The Affordable Care Act's Health Insurance Marketplace:

Consumer education resources for public health practitioners

September 2013

In March 2010, Congress passed and President Barack Obama signed the Patient Protection and Affordable Care Act into law. The ACA – also known as Obamacare – contains important provisions intended to increase access to health coverage and care, expand our focus on prevention and public health, bolster our health workforce and infrastructure, promote quality and efficiency in our health system and curb health care costs.

Many provisions of the ACA are already in effect, but it is now time to launch the major components that are predicted to expand coverage to 25 million uninsured Americans over the next ten years. On Oct.1, the ACA's Health Insurance Marketplace will officially open, and consumers will be able to shop for and enroll in coverage that will begin as early as Jan. 1. Expansions of Medicaid coverage in many states and new consumer protections will also go into effect on Jan. 1.



This information and resource guide can help public health practitioners and other partners educate consumers about the Affordable Care Act's new Health Insurance Marketplace and the importance of obtaining insurance coverage.

Tip: Use the hyperlinks throughout the document, or the list of links at the end, to find more information on each topic at Healthcare.gov.

Unfortunately, most Americans still don't understand how the ACA can benefit them or what the marketplace is and how to use it. As one of the Centers for Medicare and Medicaid Services' Champions for Coverage, APHA is joining the "all-hands-on-deck" effort happening across the U.S. to educate consumers about how the law will impact them in terms of new benefits, options and responsibilities. Many public health practitioners can play an important role in this consumer education effort. This can mean as much as providing enrollment assistance, or be as simple as directing people to the marketplace website and call center. APHA created this document to connect public health practitioners and other partners with information and resources they can use to educate consumers about the Affordable Care Act's new Health Insurance Marketplace and the importance of obtaining insurance coverage.³

Essential information to share

Official marketplace websites:

Healthcare.gov and Cuidadodesalud.gov

- Information and answers anytime
- Compare plans and enroll starting Oct. 1
- Coverage starts as early as Jan. 1, 2014

24-hour toll-free marketplace call center:

1-800-318-2596 (1-855-889-4325 TTY/TDD)

- Information and answers anytime
- Enrollment assistance starting Oct. 1
- Assistance in 150+ languages

In-person assistance locators:

https://Localhelp.healthcare.gov and https://ayudalocal.cuidadodesalud.gov

- Enter City and State or Zip Code to find local assistors
- New resources will be added regularly

Consumer education resources for partners

Official resources for partners: http://marketplace.cms.gov, including:

- consumer handouts and fact sheets in multiple languages,
- wallet cards with the marketplace website and phone number,
- a list of what consumers will need to apply for coverage,
- a calendar of key dates,
- explanatory videos and widgets with links to the marketplace,
- best practices for explaining the marketplace, and
- trainings for staff and presentations for the public.

Other helpful websites:

- www.apha.org/advocacy/Health+Reform
- www.cdc.gov/stltpublichealth/Products/health_toolkit
- www.kff.org/health-reform
- www.enrollamerica.org
- www.familiesusa.org

What is the Health Insurance Marketplace and why is it important?

The Health Insurance Marketplace will give Americans who are uninsured, or who buy their own coverage, a new way to shop for coverage.

- Easier to shop and compare: For the first time, consumers will be able to go to one place to search for health coverage options; to get accurate information in easy-to-understand language on different plans; and to make apples-to-apples comparisons of private insurance plans. Consumers will be able to get comprehensive information about plan benefits, quality and price.
- One application to qualify and enroll: Consumers will only have to fill out one application⁵ to learn if they and their family members qualify for programs like Medicaid or the Children's



Healthcare.gov, the marketplace website

- Health Insurance Program, or to find out if they qualify for lower costs on monthly premiums or out-of-pocket costs on private plans. The single application will also allow consumers to enroll themselves and their family members into the plan(s) that best meet their needs, whether Medicaid, CHIP or private insurance.
- Comprehensive benefits, consumer protections: All health plans offered in the marketplace must cover a comprehensive set of benefits, including physician visits, preventive care, hospital stays and prescriptions. Plans must also treat everyone fairly; discrimination against individuals with preexisting conditions and charging higher rates based on gender will be banned.

The federal government will manage the marketplace for some states, while other states will run their own marketplaces and may give them different names like Covered California or Maryland Health Benefit Exchange. Regardless, consumers can find the information they need at Healthcare.gov, or by calling 1-800-318-2596 (or 1-855-889-4325 TTY/TDD). Healthcare.gov has more information about the marketplace, plus information to share with consumers on how insurance works and why it is important. See partner resources above for printable materials on these topics.

