeared to turn on the views of Justice Anthony Kennedy and Chief Justice John Roberts. Justice Kennedy, in the biggest surprise from the session, suggested the challengers' theory could face a constitutional roadblock, since it assumes Congress was trying to

strong-arm the states into carrying out a federal policy. Chief Justice Roberts, who joined liberals to uphold most of the health law in 2012, was uncharacteristically quiet through most of the argument, leaving observers guessing.

The challengers' attorney, Michael Carvin, barely began his statements before the court's four liberals launched a fusillade of questions deriding his claim that a clause in the law denies tax credits to Americans in at least 34 states where residents use the federal HealthCare.gov website to obtain insurance.

Even a "person from Mars" would recognize that a literal reading of the act supports the government's position, said Justice Stephen Breyer—namely, that tax credits putting health insurance in reach for millions of lower-income Americans should be available nationwide.

Conservative justices were equally hard on the government's



## Hearings in March of 2015



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# *What would have happened if SCOTUS Invalidated Federally Facilitated Marketplace (FFM) Subsidies?*

## **6.4 Million Lose Coverage 34 States**

CRH Analysis of FFM Subsidized Enrollee Data:

<http://kff.org/health-reform/state-indicator/marketplace-enrollees-eligible-for-financial-assistance-as-a-share-of-subsidy-eligible-population/>

[http://www.rand.org/content/dam/rand/pubs/research\\_briefs/RB9800/RB9812z1/RAND\\_RB9812z1.pdf](http://www.rand.org/content/dam/rand/pubs/research_briefs/RB9800/RB9812z1/RAND_RB9812z1.pdf)



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# THE WALL STREET JOURNAL.

FRIDAY, JUNE 26, 2015 ~ VOL. CCLXV NO. 148

WSJ.com

★★★★ \$3.00

SDAQ 5112.19 ▼ 0.2% NIKKEI 20771.40 ▼ 0.5% STOXX 600 396.39 ▼ 0.2% 10-YR. TREAS. ▼ 6/32, yield 2.392% OIL \$59.70 ▼ \$0.57 GOLD \$1,171.50 ▼ \$1.10 EURO \$1.1207 YEN 123.63

## High Court Saves Health Law

Justices in 6-3 ruling uphold key provision of Obama's signature program; Republicans vow to continue fight



Roberts



Ginsburg



Sotomayor



Kennedy



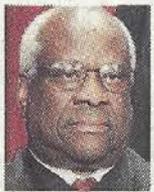
Kagan



Breyer



Scalia



Thomas



Alito

'Congress passed the Affordable Care Act to improve health insurance markets, not to destroy them'

CHIEF JUSTICE JOHN ROBERTS, MAJORITY

'Wonderfully convenient... interpretative jiggery-pokery'

JUSTICE ANTONIN SCALIA, DISSENTERS

## BREAKING NEWS: THIS JUST IN...

# Federally Facilitated Marketplaces in States

## ACA Upheld 6-3 Federal Government Can Operate Exchanges in States



Justice	ACA Upheld
Alito	No
Breyer	Yes
Ginsburg	Yes
Kagan	Yes
Kennedy	Yes
Roberts	Yes
Scalia	No
Sotomayor	Yes
Thomas	No
<b>Total Y/N</b>	<b>6-3</b>



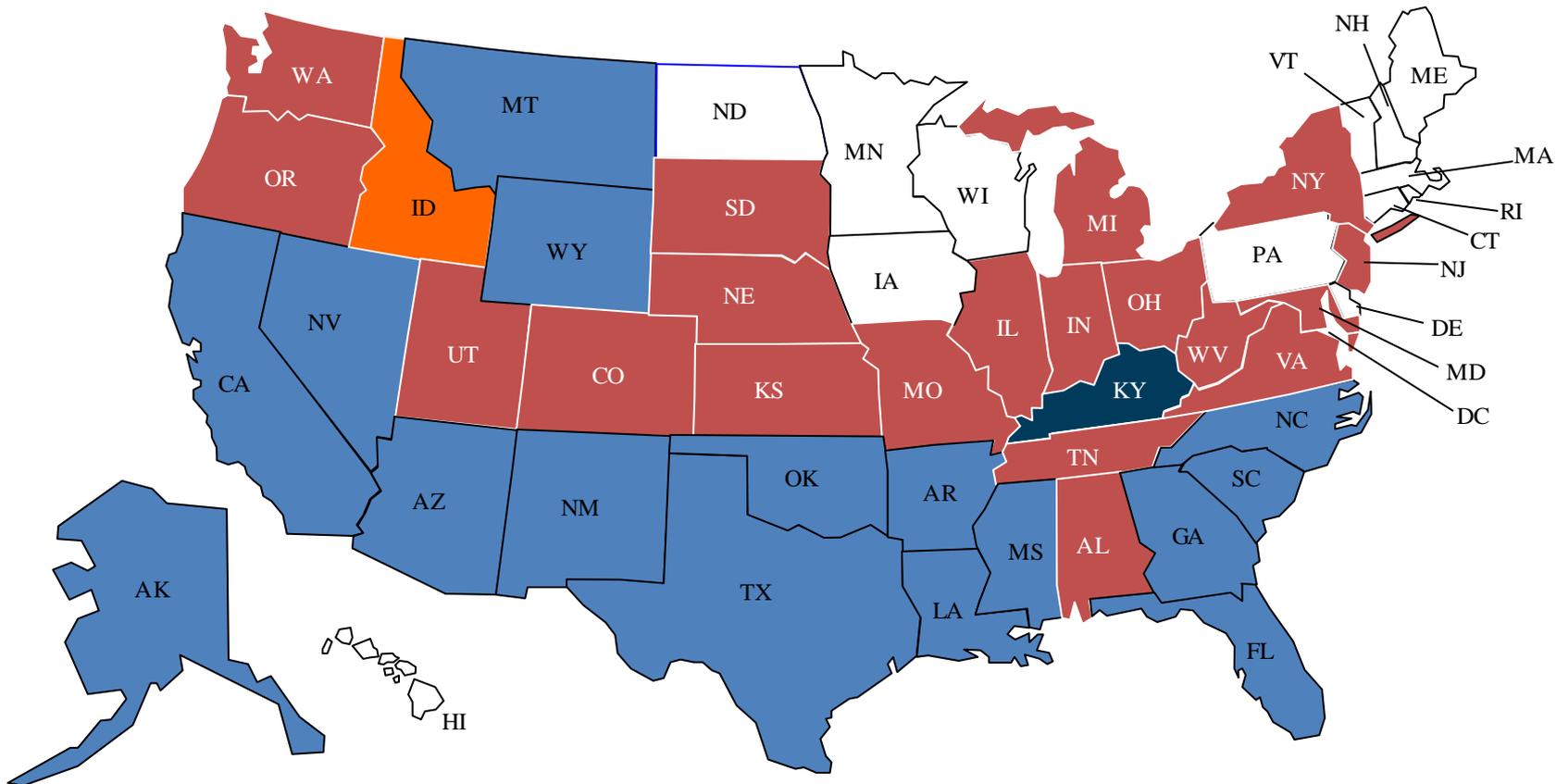
# U.S. Health Coverage 2012 – Before the Affordable Care Act (Pre-ACA)

