

What Consumers in Georgia, North Carolina, and South Carolina need to know about Open Enrollment

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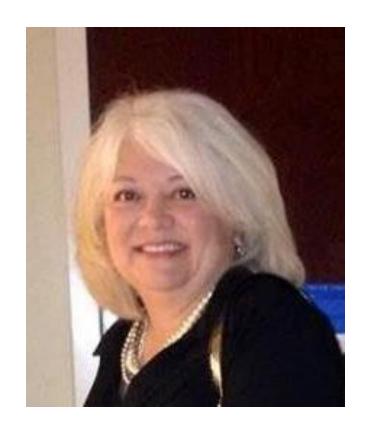
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Events leading up to open enrollment added to uncertainty for insurers and confusion for consumers.

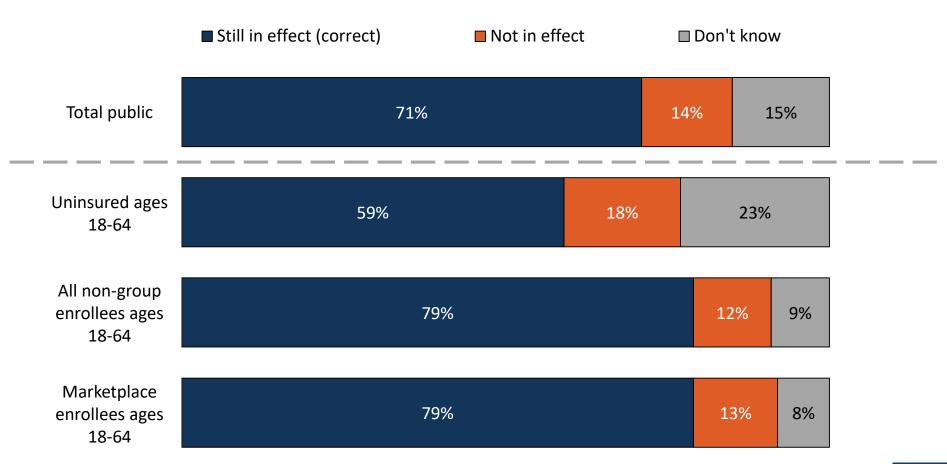
- Debate over Affordable Care Act repeal ended with no legislation enacted
- 2018 Open Enrollment shortened to 6 weeks
- Resources for outreach and consumer assistance have been reduced
 - 90% reduction in federal funding for advertising
 - 41% reduction in federal navigator grants; varying effects by states and programs
- Cost-sharing reduction (CSR) payments to insurers have been terminated
- Bipartisan effort underway in Senate to restore CSR payments to insurers and federal funding for marketing and in-person assistance, though prospects are uncertain



Figure 7

Most are aware the individual mandate is still in effect, but four in ten uninsured are unaware or unsure.

As you may know, the health care law passed in 2010—known as the Affordable Care Act or Obamacare—required nearly all Americans to have health insurance, or else pay a fine. As far as you know, is this requirement still in effect, or not?



NOTE: Refused responses not shown.

SOURCE: Kaiser Family Foundation Health Tracking Polls (pooled interviews from September and October 2017)



The Affordable Care Act is still the law.

