Wisconsin Regional Enrollment Outreach Strategy

UW Population Health Enrollment Summit
July 16, 2013
Outline

- Wisconsin Vision and Commitment
- Enrollment Background and Estimates
- Proposed Outreach Strategy; Regional Enrollment Networks
- DHS Targeted Outreach
- Enrollment Considerations
- Outreach Timeline
- Questions
Wisconsin Vision and Commitment

- Ensure that every resident has access to health insurance, create a Medicaid program that is sustainable, reduce reliance upon government health insurance, and maintain the health care safety net for those who need it the most.

- Reduce the number of uninsured non-elderly adults in our state and encourage consumers to be active participants in their healthcare.

- Simplify the Medicaid program by providing a standard set of comprehensive benefits that will lead to improved healthcare outcomes.
Current BadgerCare Plus Enrollment and Benefits

- Children
- Pregnant Women
- Parents / Caretaker Relatives
- Childless Adults

- Standard Plan
- Benchmark Plan
- Core Plan/Basic Plan
## Future BadgerCare Plus & Marketplace Enrollment and Benefits

<table>
<thead>
<tr>
<th>Category</th>
<th>100%</th>
<th>200%</th>
<th>300%</th>
<th>400%</th>
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<tbody>
<tr>
<td>Children, Pregnant Women, Parents/Caretaker Relatives, Childless Adults</td>
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<tr>
<td><strong>Standard Plan</strong></td>
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<td><strong>Qualified Health Plans in Marketplace</strong></td>
<td><img src="qualified_plan.png" alt="" /></td>
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- Eligible for Premium Tax Credits up to 400% FPL
- Eligible for Reduced Cost Sharing up to 250% FPL

![Graph showing enrollment and benefits](graph.png)
# BadgerCare Plus & Marketplace Estimated Enrollment

<table>
<thead>
<tr>
<th>Group</th>
<th>BadgerCare Plus</th>
<th>Marketplace</th>
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<tbody>
<tr>
<td>Children</td>
<td>522,695</td>
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<td>Pregnant Women</td>
<td>20,804</td>
<td>No Estimate</td>
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<td>Parents / Caretaker Relatives</td>
<td>160,255</td>
<td>232,551</td>
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<td>Childless Adults</td>
<td>98,641</td>
<td>459,757</td>
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Proposed Outreach Strategy

- Leverage Milwaukee Enrollment Network effort currently underway.
- Create regional enrollment networks throughout the state with regional partners, including tribes.
  - Provide application and enrollment assistance.
  - Mobilize other local resources to assist people in gaining healthcare coverage.
Proposed Regional Enrollment Network
Proposed Wisconsin Regional Enrollment Networks
Example #1

Person 1
Childless Adult
Currently on BadgerCare Plus
Has income at 150% FPL

County Income Maintenance Work within Consortia

Person 1 Assessed Eligible for Marketplace. Referred to Regional Enrollment Network Partner

Certified Application Counselor (CAC)
Example #2
Regional Enrollment Network Identification

- Regional Enrollment Network Lead in collaboration with DHS working to ensure maximum participation.
- Regional Enrollment Network Lead in collaboration with DHS will facilitate identification of enrollment assisters and mobilizers.
Regional Enrollment Network Planning

- Determine roles and responsibilities for each partner organization.
- Determine education and training needs for each partner organization.
- Determine capacity for each partner organization.
- Identify supporting materials.
- Identify workload based on enrollment estimates for each partner organization.
Regional Enrollment Network Operations

- Periodic checkpoints.
- Adjustments based on regional needs.
- Reporting.
- Deliverable: Regular reporting from each network.
DHS Targeted Outreach

- DHS is focused on outreach to those current members that may transition to the Marketplace, and those uninsured individuals that will be eligible for BadgerCare Plus.
  - DHS will notify current members that may be impacted by coverage changes starting September 20, 2013.
    - 87,000 parents and caretaker relatives.
    - 5,000 childless adults.
  - DHS will notify individuals on Core Plan waitlist and Basic Plan members starting September 29, 2013.
  - DHS anticipates call volumes and foot traffic in the Consortia and MilES will significantly increase.
  - DHS is working closely with the WI Department of Veterans Affairs and will proactively outreach to Veterans (i.e. through Veteran homeless shelters, County Veteran Service Officers, and Veteran Organizations).
- DHS will provide information to contracted HMOs and providers for their members that may be transitioning to the marketplace starting September 20, 2013.
- DHS will begin contacting members that may be impacted by changes starting September 20, 2013.
BadgerCare Plus Enrollment Considerations

- Current members and uninsured individuals may apply for insurance through the Marketplace starting on October 1, 2013.
  - Due to significant eligibility system modifications, DHS will begin processing applications for childless adults transferred from the Marketplace starting November 18, 2013.
BadgerCare Plus Enrollment Considerations cont.

- Starting November 18, 2013, DHS will begin processing applications using the new Modified Adjusted Gross Income (MAGI) based eligibility determination rules.
  - For all people applying at their local consortia/MiLES or online via ACCESS, that are determined ineligible for BadgerCare Plus, DHS will electronically transfer their information to the Marketplace.