	# covered (millions)
<b>Private Health Insurance</b>	<b>202</b>
<i>Employer Sponsored ESI</i>	171
Individual Purchase	31
Medicaid	51
Medicare	49
Uninsured	48
<b>Total Population</b>	<b>311</b>

US Census Bureau, accessed 11/22/14 at: <http://www.census.gov/prod/2013pubs/p60-245.pdf>



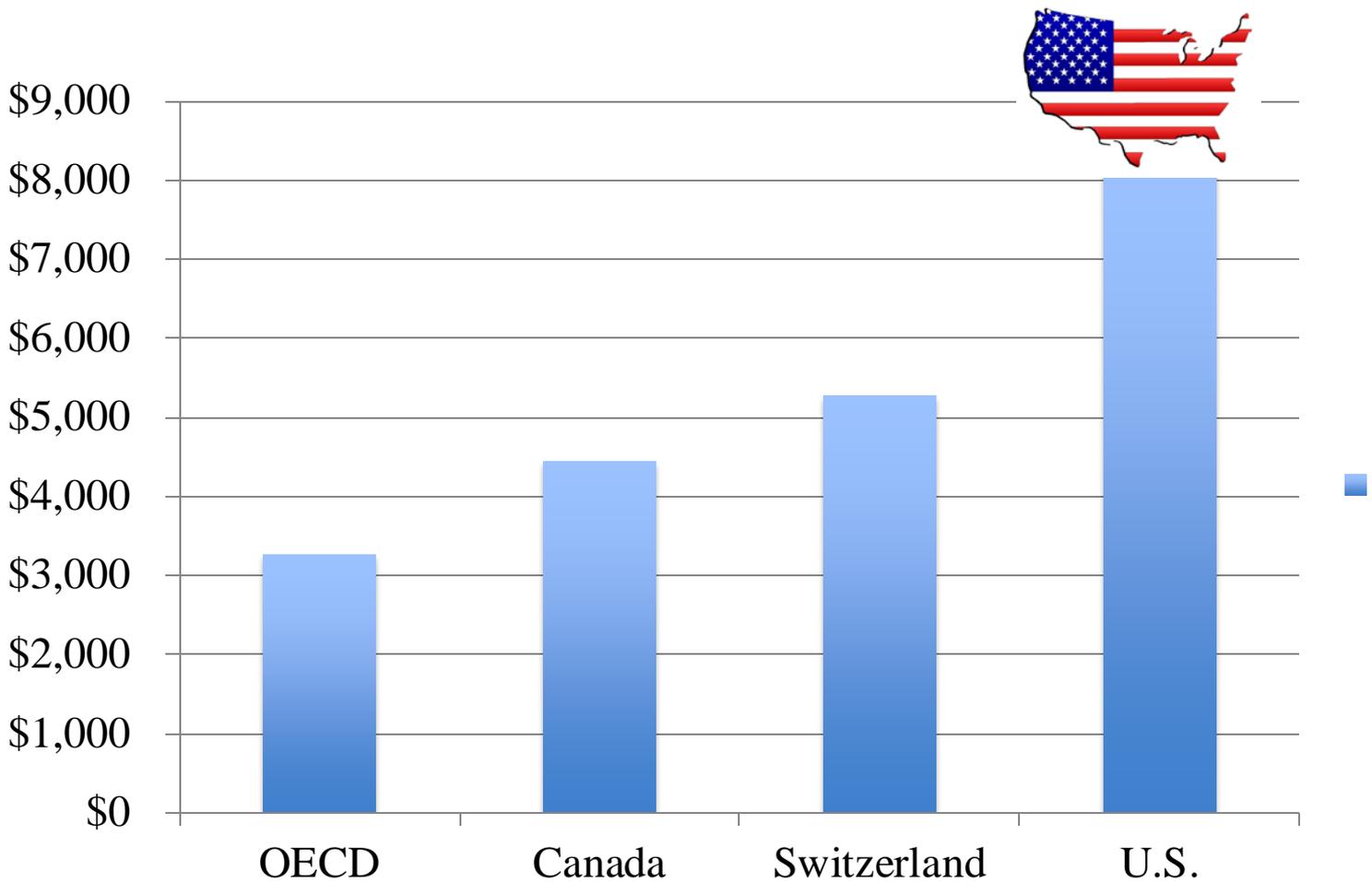
# Uninsured Rates Among Nonelderly by State, 2010-2011: Before ACA



**National Average = 18.2%**

- <14% Uninsured (13 states & DC)**
- 14 to 18% Uninsured (20 states)**
- >18% Uninsured (17 states)**

