

# **Open Enrollment Basics**

Open Enrollment Boot Camp October 19, 2022

Presented by Ryan Leong, Esq.

## Goals

- Understand Open Enrollment period and timeline for Covered California and Medicare
  - What you can do, what to remember, and important deadlines
- Review wrap-around benefits and practice tips to ensure seamless enrollment
  - ADAP, OA-HIPP, and MDPP eligibility
- Describe what happens when a client misses Open Enrollment
  - Tax penalties, Special Enrollment Period, Medi-Cal

# Open Enrollment

### Open Enrollment

- Who cares about Open Enrollment?
   We do!
- Why do we care?
  - Covered California, Medicare, private insurance, and employers all have Open Enrollment periods
  - Open enrollment is the <u>only period</u> during the year when individuals can enroll in a health plan without a Qualifying Life event

### Important Dates

	Sign up Dates	Effective Dates
Medicare Advantage & Part D	October 15, 2022 – December 7, 2022	January 1, 2023
Covered California		
		February 1, 2023
Medicare Parts A & B	January 1, 2023 – March 31, 2023	July 1, 2023

# Covered California

# Covered California Open Enrollment

Open Enrollment is from November 1, 2022– January 31, 2023

- During Open Enrollment, you can:
  - Renew your health plan
  - Enroll in a plan for the first time
  - Change your health plan
- The date you enroll or make changes determines the date the new plan goes into effect:

Enroll Between	Coverage Starts	
Nov 1, 2022 – Dec 31, 2022	January 1, 2023	
Jan 1, 2023 – Jan 31, 2023	February 1, 2023	

### Covered California vs. Medi-Cal Eligibility

- MAGI Medi-Cal and Covered California use **Modified Adjusted Gross Income** to determine eligibility
- If <u>monthly</u> income is . . .
  - \$0 \$1,564 eligible for MAGI Medi-Cal
    - Up to 138% FPL
  - \$1,564 \$54,360 eligible for Covered California with premium assistance (APTC)
    - Between 139% FPL and 400% FPL
  - Consumers at 400% FPL or higher may receive federal premium tax credit to lower their premiums to a max of 8.5% of their income based on the second-lowest-cost Silver Plan

# Who can enroll in Covered California?

- US citizens, Immigrant with Qualified legal status, Applicants for certain legal statuses
- Individuals <u>not</u> eligible for MAGI Medi-Cal
- Individuals <u>not</u> eligible for Medicare with free Part A
- Individuals who don't have employer based coverage
  - Limited exceptions apply to this rule