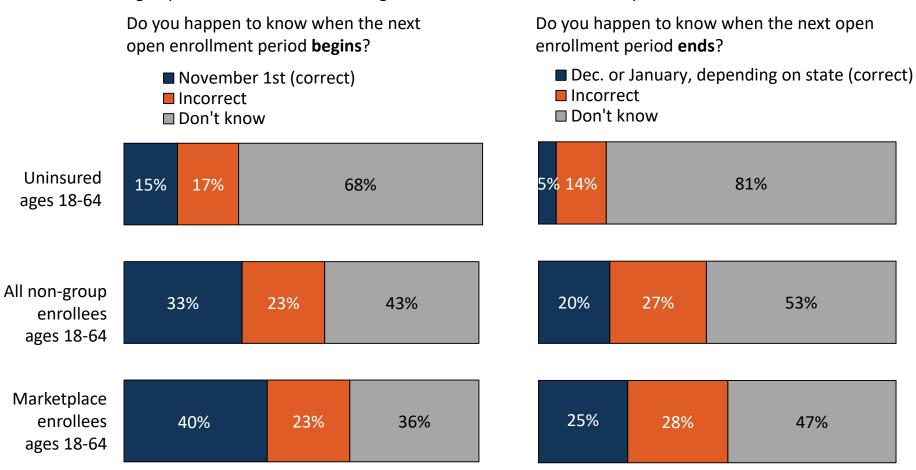
- The law has not been repealed or replaced
- Individuals must have health insurance in 2018 or risk paying a tax penalty
 - Penalty in 2018 is greater of:
 - \$695/adult (\$347.50/child), up to \$2,085/family; or
 - 2.5% of household income above the tax filing threshold, capped at the cost of national average bronze plan premium
 - Exemptions for affordability (if lowest cost marketplace premium is more than 8.05% of income in 2018), poor adults in states not expanding Medicaid, hardship, others
- To satisfy the individual mandate:
 - Sign up for health coverage offered at work
 - Apply for Medicaid/CHIP
 - Over 370,000 in GA, NC, and SC are eligible for Medicaid but not enrolled
 - Apply for private, non-group health insurance on or off Marketplace
 - Premium subsidies available in Marketplace for people with income 100%-400% FPL
- Private non-group health insurance can only be purchased during open enrollment or special enrollment periods (SEP) following life change events

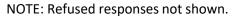


Figure 9

Most uninsured and large shares of non-group enrollees are unaware of the timing of open enrollment.

As you may know, under the health care law there are specific open enrollment periods each year when individuals can sign up for new insurance or change their current health insurance plans.



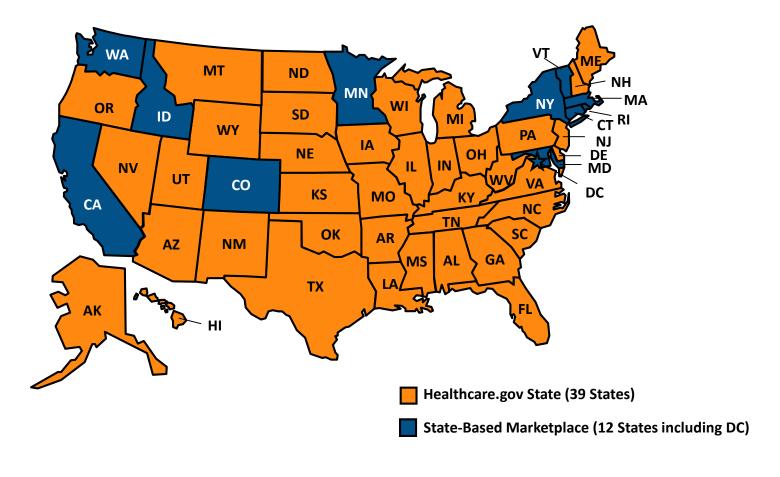


SOURCE: Kaiser Family Foundation Health Tracking Polls (pooled interviews from September and October 2017)



Open enrollment for 2018 will be shorter in most states.

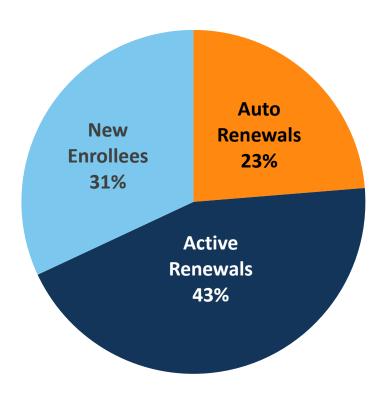
- November 1 December 15, 2017 in Healthcare.gov states
 - Open enrollment period will be 6 weeks, compared to 12 weeks in prior years
- State run marketplaces have option to extend dates, and many have





Nearly one-quarter of Marketplace enrollees autorenewed in 2017.