# U.S. Spends 2.5X More than OECD Avg.

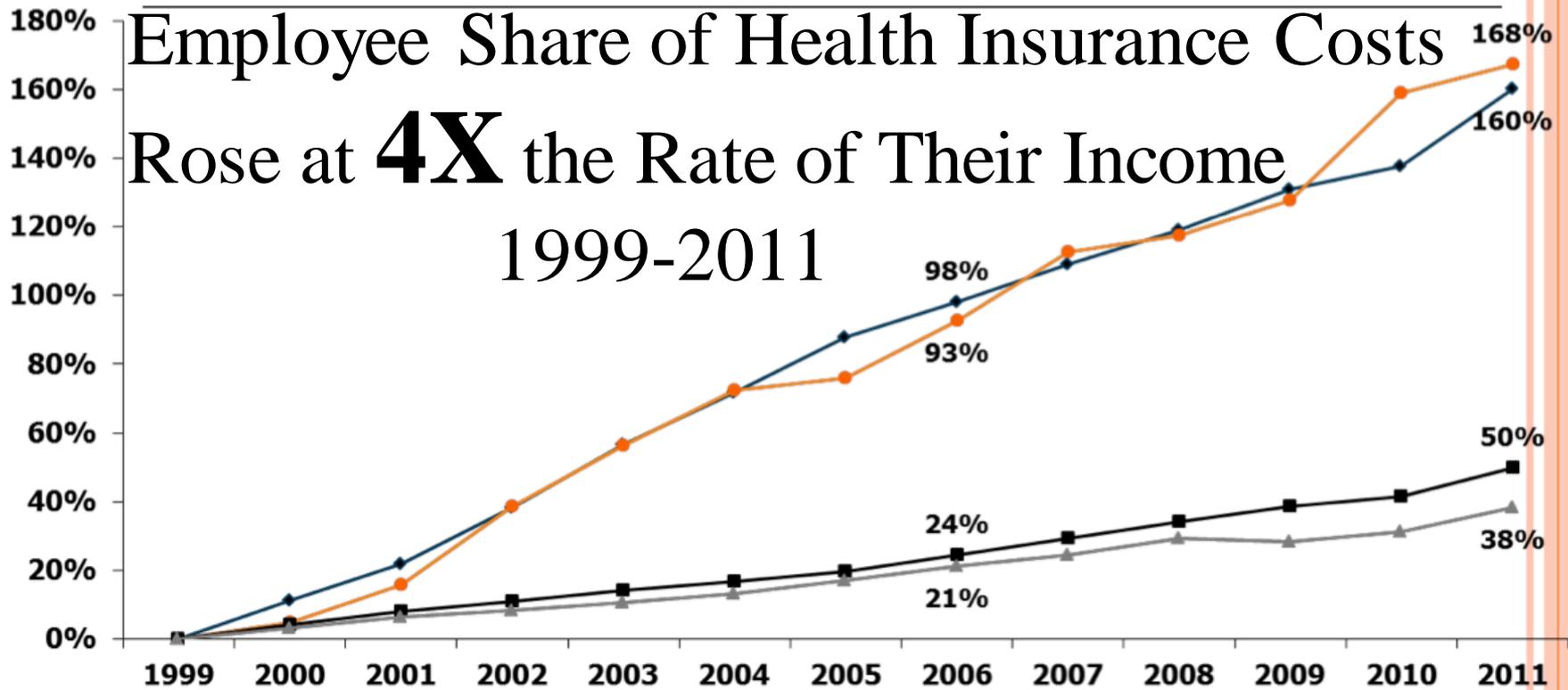


OECD Health Data: <http://www.oecd.org/health/health-systems/oecdhealthdata.htm>

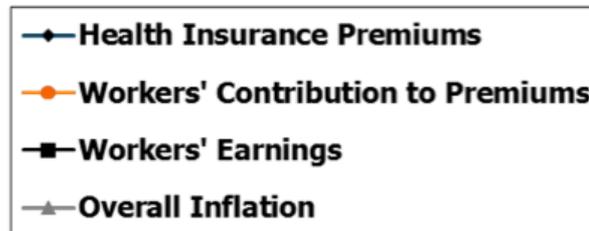
# STATUS QUO NOT A VIABLE OPTION

www.binationalhealthweek.org/uploads/Campaigns/Uninsured%20Latinos%20and%20the%20Affordable%20Care%20Act-Flores.pdf

Reader



Source: Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 1999-2011. Bureau of Labor Statistics, Consumer Price Index, U.S. City Average of Annual Inflation (April to April), 1999-2011; Bureau of Labor Statistics, Seasonally Adjusted Data from the Current Employment Statistics Survey, 1999-2011 (April to April).



THE HENRY J. KAISER FAMILY

-AND- HRET HEALTH RESEARCH

Dan Derksen MD

# \$2.8 Trillion on Health 34% Wasted Spending



Best Care at Lower Cost. IOM Consensus Report. 9/6/12.

Accessed 6/5/13 at <http://iom.edu/Reports/2012/Best-Care-at-Lower-Cost-The-Path-to-Continuously-Learning-Health-Care-in-America.aspx>



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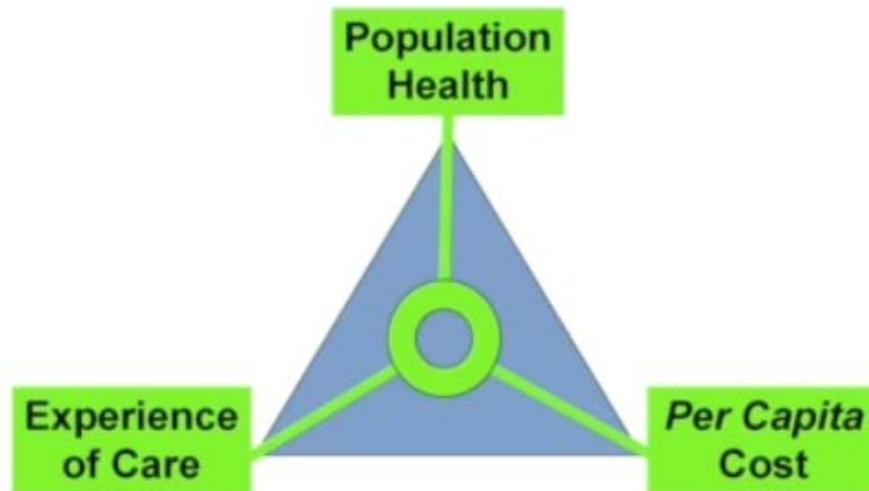
# 34% Waste \$2.9 Trillion US Health Spending Confiscates Resources for Other Spending

Keynote Address– The Challenge of Change

Donald Berwick

“Quality Equals Meeting Health Needs – We Must Reinvent Medical Education to Meet Our Nation’s Health Needs”

The Triple Aim



Accessed 08/02/15 at: <http://beyondflexner.org/conferences/bf2015/presentations/>



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# Prickly TAX Issues



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# ***The Unpopular ACA Tax Mandate***

- 2015 tax penalty for those w/o coverage:  
1% household income or \$95 per person,  
*whichever is greater*
- 2016: 2% or \$325 per person
- 2017: 2.5% or \$695 per person