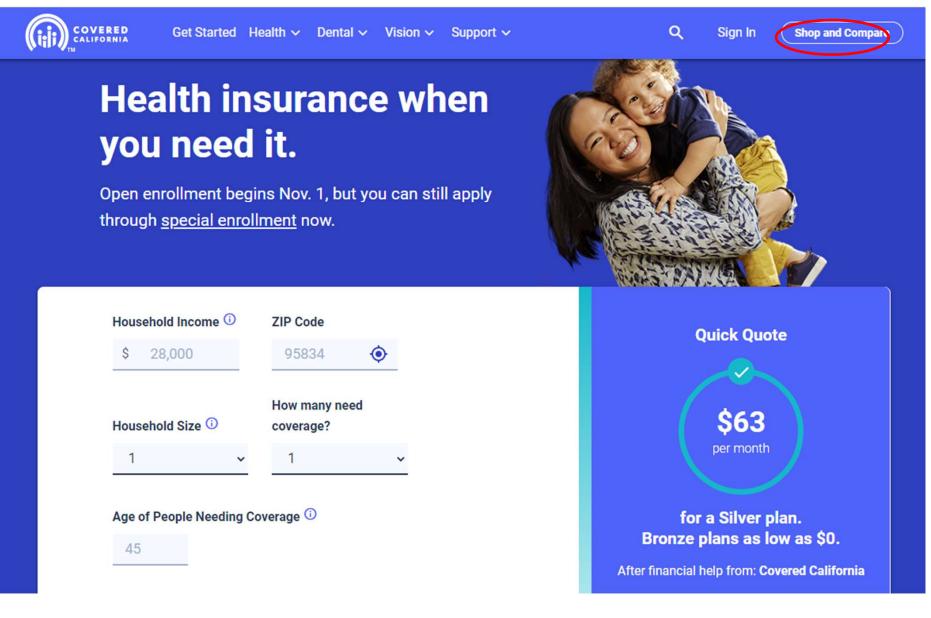
## How to Enroll

- Before you meet with your client . . .
  - Ask your client to bring income, immigration, and family information
  - Ask your client who their doctor is and to bring a medication list
    - <u>Best Practice:</u> call doctor's office billing department and ask which Covered California plans they accept, including the metal tier
  - Ask your client if they anticipate needing specific procedures or services in the next year

# How to Enroll

- Enroll online, by phone, or in person
  - CoveredCA.com or (800) 300-1506 or storefronts.coveredca.com
  - "No Wrong Door" Can enroll in Covered California or Medi-Cal through Covered California's website
- When working with a client
  - Remind your client that there are many affordable options
  - <u>Practice Tip</u>: you don't have to be an agent to help your client enroll
  - Call Covered California with your client
    - Request a delegation code helpful for ADAP EW completing OA-HIPP enrollment
    - <u>Practice Tip</u>: if having trouble reaching an agent, enter incorrect client information to speak to a Covered California agent more quickly

### www.CoveredCA.com



Answer these questions to find out if you qualify for help to lower your health care costs.

Coverage Year:

2019

What is your Zip Code? ①

Ex: 90210

1

What is your total household income per year? ①

How many people are in your household?

Enter the age of each person in your household, and tell us if they need coverage.

V

Age of Head of Household:



## Online Enrollment Tip

- If your client's income is above 138% FPL and they are not enrolled in Medicare . . .
  - DO NOT answer "yes" to this question about disability
  - A "yes" response will stop the Covered California application and direct you to apply for Medi-Cal
- If your client is not eligible for Medicare and their income is above 138% FPL, they are eligible for Covered California regardless of a disability

## Time to Enroll!

- Decide which plan level is best for your client
  - Metal tiers refer to cost-sharing levels
  - Bronze, silver, gold, platinum
- Review plan formularies and doctor networks
  - Formularies on insurance company website
  - "Find a Provider" tool on insurance company website
- Add plan to your cart and proceed with enrollment
- Application takes 20-30 minutes to complete online

### **Covered California: Metal Tiers**



A plan with a lower premium results in a larger copayment with higher deductibles and maximum out-of-pocket expense

## After Enrollment

- Summary → Current Enrollment
  - Includes information about the enrollment, including the initial payment due date
  - <u>Print this page for OA-HIPP enrollment</u>
  - From this page you will be directed to the insurance carrier website to make the initial payment aka binder payment
- <u>Binder payment must be received by the insurance</u> <u>carrier before the plan goes into effect</u>

### What about ADAP & OA-HIPP?

- If client's annual income is less than \$67,950, they are eligible for ADAP & OA-HIPP
- If not already on ADAP, will need to enroll in ADAP first
  - ID, proof of California residency, proof of income, labs, & letter of diagnosis required
- Print Current Enrollment page
  - Will need the premium amount, APTC, and name of the plan
- <u>Submit insurance information ASAP to request binder</u>
  <u>payment</u>
  - OA-HIPP says that binder payments can be made if they are requested within 48 hours of enrollment in a plan
  - If request submitted after that time, safest to have client pay premium and wait for reimbursement from insurance company

### Like Your Plan? Keep Your Plan!

- Renewal occurs automatically for most plans
  - However, it is important to still meet with your client!
- Make sure Covered California has updated information, provide:
  - Address change
  - Income change
- Make sure to note any premium increases
- <u>Practice Tip</u>: Enrollment Worker has to submit renewal information and new premium amount to OA-HIPP
- Fax or upload updated premium and verification of plan name, plan carrier, and APTC

### Hate Your Plan? Change Your Plan!

- Why might a client change their plan?
  - Their doctor left the network
  - Their plan's formulary changed
  - They want to attend a different hospital network
  - They were defaulted into a plan they don't like
- If your client wants to change their plan, follow the same steps . . .
  - Review provider network and formulary
  - Complete application online, on the phone, or in person
- Remember to follow up with ADAP & OA-HIPP

- Provide new plan and premium information ASAP

What if I miss Covered California Open Enrollment?

