

Joint Assembly and Senate Informational Hearing Health Insurance Affordability Assistance for Californians: Options and Funding

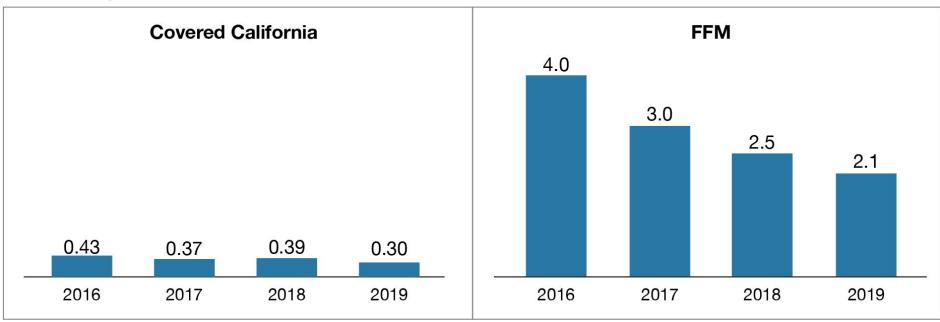
Peter V. Lee
Executive Director

February 12, 2019

WHILE COVERED CALIFORNIA'S TOTAL ENROLLMENT HELD STEADY, THE DROP IN NEW ENROLLEES IS A CONCERN AT THE STATE AND FEDERAL LEVEL

Covered California's drop in new enrollees of 24 percent surpassed the 16 percent decline in the 39 states represented by the federal marketplace. The decline in those states was on top of a <u>39 percent</u> decrease in new enrollees between 2016 and 2018, while California has maintained more new enrollees each year and a 200 percent healthier risk mix.

Comparing New Enrollment, Covered California and FFM, 2016-19, in millions



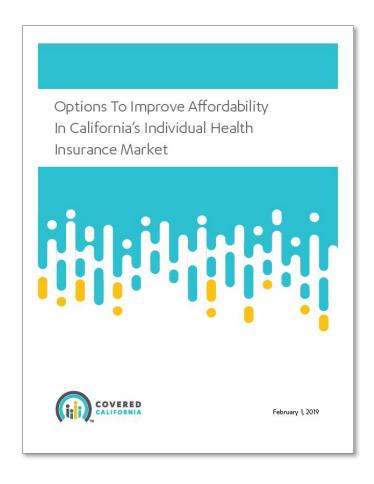
Covered California 2019 Open Enrollment Early Analysis https://hbex.coveredca.com/data-research/library/CoveredCA_2019_Open_Enrollment_Early_Analysis.pdf



1

OPTIONS TO IMPROVE AFFORDABILITY IN CALIFORNIA'S INDIVIDUAL HEALTH INSURANCE MARKET

- Developed pursuant to AB 1810 (Committee on Budget, Chapter 34, Statutes of 2018), to develop and present options to improve affordability for low- and middle-income Californians to the Governor, Legislature, and Council on Health Care Delivery Systems.
- Five-month engagement of academic experts and Covered California's Policy Division with a workgroup of stakeholders, legislative staff and broad community input.
- Report presents multiple options to improve affordability in the individual market building on tools of the Affordable Care Act.
- □ Report available at: https://hbex.coveredca.com/data-research/library/CoveredCA Options To Improve Affordability.pdf





COMPREHENSIVE MARKET-WIDE AFFORDABILITY MODELS

Policy Option	Description	Policy Objectives
Option 1: Enhance and extend premium and cost-sharing support	Premium support that lowers premium contribution caps for individuals up to 400% FPL and new premium support above 400% FPL that eliminates the cliff	 Significantly increase enrollment among those eligible for individual market coverage
	Cost-sharing support that expand eligibility for, and generosity of, cost-sharing program for individuals between 150% and 400% FPL	 Cap premium contributions for all individual market enrollees by eliminating the tax credit cliff
		 Make care more affordable for all enrollees under 400 percent FPL
Option 2: Enhance and	Option 1 plus reinstatement of individual mandate penalty	All Option 1 objectives
extend premium and cost- sharing support plus individual mandate penalty		 Restore a significant share of projected enrollment loss in the individual market due to zero-dollar federal penalty
		 Lower gross premiums through improved risk mix
Option 3: Enhance and	Option 2 plus funding for a reinsurance program modeled on the temporary federal reinsurance program funded at the level required to lower gross premiums by 10 percent per year	All Option 2 objectives
extend premium and cost- sharing support plus individual mandate penalty plus reinsurance		 Reduce individual market gross premiums by 10 percent per year to address affordability for individuals who do not receive premium subsidies.



