Frontline Staff Frequently Asked Questions

MAY 2014

The Affordable Care Act intended to expand health insurance in two ways: expanding Medicaid in all states to adults earning at or below 138% of the federal poverty level (FPL, ~\$16,000 a year for a single adult) and creating state-level marketplaces (or exchanges) for purchasing private insurance where those earning between 100% and 400% FPL would be eligible for subsidies and tax credits to help pay for a plan. When the Supreme Court decided the health law, it kept the marketplaces and the subsidies but allowed states to choose whether they wanted to expand Medicaid to most low-income adults. *As of May 1, 2014, 24 states have chosen not to expand Medicaid; hence, the 5 million people living in these areas who earn below 100% FPL are not eligible for any insurance expansions.* This has direct implications for the HCH community–below are answers to frequently ask questions.

How does the ACA work in states who do not expand Medicaid?

- Insurance marketplaces operate in every state and those earning over 100% FPL can purchase private plans (subsidies & tax credits are available to those earning 100%-400% FPL to make the plans more affordable, but premiums and other costs will still apply)
- > People earning under 100% FPL likely will remain uninsured, unless they meet the current Medicaid criteria

What changes can I expect to see?

- A simpler Medicaid enrollment process: online enrollment portal, no asset tests, no requirement for a fixed address, electronic verification of citizenship, income, and identity (*no paper documentation needed*)
- Confusion and uncertainty: Enrollment campaigns aimed at those newly eligible may give the impression that everyone can sign up for insurance—be prepared to explain why many of our clients are not eligible

In the 24 non-expansion states:

- ✓ 2 million adults are currently eligible for Medicaid but are not enrolled
- ✓ 2.3 million adults earning 100-138% FPL are able to purchase private insurance & receive financial help to afford it
- ✓ 5 million adults earning <100% FPL are not eligible for new insurance options
- States can decide to expand Medicaid at any time

What is the role of HCH?

- > Facilitate Medicaid enrollment among those who may qualify under current rules
- > Continue providing health care and support services regardless of insurance status
- Advocate for your patients and clients

What do I say to consumers who not eligible?

- ▶ Explain they can still access HCH services the same as they always have
- > Make it clear that expanding Medicaid is a <u>state</u> decision, not a federal one
- > Understand that some consumers may be upset that health insurance is not available to them
- Consider posting a sign that explains this situation clearly

What can I do to help fix this?

- > Your state can decide to expand Medicaid at any time
- > Organize staff, consumers, and community members to advocate for Medicaid expansion
- > Write letters, make phone calls, and participate in coalitions calling for expansion
- Contact Dan Rabbitt at the National HCH Council to develop a strategy: <u>drabbitt@nhchc.org</u>