2017 Marketplace Plan Selections by Enrollment Type



- Auto-renewal will still be an option in 2018, but active shopping is strongly recommended
- Issuer exits means auto-renewal could assign consumers to new insurer with new provider network
- Unlike prior years, consumers will not have the opportunity to change plans in January if they do not like the autorenewal results
- With 2018 premium changes, subsidy amounts could change substantially
- Renewal notices with 2018 premium amounts that typically arrive in October will be late for many consumers



Figure 12

2018 Insurer participation will change in Georgia, but not in North Carolina or South Carolina.

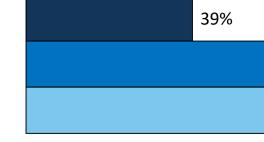
State	Number of Marketplace Insurers		Detail
	2017	2018	
Georgia	5	4	 Humana leaving Marketplace statewide Anthem leaving 74 counties, remaining in 85 Centene (Ambetter) expanding service area to 44 counties Alliant no change Kaiser Permanente no change
North Carolina	2	2	Blue Cross Blue Shield NCCigna
South Carolina	1	1	Blue Cross Blue Shield SC



Most Marketplace enrollees worry rising deductibles, premiums will make their coverage unaffordable.

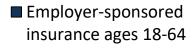
Percent who say they are "very" or "somewhat" worried that their...

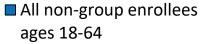
...co-pays and deductibles will become so high that they won't be able to afford to get the health care they need



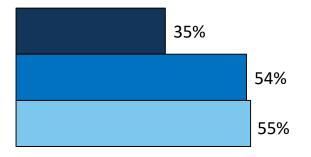
57%

60%





...health insurance premiums will increase so much that they won't be able to afford the plan they have now



■ Marketplace enrollees ages 18-64



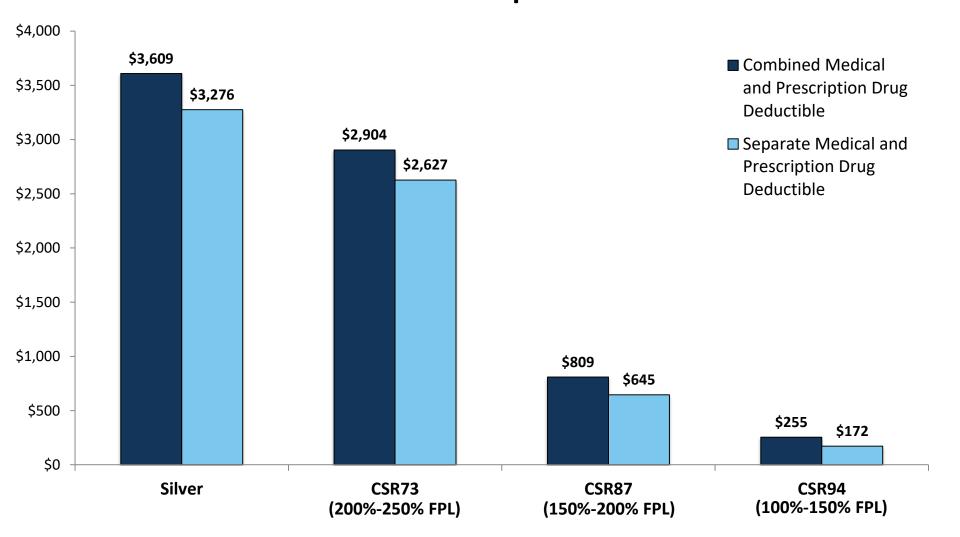
Cost sharing reductions are still available.