# *The ACA Tax Mandate 2014*

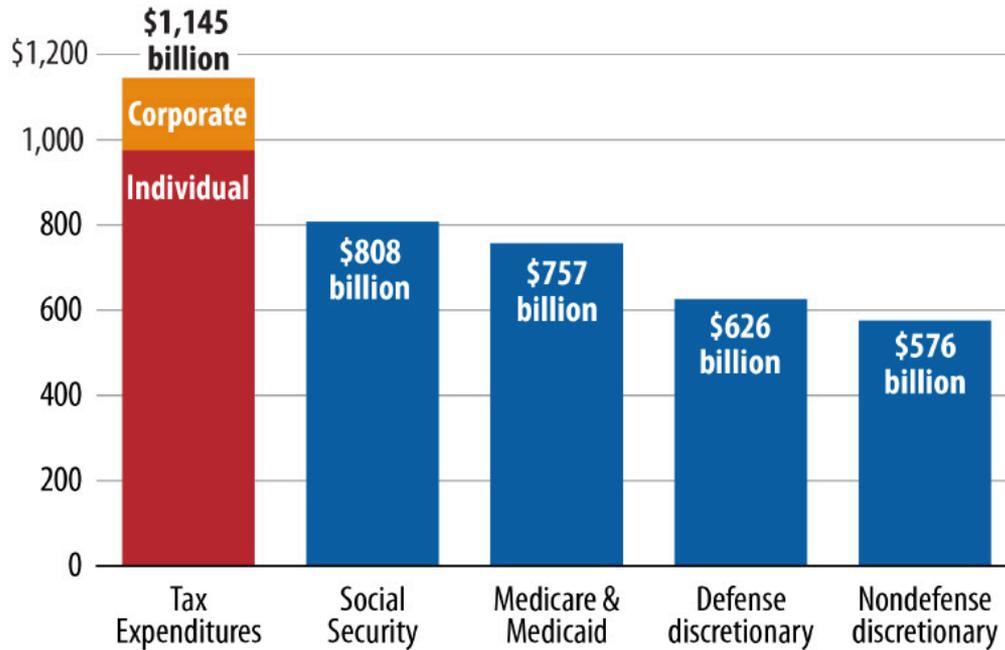
- Tax penalty: 1% income or \$95 per person, *whichever is greater*
- Advance Premium Tax Credit (APTC) recipients complete Form 8962+return
- 109 M (81%) returns checked covered
- 7.5 million paid tax penalty for 2014

<http://www.nytimes.com/2015/10/20/business/many-low-income-workers-say-no-to-health-insurance.html?smid=fb-nytimes&smtyp=cur&r=0>  
<https://www.irs.gov/pub/irs-utl/CommissionerLetterlwithcharts.pdf>



## Tax Expenditures Are Very Costly

Tax expenditures and outlays for other major spending categories in 2013, in billions



Notes: Tax expenditure estimates do not account for interaction effects; estimate does not include associated outlays (\$129 billion) or the effects on excise and payroll receipts (\$120 billion).

Source: Office of Management and Budget, Historical Tables 8.5 and 8.7 and Analytical Perspectives Table 14-2.

Center on Budget and Policy Priorities | [cbpp.org](http://cbpp.org)

The largest individual income tax expenditure in 2013 was the provision that allows households to exclude from taxable income the value of employer-provided health insurance (\$185 billion). The next three largest: the deduction for mortgage interest and other tax breaks on

Employer sponsored health insurance costs excluded from taxable *individual & payroll* income, costing the U.S. **\$248 billion/yr**

**These tax subsidies have been in place for decades**

<http://www.cbpp.org/files/policybasics-taxexpenditures.pdf>



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# Medicaid, Marketplace & Rural Health Update



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Canyon de Chelly  
Photo: Ken Miller



# Demand: Medicaid + OE-2 Marketplace Gain U.S. / AZ Enrollment Jan 2014-Aug 2015

Income < 138%

## UNITED STATES

Income 138% to 400%

Medicaid  
**+13.6 Million**



Age <26 Parents' Plan  
**+2.3 Million**

Marketplace  
**+9 Million**  
Subsidized

## ARIZONA ACA ENROLLMENT



### AHCCCS – AZ Medicaid

<138% FPL (\$33,465 Family of 4)

July-Sept 2013 to Aug 2015 Net Gain

**+436,708**

### AZ MARKETPLACE

138-400% FPL (\$33,465-\$97,200)

OE-2 Enrollment + Renewal thru Mar 2015

**+205,000**

### AZ <26 Parents' Plan

**+70,000**

<http://www.medicaid.gov/medicaid-chip-program-information/program-information/downloads/august-2015-enrollment-report.pdf>  
[http://aspe.hhs.gov/health/reports/2015/MarketPlaceEnrollment/Mar2015/ib\\_2015mar\\_enrollment.pdf](http://aspe.hhs.gov/health/reports/2015/MarketPlaceEnrollment/Mar2015/ib_2015mar_enrollment.pdf)

<http://kff.org/health-reform/state-indicator/marketplace-enrollment-as-a-share-of-the-potential-marketplace-population-2015/>

<http://kff.org/medicaid/issue-brief/recent-trends-in-medicaid-and-chip-enrollment-as-of-january-2015-early-findings-from-the-cms-performance-indicator-project/>



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# Health Coverage and the ACA

from the start OE-1 Oct 2013 through Sept 2015

- 17.6 Million Uninsured Gained Coverage
- Uninsured % Declined from 20.3% to 12.6%
- 2.3M Age <26 Yrs Covered on Parent's Plan
- Medicaid Expansion States: Decrease in Uninsured from 18.2% to 10.1%
- Non-Expansion States: Decrease in Uninsured from 23.4% to 16.1%

Accessed 10/27/15 at: <http://aspe.hhs.gov/>



H Critical Access Hospitals  
 ◆ Federally Qualified Health Centers in rural areas  
 ● Rural Health Clinics  
 ■ AHEC Regional Office

