How does the Affordable Care Act affect you?

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Healthy starts here.

What is the Affordable Care Act or Obamacare?
Here’s a very simple explanation.
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Dear community,

As I mentioned in an earlier edition of Healthy Connections, the wave of change is coming this fall for every US citizen as the Affordable Care Act of 2010 (also known as “Obamacare”) continues to unfold.

The significant change effective October 1, 2013, is the mandated insurance coverage for all American citizens. There have been articles and stories in the media over recent months – much of it revolving around the “Health Insurance Exchange” systems under development.

In Minnesota this state insurance exchange is called MNSure. Every state is required to have an insurance exchange in place by 2014 and if the state opts not to develop one, the federal government will develop and operate it for that state. For example, Wisconsin did not pursue a state exchange so theirs will be operated by the federal government.

With regard to Minnesota, MNSure is set to launch this fall. Some recent data I received indicates that there are 1.2 million people in Minnesota who are expected to get their insurance via MNSure by 2016. This number includes all of the state programs (e.g. Medicaid, PMAP, MNCare, etc) with an expectation that consolidating state programs will be more efficient for everyone. Minnesotans without any insurance will be expected to apply via MNSure and have coverage going forward. If you do not have access to health insurance through your employer, you will be expected to get insurance through MNSure.

This is not a Winona Health program but one that will impact our community, our patients, and each of us as Minnesotans and all US citizens. This Special Edition of Healthy Connections will provide broad information on this specific requirement of the Affordable Care Act as it involves every one of us. It is important that you become familiar with this requirement – whether you currently have insurance through your employer, are self insured, have no insurance or have insurance via one of the state programs.

I suspect there will be glitches in this transition for everyone and it will be helpful for everyone to understand what is expected. Our goal is to assist you in meeting the requirements of the ACA. We will assist as much as we can to make this a smooth transition for you, including having some of our staff trained and certified to help people enroll in MNSure as needed.

As I indicated, this is not a requirement of Winona Health, but a requirement of the federal and state governments. While we are not a part of the design or the process by which this will unfold, we offer support, resources and assistance to our patients and our community.

Warm regards,

Rachelle H. Schultz

This issue of Healthy Connections was published by Winona Health to give you an overview of the Federal Government’s Affordable Care Act and the changes that may affect you.

Comments or questions about this publication or Winona Health may be submitted to our website — winonahealth.org and click on ‘Contact Us’ or call the Winona Health Community Engagement Department at 507.457.4157.
Like many people, you may be confused about the Affordable Care Act, which is also called Obamacare.

In 2010, the President and Congress signed the Affordable Care Act into law. The primary goal of this law is to help you gain access to affordable health insurance coverage. One of the key elements of the law is the creation of a health insurance marketplace—a resource for that lets you shop for and compare insurance options that best fit your situation and budget.

**Why is having access to health care important?**

**Staying well.** If you have access to health care, there is a better chance that you’ll seek and receive care before you have a serious, expensive and difficult to treat healthcare issue.

**Treating illness.** The costs of treating a serious medical problem far exceed all but the wealthiest individuals’ ability to pay. The purpose of health insurance, like other types of insurance, is to spread the risk among a large group of people so there is money available if, when and where it is needed. If you have a serious health issue, or experience a medical emergency, it is difficult enough to deal with—without having to worry about going bankrupt.

**Several changes already have taken place because of the Affordable Care Act.**

For those who have health insurance, the Affordable Care Act has already implemented these six changes:

1. Your adult children, up to age 26, can remain on, or be added to, your health insurance plan if they do not have access to health insurance through an employer.

2. If anyone in your family gets sick, your insurance company can’t drop them from the plan or limit how much insurance your family uses.

3. If any of your children are chronically ill, an insurance company can’t deny them coverage.

4. Wellness or pregnancy exams are now included in your coverage with no additional co-payment.

5. Your insurance company can’t raise your premium payments without approval from the state government.

6. Insurance companies are required to spend at least 80 percent of the premiums they collect on providing actual medical services. If they spend less than 80 percent on medical services, they have to pay back the difference to policy holders.

