Greetings from the UGA Health Navigator Program

by Sheri L. Worthy, PhD
Principal Investigator

Greetings from the UGA Health Navigator program, and thank you for reading this newsletter!

In August 2013, the University of Georgia’s College of Family and Consumer Sciences (FACS) was awarded a $1,657,378 cooperative agreement with the Department of Health and Human Services Center for Medicare and Medicaid Services (CMS) to operate a Navigator program. The purpose of the Navigator program is to deliver consumer information and education related to the new federally-facilitated health insurance marketplace (HealthCare.gov) to rural consumers in the State of Georgia. UGA was one of two groups funded within the State.

FACS personnel involved in the project include: Associate Dean Debbie Murray, Project Director; Sheri Worthy, Principal Investigator; Joan Koonce, Lead Trainer; Lance Palmer, VITA Director; Sharon Gibson, Cultural Trainer; Zo Stoneman, Disability Director; Becky Brightwell Disability Trainer; and Irina Kunovskaya, Evaluation Coordinator.

UGA hired 12 Navigators to assist consumers, small businesses, and

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employees as these individuals and organizations look for health coverage options to fit their needs and budgets. The UGA Navigators, housed under FACS and Department of Financial Planning, Housing and Consumer Economics (FHCE), have completed 59 hours of comprehensive training through the State of Georgia, CMS, and FACS. All UGA Navigators have passed a State Navigator License Exam and are certified by the Georgia Insurance Commissioner.

Since the Health Insurance Marketplace debuted on October 1, UGA Navigators have been working hard to help consumers learn about their health coverage options through education and outreach activities. Navigators are also available to answer questions, assist consumers in filling out the paper application, or use the new online portal.

In addition to assisting consumers, UGA Navigators are available to educate and train Cooperative Extension agents about health care reform under the Affordable Care Act (ACA) and the Marketplace. Each month we will publish this training newsletter that highlights ACA and Marketplace developments, best practices for working with consumers, and a round-up of the latest Navigator activities.

For more information on the UGA Health Navigator program, call 1-877-7NAVIGATE (1-877-762-8442) or visit www.UGANavigators.org.

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Health Insurance Marketplace Training Opportunities

by Joan Koonce, PhD
Lead Trainer

Do You Want to Know More about the ACA and Health Marketplace? There is an online training opportunity available for all Cooperative Extension agents.

As you know, the Health Insurance Marketplace opened October 1st. Open enrollment runs through March 31, 2014. For many people, they will have the opportunity to purchase health insurance for the first time. Many will have questions about the ACA, Marketplace, and insurance in general.

Because Cooperative Extension is a trusted source of information, consumers are likely to come to you with questions or for information, regardless of your area of expertise.

The good news is that you can complete an online training through the Center for Medicare and Medicaid Services (CMS) that will prepare you to answer these questions for consumers and provide them with additional information about enrollment.

The training provides you with information about different types of health insurance plans and provisions, the ACA and its impact on consumers and small business, the Marketplace and how consumers can access it, and more. You can complete the training anytime; all you need is access to the internet. The link to the training is:


If you are interested in completing the training, email Betsy Charron at bcharron@uga.edu to get your CMS ID.

Penalty Exemptions Examined

by Stephen Bailey
Statewide Health Navigator

One of the most common questions that Navigators get is, "if I don’t have health insurance next year, will I have to pay the penalty?"

The short answer to this question is yes. Anyone who lacks minimum essential coverage in 2014, will be subject to a fee or "individual shared responsibility payment." The penalty in 2014 is either $95 per person for the year ($47.50 per child under 18) up to a maximum of $285 OR 1% of the taxpayer’s annual household income (maximum does not apply), whichever is greater.

Some people with limited incomes and other situations can get exemptions from the fee. To examine this provision, I want to discuss two of the most common exemptions from the individual responsibility payment: a hardship exemption and a lack of affordable coverage exemption.

Lack of Affordable Coverage Exemption

Simply stated, if the cheapest health plan available to someone costs more than 8% of his/her annual household income, he/she can choose not to get insurance and instead claim an exemption from the penalty. Of course, nothing is simple when it comes to legislation so here are some more details.