- Cost sharing reductions (CSR) are available to eligible individuals in the Marketplace with income 100%-250% FPL
 - \$12,060-\$30,150 for individual in 2018
 - \$24,600 to \$61,500 for family of four in 2018
- Nationwide, 57% of marketplace enrollees were eligible for CSR in 2017
 - 67% in North Carolina; 71% in Georgia, 72% in South Carolina
- CSR subsidies are delivered only through modified Silver plans.
 - Silver plan deductibles, co-pays, and other cost sharing amounts are reduced; federal government reimburses insurers monthly for the value of added coverage
- President Trump's recent announcement ended CSR reimbursement to health insurers, but insurers are still required to offer CSR to eligible individuals
 - Most important takeaway for consumers: Insurers are still required to provide reduced deductibles and copays for low-income marketplace enrollees
 - Second most important takeaway for consumers: While insurers are increasing premiums to offset the loss of payments from the federal government, consumers will mostly be held harmless



Figure 15

Average medical deductibles in cost sharing reduction plans are much lower than in traditional Silver plans.



Source: Kaiser Family Foundation analysis of Marketplace plans in the 39 states with Federally Facilitated or Partnership exchanges in 2017 (including Arkansas, Kentucky, New Mexico, Nevada, and Oregon). Data are from Healthcare.gov health plan information for individuals and families available here: https://www.healthcare.gov/health-plan-information-2017/



Most insurers raised premiums to address the termination of cost sharing subsidy payments, but states allowed different approaches.

- 1. Allow increases in premiums for silver plans
- 2. Allow increases in premiums only for silver plans offered through the marketplace (**South Carolina** adopted this approach)
- 3. Allow increases in premiums across-the-board in the individual insurance market
- 4. Do not allow any increase in premiums tied to the termination of cost-sharing subsidy payments

Rating approaches taken by insurers in **Georgia** and **North Carolina** are not yet public



How will different pricing approaches affect consumers?

Premiums increased on Silver plans only

- Premium increases will be higher on Silver plans than on Bronze or Gold plans
- Premium tax credits (PTC) are tied to the cost of the benchmark Silver Plan, so tax credits will also increase
- Important for consumers to review plan prices during OE
 - If eligible for both PTC and CSR, can avoid premium increase
 - If eligible for PTC only, can avoid premium increase, possibly find other good deals
 - If not eligible for PTC, can avoid premium increase

<u>Premiums increased across all plans</u>

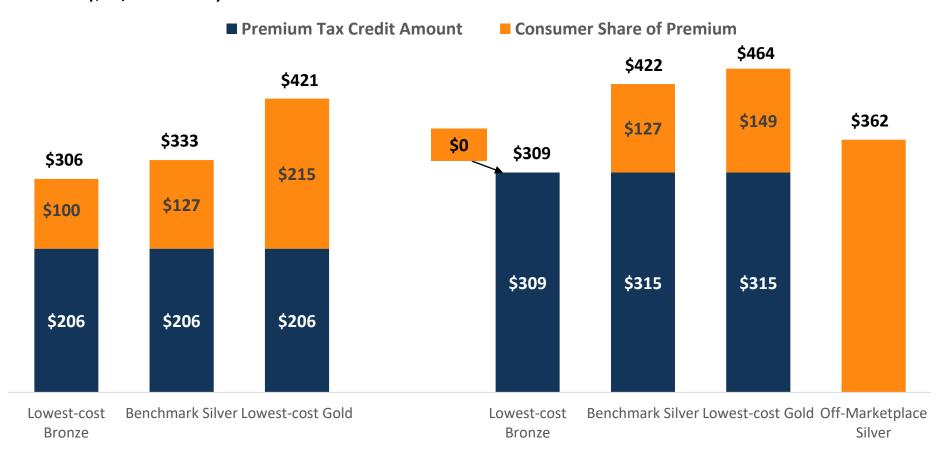
- Premium increases will be applied on all Silver, Bronze, and Gold plans
- Premium tax credits (PTC) are tied to the cost of the benchmark Silver Plan, so tax credits will
 also increase, but not by as much as in states that increased Silver premiums only
- Important for consumers to review plan prices during OE
 - If eligible for both PTC and CSR, can avoid premium increase
 - If eligible for PTC only, can avoid premium increase
 - If not eligible for PTC, will see higher premiums on all plans



Figure 18

2018 premiums in South Carolina are increasing, but subsidyeligible consumers will pay the same or less.

