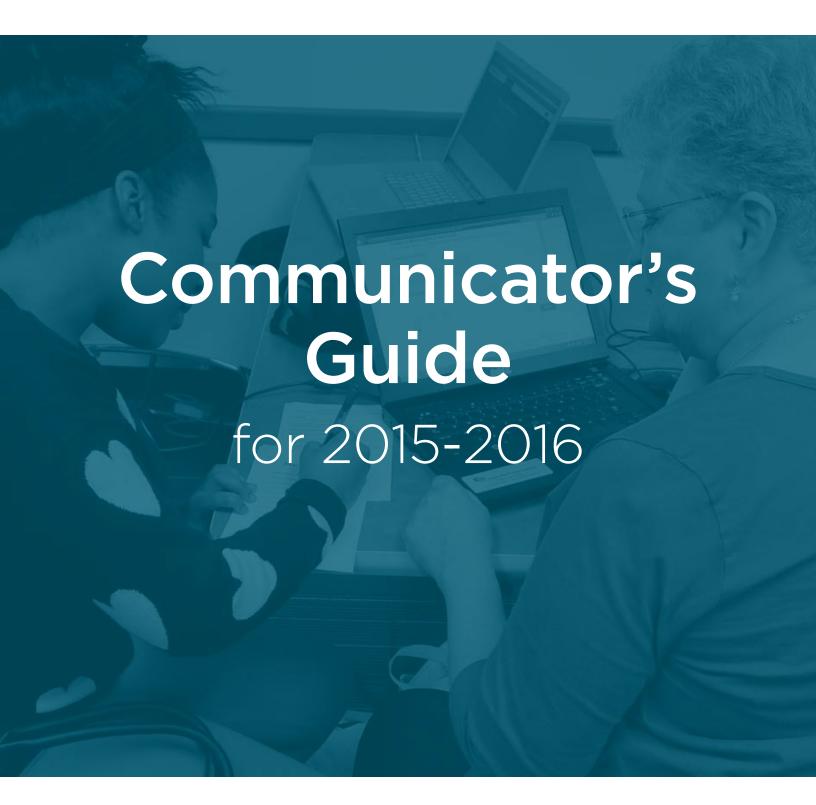




Get Covered. Stay Covered.

GetCoveredAmerica.org





Get Covered. Stay Covered.

Communicator's Guide for 2015-2016

Welcome

Following the historic first open enrollment period under the Affordable Care Act (ACA), 16.1 million Americans now have quality, affordable health coverage through the Health Insurance Marketplace, Medicaid, and the Children's Health Insurance Program (CHIP). While this is a tremendous accomplishment, we know that millions remain uninsured—and they may be harder to reach and continue to face barriers in signing up for coverage. For the next open enrollment period beginning on November 1, many of our messaging and educational challenges remain the same: too many Americans are still unaware of the new health insurance benefits and financial assistance that are available to them.

It's our job to spread the news. That's why we consider everyone in the enrollment community a "communicator."

Get Covered America is a national campaign of Enroll America focused on raising public awareness and engaging consumers about the new health care benefits and health insurance options made available under the ACA. During the second open enrollment period, we engaged over 6 million consumers online, on the phone, and in person to give them the information they needed to enroll in coverage.

We know consumers are busy and hear from a lot of different sources of information throughout the day. Our goal is to cut through the clutter and give consumers the facts about the new health insurance options that are available to them.

Based on messaging research, surveys, and our experience on the ground, we have developed this Communicator's Guide with key messages that consumers need to know and understand about their options. We know consumers are hungry for the facts and, working together, we can provide as much clear and helpful information as possible to lead even more Americans to get covered and stay covered.

Anne Filipic

President, Enroll America

Key Points: Moving Consumers to Action

There is a lot of important information to share with consumers about the new health insurance options available to them. As communicators, our first priority is to give consumers confidence that they can get covered and stay covered. All of the messages in this guide are aimed to do just that—create confidence to take action.

The **Key Points** below provide a step-by-step framing for the public and include the essential elements of what we want to communicate. Using the framework below, move clockwise. With each step the messaging should move the consumer to action. Start by laying out the facts, then convince them of affordability, then finish by describing the resources available to help for signing up or renewing.



STEP ONE: Lay Out the Facts

Everyone wants the certainty that comes with health coverage, but too often misconceptions about cost and what is covered get in the way. The reality is that financial help and comprehensive coverage means health insurance is finally affordable and within reach. Here's how to address common misconceptions by laying out the facts:

Their Question	Your Response
What do you mean Get Covered?	The Health Insurance Marketplace is a new way to find health insurance. It offers quality health plans and financial help to help pay for the cost of your health insurance.
	Having health insurance means that if you or a family member gets sick, you won't have to worry about big medical bills or going bankrupt.
Can I afford it?	For the first time ever, financial help is available to help pay for the cost of insurance.
	In fact, 87% of those who have already signed up in the Marketplace qualified for financial help, and most Americans are finding plans for \$100 a month or less.
What will it cover?	All plans offered through the Marketplace must cover the important benefits, including doctor visits, hospitalizations, maternity care, emergency room visits, prescriptions and more.
	All plans cover free preventive care with no co-pay. This means free cancer screenings, checkups, and more.
I'm healthy. Why do I need it?	No one plans to get sick or injured, but when the unexpected occurs, you want to know that you and your family are covered.
	Medical debt is the #1 cause of bankruptcy in the U.S.
	If you do not secure coverage for 2016, you may have to pay a fine: \$695 or 2.5% of your income, whichever is more.
What if I'm denied coverage?	No one can be turned down or charged more for coverage because they are sick or have a pre-existing condition like asthma, diabetes or even cancer.

