NYC and the Affordable Care Act: Where We Are Post-Roll-Out and How We Can Boost Access to Care

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Overview

I. The Affordable Care Act
II. OCHIA
III. NYC Enrollment Outcomes and Opportunities after First Cycle of Open Enrollment
IV. Pathways to Increased Coverage in NYC
V. DOHMH Role and Enrollment Campaign
VI. HHC Preparation and Enrollment and Enrollment
The Affordable Care Act

Key Coverage Provisions
New York State is implementing the Affordable Care Act or “ACA”.
NYC wants all residents to get the assistance & benefits available under the ACA.

For most uninsured New Yorkers under 65, there are new health insurance:
• obligations – a requirement to have health insurance or pay a penalty, and
• options – most uninsured can get tax credits to lower their insurance costs through NY State of Health, the Official Health Plan Marketplace.

Small businesses (<50 employees)
Don’t have to offer health insurance but some may get a tax credit through NY State of Health if they do.

Larger businesses (50+ FTE workers)
Must offer affordable & adequate coverage to full-time workers & dependent children - or else they may face a penalty in 2015 / 2016.
The Affordable Care Act aims to make health insurance accessible to more individuals* by reducing the cost of insurance in new Marketplaces.

**Medicaid expansion**
- Single adults earning under $16,105/yr**
- Couples earning under $21,708/yr**
- Family of 4 earning under $32,913/yr**

**Tax Credits - help paying for premium**
- Single Adults earning under $46,680/yr^**
- Couples earning under $62,928/yr^**
- Family of 4 earning under $95,400/yr^**

**Tax Credits and Cost-sharing assistance**
- Single adults earning under $29,175/yr^**
- Couples earning under $39,325/yr^**
- Family of 4 earning under $59,625/yr^**

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*Primarily non-elderly individual and their families without access to job-based coverage, including sole proprietors.

**Uses latest federal poverty levels (FPL): 2014

^Uses FPL in effect at start of open enrollment: Nov. 15, 2014

#Must enroll in a Silver plan to get cost-sharing assistance: reduction of the amount you have to pay for co-payments, deductibles and co-insurance.
What is the NY State of Health?

Who it serves:
- Mainly for individuals under the age of 65 in NY
- Businesses with 50 or fewer employees
- Most people offered job-based coverage cannot get tax credits for insurance

What it offers:
- 1 application for public or private health insurance
- Compare plans & enroll online, by phone or with Navigator / in-person help
- Only place to get tax credits to help pay for health insurance

The NY State of Health, the state’s ‘official marketplace’ for getting health insurance
Pathways to Health Insurance

**Individuals**

- **NY State of Health**
  - Medicaid (mainly for <65) & private insurance – only place for tax credits & subsidies

- **HRA**
  - Medicaid (if 65 or older; needing or qualifying for coverage due to disability or blindness; in a waiver program)

- **Private insurance market**
  - Buy directly from insurer

**Small Businesses**

- **NY State of Health**
  - Private insurance – only place for tax credit for eligible small businesses

- **Private insurance market**
  - Buy from insurer with broker or agent help

- **Privately-run exchanges**
  - Buy through a 3rd party, allows choice of plans
OCHIA

Our Work

- NYC Health Insurance Link Initiative
- Informational Website nyc.gov/hilink
- Training of MICSA Certified Application Counselor staff
- Coordinated Enrollment Assistance, outreach, education and training on public and private health insurance
- Broad Network of Partners
- HRA Outreach Staff Development & Coordination
- Special projects to improve access to coverage and care & help HRA better serve NYC residents
- Teen Pregnancy Prevention & Improved Access to Coverage & Care in Public Schools
- Policy research and analysis
For 13 years
Working to connect NYC residents and small business owners to care and coverage
NY State of Health (NYSOH) Enrollment by Coverage Type and Geographic Area, NYC & Rest of NY State*

<table>
<thead>
<tr>
<th>NYSOH Enrollment*</th>
<th>Bronx</th>
<th>Brooklyn</th>
<th>Manhattan</th>
<th>Queens</th>
<th>Staten Island</th>
<th>All NYC</th>
<th>Rest of NY State</th>
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<tbody>
<tr>
<td>Medicaid</td>
<td>62,404</td>
<td>98,149</td>
<td>44,640</td>
<td>92,371</td>
<td>11,223</td>
<td>308,787</td>
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<td>Child Health Plus (CHP)</td>
<td>3,790</td>
<td>8,553</td>
<td>2,562</td>
<td>8,503</td>
<td>1,432</td>
<td>24,840</td>
<td>40,035</td>
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<td>Private Insurance</td>
<td>16,419</td>
<td>53,219</td>
<td>38,413</td>
<td>50,386</td>
<td>6,879</td>
<td>165,316</td>
<td>205,288</td>
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<tr>
<td>All Coverage</td>
<td>82,613</td>
<td>159,921</td>
<td>85,615</td>
<td>151,260</td>
<td>19,534</td>
<td>498,943</td>
<td>461,819</td>
</tr>
</tbody>
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Estimated uninsured in NYC, pre-open enrollment: 1.1 million**