What key dates do consumers need to know?

The key dates for marketplace enrollment and coverage are Oct. 1, Jan.1 and March 31. Healthcare.gov has more information on these key dates¹¹ and a full ACA timeline. ¹² **See partner resources above** for a printable handout.

October 1, 2013

•The marketplace officially opens; consumers can start submitting applications and enrolling for coverage.

January 1, 2014

- Marketplace plan coverage begins as early as this date.
- Medicaid expansions begin in many states.
- •New insurance protections begin, such as the ban on denying coverage based on pre-existing conditions.
- Minimum essential coverage requirement begins (see below).

March 31, 2014

• The first marketplace open enrollment period ends. After this date, consumers will not be able to get health coverage through the marketplace until the next annual enrollment period (in fall 2014, to enroll for coverage that will begin January 2015), unless they have a qualifying life event like a job loss, birth or divorce.



How and where can consumers access the marketplace and get answers to their questions?

There are three ways consumers can access the marketplace and get assistance: online, on the phone or in person. Consumers can submit their marketplace applications online, by mail, or in person. **See partner resources above** for printable materials explaining these options, including a wallet card with the website and phone number.



The official marketplace websites are Healthcare.gov and Cuidadodesalud.gov. Already, consumers can find answers to common questions¹³ and learn how the marketplace will work in their states.¹⁴ Consumers can also chat online with marketplace representatives¹⁵ or sign up for email and text updates.¹⁶ Starting Oct. 1, they can find plan and pricing information¹⁷ and enroll for coverage.



There is also a 24-hour toll-free marketplace consumer assistance number: 1-800-318-2596 (or 1-855-889-4325 TTY/TDD).

Trained representatives can provide educational information prior to Oct. 1, and enrollment assistance after Oct. 1. Assistance is available in more than 150 languages. Special assistance for small business owners is available at 1-800-706-7893, Monday through Friday, 9 a.m. to 5 p.m. EST.



In-person assistance will also be available starting in October.

Depending on whether a state is establishing its own marketplace, defaulting to the federal marketplace or partnering with the federal government to run a marketplace, assistance program options include navigators, non-navigator assistance personnel, certified application counselors, and agents and brokers. CMS created an overview of these assistance programs. ¹⁸ Consumers and partners can find assistance locations near them at LocalHelp.healthcare.gov or AyudaLocal.cuidadodesalud.gov. The database will be regularly updated to add new locations as they become available.

Can and should everyone use the marketplace? Who will qualify for lower costs?

Most people without employer or government-provided health insurance will be able to purchase coverage in the marketplace if they want to, and many will get help with costs. Based on income and access to other coverage, ¹⁹ individuals and families may qualify for lower monthly premiums ²⁰ or out-of-pocket costs ²¹ or for public programs such as Medicaid ²² or CHIP. ²³ The marketplace will be most important and useful for people who currently have few or no coverage options, such as individuals with pre-existing conditions ²⁴ or those who are self-employed, ²⁵ employed part time ²⁶ or unemployed. ²⁷

Not everyone will need to use the marketplace, and some won't be eligible to participate. People who already have coverage through their employers²⁸ or through Medicare²⁹ probably won't need to use the marketplace, although someone paying high costs for employer coverage might want to explore their options in the marketplace. Some populations,³⁰ including non-citizens and incarcerated people, will not be eligible to participate in the marketplace.

What do consumers need to know about the requirement to obtain coverage?

Starting in 2014, the ACA's minimum essential coverage provision (also known as the "individual mandate") will require U.S. citizens and legal residents to (1) obtain and maintain "minimum essential coverage" for themselves and their dependents, or (2) to pay a penalty, or (3) to opt out if they qualify for one of numerous exemptions. Healthcare.gov has information about the coverage requirement, including what qualifies as minimum essential coverage, the penalty and who is exempt from the requirement.



What other facts about the ACA can public health practitioners share with consumers and the community?