TARGETED AFFORDABILITY MODELS

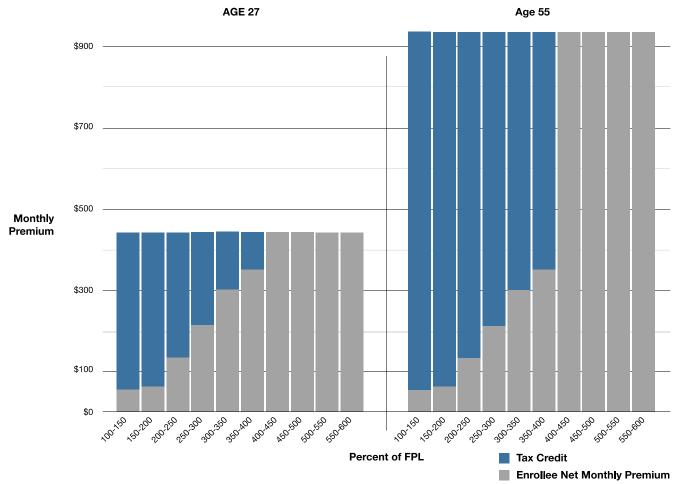
Policy Objective	Policy Option	Description		
Targeted improved affordability for consumers	T1	Premium support that lowers premium contribution caps for individuals up to 400% FPL		
earning less than 400% FPL	T2	Cost-sharing reduction so that those 200-400% FPL get AV 80 plans (Gold AV)		
Targeted improved affordability for consumers	Т3	Premium support that lowers premium contribution caps under 400% FPL and extends the cliff to 600% FPL		
earning less than 600% FPL	T4	 Premium support and penalty reinstatement Option T3 Reinstate individual mandate penalty 		
Targeted improved affordability for consumers	T5	Premium support between 400 and 600% FPL that pushes out the cliff		
earning more than 400% FPL	Т6	Premium support above 400% FPL that eliminates the cliff		
	Т7	Reinsurance that lowers premiums by 10 percent per year		
Targeted improved affordability for all consumers generated by reinstating the mandate penalty	T8	Reinstate individual mandate penalty		



AFFORDABILITY REMAINS CRITICAL CHALLENGE FOR MIDDLE INCOME CONSUMERS

Consumer share of premium (grey bars) jump for those just over the "subsidy cliff" at 400 percent of Federal Poverty Level (FPL). The impact is most severe for older consumers and those living in regions with higher health care costs.

Monthly Premium and Tax Credit by Age and Income Range in Alameda County





ILLUSTRATING POLICIES THROUGH CONSUMER SCENARIOS

Approach 1, Option 2, Comprehensive Market-Wide Affordable Enhancements

	Alfonso		Affordable Care Act Baseline	Option 2 Enhanced Premium and Cost	
	25 years old			Sharing Subsidies with Penalty	
	Lives in a low cost region	Monthly Premium (SLS)	\$350	\$333	
	Income: \$25,000	Worlding Fremian (OLO)	ΨΟΟΟ	Ψ355	
	206% FPL	Net Premium	\$136	\$39	
	Based on the second-lowest Silver plan offered where Alfonso lives	Net Premium Income Share	6.54%	1.89%	
Allonso lives		Federal Premium Subsidy	\$214	\$196	
		New Premium Subsidy	\$0	\$97	
		Silver Plan Medical Deductible (family)	\$2,200	\$650	
		Annual Penalty	None	\$695	



