



The Affordable Care Act,
MNSure and Workers
Compensation

For the Rehabilitation Provider Update
September 25, 2014

What does
the ACA do?



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Consumer
protections/Market reforms

Lower costs

Access to coverage



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Consumer protections/Market reforms

- **No more denials** for coverage based on an individual's medical history (new coverage and renewal of coverage)
- **No exclusions or waiting periods** on medical plans for individuals with pre-existing health conditions.
- **Fair health insurance premiums** can only be based on age, tobacco usage and geography
- **No annual or lifetime benefit limits** on coverage



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Consumer protections/Market reforms

- **Maximum out-of-pocket costs limited** to no more than \$6,350 for an individual plan and \$12,700 for a family plan for 2014.
- **Limits deductibles** for small group plans to \$2,000 for an individual and \$4,000 for a family.
- **Open Enrollment** period established for the individual market.
- **Standardized Plan Structures** categorizes plans into "metal levels" to make it clearer for consumers



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Mandated benefits for health plans

- Hospitalizations
- Ambulatory services
- Rehabilitative and habilitative services and devices
- Emergency services
- Prescription drugs
- Laboratory services
- Maternity and newborn care (pregnancy, childbirth and breast-feeding support)
- Pediatric dental and vision care
- Mental and behavioral health
- Preventive and wellness services and disease management



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Preventative Services

- At no cost

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Consumer protections/Market reforms

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Affordable consumer options: Public programs

- Expanded Medical Assistance eligibility** for low-income individuals
 - No premiums, very low out-of-pocket costs, broad benefit set, no asset test
 - Access to employer sponsored insurance is not a barrier to eligibility
- MinnesotaCare** made more accessible by removing caps on coverage and waiting periods
 - Reduced premiums, low out-of-pocket costs, broad benefit set
 - Not eligible if you have access to employer sponsored insurance that meets minimal standards

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Qualified health plans (QHPs)

Current insurance companies offering individual/family plans through MNSure:

- Blue Cross Blue Shield
- HealthPartners
- Medica
- PreferredOne
- UCare

Levels of Coverage	Plan Pays on Average	Enrollees Pay on Average (in addition to the monthly plan premium)
Bronze	60 %	40 %
Silver	70 %	30 %
Gold	80 %	20 %
Platinum	90 %	10 %

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Affordable consumer options: Tax subsidies

- **Tax subsidies** reduce the cost of premiums for private insurance for individuals
 - Eligible if you are legally present, do not have qualifying employer sponsored insurance, and are under age 65
 - Reduce the cost of premiums for individuals with household income from 200 to 400 percent of the federal poverty line
 - Cost-sharing subsidies also available to reduce out-of-pocket costs
 - Must purchase Qualified Health Plan through MNSure

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Minnesota coverage continuum in 2014



*Income standard in effect on June 1, 1997, must be maintained to comply with the CHIP maintenance of effort.



Consumer protections/Market reforms

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Individual mandate

- As of January 1, 2014, all U.S. citizens and legal residents are required to obtain health insurance coverage (with some exceptions)
- Starting in 2014, if you don't have health insurance, you will pay a tax penalty. The penalty will increase over time.
 - 2014, it will be the greater of \$95 per adult, or 1% of taxable income
 - 2015, it will be the greater of \$325 per adult, or 2% of taxable income
 - The penalty for a child is half that of an adult



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Employer mandate

- Small employers (50 FTEs or fewer) – not required to offer insurance, but there are new opportunities
- Large employers (more than 50 FTEs) – “Shared responsibility provision” requires large employers to offer insurance to full-time employees that meets minimum essential coverage standards:
 - Cover at least 60 percent of health care costs (actuarial value)
 - Cost less than 9.5 percent of employee's household income
 - Note: delayed until January 1, 2015



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What's MNsure's role?