1) If a consumer has the option of being covered under an employer-sponsored plan, the 8% rule will apply only to available employer plans (ignoring individual plans that he/she could find on or off the Marketplace).

2) When an employer plan offers coverage for dependents, the 8% rule will be applied to each person in the family, individually. For example, if the required contribution for self-only coverage under an employer-sponsored plan costs less than 8% of household income, while the required contribution for family coverage under the same employer plan costs more than 8% of household income, the employee would not be exempt from the individual mandate penalties, but the spouse and claimed dependents would be exempt.

3) If someone does not have the option of employer-sponsored health insurance, the 8% rule will be determined by the cheapest health plan available to him/her on the Marketplace, after any premium tax credit has been applied to the cost.

This Lack of Affordable Coverage exemption is something that can be claimed directly from the online Marketplace or through the IRS when a person files taxes.

Hardship Exemption

There are 12 Hardship exemptions available in the Marketplace. A list of these can be found on HealthCare.gov (https://www.healthcare.gov/exemptions/). Most exemptions are based on unexpected expenses, losses, or changes in income. However, I want to point out that one exemption allows a person to claim a hardship because he/she was “determined ineligible for Medicaid because your state didn’t expand eligibility for Medicaid under the Affordable Care Act.”

This is important because, for states like Georgia, it means anyone whose household income is below 138% of the Federal Poverty Level (right now that’s $15,856 for individuals, $21,403 for a family of two, $32,500 for a family of four) has the potential to claim this exemption if they get turned down by Medicaid.

This exemption can only be claimed directly through the Marketplace, and it is a great reason for you to urge low-income residents to fill out an application on HealthCare.gov. Even if a consumer doesn’t believe he/she will find affordable insurance, the website will first determine Medicaid eligibility, and then give him/her the option to file for the hardship exemption if that person is turned down but still meets the 138% income requirement.

How to File an Exemption

If someone does not have health insurance during 2014, there are three possible methods for him/her to receive an exemption (the method available to that person will depend on which exemption he/she is eligible for). These methods are:

1) Creating an account at healthcare.gov and filing an exemption through the online Marketplace.

2) Waiting until filing 2014 taxes and applying for an exemption through the IRS.

3) Doing absolutely nothing. If a person’s income is below the Federal Filing Limit, if he/she is only without health coverage for less than 3 months during a given year, or if he/she is not lawfully present in the U.S., that person is automatically exempt.

We may be dealing with quite a few people who fall into these categories, and over time I’m sure we will familiarize ourselves with all of the many exemptions on a case by case basis. In the meantime, I hope you find this information useful as you assist people in your communities!

For more information on Marketplace exemptions visit: https://www.healthcare.gov/exemptions/

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Protecting Consumers: ACA Scams Pose Risk for Identity Theft

by Betsy Charron
Health Navigator Program Coordinator

Since the Health Insurance Marketplace (Exchange) launched October 1, con artists have been devising scams to steal the identities of unwitting consumers. Affordable Care Act (ACA) scams come in a variety of forms. Consumers have complained about con artists contacting them by phone, fax, email and even in person.

The confusion with HealthCare.gov has only increased consumer’s susceptibility to fraud schemes. People who are not aware of being logged into the official website are at risk for being exposed to identify theft. This problem may arise when consumers conduct a web search using words such as “medical insurance” and “Medicare”. Using these searches, consumers are finding themselves linked to potential websites that may be health insurance scams.

Several government and community resources, available on the Internet, provide helpful information and tips for avoiding fraud. The Better Business Bureau, for example, recommends the following:

1.) Don’t use a Google search for help. Go to the government’s official website instead, which can lead you to websites owned by individual state governments. The official website is www.HealthCare.gov.

2.) Check for a digital certificate. This is the website’s way of proving it is an official ACA website and won’t steal your personal information.

3.) Ignore unsolicited phone calls or emails. If a government official calls or emails asking for your information, don’t respond to the email or hang up the phone. The government never solicits consumers for personal information.

Cooperative Extension faculty can take additional measures to help consumers protect themselves against fraud. These include encouraging consumers to protect social security numbers, avoid giving out confidential information over the phone or to anyone who calls or visits the home uninvited, and report any suspicious caller or visitor to the authorities (see TABLE 1).