With so much focus on the major ACA provisions that begin in 2014, many people don't realize that **the health care law is already making a difference in the lives of millions of Americans.** Since the law passed in 2010, 3.1 million young adults have gained insurance through their parents' plans, 105 million Americans have had lifetime limits removed from their insurance coverage, 54 million Americans have access to no-cost preventive services through their insurance plans and nearly 6.3 million seniors have saved more than \$6 billion on their prescription drugs. Besides affecting the lives of millions of individuals, the ACA is also improving the health of our communities, through the Prevention and Public Health Fund, the National Prevention Strategy and new Community Benefit requirements for hospitals. **Together, the ACA's reforms are beginning to shift our health system from one that focuses on treating the sick to one that prioritizes keeping people healthy.** For more information, visit APHA's health reform website³³ or Healthcare.gov.

Notes and resources:

Find more information:



¹ **The Patient Protection and Affordable Care Act** (P.L. 111-148) was enacted March 23, 2010. The Health Care and Education Reconciliation Act (P.L. 111-152), which amends parts of P.L. 111-148, was enacted March 30, 2010. Collectively, they are referred to as the Affordable Care Act. Read the ACA: www.hhs.gov/healthcare/rights/law

² CBO's May 2013 Estimate of the Effects of the Affordable Care Act on Health Insurance Coverage: www.cbo.gov/sites/default/files/cbofiles/attachments/44190 EffectsAffordableCareActHealthInsuranceCoverage 2.pdf

³ APHA is proud to be recognized by the Centers for Medicare and Medicaid Services as a "Champion for Coverage," and to share CMS and HHS resources in this document. However the contents of this document are the sole responsibility of APHA.

⁴Accurate information in easy to understand language: www.healthcare.gov/how-does-the-health-care-law-protect-me/#part=4

⁵One application: www.healthcare.gov/how-do-i-apply-for-marketplace-coverage

⁶Comprehensive set of benefits: www.healthcare.gov/what-does-marketplace-health-insurance-cover

Discrimination based on pre-existing conditions: www.healthcare.gov/what-if-i-have-a-pre-existing-health-condition

⁸Charging higher rates based on gender: www.healthcare.gov/blog/here-s-how-the-health-insurance-marketplace-helps-women

⁹More information about the marketplace: www.healthcare.gov/what-is-the-health-insurance-marketplace

¹⁰How insurance works and why it is important: www.healthcare.gov/why-should-i-have-health-coverage

¹¹**Key dates:** www.healthcare.gov/what-key-dates-do-i-need-to-know/#part=1

¹²ACA timeline: www.healthcare.gov/timeline-of-the-health-care-law/#part=2

¹³Answers to common questions: www.healthcare.gov/all-topics

¹⁴How the marketplace will work in their state: www.healthcare.gov/what-is-the-marketplace-in-my-state

¹⁵Chat online with marketplace representatives: www.healthcare.gov/chat

¹⁶Sign up for email and text updates: www.healthcare.gov/subscribe

¹⁷Pricing information: www.healthcare.gov/how-much-will-marketplace-insurance-cost

¹⁸Consumer assistance roles: www.cms.gov/CCIIO/Resources/Files/Downloads/marketplace-ways-to-help.pdf

¹⁹Access to other coverage: www.healthcare.gov/what-if-i-have-job-based-health-insurance

²⁰Lower monthly premiums: www.healthcare.gov/will-i-qualify-to-save-on-monthly-premiums

²¹Lower out-of-pocket costs: www.healthcare.gov/will-i-qualify-to-save-on-out-of-pocket-costs

²²Medicaid: www.healthcare.gov/do-i-qualify-for-medicaid

²³Children's Health Insurance Program: www.healthcare.gov/are-my-children-eligible-for-chip

²⁴Individuals with pre-existing conditions: www.healthcare.gov/what-if-i-have-a-pre-existing-health-condition

²⁵**Self-employed individuals:** <u>www.healthcare.gov/what-if-im-self-employed</u>

²⁶Individuals employed part time: www.healthcare.gov/what-if-im-a-part-time-employee-without-health-coverage

²⁷Unemployed individuals: www.healthcare.gov/what-are-my-health-coverage-options-if-im-unemployed

²⁸Already have coverage through their employers: www.healthcare.gov/what-if-i-have-job-based-health-insurance

²⁹**Medicare:** www.healthcare.gov/if-i-have-medicare-do-i-need-to-do-anything

³⁰Populations not eligible to participate: www.healthcare.gov/am-i-eligible-for-coverage-in-the-marketplace

³¹Minimum coverage requirement: www.healthcare.gov/what-if-someone-doesnt-have-health-coverage-in-2014

³²ACA by the numbers: www.whitehouse.gov/healthreform/healthcare-overview

³³APHA's health reform website: www.apha.org/advocacy/Health+Reform