

Delaware's Health Insurance Marketplace: Update on Activities

Delaware Health Care Commission
September 3, 2015

Secretary Rita Landgraf
Department of Health and Social Services



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Agenda

- Federal Navigator Grants Awarded
- Special Enrollment Period
- Four views of Del.'s declining uninsured rate
- QHP Rate Review Timeline
- Key Dates

Federal Navigator Grants Awarded

- On September 2, 2015, the Centers for Medicare & Medicaid Services (CMS) announced a total of \$600,000 in grants to two organizations to help Delawareans apply and enroll through the Marketplace.
- Chatman LLC received \$339,096 and Westside Family Healthcare received \$260,904 to support the work of Navigators, who help consumers understand the coverage options and financial assistance available at HealthCare.gov.
- The funds awarded this week cover the first year of a three-year grant that runs until Sept. 1, 2018.

Special Enrollment Period

- CMS measured the number of consumers in the 37 states using Healthcare.gov who enrolled from Feb. 23 through June 30, 2015, because they qualified for a Special Enrollment Period.
- Nearly 950,000 people in those states, including 3,264 Delawareans, selected a Marketplace plan during the period.
- Here's a breakdown of the reasons Delawareans qualified for an SEP during the period measured:

Reasons for Enrollment during SEP	Total
Loss of Coverage	1593
Denial of Medicaid	907
Tax Season	279
All Other SEPs	485
Total Delawareans Enrolled	3264

Four views of Del.'s declining uninsured rate

- **Behavioral Risk Factor Surveillance System (BRFSS)** – 10.8% uninsured among ages 18-64 through 2014, down from 14.3% in 2013
- **BRFSS** – 8.7% uninsured among all adults through 2014, down from 11.6% in 2013
- **Gallup** – 9.6% uninsured among all adults through 2014, down from 10.5% in 2013
- **Centers for Disease Control** – 5.4% uninsured among ages 0-64 through 2014, down from 10.7% in 2013

QHP & Rate Review — Timeline for Review and Final Approval/QHP Certification

The following timeline is subject to change contingent on CMS revisions during the process.

Date	Milestone
May 16 - August 23	DOI conducts in-depth actuarial review of proposed rates
June 15 – July 15	DOI conducts Public Comment Period on proposed rates
July 16 – August 23	Commissioner conducts final review of proposed rates and makes determination on requested increases.
August 24-25	DOI submits QHP application data and State determinations on proposed rates to federal government (CMS) for review
August 26 – September 16	CMS reviews QHP application and state recommendations
September 17-18	CMS sends Certification Notices and QHP agreements to issuers
September 25	Issuers return QHP Agreements, including final plan list, to CMS
October 8-9	CMS sends Validation Notices confirming final plan list and countersigned QHP Agreements to Issuers
October 15	DOI posts QHP Plan rates on Department of Insurance website

Key Dates

Date	Milestone
November 1, 2015	Beginning of Open Enrollment for Plan Year 2016
January 31, 2016	End of Open Enrollment for Plan Year 2016

- Consumers who experience qualifying life events -- for example, domestic violence eligibility, birth/adoption of a child, loss of minimum essential coverage, or aging out of parents' insurance at age 26 -- may enroll outside of open enrollment.
- Enrollment assisters and agents and brokers are available to assist with enrollments outside open enrollment.
- Visit www.ChooseHealthDE.com to find assistance.

Medicaid enrollment is open all year. Small businesses can enroll in SHOP anytime.

Questions/Comments

- Health Care Commission
- Public



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