The Affordable Care Act was developed in an attempt to fix these problems:

- There are about 32 million people in the United States who don’t have health insurance.
- About 9 percent of Minnesota’s population lacks health insurance—about 497,500 people.*
- About 10 percent of Wisconsin’s population lacks health insurance—about 560,000 people.*
- Health care costs are the #1 cause of bankruptcy in this country.

*Kaiser's statehealthfacts.org
I have health insurance.

If you currently have health insurance, you probably will not see any big changes. You can keep your existing insurance if it’s an individual plan you purchased yourself, an employer plan (including COBRA), a retiree plan, Medicare, Medicaid, CHIP, TRICARE and other veterans health care programs, and Peace Corps Volunteer plans. If you have any questions about your coverage or changes to your coverage, ask your health insurance provider.

If you have insurance through your employer, you and your employer probably share the cost of your monthly premium. Depending on how much you contribute to your premium and the benefits you receive, you may consider shopping for different health coverage on the new health insurance exchange.

Some people are concerned that because of the new law, their company will cancel their health insurance. Although this probably won’t happen, some companies might find it more cost-effective to pay a tax penalty, knowing that their employees can get coverage on the health insurance exchanges. Other employers may prefer to shop the exchanges themselves to see if they can get better health coverage that costs less.

I am on Medicare.

If you currently have traditional Medicare coverage, you probably will not see any substantial changes, but you will begin receiving additional benefits including:

- Free preventive care screenings such as mammograms and colonoscopies
- A yearly wellness physical
- Discounts for brand-name prescription drugs

Note that if you have a Medicare Advantage plan, you may see changes in your benefits depending on how your insurance company reacts to a decrease in funding for this type of insurance plan.
I do not have insurance.

If you do not have health insurance, the Affordable Care Act will probably have the biggest impact on you. Beginning in 2014, all United States citizens and legal residents must have health coverage or pay a tax penalty.

The Affordable Care Act gives you access to health insurance through an insurance exchange. If you cannot afford health insurance, you may qualify for assistance. In 2014, Medical Assistance will expand to cover more people. Depending on your income and family size, you may qualify for Medical Assistance, Minnesota Care or tax credits to eliminate or decrease your share of monthly health insurance premiums and other costs.

If you earn too much money to qualify for Medicaid, are too young (under age 65) to qualify for Medicare, and are self-employed or don’t get insurance through your job, you will have to purchase your own insurance—or pay a tax penalty.

The Affordable Care Act requires states to either offer insurance plans through their own state-wide health insurance exchange (healthcare marketplace) or use the insurance exchange created by the federal government. The exchanges, or marketplaces, are like an online health insurance mall where you can shop and compare plans side-by-side and make purchase decisions based on your personal situation and budget. More information about insurance exchanges is on page 10.

Coverage options are categorized as bronze, silver, gold or platinum

Plans offered through the insurance exchange are in four different categories, arranged by how much you pay versus how much coverage they provide. Bronze plans only pay 60% of your total health care costs, but have the lowest monthly premiums. Plans in the other three categories cover more costs: Silver plans cover 70%, Gold plans cover 80%, and Platinum plans cover 90% of costs, but those plans have higher monthly premiums.

You may try to go without insurance, pay the tax penalty and take your chances. But if you get sick, have an accident or develop a chronic illness, you could be facing not only a stressful medical issue, but also an extremely difficult financial situation.

Next page: A brief overview and what it means to businesses and their employees.

Dates you need to know:

**October 1, 2013:**
Insurance exchanges open and enrollment begins.
If you are an individual or family without health insurance, you can begin researching your options through the new health insurance exchange. The exchange is like an insurance marketplace where you can shop and compare health insurance coverage options and costs. If you live in Minnesota, the health insurance exchange (or marketplace) is called MNsure. More information is available at www.mn.gov. If you are a resident of another state, you can find information about your options at www.healthcare.gov.