ILLUSTRATING POLICIES THROUGH CONSUMER SCENARIOS

Approach 1, Option 2, Comprehensive Market-Wide Affordable Enhancements

	Erin and Francis 62 years old		Affordable Care Act Baseline	Option 2 Enhanced Premium and Cost Sharing Subsidies with Penalty
	Live in a high cost region Income: \$75,000	Monthly Premium (SLS)	\$2,250	\$2,138
	456% FPL	Net Premium	\$2,250	\$578
Based on the second-lowest Silver plan offered where Erin and Francis live		Net Premium Income Share	36.00%	9.25%
		Federal Premium Subsidy	\$0	\$0
		New Premium Subsidy	\$0	\$1,559
		Silver Plan Medical Deductible (family)	\$5,000	\$5,000
		Prorated Monthly Penalty	None	\$263



7

COVERED CALIFORNIA 2019 PATIENT-CENTERED BENEFIT DESIGNS

In California, standard benefit designs allow apples-to-apples plan comparisons and seek to encourage utilization of the right care at the right time with many services that are not subject to a deductible. All health plans offer identical patient-centered benefit designs.

Coverage Category	Bronze	Silver	Gold	Platinum
	Covers 60% average annual cost	Covers 70% average annual cost	Covers 80% average annual cost	Covers 90% average annual cost
Annual Wellness Exam	\$0	\$0	\$0	\$0
Primary Care Visit	\$75	\$40	\$30	\$15
Specialty Care Visit	\$105	\$80	\$55	\$30
Urgent Care Visit	\$75	\$40	\$30	\$15
Emergency Room Facility	Full cost until out-of-pocket maximum is met	\$350	\$325	\$150
Laboratory Tests	\$40	\$35	\$35	\$15
X-Ray and Diagnostics	Full cost until out-of-pocket maximum is met	\$75	\$55	\$30
Medical Deductible	Individual: \$6,300 Family: \$12,600	Individual: \$2,500 Family: \$5,000	N/A	N/A
Pharmacy Deductible	Individual: \$500 Family: \$1,000	Individual: \$200 Family: \$400	N/A	N/A
Annual Out-of-Pocket Maximum	Individual: \$7,550 Family: \$15,100	Individual: \$7,550 Family: \$15,100	Individual: \$7,200 Family: \$14,400	Individual: \$3,350 Family: \$6,700

Benefits shown in blue are not subject to a deductible.

White corner = subject to a deductible after first three visits. The copay is for any combination of services (primary care, specialist, urgent care) for the first three visits. After three visits, they will be at full cost until the medical deductible is met.



COVERED CALIFORNIA 2019 PATIENT-CENTERED BENEFIT DESIGNS FOR COST-SHARING REDUCTION BENEFIT DESIGNS

Consumers who have a **household income between 138% and 250%** of the federal poverty level are eligible to enroll in **Silver plan** with **Cost-Sharing Reduction (CSR)** benefits.

Coverage Category	Enhanced Silver 94	Enhanced Silver 87	Enhanced Silver 73
Eligibility Based on Income and Premium Assistance	Covers 94% average annual cost	Covers 87% average annual cost	Covers 73% average annual cost
Single Income Ranges	up to \$18,210 (≤150% FPL)	\$18,211 to \$24,280 (>150% to ≤200% FPL)	\$24,281 to \$30,350 (>200% to ≤250% FPL)
Annual Wellness Exam	\$0	\$0	\$0
Primary Care Visit	\$5	\$15	\$35
Specialty Care Visit	\$8	\$25	\$75
Urgent Care Visit	\$5	\$15	\$35
Emergency Room Facility	\$50	\$100	\$350
Laboratory Tests	\$8	\$15	\$35
X-Ray and Diagnostics	\$8	\$30	\$75
Imaging	\$50	\$100	\$300
Medical Deductible	Individual: \$75 Family: \$150	Individual: \$650 Family: \$1,300	Individual: \$2,200 Family: \$4,400
Pharmacy Deductible	_	Individual: \$50 Family: \$100	Individual: \$175 Family: \$350
Annual Out-of-Pocket Maximum	Individual: \$1,000 Family: \$2,000	Individual: \$2,600 Family: \$5,200	Individual: \$6,300 Family: \$12,600

Benefits shown in blue are not subject to a deductible.





Information for consumers CoveredCA.com

Information on exchange-related activities hbex.CoveredCA.com