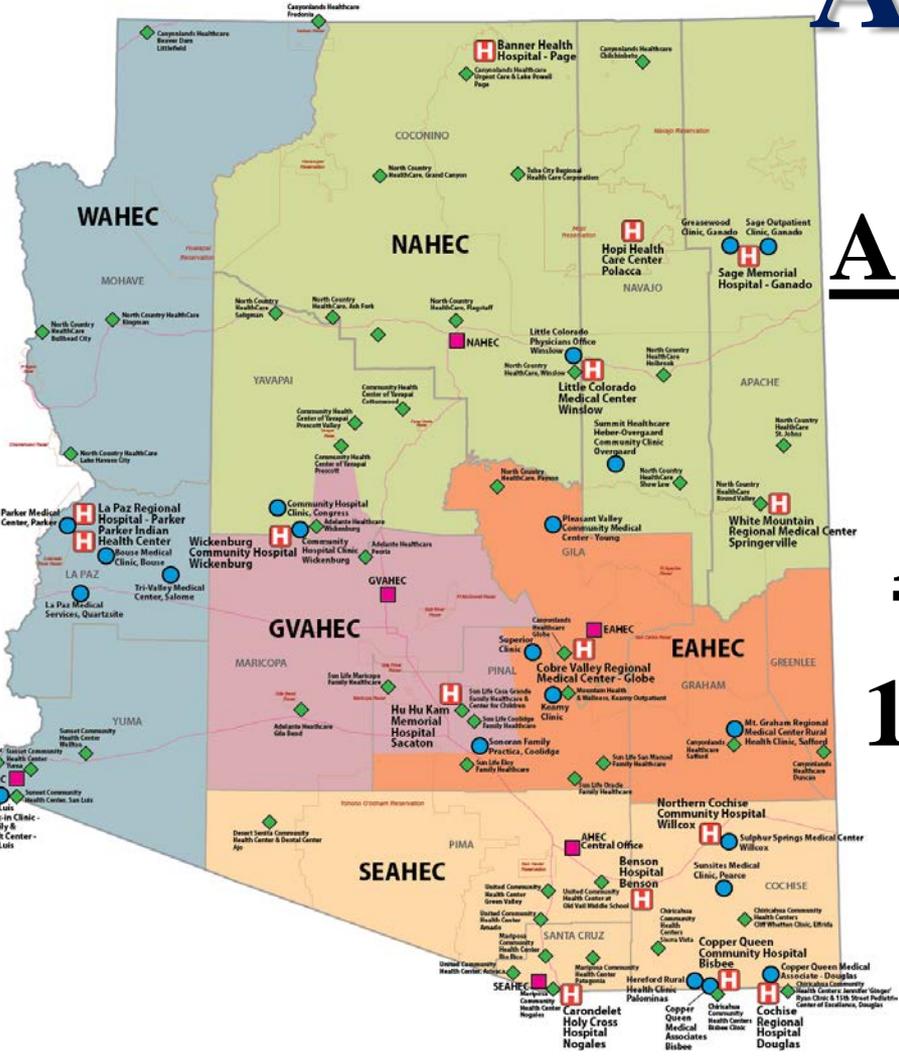
# ACA Enrollment (Participation Rate)

## AHCCCS – AZ Medicaid +365,129 (74%)

### AZ MARKETPLACE

# Enrollees with subsidy / # Eligible for subsidy

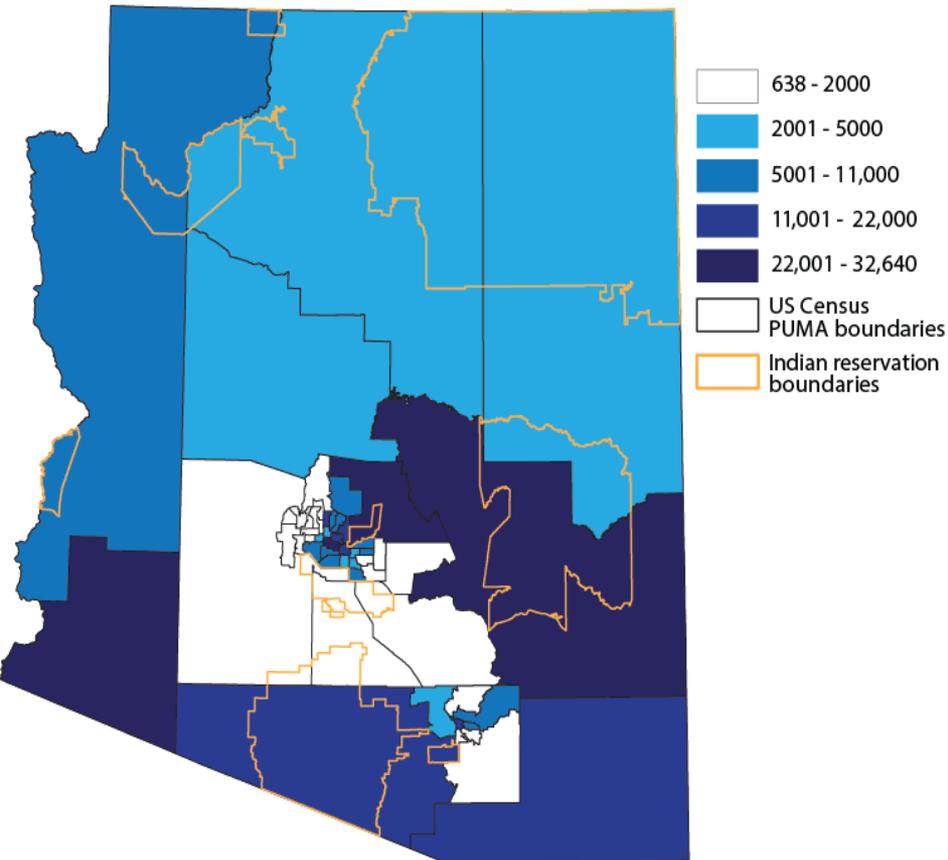
## 126,506 / 335,000 (38%)



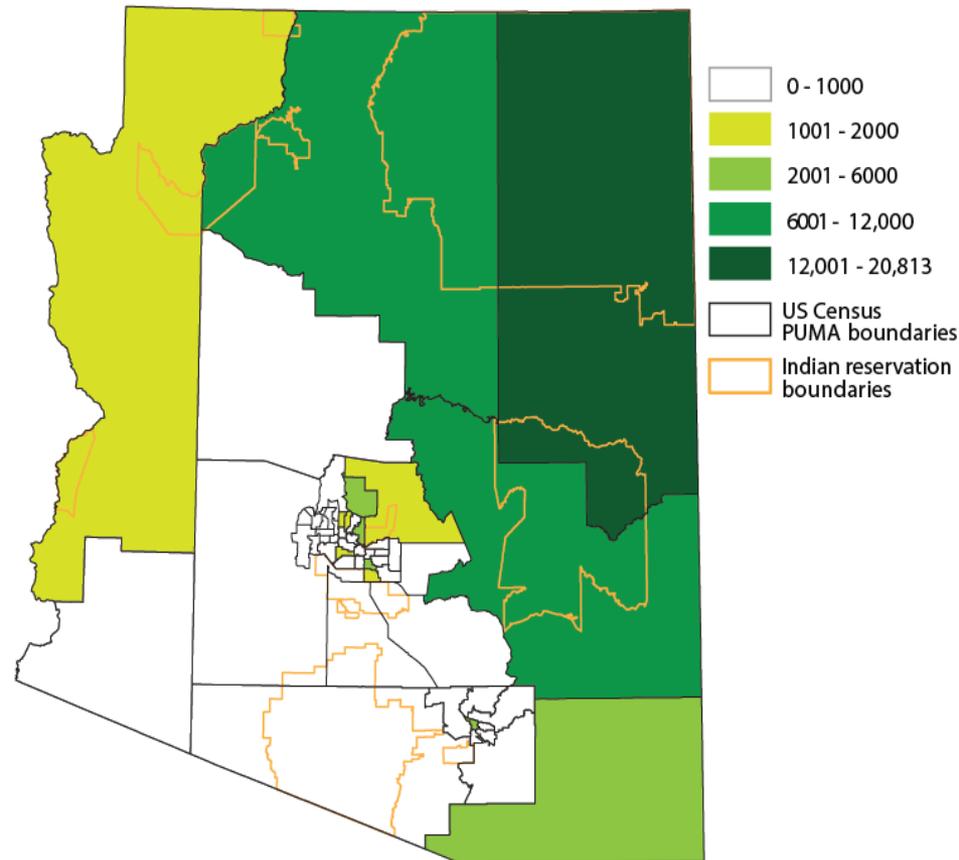
<http://kff.org/health-reform/state-indicator/marketplace-enrollees-eligible-for-financial-assistance-as-a-share-of-subsidy-eligible-population/>



