



# ACA Implementation

County Managed Care Advocates  
August, 2013



# Agenda

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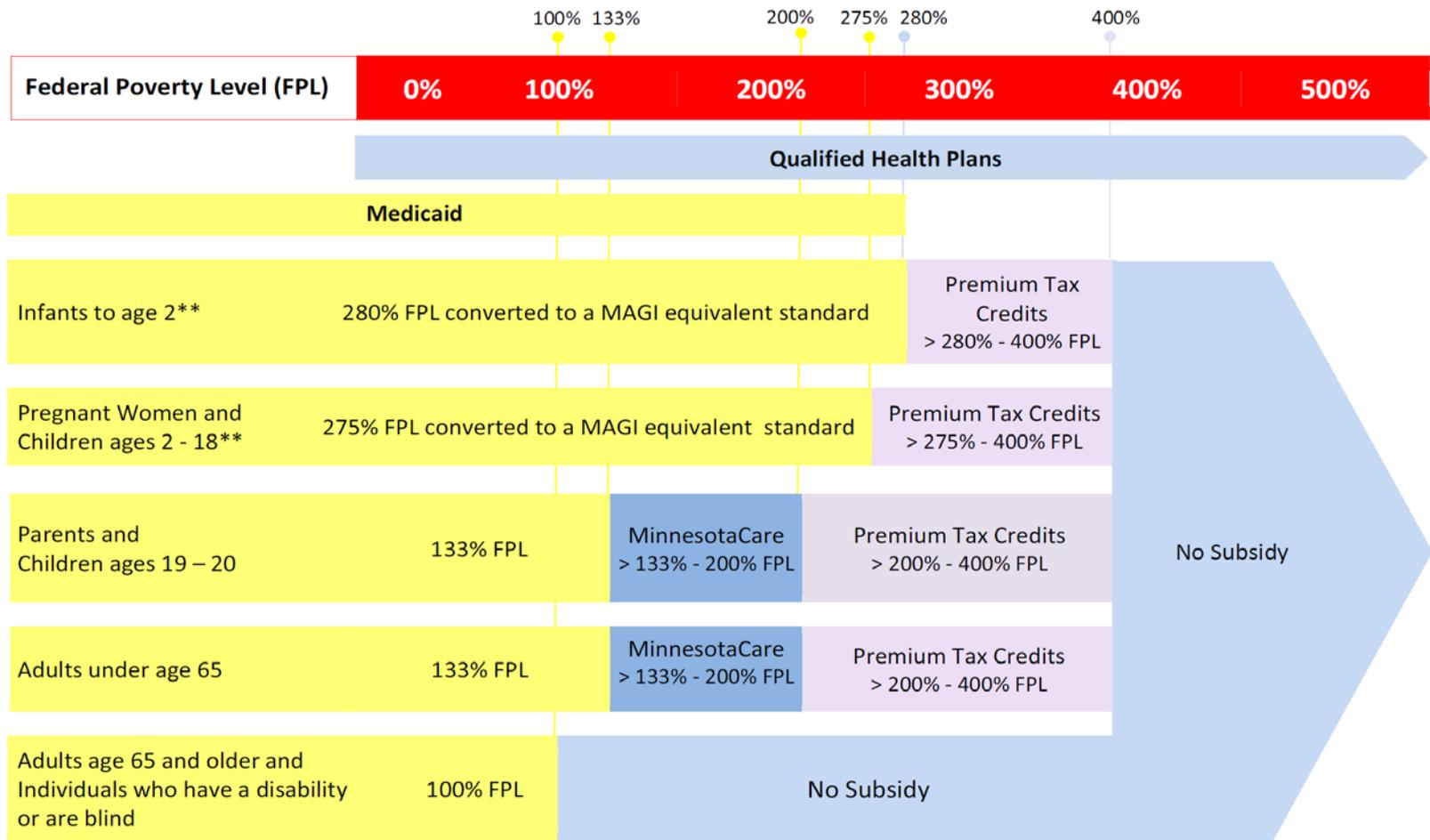
- **Minnesota's New Health Care Landscape**
  - **MA and MinnesotaCare Changes**
  - **MNsure**
- **MNsure Marketing and Outreach**
- **MNsure Consumer Assistance**
- **Q & A**

# New Vocabulary

- **Advance Premium Tax Credits (APTC)**
  - Payments of a premium tax credit on an advance basis to help individuals purchase and enroll in a qualified health plan (QHP) through MNsure.
- **Insurance Affordability Programs (IAPs)**
  - Financial assistance programs available through MNsure including Medical Assistance (MA), MinnesotaCare, and APTC.
- **Modified Adjusted Gross Income (MAGI)**
  - The measurement of income for eligibility determination for all Insurance Affordability Programs (IAPs) starting in 2014.
- **MNsure**
  - A new, one-stop health insurance marketplace where Minnesotans can find, compare, choose, and obtain private and public health care coverage that best fits their needs.
- **Qualified Health Plan (QHP)**
  - A private health insurance plan that is certified to be issued through MNsure.