**January 1, 2014:**
Coverage begins for those who have purchased a plan.

**March 31, 2014:**
Deadline for health insurance open enrollment.
If you don’t have insurance by now, you will be assessed a tax penalty that’s roughly 1% of your Adjusted Gross Income. The minimum tax you can pay is $95 per adult and $47.50 per child, capped at $285 per household. These costs may change in future years. However, some families will qualify for free health insurance under Medicaid.
The Affordable Care Act:
What it means to businesses and their employees

The Affordable Care Act requirements for businesses were postponed until 2015. No employer is required to offer health coverage, however, small businesses have options available now.

- Small businesses with fewer than 50 employees are eligible for a tax credit to help offset the cost of purchasing health insurance.
- Small businesses now have the option of shopping for and comparing health insurance plans through the Small Business Health Options Program (SHOP) Marketplace, a new program intended to simplify the process of buying health insurance for small businesses. Coverage could begin as early as January 1, 2014.
- In Minnesota the SHOP Marketplace is MNsure. Wisconsin businesses can use the SHOP Marketplace through healthcare.gov. If you have questions about the SHOP Marketplace for businesses with 50 or fewer employees, call 1.800.706.7893.
- Beginning in 2016, some larger businesses that don’t offer coverage may have to make an Employer Shared Responsibility payment.

A brief overview
Use the table below to see which changes associated with the Affordable Care Act apply to you.

<table>
<thead>
<tr>
<th>Young Adults</th>
<th>Adults</th>
<th>Families and Children</th>
<th>Persons with Disabilities</th>
<th>Changes that have been implemented or that take effect January 1, 2014.</th>
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<tbody>
<tr>
<td>X</td>
<td></td>
<td>X</td>
<td>X</td>
<td>Children under the age of 19 can no longer be denied coverage because of a preexisting condition, like asthma or diabetes.</td>
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<tr>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>Beginning in 2014, no one can be denied because of a preexisting condition.</td>
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<tr>
<td>X</td>
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<td>X</td>
<td>X</td>
<td>Until 2014, there are options for those who are denied coverage in the private market, including the Minnesota Comprehensive Health Association, the Preexisting Condition Insurance Plan and Minnesota health care programs.</td>
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<tr>
<td>X</td>
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<td></td>
<td>Young adults can now stay on their parent’s health insurance plan until age 26, unless they have access to coverage through their employer.</td>
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<tr>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td>Insurance plans can no longer place a dollar limit on the health care that is covered in a lifetime. Starting in 2014, there will be no dollar limits on the care that is covered in one year.</td>
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<tr>
<td>X</td>
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<td>X</td>
<td></td>
<td>New health plans must now cover preventive care and screenings, such as an annual exam or the flu shot, at no cost to the patient.</td>
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<tr>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td>In 2014, most Minnesotans will be required to have health coverage through their employer, a public program or a private insurance plan.</td>
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<td>X</td>
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<td>Starting in 2014, Medical Assistance will expand to cover more people, including individuals and families making up to 138 percent of the federal poverty level—(about $30,000 for a family of four in 2011, and about $15,000 a year for an individual in 2011).</td>
</tr>
<tr>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td>Starting in 2014, individuals and families without employer coverage will be able to shop for and compare health insurance plans through the Minnesota Health Insurance Exchange (MNsure). Depending on income, tax credits may be available to help pay for coverage.</td>
</tr>
<tr>
<td>X</td>
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<td></td>
<td></td>
<td>Starting in 2014, prenatal and newborn care along with vision as well as dental care for kids will be covered in all new health plans sold through an Exchange.</td>
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<tr>
<td>X</td>
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<td></td>
<td></td>
<td>In 2011, Minnesota was chosen as one of 15 states to receive funding to improve care for “dual eligible” Minnesotans who are served by Medicare and Medicaid.</td>
</tr>
</tbody>
</table>
### The Healthcare Law’s 10 Essential Benefits

The Affordable Care Act requires that these health benefits be included in every health insurance plan offered through the health insurance exchange or marketplace.