Number of Eligible Uninsured Hispanics



Number of Eligible Uninsured Native Americans



# Low Arizona Participation Rates - Rural, Latino, American Indian

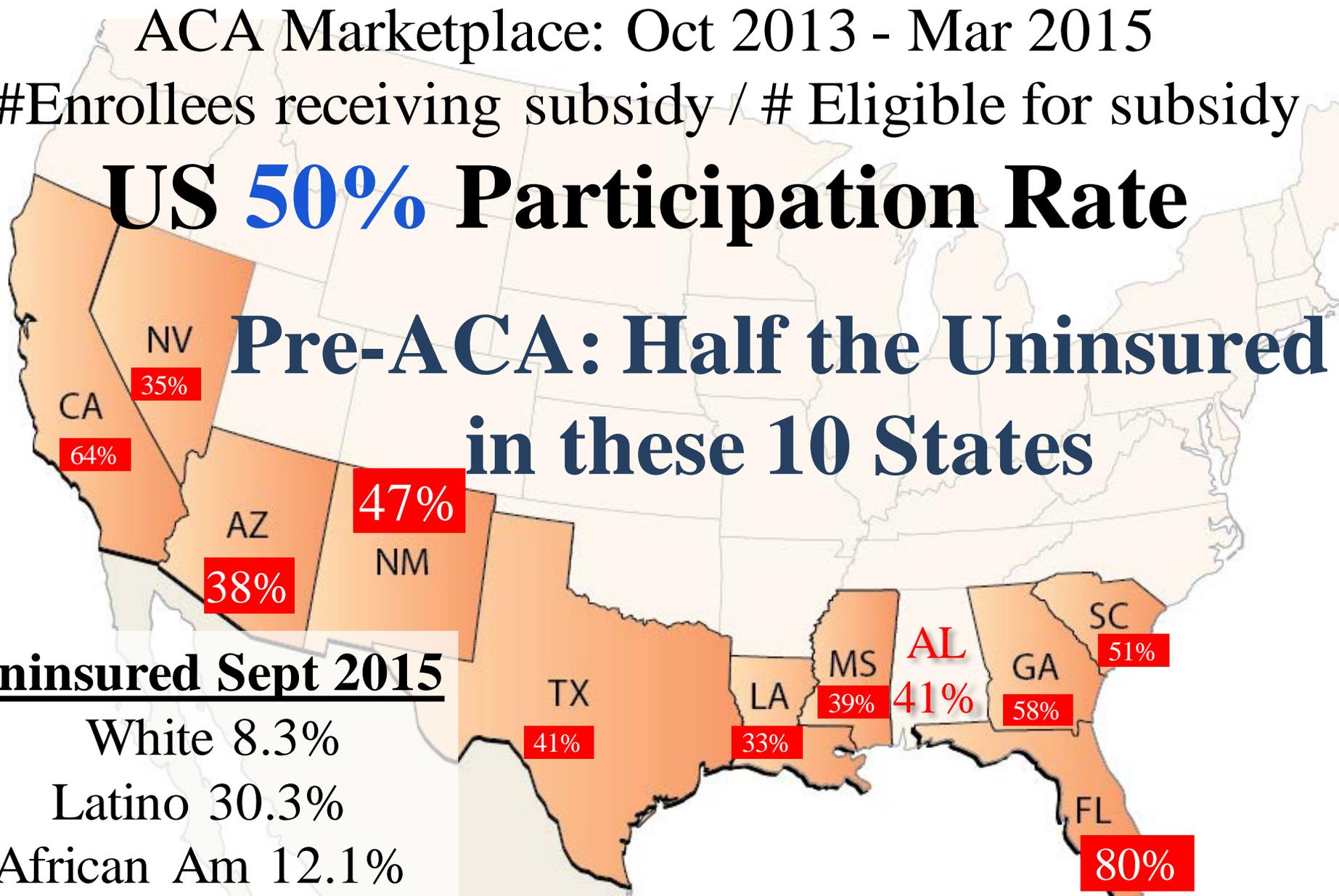


ACA Marketplace: Oct 2013 - Mar 2015

#Enrollees receiving subsidy / # Eligible for subsidy

# US 50% Participation Rate

## Pre-ACA: Half the Uninsured in these 10 States



### Uninsured Sept 2015

White 8.3%  
 Latino 30.3%  
 African Am 12.1%

Accessed 7/6/15at: <http://obamacarefacts.com/2015/03/16/obamacare-enrollment-numbers-as-of-march-2015/>

<http://kff.org/health-reform/state-indicator/marketplace-enrollees-eligible-for-financial-assistance-as-a-share-of-subsidy-eligible-population/>

Accessed 10/27/15: [aspe.hhs.gov](http://aspe.hhs.gov)

# Pre-ACA: 4 US-Mexico Border States: 57% U.S. Hispanic Uninsured

**Hispanic Marketplace  
Participation Low in 2014-  
15**

7.3M uninsured total in CA  
4.1M uninsured Hispanic

1.2M uninsured total in AZ  
0.7M uninsured Hispanic

0.4M uninsured total in NM  
0.2M uninsured Hispanic

6.2M uninsured total in TX  
3.8M uninsured Hispanic

Accessed 10/14/14 at: <http://kff.org/uninsured/state-indicator/rate-by-raceethnicity/>



# *Open Enrollment III (OE-3)*

- APTC average assistance \$270/mo
- 80% pay < \$100/month premium
- 70% enrolled in silver plans after OE-2
- 2016 silver plan premium increase 7.5%
- AZ avg. silver premium increase 17.5%

