# Maryland Health Benefits Exchange







# MARYLAND HEALTH CONNECTION

#### What is the Maryland Health Benefit Exchange?

• The Patient Protection and Affordable Care Act (2010) requires each state to either establish a "health insurance exchange" or opt for a Federally managed exchange to assist citizens with obtaining affordable health insurance

 Maryland has chosen to establish the state managed Maryland Health Benefit Exchange, called Maryland Health Connection (www.marylandhealthconnection.gov)

 All citizens are required to obtain health insurance coverage by January 1, 2014 or pay a fine

#### Fast Facts about Maryland Health Connection

- Open enrollment will run from October 1, 2013 through March 31, 2014 for individuals and in early 2014 for small businesses
- There are 5 participating healthcare and dental care insurance carrier options from which enrollees will select coverage.
- There are currently 10,620 uninsured Cecil County residents
- The year-one, county wide enrollment target is 2,486

# Who are the targeted populations?

- The uninsured which typically includes earners of lower-middle income, the self employed, part-time workers, those not offered insurance by their employers or whose employer sponsored health insurance options are deemed unaffordable
  - Those who do not or never have had health insurance due to financial barriers, pre-existing conditions or other impediments

# Who is **not** eligible for coverage through the Maryland Health Connection?

- Those who are not legal residents of the Country (legal resident includes those in the country with green card or visa status)
- Those who are not legal residents of the state of Maryland
- The incarcerated
- Individuals age 65 and over

Certain populations, while eligible, may choose not to elect coverage. These include individuals belonging to a recognized native American tribe and those with religious objections

# Pathways to enrollment



# Online

www.MarylandHealth Connection.gov



#### In Person

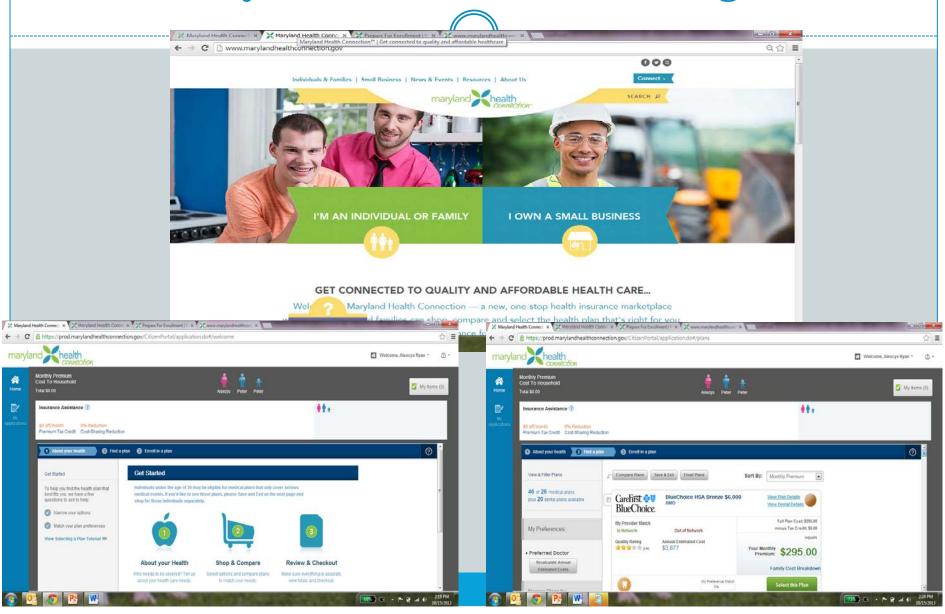
Navigator or Assister



# Telephone

855-642-8573

# MarylandHealthConnection.gov



# What is a Navigator?

- Navigators are individuals who have completed training and received certification to determine eligibility, provide information about qualified health plans available through Maryland Health Connection and facilitate enrollment, renewal or disenrollment
- Navigators are employees of Triangle Health Alliance (funded by 1 year grant award)
- Navigators will conduct outreach, public education, advocacy and marketing activities to reach target populations
- Navigators will work closely with community partners and public service agencies to generate referrals

# How to reach a Navigator

Events and Public Forums

**Email** 

navigator@uhcc.com

Phone

443-245-3939

**Navigator Line** 

Navigator

#### What if I choose not to become insured?

- Most individuals are required to obtain some level of health insurance coverage in 2014, or be subject to fines. These fines are imposed when filing income taxes. Fines are calculated by using the greater of:
  - o \$95 per adult, \$37.50 per child

OR

 1% of annual household income. In example, a household with an annual income of \$30,000 would be subject to a fine of \$300

# Qualified Health Plan Marketplace

- Maryland Health Connection is the marketplace offering consumers a new way obtain affordable qualified health plans
- In the marketplace consumers can learn about insurance options, make apples-to-apples plan comparisons, and enroll for health coverage
- Consumers will choose a plan that fits their needs and budget. Plans will cover 60-90% of healthcare costs with premiums increasing respectively. The different levels of coverage are called "metal levels" ranging from the lowest coverage, Bronze to the highest, Platimum.

#### Participating MHC Health Insurance Providers

CareFirst BlueChoice

CareFirst Blue Cross Blue Sheild

Evergreen Health

UnitedHealthcare All Savers

#### **Preventive Care Services**

Preventive care services are covered under all plan metal levels with no co-payment, co-insurance, deductibles or out of pocket costs

### Examples of covered preventive services

- Mammograms for women over age 40
- Annual preventive health visit (check up)
- Diabetes (type 2) screening for adults with high blood pressure
- Osteoporosis screening for women over age 60 depending on risk factors
- Colorectal Cancer screenings (colonoscopy) for individuals over age 50
- Routine vaccinations
- Influenza and pneumonia immunizations

# Case study

- A family of four, living in Cecil County, Maryland and consisting of:
  - Father, age 60
  - Mother, age 55
  - o Child, age 19
  - o Child, age 24
- Non tobacco users

Household income of \$53,000

# Case Study: MHC Insurance Options

Monthly Tax Credit: \$844.88	Premium before tax credit	Monthly premium after tax credit
Lowest cost Bronze plan	\$738	\$0 with <i>\$106.88 leftover</i>
Lowest Cost Silver Plan	\$1,152	\$307.12
Second Lowest Cost Silver Plan	\$1,162	\$317.12
Lowest Cost Gold Plan	\$1,318	\$473.12
Lowest Cost Platinum Plan	\$1,862	\$1,017.12

<sup>\*</sup>leftover funds can be utilized to purchase stand alone dental coverage if dental is not covered under the health plan

# Case Study: Tax Penalties

- The tax penalty for the aforementioned family should they choose to forgo obtaining health insurance coverage would be 1% of the household annual income, or \$530
- For less than the cost of the tax penalty, this family would have the "safety net" of basic health insurance coverage and access to many preventive services with no out of pocket cost

#### What are the benefits those in our community?

- Health insurance coverage for those previously unable to obtain coverage due to employment status, financial barriers or pre-existing conditions
- Coverage for more preventive services than ever before
- Eliminates or reduces delay or declination by the patient of necessary medical diagnostics or treatments due to cost barriers
- Eliminates pre-existing condition exclusions or denial of coverage
- Eliminates limits of coverage on essential health benefits
- Dependent children can remain covered under a parent's health insurance plan until the age of 26
- Eliminates gender differences in premiums

# What can you do to help?

- Be informed!
- Contact a Navigator or Assister with questions
- Provide information about contacting a Navigator or Assistance to your friends, neighbors, employees and co-workers who have questions or would like to learn about health insurance options



Phone: 443-245-3939

Email: navigator@uhcc.com

# Questions?