# Minnesota Coverage Continuum in 2014\*



\* Subject to additional federal guidance related to maintenance of effort requirements.

\*\*Income standard in effect on June 1, 1997, must be maintained to comply with the CHIP maintenance of effort.

Department of Human Services  
May 7, 2013

# MA Eligibility Changes 1/1/2014

- **Changes to Income and Asset Standards**

- Increase in income standards
  - Children under age 19 – 275% FPG
  - Children ages 19-20 – 133% FPG
  - Parents and caretakers – 133% FPG
  - Adults without children – 133% FPG
- Asset test for parents and caretakers is eliminated

- **Changes to Income Methodology**

- Modified Adjusted Gross Income (MAGI) methodology for children and adults under age 65 whose MA eligibility is not based on disability
- MAGI is based on a household's taxable income and tax filing unit as stated on the tax return with some adjustments

# MinnesotaCare Eligibility Changes

## 1/1/2014

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- **Changes to Income and Asset Standards**
  - 19-20 year old children and adults with income > 133%-200% FPG
  - Children under 19 who are not eligible for MA solely due to federal household composition rules with income 0%-200% FPG
  - Lawfully present noncitizens who are ineligible for MA because of immigration status with income 0%-200% FPG
  - Asset test for parents and caretakers is eliminated
  - Individuals who are eligible for MA are not eligible for MinnesotaCare
- **Changes to Income Methodology**
  - Modified Adjusted Gross Income (MAGI)

# MinnesotaCare Eligibility Changes 1/1/2014 (continued)

- **Changes to Insurance Barriers**
  - 4-month waiting period for individuals who had access to other coverage or who fail to pay a premium is eliminated
  - 18-month waiting period for individuals who had access to employer-subsidized insurance is eliminated
  - Insurance barrier on other current health insurance remains
  - Individuals who have access to affordable ESI where the employee premium is within 9.5% of household income

# MinnesotaCare Eligibility Changes 1/1/2014 (continued)

- **Changes to Verification Requirements**
  - Relies on electronic data sources. If not available, self-attestation accepted and used to determine eligibility. Verification must be provided during the reasonable opportunity period (95 days).
- **Changes to Covered Services**
  - \$10,000 annual cap on inpatient hospital services eliminated
  - 10% co-pay (up to \$1,000) on inpatient hospital services eliminated
- **Changes to Premium Scale**
  - Each individual required to pay a premium based on income level
  - Aligns premiums across all family sizes based on income level

# MinnesotaCare Premium Table 1/1/14

FPG Greater Than or Equal To	FPG Less Than	Individual Premium Amount
0%	55%	\$4
55%	80%	\$6
80%	90%	\$8
90%	100%	\$10
100%	110%	\$12
110%	120%	\$15
120%	130%	\$18
130%	140%	\$21
140%	150%	\$25
150%	160%	\$29
160%	170%	\$33
170%	180%	\$38
180%	190%	\$43
190%		\$50

