



Arizona 2021 Assister Training



Introduction



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“There has never been a more critical time to ensure quality health coverage for all Americans.” said Health and Human Services Secretary Xavier Becerra. “Thanks to the Special Enrollment Period, we were able to help a record-breaking number of people across the country get covered, including those in rural and underserved communities. No one should have to lose their life savings to gain life-saving care.”

Xavier Becerra
Secretary
Department of Health and Human Services

Source: <https://www.cms.gov/newsroom/press-releases/biden-harris-administration-announces-record-breaking-122-million-people-are-enrolled-coverage>

American Rescue Plan and the Marketplace

- President Biden signed the American Rescue Plan Act of 2021 (ARP) into law on March 11, 2021.
- The law increased premium tax credits for all income brackets for coverage years beginning in 2021 and 2022. For 2021 and 2022, the law applies a new premium percentage owed by individuals and families at all household income levels.

The ARP and Marketplace Coverage

- » For PYs 2021 and 2022, the ARP makes PTCs available to consumers with household income above 400 percent FPL and caps how much of household income the family will pay toward the premiums for a benchmark plan at 8.5 percent.
- » The ARP reduces the percentage of household income consumers at all income levels are expected to contribute to their monthly premiums for a benchmark plan:
 - Consumers with household incomes between 100-150 percent FPL may be eligible for coverage options with \$0 premiums.
 - Four out of five enrollees will be able find a plan for \$10 or less after APTC.
 - Over 50 percent of enrollees will be able to find a Silver plan for \$10 or less after APTC.
- » For 2021, the ARP made available additional PTCs and CSRs to otherwise eligible households that received unemployment compensation. These benefits were only available during 2021. Consumers may see a reduction in their tax credit amount or CSRs for 2022 coverage because the benefits are no longer available.

2021 Special Enrollment Period

- 2.8 million enrolled during the 2021 SEP
- Total 12.2 million enrolled in health insurance marketplace (federal + state marketplaces)
- Almost half of consumers are paying \$10 or less monthly plan premium

“ I wasn't expecting to find such a good policy that was so affordable and I was pleasantly surprised to actually find the perfect policy for our family.

- Michael

After the COVID relief law, I went back on and made some changes, and it was even more affordable.

- Adrian ”

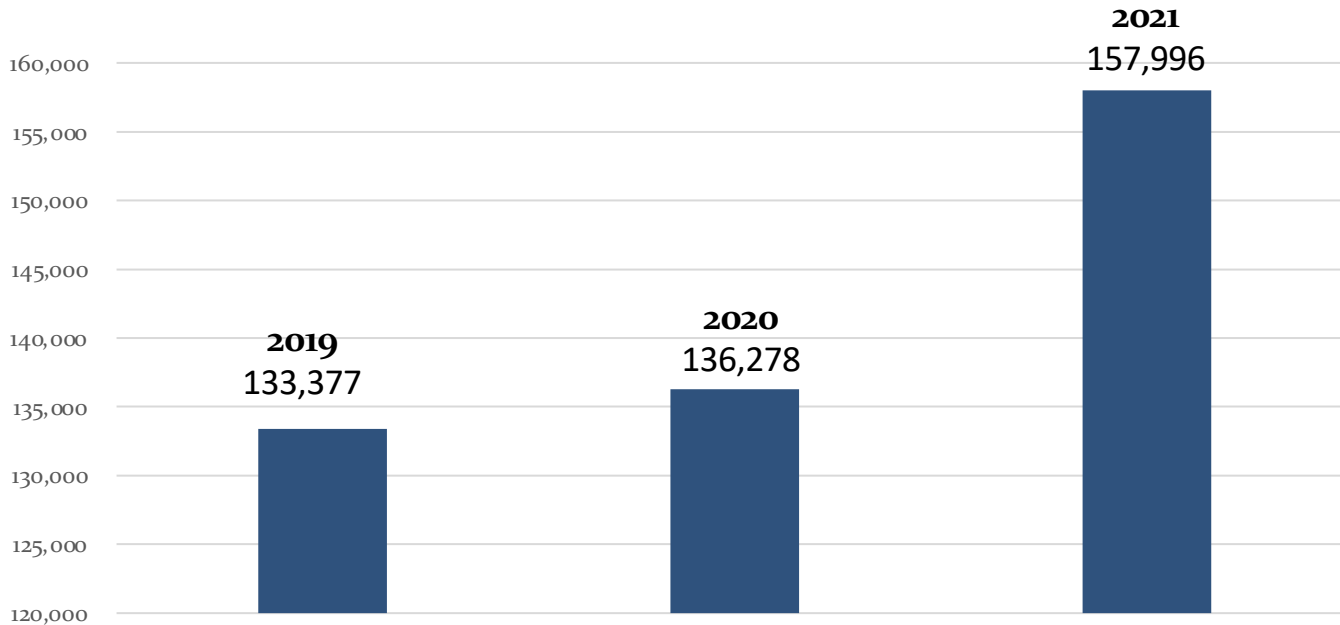
“ Previously, I couldn't afford health insurance. And this year, I went on HealthCare.gov and prices were great. Now my monthly premium is zero.