Advance premium tax credit amounts and consumer share of premiums for 30-year old in Charleston, SC with income at 200% FPL (\$24,120 in 2018)



2017 Monthly Premiums

2018 Monthly Premiums



New enrollment rules may add to confusion.

- Failure to reconcile
 - Consumers who received advanced premium tax credits (APTCs) in 2016 and who have not yet filed their 2016 federal income tax return with Form 8962 may be denied APTCs in 2018
 - Marketplace eligibility determination notice won't specify this reason
 - Consumers can regain eligibility for APTC by filing 2016 federal return with Form 8962
- Insurers can require repayment of 2017 unpaid premium debt
 - Insurers can require payment of back due premiums from prior 12 months before issuing new coverage for 2018
 - For 2018, people who enrolled through special enrollment periods may be at risk
 - New rule, effective June 19, 2017, applies to premium debt after that date
 - Prior notice required in 2017
 - Appeals process not yet clearly defined
 - Contact marketplace, state insurance regulator, in-person assister for help



Start early. Waiting to the last minute risks delays.

- "Surge" signups as deadline approaches may increase with shorter Open Enrollment period
 - Healthcare.gov slowdowns, call center waits are possible
 - Unclear whether "in-line" enrollment will be permitted for those who are unable to complete their enrollment by Dec. 15 deadline
- Planned maintenance on HealthCare.gov during Open Enrollment
 - Evening of November 1, Sundays from midnight to noon
- Navigator funding reduced 41%, on average, in federal marketplace states
 - Reductions vary by state: 10% in NC, 61% in GA, and 66% in SC
 - Response to funding reductions will vary: Staff layoffs, reduced service areas,
 reduced service hours expected in GA and in SC*
- Demand for in-person help can exceed capacity in final weeks of Open Enrollment



KFF Resources on Open Enrollment

- Health Reform Frequently Asked Questions
 https://www.kff.org/health-reform/faq/health-reform-frequently-asked-questions/
- Marketplace Subsidy Calculator (2018 updates pending) https://www.kff.org/interactive/subsidy-calculator/
- Penalty calculator (pending)
- ACA and You Explainers https://www.kff.org/understanding-health-insurance/
- State Health Facts https://www.kff.org/statedata



WHAT GEORGIA CONSUMERS NEED TO KNOW

- Financial help is still available
- When prices rise, so do tax credits
- Shop early avoid the rush
- Help is available



HELP WE OFFER

- Community Enrollment Hours/Events
 - 149 out of 159 Counties
 - ~ 11 events a day across the state
- Virtual Navigation Center
 - Telephone and Online Navigation
 - Staffed 7am to 7pm by Georgians
- Self-service Aids
 - Enrollment Workbook
 - Educational Videos
- Referral Network
 - Other Navigators, CACs, and Agents



GETTING HELP IN GEORGIA



One Stop Shop for Georgia Information

www.insurega.org

- Events by County and Date
- Enrollment Workbook
- Enrollment Videos
- Find Other Assisters
- Educational Resources

1.866.988.8246

help@insurega.org



NC Navigator Consortium



- Statewide group of 12 nonprofits
- Providing outreach and enrollment opportunities across NC from Outer Banks to western mountains since 2013

