

# + Health Care Reform & Homeless Populations:

## What Does the Law Do for You?

May 9, 2012



**Barbara DiPietro**

National HCH Council Policy Director

**Joseph Benson**

SEARCH Group Volunteer and Community Outreach, Houston, TX

Member at Large, National Consumer Advisory Board

# + Goals of Health Reform

- **Increase access** to health care services
- **Improve health** of people and communities
- **Lower costs** to individuals & families
- **Reduce total spending** for U.S. health care
- **Improve quality** of care for everyone



# The Affordable Care Act (ACA)

- Signed into law in March 2010
- Major Components:
  - **Medicaid expansion: public health insurance for the poor**
  - New health insurance rules
  - Help for higher income people to buy private insurance
  - Money for new health care jobs
  - Many other programs to improve care, lower costs and test new ideas



# + Current Status of the Law

- Biggest changes not until 2014
- Many people confused about law
  - Lots of mixed messages and misinformation
- *Obama Administration*: Full speed ahead
- *Congress*: Many trying to block and repeal
- *Courts*: Supreme Court hearings in March;  
decision expected end-June



# Medicaid Expansion: Who Is Eligible?



- **Currently eligible:** children, pregnant women, disabled people, and some parents of children
- **Newly eligible (starting January 1, 2014):** Law expands Medicaid to most poor people. Annual income must be below:
  - About \$15,000/year for singles
  - About \$25,500/year for family of 3
- Must be a U.S. citizen or legal resident here for at least 5 years
- Your state might have started expanding Medicaid already



# Medicaid Will Serve More People

- **Note:** Your state may not call it “Medicaid” or may have smaller program
- Medicaid has 60 million people now (1 in 5 people)
- Expansion adds 16-20 million new people nationally (depending on outreach and enrollment)
- After expansion, about 80 million people will have Medicaid (about 1 in 4 people)
- **Largest benefit** in health reform law for low-income people





# Other Health Care Programs

- **Medicare:**

- Doesn't change eligibility
- Free preventive services
- Law changes things “behind the scenes”
- Patients should notice few changes

- **VA:**

- Doesn't change VA and TRICARE insurance
- Some people could be eligible for other programs also
- **If you have served in the military,** make sure you get connected to VA services!



# + Signing up for Medicaid will be easier

- Law requires fast, simple process
- Paper documentation will not be needed
  - **Do not need:** paper copy of your paycheck or utility bill, birth certificate, ID or social security card (unless there's a problem)
  - **Will need to know:** your full legal name, your social security number, your birth date, and your income





# Using Technology to Make it Easier



- Eligibility will be just based on your income
  - Not whether you have children or a disability
  - Not whether you have a bank account, or the value of your car, or other “assets” you might have
- The Medicaid system will automatically verify your income with the Internal Revenue Service (IRS).
- The Medicaid system will automatically verify your identity and your citizenship/residency status with Social Security.

# + Applying for the new Medicaid

- **Online** applications (but can also do by phone and mail)
- **Do not need a permanent address** and **do not need to prove residency** in your state.
  - “No fixed address” will be an option
- No in-person interviews
- **Simple renewal process, only need to renew once a year**

# + Benefits: Covering the Basics

- Hospital and emergency room
- Prescription drugs
- Doctors visits
- Treatment for mental health and addictions
- Lab work and other tests
- Dental and vision *for children only*
- Prevention services

**Details will be  
different in every  
state**

# + Signing Up for a Doctor/Provider

- You will have to choose a doctor/provider
- Choose your doctor carefully (don't skip this section or you will be "auto-assigned" somewhere!).
- This will be your "health home."
- Things to consider:
  - Current provider? Transportation? Hours open? Services needed?
- Recommendations:
  - Ask your case manager for advice
  - Choose a health center, or Health Care for the Homeless provider

Health Care & Housing Are Human Rights

# + Those Remaining Uninsured

- Law does not provide a “right to health care”
- Estimate over 20 million left uninsured
  - Medicaid eligible (but not enrolled): 8-10 million
  - Undocumented persons: 6-7 million
- **Individual Mandate: requires most people to get health insurance or face a penalty.**
  - Medicaid counts toward the mandate
  - Penalty: \$95 in 2014, \$695 in 2016 — **BUT...**
  - Those not filing taxes are exempt from the penalty
    - **If you earn less than ~\$10,000 per year (2012)**



# Work at State Level

- Building a new system
- Making sure it all works together
- Deciding details of benefits
- Finding new providers
- Changing the culture of “Medicaid”



# + Unresolved Questions

- How will Supreme Court decisions determine future of all these changes?
- How will states find and enroll everyone eligible for Medicaid?
- How will states decide the specifics of benefits covered through Medicaid?
- How much will co-pays cost for patients?





# Action Steps: What to do **NOW**



- **Spread the word:** Tell friends and family about Medicaid expansion—make sure they know to sign up in 2014
- **Start planning:** Talk to your doctor/provider/case manager
  - Ask about tests, surgery or other care you need
- **Tell your story:** Decisions being made now
  - Public meetings
  - Letter/email campaigns
  - Advocacy groups





# Action Steps: What to do **NOW**



- Types of decisions you can help with:
  - How the system can work best for you
  - Types of services needed
  - Care for remaining uninsured
  - Doing outreach to find people
  - Help enrolling for those who need it



# You Don't Have to Do it Alone!

- Many organizations can help you:
  - Local Consumer Advisory Boards (CABs) (check with your local clinic)
  - National Consumer Advisory Board ([ncab@nhchc.org](mailto:ncab@nhchc.org))
  - Staff and other consumers from your local clinic (ask your case manager)
  - Other community groups (poverty, homelessness, health, faith, etc. organizations)
  - **Groups with real life experience are very powerful and can support each other**

# + More Information

- The **National Health Care for the Homeless Council** is an organization trying to improve the health of homeless people and to prevent & end homelessness:  
[www.nhchc.org](http://www.nhchc.org)
- **Join us! Free individual memberships**
- Health reform information: [www.healthcare.gov](http://www.healthcare.gov)
- **Health Reform Fact Sheet** available online
- **National Consumer Advisory Board (NCAB):**  
[ncab@nhchc.org](mailto:ncab@nhchc.org)

# + Ultimate Goals

- Greater access to Medicaid = people getting health care services
- More health care services = better health
- Better health = preventing and ending homelessness



# Group Discussion Where You Are



- How can you help get the word out in your community?
- Do you have a story to tell that might help make the new system work better?
- How can consumers of homeless services in your community participate in decisionmaking?