## Can I still get insurance?

- Special Enrollment Period (SEP) required to enroll in Covered California outside of Open Enrollment
- Qualifying Life Event (QLE) triggers SEP
  - Losing other health insurance
  - Permanently more to or within California
  - Having a baby, adopting a child, or getting married
  - Returning from active military duty
  - Gaining citizenship/lawful presence
- SEP is 60 days

# What if I don't enroll?

### • Tax Penalty

- California state income tax penalty
- Penalty is the <u>greater of</u> \$750 per adult and \$375 per dependent child under 18
- Limited exceptions
- Healthy San Francisco
  - Must be uninsured for 3 months before applying
  - Not minimum essential coverage
- Medi-Cal enrollment year around
  - Contact PRC to see if your client qualifies

# Medicare

### Important Dates

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## Medicare

### • Medicare has different parts

- Part A = hospital insurance
- Part B = medical/outpatient insurance
- Part C = Medicare Advantage Plan
- Part D = prescription drug coverage
- "Original Medicare" refers to enrollment in Parts A, B, and D
- Can enroll in either Original Medicare or Medicare Advantage plan

## Medicare Open Enrollment

**Open Enrollment is from October 15, 2022 – December 7, 2022** During the Open Enrollment period, you can:

- Switch from Original Medicare to Medicare Advantage
- Switch Medicare Advantage plans
- Enroll in a Part D plan
- Change Part D plans
- Changes or new enrollment effective January 1, 2023

### Open Enrollment for Medicare Parts A & B

- January 1, 2023 March 31, 2023
- For more information about enrolling in Parts A & B, contact HICAP at (415) 677-7520

### What is Part C?

- Part C plans are also called Medicare Advantage Plans
- Coverage provided by private insurance companies approved by Medicare
- In California, Advantage plans include Parts A, B, & D
- There is a monthly premium in addition to the Part B premium
- Potential cost savings
- Many offer supplemental benefits such as dental, vision, health, and wellness
- Must be enrolled in Parts A & B to enroll in a Medicare Advantage

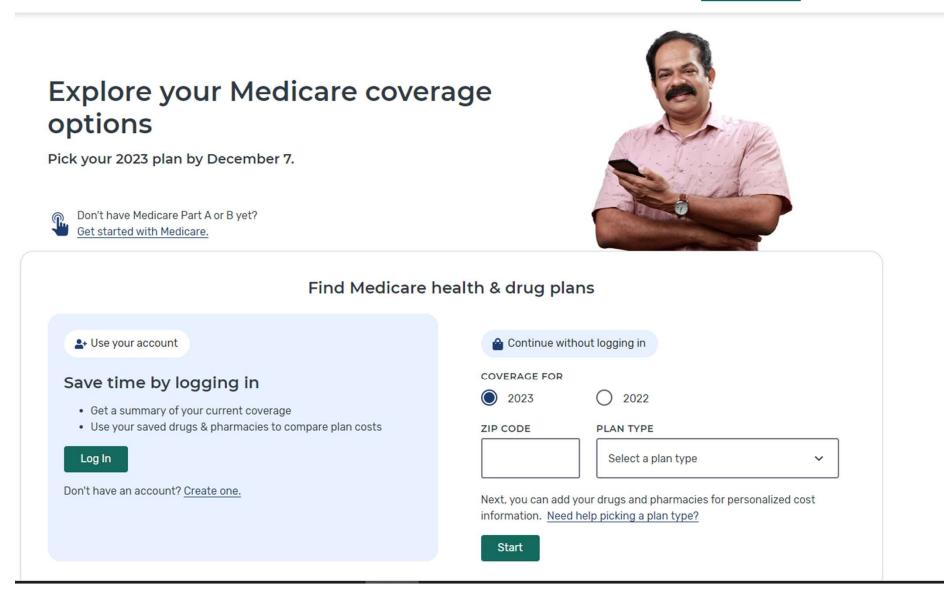
### Part D Plans

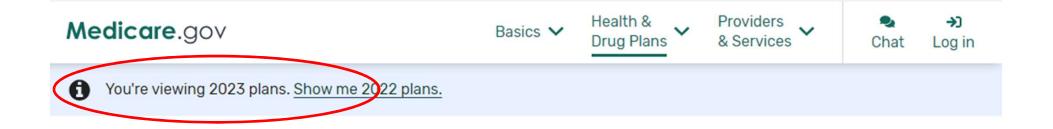
### • Considerations when choosing a Part D plan