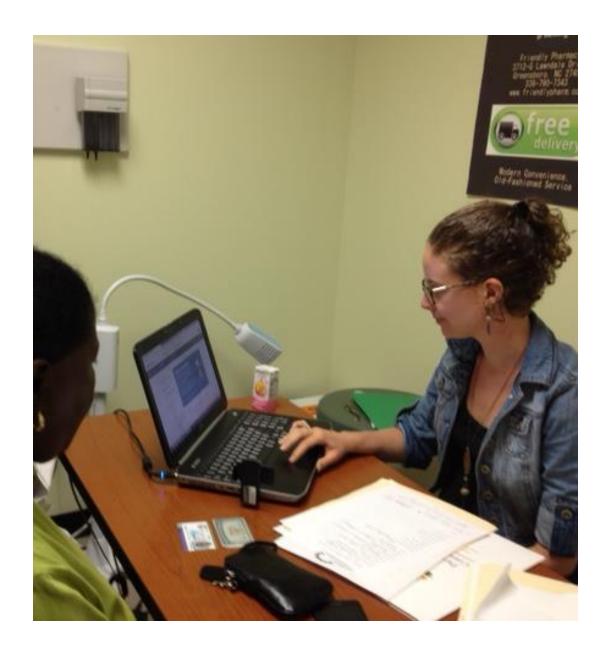
- The Marketplace will open for business on November 1st
- We will be sharing key
 messages and answering
 consumer questions later
 today on three TV networks
 around NC WRAL in Raleigh,
 WECT in Wilmington, and
 WFMY in Greensboro



- North Carolinians should take action early in the OEP. We expect demand to be high during the shortened OEP
- The NC Navigator
 Consortium has more than
 30 walk-in friendly
 enrollment events in the
 first week of the OEP.
 Events will be held across
 NC in cities like
 Fayetteville, Raleigh,
 Charlotte, and Asheville,
 as well as in smaller
 communities such as
 Plymouth, Roxboro,
 Murphy, and Fairmont



- Consumers who had Marketplace plans should return to Healthcare.gov to review the plans and prices for 2018
 - Plans & prices change every year!
 - Consumers may find options that work better for the needs and budgets
- Even though premiums increased, financial help for premiums will go up too
 - Financial help goes up when premiums rise
 - For 2018 coverage, we expect APTCs to be larger than ever because Silver plans will be more expensive



- Financial help is still here!
- People can still get help with both the cost of premiums (APTCs) and the cost of healthcare, such as reduced co-pays and deductibles (CSRs)
- 9 out of 10 North Carolinians who enrolled in 2017 coverage received financial help with their monthly premiums





In-Person Help is Available

- Have questions? Confused?
 Want help with your application? Need postenrollment support?
- NC's Assisters are here to help!
- Call us at 1-855-733-3711 or go online to NCNavigator.net.

Open Enrollment signupSC

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What's the Same in SC?

- Affordable Care Act is still law
- The penalty still exists
- BlueCross BlueShield of South Carolina is still the only Marketplace issuer
- Enrollment assisters are available



What Consumers Need to Know

Discounts

Shop to Save

Debt

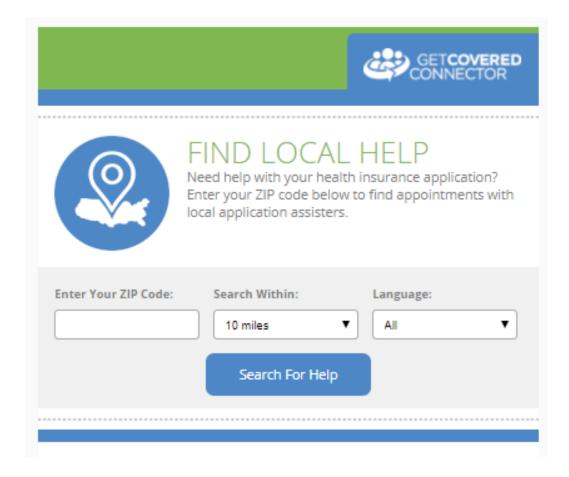
Unpaid premiums must be paid before 2018 insurance can be effectuated

Documents

New verification processes are in place



signupSC.com







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