<table>
<thead>
<tr>
<th>Essential Benefits</th>
<th>Source: <a href="http://www.healthcare.gov">www.healthcare.gov</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>Outpatient care (the healthcare services you get without being admitted to a hospital)</td>
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<tr>
<td>Your prescription drugs.</td>
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<tr>
<td>Emergency room care.</td>
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<tr>
<td>Services and devices to help you recover if you are injured, or have a disability or chronic condition. This includes physical and occupational therapy, speech-language pathology, psychiatric rehabilitation, and more.</td>
<td></td>
</tr>
<tr>
<td>Inpatient care. (treatment in the hospital)</td>
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<tr>
<td>Your lab tests.</td>
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<tr>
<td>Care before and after your baby is born.</td>
<td></td>
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<tr>
<td>Preventive services including counseling, screenings, and vaccines to keep you healthy and care for managing a chronic disease.</td>
<td></td>
</tr>
<tr>
<td>Mental health and substance use disorder services including behavioral health treatment, counseling, and psychotherapy.</td>
<td></td>
</tr>
<tr>
<td>Pediatric services: This includes dental care and vision care for kids.</td>
<td></td>
</tr>
</tbody>
</table>

Changes that have been implemented or that take effect January 1, 2014.
Why should I buy health insurance?
Accidents that require emergency care or illness can happen to anybody at any time. Everybody uses the health care system at some point in his or her life. The government’s Affordable Care Act mandates that you must have health insurance. If you do not have a health plan, you are responsible for 100 percent of your, and your dependents’, medical bills.

When someone who is uninsured requires medical care but doesn’t pay, everyone else pays more. That is why the Affordable Care Act includes a penalty for those who chose not to purchase health insurance.

What happens if I need medical care but I do not have insurance?
When you are uninsured and either seek medical care or require emergency medical care, you will be responsible for 100 percent of your medical expenses. If you do not pay your bill, everyone else ends up paying for you. That’s why the new health care law requires all people who can afford it to purchase coverage or pay a penalty.

Without health insurance, you won’t be protected from the kind of unexpected, very high medical bills that can sometimes lead to bankruptcy.

How can I purchase health insurance or find out if I’m eligible for assistance?
You can shop for health insurance and learn whether you are eligible for free coverage, medical assistance or tax credits through the new insurance exchange. Review the information about insurance exchanges on page 10 and see the resources listed on page 11.
How much will health insurance cost?

If you are a Minnesota resident

Rates for plans offered through MNsure (or plans through other insurance exchanges) vary depending on your income, age, family size, the region in which you live and the level of coverage you choose.

MNsure has divided the state into nine Areas. Southeast Minnesota is Area 1, which includes the following counties:

**Area 1**
Dodge Freeborn Houston Olmstead Wabasha
Fillmore Goodhue Mower Steele Winona

Health plans available in Area 1 include 14 options offered by Medica and BlueCross BlueShield of Minnesota. The options include Bronze, Silver and Gold Plans. Plans with lower monthly costs will have higher deductibles, and plans with higher monthly costs will have lower deductibles.

To calculate your estimated cost for various coverage options, go to the MNsure website: **MNsure.gov**, and click Find Your Cost. There is a simple form to complete to calculate your cost and options depending on income and family size. You’ll also learn whether you qualify for no-cost or low-cost coverage through Medical Assistance or MinnesotaCare.

If you are not a Minnesota resident, please see the Resources section to learn where you can find information about purchasing health coverage.

How do I compare and purchase insurance coverage through MNsure?

Here is the process:

- **Step One**: Access the website (MNsure.gov). Choose either the individual or family or small employer category.

- **Step Two**: About You. Once you’ve provided key details, you’ll see a range of plans that provide the coverage you’re looking for.

- **Step Three**: Select a Plan. Compare your options by price, provider or services offered.

- **Step Four**: Reduce Your Cost. Complete the information to see if you may qualify for tax credits or health programs.