- On November 23, 2013, DHS will begin notifying members of coverage changes effective January 1, 2014.
Marketplace Enrollment Considerations

- Individuals have until December 15, 2013 to enroll in a QHP.
  - Individuals will be required to pay the first month’s premium to ensure coverage effective January 1, 2014.
  - Individuals will have 75 days from October 1, 2013 to enroll.
- Open enrollment for the Marketplace ends March 31, 2014.
- Currently unclear how long it will take for an individual to complete an online application for the Marketplace.
  - This will be important in determining capacity for those partners participating in Regional Enrollment Networks.
Regional Enrollment Network Operational Timeline

Overall Outreach Timeline

8/15/2013
Regional Enrollment Network Identification

8/15/2013
Begin establishing Regional Enrollment Networks

7/15/2013
Core Plan Waitlist/Basic Plan Members Notified of Coverage Opportunities

9/1/2013
Marketplace Open Enrollment Begins

9/1/2013
DHS Begins Processing BadgerCare Plus Applications Under New Eligibility Rules for January 1, 2014 Coverage

10/1/2013
Marketplace Enrollment Deadline for Coverage Effective January 1, 2014

11/20/2013
DHS Targeted Call Outreach Begins

9/26/2013
Current BadgerCare Plus Members Notified of Potential Changes

11/18/2013
DHS Begins Processing Applications Transferred from Marketplace

12/15/2013
Marketplace Enrollment Deadline for Coverage Effective January 1, 2014

1/1/2014
New BadgerCare Plus Coverage Changes Effective

3/31/2014
Marketplace Open Enrollment Ends

4/30/2014
4/30/2014

7/15/2013
Certified Application Counselors (CACs)

State Training/Examination Requirements (same as those required for Navigators):

- Complete 16 hours of training.
  - 8 hours state specific health insurance laws/regulations.
  - 4 hours Navigator/CAC specific training.
  - 4 hours WI. Specific Medicaid related training.
- Pass a written examination.
- Complete annual 8 hours of approved training.
- Complete any federal training requirements.
Certified Application Counselors (CACs)

State Training Availability:

- Goal is to have training opportunities to satisfy the 16hr. requirement available by August 15th.
- Individuals interested in serving as CACs have the option, for 2013-14 only, to complete the current 20hr. pre-licensing training affiliated with receiving a health insurance license, in lieu of the 16hr. training requirement.
  - This training is currently available.
Certified Application Counselors (CACs)

Examination Availability:

- The examination and study materials will be available on August 15th.
  - Note that the 16hr. training requirement does not need to be satisfied prior to taking the examination.
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State Registration Requirements:

- Entities employing one or more CACs must provide OCI with a list of all CACs that it employs, once the CACs are authorized by the federal Exchange to provide assistance.
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Permitted Activities:

- Conduct public education activities to raise awareness of available Qualified Health Plans within the federal Exchange.
- Make consumers aware that plans are available for purchase in the outside market and that they may want to talk with a licensed health insurance agent about health insurance options.
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Permitted Activities, continued:

- Facilitate enrollment in a QHP through the federal Exchange.
- Outline information that a consumer will need to have available when applying for coverage through the federal Exchange.
- Explain to the consumer the following information:
  - Potential eligibility for public/governmental programs.
  - How the federal health insurance premium tax credit and cost-sharing reductions work and risks, if any.
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Permitted Activities, continued:

- Describe the features and benefits of health insurance coverage in general terms, including cost-sharing mechanisms like deductibles, co-pays or co-insurance and how these work or affect the consumer.

- Describe the different metal tiers and how the benefits may change at different tiers based on the consumer’s income.
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Permitted Activities, continued:

- Describe what a summary of benefits document is and where to locate a summary of benefits.
- Explain where to find information about provider networks.
- Provide information in a manner that is culturally and linguistically appropriate to the needs of the population being served by the federal Exchange.
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Permitted Activities, continued:

- Provide a referral for an individual to an appropriate state or federal agency who has a grievance, complaint or questions regarding their health plan, coverage or a determination under such plan or coverage.
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Prohibited Activities:

- Provide advice comparing health benefit plans that may be better or worse for the consumer or employer.
- Recommend a particular health benefit plan or insurer.
- Advise consumers or employers regarding a particular insurer or health benefit plan selection.
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Prohibited Activities, continued:

- Engage in any fraudulent, deceptive or dishonest acts or unfair methods of competition.
- Receive compensation from an insurer, stop-loss insurance or a third-party administrator.
- Provide any information related to enrollment or other insurance products not offered in the federal Exchange.
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Prohibited Activities, continued:

- Receive compensation that is dependent upon, in whole or part, on whether an individual enrolls in or renews coverage in a health benefit plan.
- Make or cause to be made false or misleading statements.
- Receive consideration directly or indirectly from any health insurance issuer in connection with the enrollment of individuals or employees into a QHP.
Questions