# Changes Affecting MA and MinnesotaCare 1/1/2014

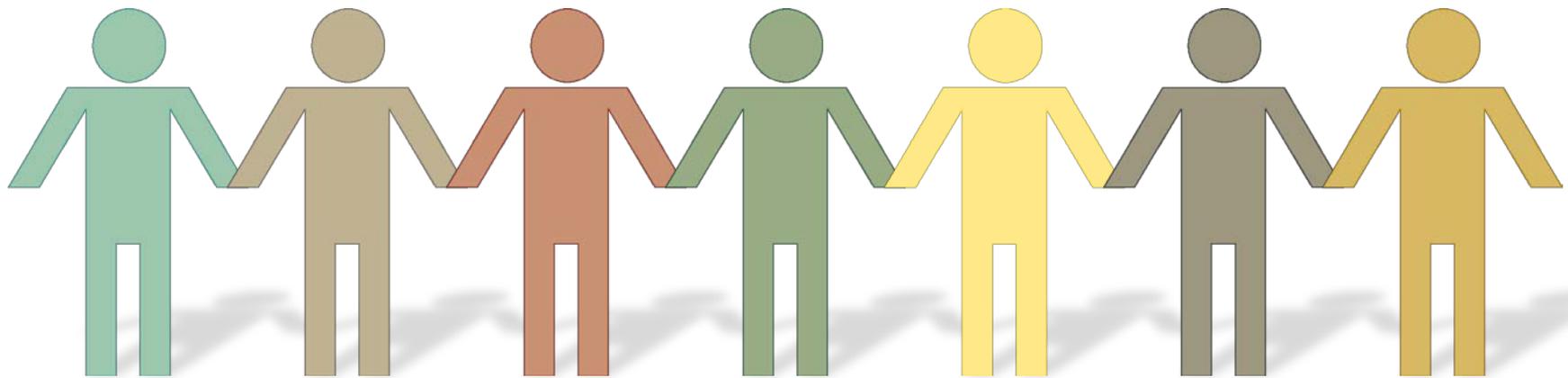
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- Applications may be submitted via the web, mail, telephone or in person.
- Eligibility renewed on an annual basis.
- Verification of eligibility factors will be conducted via electronic data sources to the extent possible.
- Hospitals participating in MA may make presumptive eligibility determinations for all populations.

# Coverage Changes

- 45,000 new enrollees in MA
- MinnesotaCare enrollment expected to be 193,000 by 2016
  - 110,000 current MinnesotaCare enrollees move to MA
  - 10,000 current MinnesotaCare enrollees move to Tax Credits
  - 32,000 current MinnesotaCare enrollees remain on MinnesotaCare
  - 40,500 new MinnesotaCare enrollees in January 2014
  - 143,000 new MinnesotaCare enrollees by January 2015
- **Number of Uninsured Expected to Decline**
  - From 500,000 to 160,000 by 2016 – 68% reduction!

# Who will MNsure serve – Over 1 million Minnesotans projected by 2016



**Individual Consumers –  
300,000**

**Small Businesses and  
Employees – 150,000**

**Medical  
Assistance/MNCare –  
880,000**

# Who will MNsure serve?

- **Individuals**
  - Those seeking individual market coverage
  - Tax credits available from 100% to 400% FPL to limit benchmark plan (second lowest cost “silver plan”) premiums from 2.0% to 9.5% of income
  - Tax credits available to those without “affordable” employer coverage (employee share of premiums above 9.5% of income) and those not eligible for public programs
- **Small Employers**
  - < 50 employees through 2015, < 100 employees starting 2016
  - Tax credits for < 25 employees below \$50,000 average wage
- **Medical Assistance and MinnesotaCare**
  - Medicaid Assistance: Adults below 133% FPL, kids under 275% FPL
  - MinnesotaCare: Adults between 133% and 200% FPL

# When can people enroll?

- Initial open enrollment runs October 1, 2013 through March 31, 2014
- Annual open enrollment periods after that run October through December
- Special enrollment periods available in certain circumstances during the year
- Members of federally-recognized tribes may enroll or change plan designations one time per month
- Small employers can enroll/renew throughout the year at one time of their choosing
- Individuals may apply and be eligible for Medicaid throughout the year

# One On One Assistance

- Four types of one on one assisters:
  - Navigator: MNCAA program for 2014 and state/MNsure funded
  - In Person Assister: Federally Funded for 2014, transitions to MNsure funded singular Navigator program in 2015
  - Certified Application Counselor: Not funded by MNsure or insurers, but can help people enroll (i.e. health care providers, HR departments, etc.)
  - Agent/Broker: Functions similar to today
- April 29<sup>th</sup> rules described programs for assisters:
  - Participation requirements/eligibility
  - Responsibilities
  - Training requirements
  - Compensation structure

# Health Care Training

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- **Role based to focus on tasks critical at go-live**
- **Training modules used across multiple audiences**
  - Eligibility Workers
  - County/Tribe Front Line Staff
  - MinnesotaCare Operations
  - Navigators
  - In-Person Assistors

Thank You!

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Questions?

# Resources/Communication

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**DHS Health Care Reform:**  
<https://connect.mn.gov/sites/dhs-hc/HealthReform/default.aspx>

**mnsure.org**

healthreform.mn.gov

healthcare.gov

# Questions?

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