- **Step Five**: Complete Your Enrollment. Individuals and families only need to fill out one application for any type of health coverage offered through the MNsure marketplace.

How can I protect myself from fraud?

All individuals are encouraged to take caution when researching and purchasing health insurance. Websites can look legitimate even when they are not. If you are shopping for health insurance through Minnesota’s insurance exchange, be sure that you are on the MNsure website: MNsure.org, and not just something that looks or sounds the same.

Always protect your identity. Remember:

- Never give your personal health or financial information to someone who calls or comes to your home uninvited, even if they say they are from the Marketplace or a government agency. The Marketplace has trained assisters to help you at no cost. You should never be asked to pay for services or help to apply for Marketplace coverage.

- No one working with the insurance exchange should ask for your personal health information such as your health history, your health condition, or your medical treatment history. Don’t give it to anyone.

- Keep personal and account numbers private. Don’t give your Social Security number or credit card or banking information to anyone you didn’t contact or in response to advertisements.

- Write down and save the name of anyone who may assist you, along with information about the company he or she works with including: phone number, street address, email address and website.

- Double check information that is confusing or sounds fishy. Visit HealthCare.gov to verify, or call the Marketplace at 1.800.318.2596. TTY users should call 1.855.889.4325.

- Ask questions if any information is unclear.

- Don’t sign anything you don’t fully understand.

If you have questions, or suspect fraud, call the Health Insurance Marketplace call center at 1.800.318.2596. TTY users should call 1.855.889.4325. Also contact your local police department.
Top 10 things you should know about an insurance exchange:

1. An insurance exchange is a new way to find, compare and buy health coverage online. Some people have compared it to shopping online for airline tickets, but instead you’re shopping for a health insurance plan.

2. Using the insurance exchange allows you to compare a variety of insurance plans side-by-side.

3. All plans offered through an insurance exchange must meet the requirements of the Affordable Care Act. That means they must cover doctor visits, hospital stays, emergency services, preventive care (care that’s designed to help you stay healthy), prescriptions and more (see the 10 Essential Health Benefits on page 7).

4. In addition to comparing plans online, the insurance exchange allows you to use one application to tailor options to your personal situation and learn whether you may be eligible for financial assistance to lower your cost based on your income.

5. Low cost and free coverage is available and financial help is available depending on how much money you make.


7. You cannot be denied coverage because of a pre-existing condition.

8. All information is available online, and you may choose to apply for coverage online, by phone, by mail, or in-person with the help of a trained assister or navigator. (Review information about resources available to you on page 11.)

9. No one will give you a sales pitch.

10. Information is available in several languages.
Top things you should know about an insurance exchange:

If you live in Minnesota

MNsure.org is the new online health insurance marketplace for Minnesotans. The MNsure website is an easy-to-use website where you can search and compare plans, apply for coverage, and enroll.

The MNsure hotline is also open for your questions: 1.855.3.MNSURE or 1.855.366.7873.

If you live in Wisconsin

Your online health insurance resource is Healthcare.gov. Wisconsin decided not to pursue a state health insurance exchange so, Wisconsin residents will use the federal insurance exchange.

If you live in another state

No matter what state you live in, you can go to Healthcare.gov and click on the “What is the marketplace in my state” tab at the bottom of the page to be directed to the right resource.

Resources

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Need help? We’re here for you.

As your local, not-for-profit healthcare provider, Winona Health remains committed to providing high quality care and investing in the healthcare services to meet the needs of our community.
My Winona Health is a free web-tool that gives you instant access to your Winona Health medical information anytime, anywhere you have an Internet connection. To sign up, call 507.474.5678 or visit a registration desk at Winona Health. You must have an email address to sign up.

My Winona Health is a secure Internet application in compliance with state and federal requirements.

For more information visit: www.winonahealth.org/mywh

Use My Winona Health to:
- Check upcoming appointment dates
- Send messages to your provider or care team
- Check your latest lab results
- View your medical history