- Dorothy ”

2021 Expanded Premium Tax Credit

- **Over 90% of consumers who enrolled during the SEP saw their premiums reduced** due to these tax credits.
- **Existing consumers saved an average of \$67 per consumer, per month, in premium savings.**
- **48% of new HealthCare.gov consumers received a monthly premium of \$10 or less after tax credits.**
- **The median deductible for new HealthCare.gov consumers fell by over 90%.**

Total Effectuated Enrollment in Arizona (August 2019 – 2021)



Source: Total Effectuated Enrollment by State, August 2019-2021 - <https://www.cms.gov/files/document/2019-2021-Aug-Effectuated-Enrollment.xlsx>

THANK YOU!



“Health care is a basic human right, and the Biden-Harris Administration is committed to making health coverage more accessible than ever. With the Affordable Care Act and the American Rescue Plan, the President has brought affordable health coverage to millions—many of whom now have insurance for the first time,” said CMS Administrator Chiquita Brooks-LaSure.

Chiquita Brooks-LaSure

Administrator

Centers for Medicare & Medicaid Services

Source: <https://www.hhs.gov/about/news/2021/09/17/hhs-extends-open-enrollment-period-launches-initiatives-expand-health-coverage-access-nationwide.html>

Marketplace Open Enrollment Period

- Nov. 1, 2021 – Jan. 15, 2022
- www.healthcare.gov
- 1-800-318-2596 (TTY: 1-855-889-4325)
 - Available 24 hours a day, 7 days a week (except holidays)

How Marketplaces Work

- Through a single application, you can apply for:
 - Medicaid and the Children's Health Insurance Program (CHIP)
 - A Marketplace plan
 - Premium tax credits (which can reduce what you pay for a Marketplace plan)
 - Cost sharing reductions (which are discounts that lower your out-of-pocket costs for deductibles, coinsurance, and copayments)
- You can apply online, by phone, by mail, or in person
- Once eligibility is determined, you may be able to enroll immediately
 - Depends on the program and your state's enrollment process

Health Insurance Company Requirements for Selling Marketplace Plans

Health insurance companies must:

- Be licensed by the state and in good standing
- Offer at least one Silver plan and one Gold plan
- Charge the same premium whether offered through a Marketplace or outside a Marketplace



Marketplace Plan Requirements

Marketplace plans must:

- Provide qualifying health coverage with at least the essential health benefits;
- Follow established limits on cost sharing, such as deductibles, copayments, and out-of-pocket maximum amounts; and
- Meet certain requirements for:
 - Nondiscrimination
 - Network adequacy