STEP TWO: Convince Them of Affordability

The majority of Americans who are signing up or renewing their health coverage can get a plan for \$100 per month or less. In fact, 87% of people who signed up in the Marketplace received financial help for their new coverage.

Key Points

- Now there are low-cost health insurance options available, and you can get help paying for the cost of your insurance.
- An individual making up to \$46,680 or a family of four earning up to \$95,400 a year could qualify for financial help.

 To see how much financial help you could receive, use the calculator available at GetCoveredAmerica.org/Calculator
- In the next open enrollment period starting November 1, millions will qualify for financial help to cover the cost of their insurance.



- Millions of Americans are already paying less for their Marketplace coverage than their cable bill.
- In the second enrollment period, 87% of those who signed up qualified for financial help.



- Those who received financial help are paying an average of \$105 a month for their coverage.
- Overall, most Americans in the federal marketplace are paying \$100 or less for their coverage each month.
- If you don't get covered, you might have to pay a fine of \$695 per person or 2.5% of your income (whichever is higher).

Get local with the costs!

Consumers want to hear about what their neighbors might be paying.



- Pam in Pennsylvania got covered for just \$9.43 a month!
- The average monthly tax credit for Pennsylvanians who got covered with financial help during the second open enrollment period is \$226 a month.
- Visit EnrollAmerica.org/ Communicators for more statespecific info.



STEP THREE: How, When, Where to Sign Up

There are resources available that make signing up for coverage easier including free help online, in-person, or over the phone.

The Health Insurance Marketplace will reopen on November 1, 2015, through January 31, 2016. If you sign up by November 15, 2015, your coverage could begin as early as December 1, 2015.

Visit <u>GetCoveredAmerica.org</u> to sign up for updates, get the facts, find events in your state, and help get the word out to friends and family.

You can also learn more about how to sign up or get assistance with your application with local, in-person help. To find help near you, visit: GetCoveredAmerica.org/Connector

Low-Income Consumers and Those With Qualifying Life Events:

Moving, a change of income, a loss of coverage, marriage, birth or adoption, and other qualifying life events may trigger a special enrollment period for some. This guarantees consumers can get or change marketplace coverage during major periods of transition, even outside of open enrollment season.

Additionally, free or low-cost coverage is available to those who qualify. In some states, this program is called Medicaid/CHIP, but your state's program may have a different name and enrollment is year-round.

You can't afford to wait—make your plan to secure coverage today!

Enroll by:	For coverage beginning:
November 15, 2015	December 1, 2015
December 15, 2015	January 1, 2016
January 15, 2016	February 1, 2016

On Renewals: Get Covered. Stay Covered.

The messaging in this guide also applies to those who will be renewing their coverage, with some additional helpful points:

- 1. Consumers must **update their financial information** to be sure they are receiving the appropriate amount of financial help.
- 2. They should **shop the Marketplace** and pick the plan that best meets their family's needs and budget. There may be new options available in their area.
- 3. They should **act by December 15th** to ensure the smoothest transition to coverage.

Words to Use, Words to Avoid

We've heard from consumers across the country, and we know they want information about the Health Insurance Marketplace to be conveyed clearly and in a way that works for them. Below are some language tips to

help you communicate important aspects of the Marketplace. "Words to Use" are key phrases to emphasize when communicating and "Words to Avoid" are phrases that don't resonate with consumers.

Table 1. Words to Use

Words to Use	Why
"Fits your needs and budget"	"Fits your needs and budget" can apply to each person's unique economic and health situation.
"Financial help is available"	People need to know they can get help paying for their insurance. This is a more consumer-friendly term than "tax subsidy" or "tax credit."
"New health plans"/ "New way to find health insurance"	Emphasizing that these are "new health plans" helps to remind consumers that these options have not been available to them before and this is not more of the same. Incorporating the word "new" helps across the board, including using it to describe that there are "new options" and this is a "new way" to shop for health insurance.
"In-person help" or "local help"	People who signed up with the help of an in-person expert were twice as likely to enroll in coverage, but many are still unaware this help is available to them. This is a key message to emphasize. These terms are more consumer-friendly than "navigator" or "enrollment assister."
"No fine print" and "side- by-side comparisons"	A majority of those who have shopped for insurance in the past have found it hard to understand all of the details and fine print in the plans. They are drawn to side-by-side comparisons.
"All plans cover the important benefits— doctor visits, hospital stays, preventive care, prescriptions and more"	One of the most important things people need to know is the specific types of coverage provided in the plans.
"Sign up"	The phrase "sign up" is a good alternative to the word "enroll" and is more consumer friendly.
"Most can get coverage for \$100 per month or less."	Most Americans qualified for financial assistance that helped reduce their premiums many are paying less than \$100 a month on average. That's cheaper than a cable bill!

Table 2. Words to Avoid

Words to Avoid	Why
"Exchange"	This word makes people think they are going to be dealing with the stock market. Use "Health Insurance Marketplace" to align with the federal terms.
"Penalty"	Use "fine" instead. Going without coverage in 2015 could mean you pay \$325 or 2% of your income—whichever is greater—for the fine.
"One click away, signing up is easy" or other salesy words	Messages that sound too salesy turn people away. Also, consumers are skeptical about "too good to be true" health options so it's important to set expectations to emphasize resources that can make signing up easier.
Navigator, Certified Application Counselor, in-person assistor, etc.	Using "local help" keeps it simple for consumers. While these are important distinctions for our work, consumers can find help they need through any of these avenues.
Health insurance jargon	Studies show that most people in our target audience don't understand terms like co-insurance, formularies, tax subsidies, provider networks, etc. Instead, opt for simple, straightforward language like "coverage options, local help, financial help, etc."

For more messaging tips, visit EnrollAmerica.org/Communicators







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