Hemophilia Council of California
Health Access, Advocacy , and Policy Webinar

Preparing for Open Enrollment: **2020 and Beyond**

Presented by
Kollet Koulianos, National Hemophilia Foundation

HCC's 2019 Webinar series is sponsored by:

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Overview of Upcoming Webinars

Upcoming webinars will take a deeper dive into…

- Co-Pay Accumulator Adjustors Strike Back: What You Need to Know for Your Care. We thought they were gone, but these programs are back with a vengeance. Before you choose insurance for 2020, learn the latest on how these programs could affect your care. November 15.
- You can find HCC's Roundup of Health Care Access in CA on our website:

http://www.hemophiliaca.org/programs/webinars/

CELEBRATING 70 YEARS

NATIONAL HEMOPHILIA FOUNDATION

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1948-2018

PREPARING FOR OPEN ENROLLMENT 2020 & BEYOND

Kollet Koulianos, MBA

Senior Director Payer Relations

NATIONAL HEMOPHILIA FOUNDATION

WHAT ARE THE ESSENTIAL HEALTH BENEFITS PROTECTED BY THE AFFORDABLE CARE ACT

WHAT ARE THE ACA PROTECTIONS?

- Requires coverage for people with pre-existing health conditions, including pregnancy, **WITHOUT charging** more
- Free preventative care
- Gives young adults more coverage options
- Ends lifetime and yearly dollar limits on coverage of essential health benefits
- Helps you understand the coverage you are getting
- Holds insurance companies accountable for rate increases
- Makes it illegal for health insurance companies to cancel your health insurance just because you get sick
- Protects your choice of doctors
- Protects you from employer retaliation
- Prescription drug coverage
- Birth control methods and counseling
- Breastfeeding equipment and support
- Mental health and substance abuse

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CURRENT STATE OF AFFAIRS

Administration is proposing to expand access to different types of plans that don't have to meet the Affordable Care Act (ACA) standards:

- Short-term, limited duration (STLD) plans: bare bones or skinny plans
- Association health plans (AHPs)
- Administration **NOT enforcing ACA Protections**

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CALIFORNIA

2020 OPEN ENROLLMENT

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CALIFORNIA OPEN ENROLLMENT FOR 2020 COVERAGE YEAR

National Hemophilia Foundation

CALIFORNIA INDIVIDUAL MANDATE RESTORED

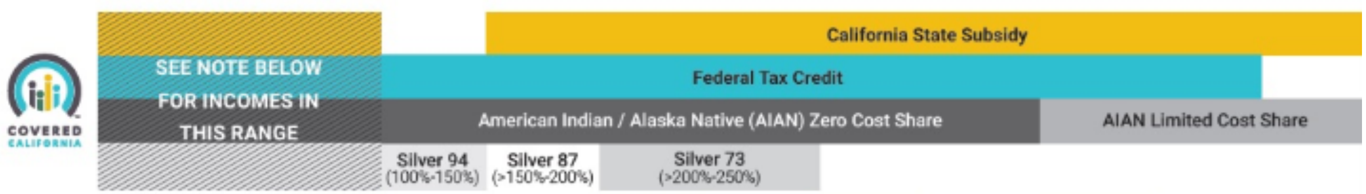
INDIVIDUAL	FAMILY
$695	$2,100

HOWEVER….

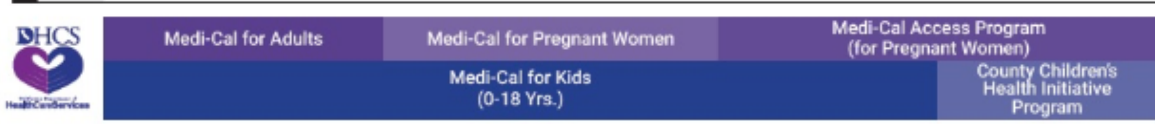
SUBSIDIES NOW UP TO 600% OF FPL

Program Eligibility by Federal Poverty Level for 2020

Medi-Cal and Covered California have various programs with overlapping income limits.