For more information on ACA scams and protecting consumers, visit:


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TABLE 1. Resources to Report Fraud

<table>
<thead>
<tr>
<th>Resource</th>
<th>Contact Information</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Federal Trade Commission (FTC)</td>
<td>• Online: Secure Complaint Form</td>
<td>To report identity theft</td>
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<tr>
<td></td>
<td>• Phone: 1-877-ID-THEFT (1-877-438-4338); TTY: 1-888-653-4261</td>
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<tr>
<td>The HHS Office of the Inspector General (OIG)</td>
<td>• Online: OIG Hotline Operations</td>
<td>To report that a consumer’s information was used to enroll someone else in the Marketplace</td>
</tr>
<tr>
<td>State Department of Insurance (SDI)</td>
<td>• Your local State Department of Insurance</td>
<td>To report Agent/Broker fraud</td>
</tr>
<tr>
<td>Federally-facilitated Marketplace Call Center</td>
<td>• 1-800-318-2590; TTY: 1-888-889-4325 (all languages available)</td>
<td>To report a complaint about a Navigator</td>
</tr>
</tbody>
</table>

Spotlight on Success

UGA Health Navigators help enroll consumers in affordable health coverage every day. Each month in Spotlight on Success, we will highlight a different consumer enrollment story from a Navigator around the State. This month’s story comes from Cassandra Hunter in Habersham County.

I assisted a middle-aged widow seeking alternative health coverage. She’s currently receiving benefits through her late husband’s company. Her health coverage will increase to $750.00 dollars a month starting January 2014. She has an autoimmune disorder and paid out more than $1,700.00 dollars in prescription medications over the past three months.

When we met, I thoroughly went over the Marketplace application with her, as well as, assisted her with reviewing estimated premium costs and tax credit options. After we finished, she was overwhelmed stating, “This is so much information. I’m still confused.”

I clarified estimated costs and tax credit subsidies and advised the consumer to contact her financial counselor regarding calculating her monthly income. She immediately stated, “I will contact him as soon as possible.” Upon realizing she was eligible for tax credits, she cried stating, “I cannot afford my current health insurance, but seeing my estimated costs on Marketplace, I can easily afford this coverage.”

November 2013
The roll-out of HealthCare.gov has been bumpy for all of us invested in the Marketplace. The website’s ongoing technical difficulties are both problematic for consumers trying to enroll in coverage and assister trying to help those individuals. Not surprisingly initial reports show that national enrollment numbers are lower than expected. With 1.86 million Georgians uninsured, Extension Faculty may receive calls from frustrated and confused consumers looking for answers to Marketplace website woes.

The Department of Health and Human Services (HHS) Digital Strategy blog, which can be accessed at - http://www.hhs.gov/digitalstrategy/blog/index.html - provides regular updates on ongoing software fixes to HealthCare.gov. The most recent update, posted Thursday, November 21, states that the site will work smoothly for most people by the end of the month. Here is the list of the most recent Marketplace website and call center updates:

• First, to improve the user experience we’ve streamlined the site by removing potentially confusing screens and displays and adding helpful icons and calendar functions.
• Second, to improve the enrollment process, several fixes focused on ensuring that information is correctly provided to users as they navigate through the site, so that people can move more efficiently and effectively through the enrollment process, and can be assured that the input they provide to the system is displayed properly.
• We’ve also made changes to the summary and the review sections of the application so that information is displayed in a more user friendly manner. For example, records now show which coverage is being canceled for a member—something particularly important to ensuring accuracy of 834 notices.
• Third, to improve the workflow for agents, brokers and Call Center representatives, we undertook further improvements overnight to make it easier for them to work through the site. For example, now Call Center representatives can get to Plan Compare without going through the entire application, again. Additionally, Call Center representatives now no longer receive error messages when a search result does not return any records.

To keep current on HealthCare.gov improvements, visit the HHS Digital Strategy blog at:

http://www.hhs.gov/digitalstrategy/blog/index.html

HHS Update: “Ongoing Software Fixes to Improve User Experience”