Essential Health Benefits

All plans offered in the Marketplace cover these 10 essential health benefits:

1. Ambulatory patient services (like doctor and clinic visits)
2. Emergency services (like ambulance, first aid, and rescue squad)
3. Hospitalization
4. Pregnancy, maternity, and newborn care
5. Mental health and substance use disorder services, including behavioral health treatment
6. Prescription drugs
7. Rehabilitative and habilitative services and devices (like, therapy sessions, wheelchairs, and oxygen)
8. Laboratory services
9. Preventive and wellness services and chronic disease management (like blood pressure screening, and immunizations)
10. Pediatric services, including dental and vision care

Who's Eligible for Coverage through the Marketplace?

To be eligible for coverage through a Marketplace, you must:

- Live in the U.S. in a state served by the Marketplace where you're applying;
- Be a U.S. citizen, U.S. national, or lawfully-present immigrant for the entire time you plan to have coverage; and
- Not be incarcerated (unless pending disposition of charges)



Affordability Program: Premium Tax Credits

- Advance payments of the premium tax credit (APTC) are only available if you enroll in a Marketplace plan
- If eligible, you can use all, some, or none of the tax credit in advance to lower your monthly premiums
- As the Patient Protection and Affordable Care Act (PPACA) was originally passed, you could qualify for premium tax credits if your household income for the coverage year was between 100% and 400% of the Federal Poverty Level (FPL), if you met other eligibility criteria
- The American Rescue Plan allows some consumers with higher incomes to qualify for 2021 and 2022
- You may qualify if under 100% of the FPL if not eligible for Medicaid based on immigration status and are otherwise eligible

Affordability Program: Premium Tax Credits, continued

- The amount of the premium tax credits you're eligible for can change
 - Due to changes in household income or size, or other factors
 - If you experience changes in income or household, you must report them to the Marketplace
- When you file your income taxes, you'll have to reconcile advanced premium tax credits that were paid on your behalf
 - If you use more than you're eligible for, you may have to repay all or some
 - If you use less than you're eligible for, you may get the additional tax credit as a refund

Affordability Programs: Cost-Sharing Reductions

- If you qualify for premium tax credits, you might also qualify for extra savings called cost-sharing reductions (CSR)
- To be eligible for CSR based on income, you must:
 - Have a household income under 250% of the FPL
 - Be eligible for premium tax credits
 - Enroll in a Silver plan through the Marketplace



Affordability Programs: Cost-Sharing Reductions, continued

Special benefits if you're American Indian/Alaska Native (AI/AN):

- If your income is between 100% to 300% of the Federal Poverty Level, you can
 - Enroll in a “zero cost-sharing” plan through the Marketplace
 - Have no out-of-pocket costs
- If you get services from an Indian Health Care Provider, you won't have any out-of-pocket costs
- If your income is above 300% of the Federal Poverty Level, you can qualify for reduced cost-sharing
- You can enroll in a Marketplace health insurance plan any time, not just during the yearly Open Enrollment Period
 - You can change plans as often as once a month
- Tribal members and non-tribal members should enroll in separate plans to take advantage of all potential savings



Job-based Coverage & the Marketplace

- Many people have health care coverage through their employer or a family member's employer
- If you can get coverage through your employer, you can't get cost-sharing reductions or premium tax credits in the Marketplace, unless employer's coverage doesn't meet certain coverage standards or it's considered unaffordable



Final Rule and 2022 Open Enrollment

- » On September 17, 2021, CMS finalized a series of provisions that follow through on President Biden's commitment to build on the Affordable Care Act (ACA), expand health coverage access for Americans and advance health equity. The provisions are the third installment of the payment notice for 2022.