- Check formularies for client's prescription medication
- Check an restrictions on the medication, i.e., prior authorizations or step-therapy
- Review the premium price and cost-sharing associated with each plan
- ADAP can help with Part D plans too!
  - ADAP will pay for co-pays for prescriptions on ADAP's formulary
  - Can also enroll in CDPH's Medicare Part D Premium Payment (MDPP) program
- To maximize benefits, enroll in a Benchmark plan

### Plan Compare Tool

- Go to <u>Medicare.gov/plan-compare</u> to review coverage options for clients!
- Search using your client's information, or no information, to review coverage options
- Be sure you are looking at the correct year's plans
- Select which comparisons you need
- Enter prescription information to compare formularies

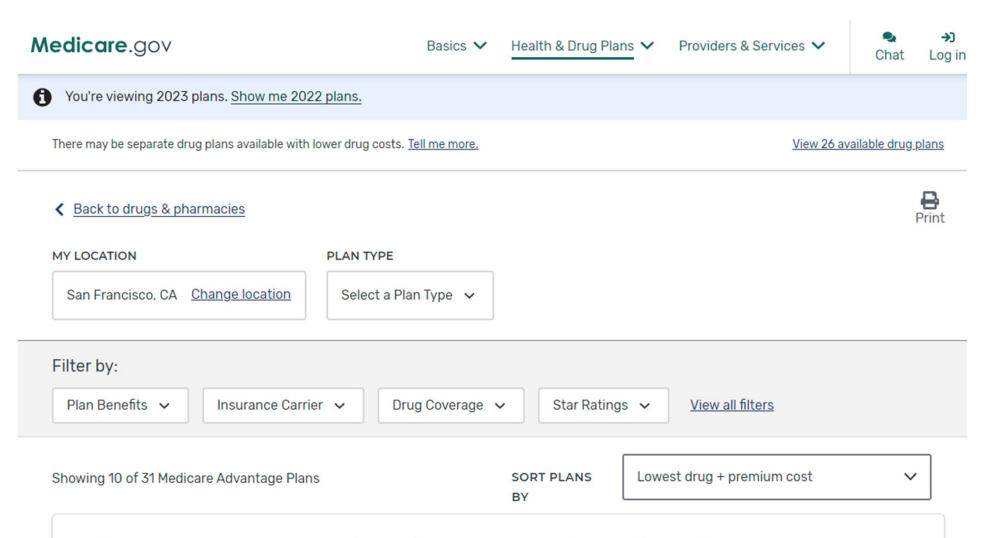




### Help with your costs

### Do you get help with your costs from one of these programs?

- Medicaid
- Supplemental Security Income
- Medicare Savings Program
- Extra Help from Social Security
- I'm not sure
- I don't get help from any of these programs



### Kaiser Permanente Senior Advantage Basic SF (HMO)

Kaiser Permanente | Plan ID: H0524-060-0

Star rating: 🏠 This plan got Medicare's highest rating (5 stars)

### Aetna Medicare Elite Plan (PPO)

Aetna Medicare | Plan ID: H5521-293-0

Star rating: \*\*\*\*

#### MONTHLY PREMIUM

\$0.00 Includes: Health & drug coverage

Doesn't include: \$148.50 Standard Part B premium

### YEARLY DRUG & PREMIUM COST

### \$0.00

Only includes premiums for the whole year when you don't enter any drugs

#### OTHER COSTS

\$750 annual deductible Health deductible

\$0.00 Drug deductible

### \$11,300 In and Out-of-network

### \$6,700 In-network

Maximum you pay for health services



### PLAN BENEFITS

- ✓ Vision
- ✓ Dental
- ✓ Hearing
- X Transportation
- ✓ Fitness benefits
- ✓ Worldwide emergency
- ✓ Telehealth