- **Health insurance marketplace** where consumers can shop, compare and enroll in health coverage
 - Established by Legislation passed in May 2013
 - Governed by seven member board of directors appointed by Governor
 - Went live October 1, 2013
- **Determines eligibility** for Minnesota's public programs and tax subsidies for private insurance
- **Provides free in-person assistance** for consumers to enroll via certified navigators and agents/brokers



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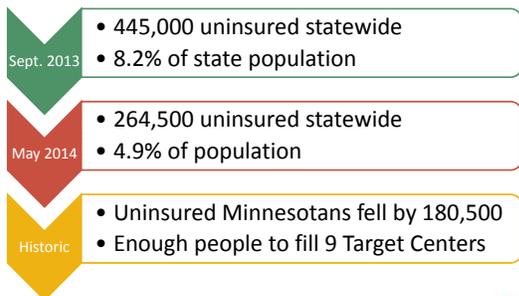
Enrollment opportunities

- Individuals with qualifying life events can enroll year-round
- Individuals may apply and be eligible for Medical Assistance and Minnesota Care year-round
- Members of federally-recognized tribes may enroll or change plan designations one time per month
- Small employers can enroll/renew throughout the year at one time of their choosing
- Next open enrollment period runs November 15, 2014 thru February 15, 2015 (for coverage effective no earlier than January 1, 2015)



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Lowest uninsured rate in state history



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But it hasn't been perfect or easy

- The initial fall rollout was not great.
 - Lots of consumer frustration, and also lots of need to create manual processes where we had failed system functionality
- Improvement through course of open enrollment, but still a lot of challenges
 - Improved call center wait times, improved system functionality, better consumer experience
- Properly focused on improving MNsure for consumers, but also know that back end processes were (and in some cases still are) "messy"

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A few of the lessons learned

- Complexity lead to complexity
 - *An integrated system was going to be more challenging to build, out of the gate*
- Consumers needed a lot of assistance
 - Importance of building our network of assisters
- Listening to (*really* listening to) and working with partners across the spectrum has been, and will continue to be critical to our long term success
- Health reform is more than a website
 - 40% reduction in the uninsured in Minnesota

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Using MNsure

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Enrollment as of September 11, 2014:

325,721 total enrollments

54,617 Private Insurance	71,699 Minnesota Care	199,405 Medical Assistance (Medicaid)
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Help is available

Navigators

- Based in trusted community organizations
- Specially trained
- Do not charge for their services
- Must help any individual
- Keep consumer information and records confidential
- Are not employed by the county, state or MNSure
- Cannot recommend plans or carriers, but can help people understand the differences

Brokers

- Licensed by the Minnesota Department of Commerce
- Specially trained
- Do not charge for their services, compensated by insurance companies
- Are not employed by the county, state or MNSure
- Can provide advice as to which insurance plan is best for an individual's situation based on their medical needs and/or financial situation

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Using the assister directory

public health care programs

MinnesotaCare & Medical Assistance recipients can apply for coverage year-round. Find out if you qualify.

individuals or families

Need financial? Compare plans from MinnesotaCare, MA, and MA. Find out if you qualify for a benefit or free plan.

small business & employees

Discover the new way to shop for health insurance and get the right plan for you. Assistors, employees, find out how to sign up.

assistors

Join our Assister Network of certified assistors who help you understand your options.

general information

Account creation and application access is available 6 AM - midnight every day (October 1st to 11/30/14)

Contact Center Line: 1-855-346-7974

Hours: 8 AM - 8 PM Monday - Friday

medical assistance (MA) or minnesotacare

Current MA and MinnesotaCare enrollees will receive instructions on how to enroll in MA or MA as part of your renewal process. Not sure if you have MA or MinnesotaCare?

special enrollment

2014 Open Enrollment is closed. See if you qualify for **Special Enrollment**

Find help nearby: [Request an assister](#) in your community. [Request an assister](#) in your community.

year-round enrollment:

Enrollment is open year-round for MA, MA, MinnesotaCare and American Indian beneficiaries.

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