2022 Open Enrollment

- » The rule extends the annual individual market open enrollment period for 2022 and future benefit years to allow consumers more time to review plan choices, seek in-person assistance, and enroll in a plan that best meets their needs.
- » The annual open enrollment period for all individual market Exchanges using the federal eligibility and enrollment platform and off-Exchange individual market plans in states with such Exchanges for 2022 and future benefit years will be **November 1 of the prior year through January 15 of the benefit year**. State Exchanges not using the federal eligibility and enrollment platform maintain flexibilities regarding effective date rules and open enrollment end dates, provided the Exchange's open enrollment end date is no earlier than December 15 of the calendar year preceding the relevant benefit year.

Monthly Special Enrollment Period (SEP) for Certain Low-Income Consumers

- » To provide more opportunities for certain low-income consumers to access coverage with low or no premiums after advance payments of the premium tax credit (APTC), such as under the ARP, Exchanges will now have the option to provide a monthly SEP for APTC-eligible consumers with a projected annual household income no greater than 150% of the federal poverty level (FPL). The rule will permit Exchanges to provide a SEP for periods of time during which premium tax credits (PTCs) are available without the applicable taxpayer having to contribute toward their applicable portion of premiums before PTCs become available, such as those currently available under Section 9661 of the ARP. Exchanges on the Federal platform will implement this SEP by providing eligible consumers with a pathway through the HealthCare.gov application during such periods of time.

Navigator Duties

- » The FFE Navigator Program reaches vulnerable and underserved populations. This program is important to increase awareness of coverage options available through the Exchanges, help consumers find affordable coverage that meets their needs, and narrow health disparities. This final rule reinstates the requirement that FFE Navigators provide consumers with information and assistance on certain post-enrollment topics, such as the Exchange eligibility appeals process, the Exchange-related components of the PTC reconciliation process, and the basic concepts and rights of health coverage and how to use it. In addition, the rule expands the interpretation of what activities are encompassed in the duty to provide consumers with information and assistance related to the basic concepts and rights of health coverage and how to use it.

Changes for PY 2022: Expiration of Unemployment Compensation Benefits

- » Under the ARP, if a taxpayer received or was approved to receive unemployment compensation for any week beginning in 2021, the taxpayer's household income would be considered to be no higher than 133% of the FPL.
- » If the taxpayer met other eligibility criteria, this means that the taxpayer could be eligible for a PTC that covers the entire premium cost for the benchmark Marketplace plan for the whole household, regardless of the taxpayer's actual household income amount.
- » If anyone in the household received or was approved to receive unemployment compensation for any week beginning in 2021, the household may also qualify for cost-sharing reductions (CSRs) if they enroll in a silver-level plan. In both cases households that in the past have not qualified for APTC or CSR due to income below 100% of the FPL are considered to have household incomes of 100% FPL for purposes of APTC and/or CSR.
- » This benefit is available for the remainder of 2021 and consumers who are not currently enrolled in Marketplace coverage and who attest to receiving or being approved to receive unemployment compensation for any week beginning in 2021 can still be eligible for the benefits, and may qualify for a 2021 SEP.
- » **Note: These extra savings aren't available on 2022 Marketplace plans.**

Expiration of Unemployment Compensation Benefits: Consumer Impacts

- » Starting with Open Enrollment for 2022, consumers who received these extra Marketplace savings and lower costs in 2021 due to their receipt of unemployment compensation may notice changes to their financial assistance amounts when they shop and re-enroll for PY2022 plans.
- » Their eligibility for financial assistance will be based on their projected household income for 2022, unlike in 2021 when unemployment compensation recipients may have received more financial assistance without regard to their household income amount.
- » However, consumers with **household income from 100% through 150% FPL may remain eligible for a tax credit that covers the entire monthly premium** cost for the benchmark Marketplace plan and continue to qualify for CSRs.
- » Other consumers may experience significant changes – such as an increase in their share of the premium or less CSRs.