APTC = Advance Premium Tax Credit

Silver Plan Covers 70% Costs and 30% Are Paid by the Consumer

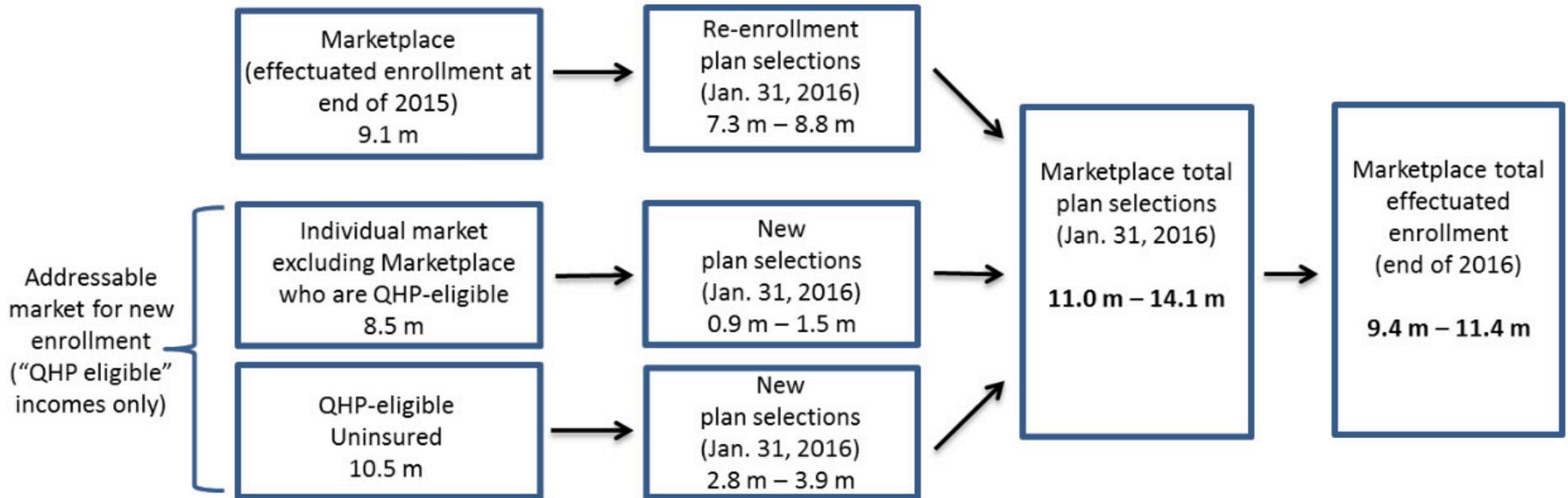
<https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2015-Fact-sheets-items/2015-10-26-2.html>



# Health Coverage and the ACA

## What's forecast for OE-3 Marketplace by Dec 2016

**Range: 9.4 to 11.4 Million Marketplace Enrollees**



**ASPE Report 10/15/15, Accessed 10/27/15 at: <http://aspe.hhs.gov/>**



# We Know the Rural Health Challenges



Higher poverty  
Fewer providers  
Poorer outcomes  
Higher uninsured  
Precarious finances



# Rural Health Workforce



19% (60 Million) US pop. lives in a rural area  
50M live in Health Professions Shortage Areas  
10% physicians practice in rural areas





**azdailysun.com**  
Serving Flagstaff and northern Arizona

# Rural Hospital Margins Improved, but Thin

**Cochise Regional Hospital set to close, after Medicare cut off funding**

July 28, 2015 6:54 pm • By NICK WICKSMAN Cronkite News | AP Content

[http://azdailysun.com/news/local/cochise-regional-hospital-set-to-close-after-medicare-cut-off/article\\_8a34f3a3-db78-5a7f-93c4-ae381af41aba.html](http://azdailysun.com/news/local/cochise-regional-hospital-set-to-close-after-medicare-cut-off/article_8a34f3a3-db78-5a7f-93c4-ae381af41aba.html)

WASHINGTON – Medicare restrictions are crippling rural healthcare centers like Cochise Regional Hospital, which is set to close Friday after a funding dispute with the federal agency, an Arizona health expert testified Tuesday.



Dr. Daniel Derksen, the director of the University of Arizona's Center for Rural Health, was one of several health care experts testifying before a House subcommittee on "rural health disparities created by Medicare."

They told a House Ways and Means subcommittee that rural facilities operate on such thin margins that any change in policy or delay in payment can "push them over the brink."



THE UNIVERSITY OF ARIZONA  
MEL & ENID ZUCKERMAN COLLEGE OF PUBLIC HEALTH  
**Center for Rural Health**

**Dan Derksen MD**

# Did you know?

## Arizona's

114,000 sq. mi.