See more benefits ∨

### COPAYS/COINSURANCE

Primary doctor: \$0 copay

Specialist: \$25 copay per visit

#### DRUGS

Add your prescription drugs Enter drugs you take regularly (if any) to see your estimated drug + premium cost

	Aetna Medicare X Elite Plan (PPO) \$0.00 Medicare Advantage and drug monthly premium Enroll Plan Details	Anthem MediBlue × Select (HMO) \$0.00 Medicare Advantage and drug monthly premium Enroll Plan Details	Kaiser Permanente × Senior Advantage Basic SF (HMO) \$19.00 Medicare Advantage and drug monthly premium Enroll Plan Details			
Overview						
Star rating	****		This plan got Medicare's highest rating (5 stars)			
Health deductible	\$750 annual deductible	\$0	\$0			
Drug plan deductible	\$0.00	\$0.00	\$0.00			
Maximum you pay for health services	\$11,300 In and Out-of-network \$6,700 In-network	\$7.550 In-network	\$6,700 In-network			
Health premium	\$0.00	\$0.00	\$0.00			
Drug premium	\$0.00	\$0.00	\$19.00			

Feedback

Using Plan Compare tool on Medicare.gov

- o Once the plans come up, select "Plan Details"
- This takes you to the plan's overview page where you can quickly see important details such as:
  - o Premiums
  - o Deductible
  - Co-pays for doctor visits, lab services, urgent or emergency care
  - Further down you will see Drug Coverage priced by Tiers
  - Extra benefits such as preventative dental, vision, or hearing (if available)

## Helping Clients During Open Enrollment

- No action needed if client does not wish to change or enroll in Advantage or Part D plans
- However, **best practice** is to review current coverage!
  - Check for changes to formulary or provider network
  - Check for changes in premium amount
  - Use the Plan Finder Tool!
- Medicare is required to send clients notices of changes, or cancellations of coverage
  - Remind clients to check their mail!
- If client wants to enroll in or switch their Advantage or Part D plan, they will do this using the Plan Finder Tool

What if I miss Open Enrollment for Medicare Advantage & Part D?

# Special Enrollment

- If you miss Open Enrollment, you can enroll in or switch Advantage or Part D plans when you have Qualifying Life Event (QLE)
- Qualifying Life Event includes:
  - Moving
  - Becoming eligible for Medi-Cal
  - Qualifying for Extra Help
  - Losing other coverage such as Medi-Cal or Cobra
  - Losing employer or union coverage
  - Health plan changes its Medicare contract

# What if I don't enroll in Medicare?

It's very important to elect Medicare Part D when you become eligible!

- If you don't choose a Part D plan during initial enrollment and later enroll, there is a penalty that *remains with you throughout your enrollment*
- Part D Penalty
  - 1% of the national base beneficiary premium times the number of months the individuals lacked covered
  - Added to *monthly premium*
- Exceptions
  - Have prescription drug coverage through another plan
  - If you lose employer or other drug coverage, you have 63 days to sign up for a Part D plan without facing a penalty

# What if I have Medicare and Medi-Cal?

Clients who are Medi-Medi have additional protections

- If they have full-scope Medi-Cal (no Share of Cost), they are automatically enrolled in Extra Help and will receive the Medi-Cal State Buy-In
  - Medi-Cal pays for Parts A, B, & D premiums
  - Clients qualify for low or no co-pays/cost-sharing for prescription drugs
  - Clients qualify for LINET program to provide prescription coverage during transition periods
- Medi-Medi clients can
  - Change plans at any time
  - Enroll in Special Needs Plans
  - Enroll in ADAP

### Thank you!

- Questions? - Call PRC's EAHP • (415) 777-0333 • www.prcsf.org - Call HICAP • (800) 434-0222 • Reminder Enroll at CoveredCA.com
  - Covered California hotline: (800) 300-1506
  - Enroll at Medicare.gov/find-a-plan