Expiration of Unemployment Compensation Benefits: Consumer Impacts

- » For example, consumers who qualified for and accessed the ARP unemployment compensation benefits in 2021 may experience one of the following situations:
- » Consumers with incomes **above 150% FPL** (\$39,750 for a family of four) may be eligible for **lower APTC and CSR amounts** on their PY2022 plan, meaning their premium and cost sharing owed would be higher.
- » Consumers with incomes **above 250% FPL** (\$66,250 for a family of four) **will no longer be eligible for income-based CSRs*** on their PY2022 coverage.
 - ***Note:** Tribal CSR benefits are unaffected.
- » Consumers with **higher incomes** may now have to **pay the full cost** of their Marketplace premium due to being eligible for a \$0 APTC amount on their PY2022 plan. Even though the ARP lifted the 400% FPL income limit for 2021 and 2022, consumers with higher incomes may still not receive a tax credit if the premiums available to them are low enough to be below 8.5% of their household income.

Expiration of Unemployment Compensation Benefits: Consumer Impacts

- » For example, consumers who qualified for and accessed the ARP unemployment compensation benefits in 2021 may experience one of the following situations:
 - Consumers with household incomes **under 100% FPL** (\$26,500 for a family of four) and who are ineligible for Medicaid (i.e. consumers in the “Medicaid gap”) may now be **ineligible for APTC and CSR** benefits in PY2022 due to their household income being under 100% FPL, with the exception of certain immigrant consumers.
 - Consumers at any income level may see new Data Matching Issues (DMIs) associated with their PY2022 coverage, and should follow standard processes to submit documents online or via mail to resolve their DMIs.

Expiration of Unemployment Compensation Benefits: Consumer Messaging

- » It's important that consumers who are receiving the ARP unemployment compensation benefits in 2021 understand those one-time extra savings aren't available in 2022 and their financial assistance may be changing.
- » Impacted consumers will see special language in their Marketplace Open Enrollment Notice and new content is being added to HealthCare.gov to explain the change.
- » Consumers who don't return to HealthCare.gov to update their Marketplace application during Open Enrollment and are automatically re-enrolled into PY2022 coverage will also receive notices with special language that the ARP unemployment compensation benefits aren't available for 2022.
- » **Encourage consumers to visit HealthCare.gov to update their Marketplace application, shop for 2022 coverage, and submit any required documents to make sure they're getting the right coverage and savings.**
- » **Open Enrollment for 2022 runs Monday, November 1, 2021 – Saturday, January 15, 2022. Enroll by December 15, 2021 for coverage that starts January 1, 2022.**

Failure to File and Reconcile

- » On July 23, 2021, CMS, together with the Internal Revenue Service (IRS), released guidance to ensure consumers continue to receive the tax credits they are eligible for through their Marketplace plan.
- » For plan years 2021 and 2022, **CMS will not end** the financial help consumers enrolled through the Health Insurance Marketplace®¹ receive to pay for their health coverage if IRS data indicates the consumer did not file a federal income tax return(s) and reconcile a previous year's PTC.
- » Consumers are generally still required to file and reconcile PTCs with the IRS for their federal income tax returns, with the exception of consumers who received excess PTCs in plan year 2020.
- » In response to this change, CMS will be removing the application attestation for consumers to verify they have reconciled PTCs received during previous years.

COBRA SEP

COBRA SEP

- » COBRA premium assistance **ended on September 30, 2021**, and so consumers can enroll in a Marketplace plan with an SEP. To enroll, consumers can report a September 30 "loss of coverage" on their application. Consumers can't qualify for a premium tax credit while they're enrolled in COBRA, so if they want to change to Marketplace coverage, make sure that their COBRA coverage ends on the last day before their Marketplace coverage starts. [Learn more about COBRA premium assistance.](#)
- » When consumers apply for Marketplace coverage, they should indicate they've lost qualifying health coverage, and provide the last day that they had COBRA coverage with premium assistance (generally, September 30, 2021).
- » If consumers decide to keep COBRA without premium assistance, they can qualify for a special enrollment period based on the end date of their COBRA coverage, which is usually 18 to 36 months after it started.