would encompass

NY, CT, DE, ME,

MA, NH, RI, VT, DC



# Access to Care

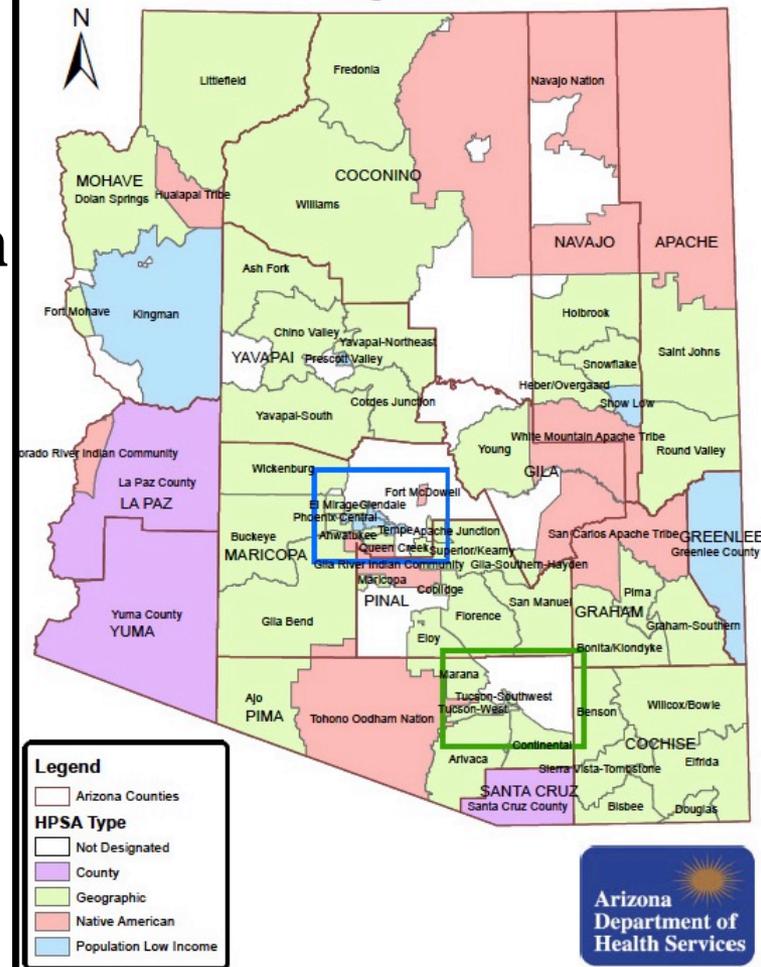
75% Pop. live in Phoenix, Tucson

86% Physicians in Phoenix, Tucson

**CHALLENGE:**  
Distributing the  
health workforce to  
the areas of high need

## Primary Care HPSAs

August 2014



HPSA = federally designated health professions shortage area

I. ACA – Update

II. ACA Medicaid & Marketplace

III. Rural Health

IV. Health Workforce





# Teaching Health Centers

State Pacesetters

**Teaching Health Centers** – move the primary care training pipeline to areas of need. Grads have higher rates of practicing in rural and medically underserved areas.

Teaching Health Center Awardees  
Academic Year 2013-2014

U.S. Department of Health and Human Services  
**HRSA**  
Health Resources and Services Administration

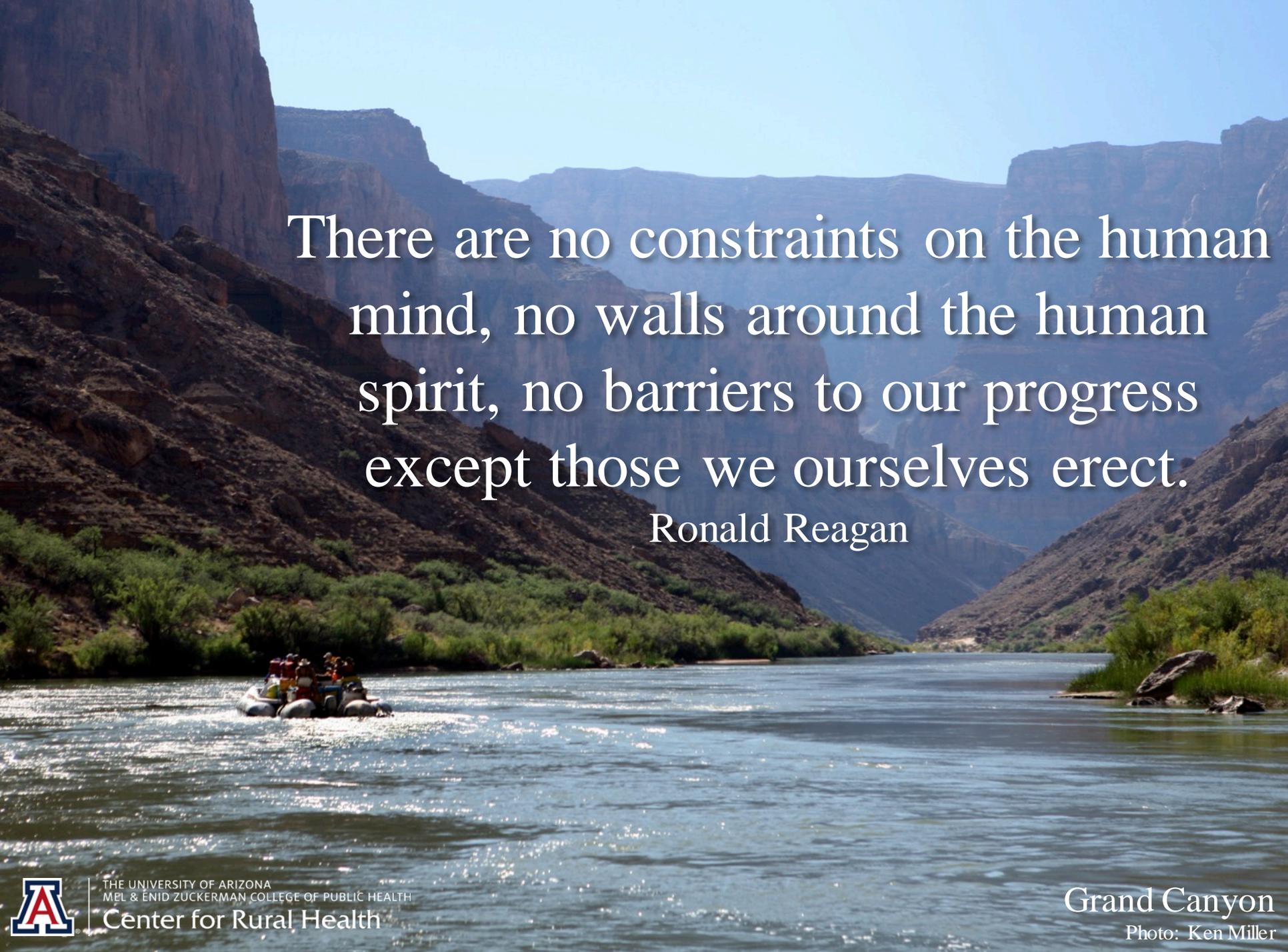
**\$4 Billion in  
Medicaid  
GME?**

**States:** AL, AK, AZ,  
CA, CT, ID, IL, IA,  
KY, ME, MA, MI, MO,  
MT, NM, NY, NC, OK,  
PA, TX, WA, WV



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Center for Rural Health

Dan Derksen MD



There are no constraints on the human  
mind, no walls around the human  
spirit, no barriers to our progress  
except those we ourselves erect.

Ronald Reagan





**Thank you  
Questions?**



THE UNIVERSITY  
OF ARIZONA

## Webinar Schedule

September 29, 2015	How to build, maintain and sustain community coalitions focused on population Health
October 27, 2015	Affordable Care Act: Overview, impact and resources
November 24, 2015	Celebrating Rural Health Day
February 23, 2016	Heart Health in Rural Arizona
March 29, 2016	Farmworker Health Month & Cervical Cancer Awareness Month
April 26, 2016	National Public Health Week
May 31, 2016	Update on Rural Men's Health

For more information contact: Martha Moore-Monroy [mmonroy@email.arizona.edu](mailto:mmonroy@email.arizona.edu) 520.626.8036

Next webinar is scheduled for November 24<sup>th</sup> at noon MDT

Go to <http://telemedicine.Arizona.edu/distant-education/upcoming-workshops>

**Your opinion is valuable to us  
Please participate in this brief survey:**

<https://www.surveymonkey.com/r/AzSORH>

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

This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, DHHS or the U.S. Government.