Household Size / % FPL	0%	100%	138%	150%	200%	213%	250%	266%	300%	322%	400%	600%
1	$0	$12,490	$17,237	$18,735	$24,980	$26,604	$31,225	$33,224	$37,470	$40,218	$49,960	$74,940
2	$0	$16,910	$23,336	$25,365	$33,820	$36,019	$42,275	$44,981	$50,730	$54,451	$67,640	$101,460
3	$0	$21,330	$29,436	$31,995	$42,660	$45,433	$53,325	$56,738	$63,990	$68,683	$85,320	$127,980
4	$0	$25,750	$35,535	$38,625	$51,500	$54,848	$64,375	$68,495	$77,250	$82,915	$103,000	$154,500
5	$0	$30,170	$41,635	$45,255	$60,340	$64,263	$75,425	$80,253	$90,510	$97,148	$120,680	$181,020
6	$0	$34,590	$47,735	$51,885	$69,180	$73,677	$86,475	$92,010	$103,770	$111,380	$138,360	$207,540
7	$0	$39,010	$53,834	$58,515	$78,020	$83,092	$97,525	$103,767	$117,030	$125,613	$156,040	$234,060
8	$0	$43,430	$59,934	$65,145	$86,860	$92,506	$108,575	$115,524	$130,290	$139,845	$173,720	$260,580
add'l, add	$0	$4,420	$6,100	$6,630	$8,840	$9,415	$11,050	$11,758	$13,260	$14,233	$17,680	$26,520



Note: Most consumers up to 138% FPL will be eligible for Medi-Cal. If ineligible for Medi-Cal, consumers may qualify for a Covered California health plan with financial help including: federal tax credit, California state subsidy, Enhanced Silver plans and AIAN plans.

COMPARED TO:

2019 PREMIUM
INCREASE OF 8.7%

AVERAGE
ANNUAL
INCREASES
OF 7%

'PREP' FOR OPEN ENROLLMENT

- **PREPARE BY NOTING IMPORTANT DATES AND COMPILING PERTINENT INFORMATION**
  - Know when your open enrollment period is
    - Check with your employer or make note of health insurance marketplace open enrollment that begins on November
    - Gather all of your personal health care information, such as lists of current doctors, preferred specialists, hospitals and pharmacies, and the list of medicines you and your family need.

- **REVIEW YOUR OPTIONS CAREFULLY**
  - Insurance plans can change dramatically from year to year. It is important to identify upgrades plans may offer or restrictions that will affect you and your family. All of these impact out-of-pocket costs and should be reviewed when selecting a plan.
  - Think about your family's changing health care needs and compare them to each plan's offerings.

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‘PREP’ FOR OPEN ENROLLMENT

- **EVALUATE FACTORS THAT MIGHT MAKE SOME PLANS BETTER FOR YOU AND YOUR FAMILY**
  - Knowing which options are offered by a plan can make a big difference in what you pay. Also, know what the terminology being used means. Learn the difference between a Co-Pay and Coinsurance.
  - Carefully consider all of the options important to you
    - The network of providers and deductible amounts due before coverage begins.
    - Are your doctors, specialists and hospital covered?
    - Is your preferred pharmacy in network*

*NHF position is there should at least be two options.

- **PICK A PLAN THAT BEST MEETS YOUR NEEDS IN THE MOST COST EFFECTIVE MANNER**
  - Consider all costs
    - Premiums
    - Deductibles
    - Co-Insurance
    - Copays
    - Max out-of-pocket
  - Choose accordingly.

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INSURANCE PLAN TYPES

PPO	**Preferred Provider Organization** • Plan has network of providers, hospitals, & facilities who have agreed to a set contract rate ("In Network Provider") • Referral generally not needed to see a specialist • Care outside of network is covered, but member incurs higher cost
HMO	**Health Maintenance Organization** • Most restrictive. Defined network of providers and hospitals. No coverage for care received outside of network • PCP manages & coordinates all care. Referral required to see specialist
POS	**Point of Service plan** • Hybrid of PPO & HMO combining network of providers & facilities with coverage (at reduced rate) of services received outside of network • May still require PCP and referral to see specialist
HDHP	**High Deductible Health Plan** • Any of above plans with a higher deductible & lower montly premiums
EPO	**Exclusive Provider Organization** • Similar to HMO, but no referral needed for specialist

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ACCUMULATOR

The tracking of a members out of pocket expenditures on deductibles, co-insurance and copayments until the member reaches his/her out of pocket maximum

COPAY ACCUMULATOR ADJUSTMENT PROGRAMS (CAAP)

- NO LONGER ALLOW MANUFACTURER COPAY ASSISTANCE TO COUNT TO MEMBER OOP
- 2020 MAX OOP

INDIVIDUAL	FAMILY
$8,150	$16,300

- HAVE GREATEST IMPACT ON HDHP's

- THIRD PARTY NEEDS BASED COPAY ASSISTANCE COUNTS TOWARDS MEMBERS ACCUMULATOR.
  - PAN FOUNDATION
  - THE ASSISTNACE FUND

- AVOID HDHP IF POSSIBLE
- PREVENTITIVE DRUG LIST

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Questions

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Questions?

Thank you for joining us!

Reminder: this webinar is part of a series of educational webinars presented by the Hemophilia Council of California.

A recording and slides will be available in a few weeks at http://www.hemophiliaca.org/programs/webinars/

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