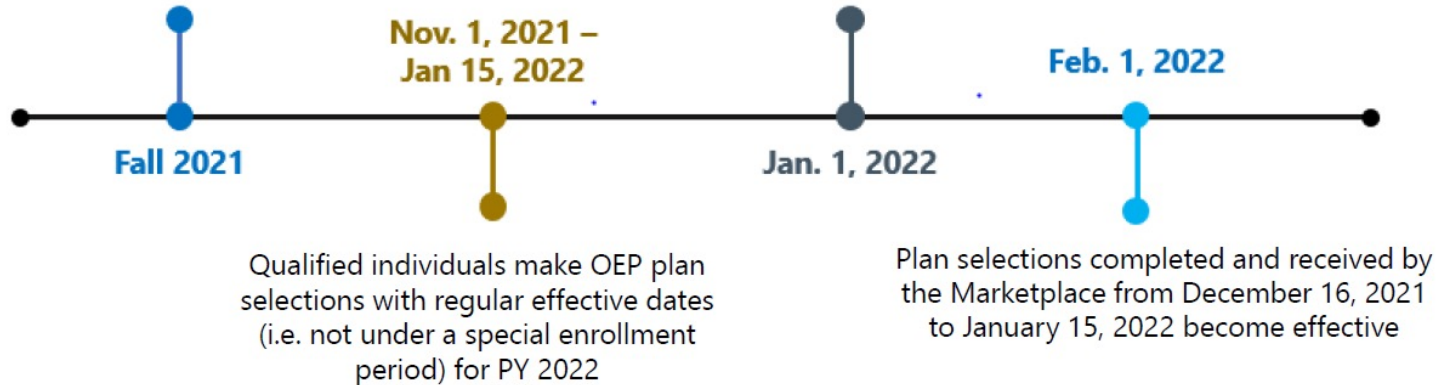
What Is Auto Re-enrollment?

- » Auto re-enrollment is the process the Marketplace uses to ensure that current enrollees who do not make an active plan selection by December 15, 2021 will retain coverage on January 1, 2022.
- » **Active re-enrollment, where an applicant updates the application and plan selection, is always preferred.**
 - Active re-enrollment ensures the enrollee receives a more accurate financial assistance eligibility determination and that the re-enrollment QHP reflects qualities that are important to the enrollee (e.g., cost, provider network, prescription drug formulary).
 - Some enrollees will lose their financial assistance unless they actively re-enroll. The Marketplace Open Enrollment Notice sent to them by the Marketplace will include special language noting the need to actively apply.

PY 2022 Timeline

The Marketplace sends an annual notice to all enrollees during the fall to inform them of the upcoming OEP

Plan selections completed and received by the Marketplace from November 1, 2021 to December 15, 2021 become effective



NOTE | Consumers completing plan selections by December 15 generally must pay their portion of the premium by the issuer's deadline for their health coverage to become effective on January 1, 2022. Consumers completing plan selection between December 16 and January 15 must pay their portion of the premium by the issuer's deadline for their health coverage to become effective on February 1, 2022. +

Model Marketplace Open Enrollment Notice (MOEN):

<https://marketplace.cms.gov/applications-and-forms/notices>

Champions for Coverage

- A Champion for Coverage organization can be a national or local organization representing under or uninsured communities. They're active in providing outreach and education about the Health Insurance Marketplace® and how consumers can enroll in health coverage through HealthCare.gov, Medicaid or CHIP. Organizations don't need healthcare or health insurance backgrounds or licensure, they simply need to be willing to help spread the word about the affordability and accessibility of health coverage.
- More information: <https://marketplace.cms.gov/technical-assistance-resources/assister-programs/champion>
- Apply at <https://marketplace.cms.gov/technical-assistance-resources/assister-programs/champion-apply>

Flu

- **CMS.gov/ Flu** - <https://www.cms.gov/flu>
 - Flu can lead to serious illness, hospitalization, or even death especially for those 65 and older. CDC recommends everyone six months and older get an annual flu vaccine. This year the flu vaccination is critical due to the ongoing COVID-19 pandemic. Co-administration of the flu and COVID-19 vaccines are possible so if you have not yet received your COVID-19 vaccine, please be sure to do so.
- **Flu Vaccine Partner Toolkit** - <https://www.cms.gov/flu-vaccine-partner-toolkit>
 - Key Facts About Seasonal Flu Vaccine
 - Multi-Language Factsheets
 - CDC Social Media Toolkit (English and Spanish)
 - Spanish Communication Resources
 - and more...

Medicare Open Enrollment

- Medicare Open Enrollment Period: October 15 – December 7
 - Arizona State Health Insurance Assistance Program (SHIP)
 - 1-800-432-4040
 - <https://des.az.gov/services/older-adults/medicare-assistance>
 - <https://www.facebook.com/OfficialArizonaDES>

Cochise, Graham, Greenlee, Santa Cruz Counties Area Agency on Aging, Region Six 520-432-2528 extension 222	Inter-Tribal Council of Arizona (ITCA) Area Agency on Aging, Region Eight 602-258-4822	Maricopa County Area Agency on Aging, Region One 602-280-1059 800-432-4040	Mohave, La Paz, Yuma Counties Area Agency on Aging, Region Four Western Arizona Council of Governments (WACOG) 928-377-4964 or 800-782-1886
Navajo Nation Area Agency on Aging, Region Seven 928-871-6797	Pima County Pima Council on Aging (PCOA), Region Two Medicare Line: 520-790-7262	Pinal and Gila Counties Area Agency on Aging, Region Five 520-836-2758 800-293-9393	Yavapai, Coconino, Navajo, Apache Counties Area Agency on Aging, Region Three Northern Arizona Council of Governments (NACOG) Show Low 877-521-3500 Flagstaff Office 877-521-3500

Coverage to Care



Coverage to Care (C2C) is an initiative, developed by the Centers for Medicare & Medicaid Services, to help you understand your health coverage and connect to primary care and the preventive services that are right for you, so you can live a long and healthy life. We understand health insurance can be a bit overwhelming and confusing at first, however there are many ways you can make the most of it.

For more information and materials: <https://www.cms.gov/About-CMS/Agency-Information/OMH/equity-initiatives/from-coverage-to-care>

Health Insurance Glossary:
<https://www.healthcare.gov/glossary/>

Coverage to Care Partner Webinar

- Wednesday, October 27, 2021 from 12:00 – 1:00 p.m. ET.
- Register:
https://us06web.zoom.us/webinar/register/WN_xlHo2DpZTvatlGtPiXZhew
- During the webinar, we will:
 - Provide an overview of the C2C initiative
 - Review key C2C resources you can use to help consumers
 - Present the newly updated C2C Enrollment Toolkit
 - Learn what languages resources are available
 - Share ways you can get involved in C2C
 - Question and Answer

Other Resources From HHS

- Information on COVID-19 Vaccines: <https://www.hhs.gov/coronavirus/covid-19-vaccines/index.html>
- Information on COVID-19 Vaccine Booster Shot: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/booster-shot.html>
- HHS Launches Spanish Language App to Help Latinos Navigate Health Care Questions, Issues New Report Highlighting Latino Coverage Issues: <https://www.hhs.gov/about/news/2021/10/08/hhs-launches-spanish-language-app-help-latinos-navigate-health-care-questions-issues-new-report-highlighting-latino-coverage-issues.html>
- Surprise billing & protecting consumers: <https://www.cms.gov/nosurprises>
 - Information on how these rules help consumers: <https://www.cms.gov/nosurprises/consumer-protections/What-are-the-new-protections>