*NY State of Health 2014 Open Enrollment Report, June 2014

**HRA Office of Evaluation & Research (OER) analysis of the 2012 American Community Survey, March 2014, children and non-elderly adults (most recent data available)
Ethnicity of NYC Uninsured pre-open enrollment & NYC NYSOH Enrolled

NYC Uninsured Non-elderly Adults in 2012*

- 43% Non-Hispanic
- 57% Hispanic

NYC Residents Enrolled in NYSOH 2014**

- 9% Non-Hispanic
- 28% Hispanic
- 64% Not Reporting

*HRA/OER Analysis of 2012 American Community Survey, March 2014

**Children and adults, NY State of Health 2014 Open Enrollment County Level Enrollment Report, September 2014. Data available here: [http://info.nystateofhealth.ny.gov/2014OpenEnrollmentCountyData](http://info.nystateofhealth.ny.gov/2014OpenEnrollmentCountyData)
Languages Spoken by NYC Uninsured & NYC Enrolled

NYC Uninsured Non-elderly Adults - language proficiencies & preferences*

- English: 58%
- Spanish: 26%
- Chinese: 5%
- Korean: 2%
- Mandarin: 1%
- French Creole: 1%
- Russian: 1%
- Polish: 1%
- All other languages: 5%

NYC Residents Enrolled in NYSOH – language preferences**

- English: 79%
- Spanish: 12%
- Chinese: 5%
- All other languages: 3%

*English segment represents the number of uninsured NYC adults who spoke only English or who spoke English very well; other language segments represent the language spoken at home of uninsured NYC adults who spoke English less than very well (436,002 adults). HRA/OER Analysis of 2012 American Community Survey, March 2014

**NY State of Health 2014 Open Enrollment County Level Enrollment Report, September 2014
Pathways to Increased Coverage for NYC Residents and Small Business Owners
Opportunities on the Horizon
Open Enrollment begins November 15, 2014

Through partnerships and City resources, NYC can help more residents get insured under the ACA:

- Enhanced – Health Insurance help
- ACA Awareness & Enrollment Campaigns-- with emphasis on immigrant and LEP populations in NYC
**Enhanced Health Insurance Help**

- **Local Law 1**
  - **Expand use of Local Law 1 to inform residents about ACA coverage.** Local Law 1 requires certain Agencies, programs and vendor to provide clients with information about public health insurance (a pamphlet) when they seek City services.

- **Greater Agency Engagement**
  - **Partner with more City Agencies & further enhance existing relationships.** Make health insurance application assistance referrals & on-site services available at more city office sites and events, and deepen existing partnerships.
OCHIA Planned Outreach Efforts for Fall 2014:

Highlights

**Small Business Outreach**
- **Sept. 30**th event in Harlem with SBA, NYC DCA, NYC SBS, and Harlem CDC
- **October 17**th event at Science, Industry & Business Library (SIBL)
- **Oct. 30**th New York Business EXPO and Conference at the Jacob Javits Center
- **Nov. 14**th event at the Bronx Museum of Arts in collaboration with Bronx Borough Pres. and BOEDC

**City Agency Partnerships**
- **Sept. 18**th & **22**nd training for new DOE nurses
- **Oct. 1**st & **Nov. 5**th outreach at CUNY’s York College in Queens
- **Oct. 22**nd presentation for ACS contracted early childcare directors

**Community & Immigrant Outreach**
- **Nov. 18**th event in Bushwick, BK for Spanish speaking immigrants
- **Oct. 23**rd health insurance workshop for Grameen Prima Care health coaches
- **Dec. 13**th event in East/Central Harlem for Spanish speaking residents
ACA Implementation: DOHMH Role

- New York State Department of Health operates the state-based health insurance marketplace “New York State of Health”

- NYC DOHMH plays a role in ensuring the successful downstate implementation of the marketplace:
  - Monitoring Implementation and Assessing Impact on NYC
    - Policy analysis
    - Surveillance activities: data analysis, field surveys
  - Increasing Education and Awareness
    - Insurance enrollment campaign
    - Outreach and education via District offices
  - Insurance Enrollment Assistance
    - DOHMH Certified Application Counselors at 9 DOHMH Health center sites
NYC 2014 Get Covered! Media Campaign

Objectives

• Increase awareness and outreach among uninsured about health insurance options available through the NYS Marketplace
• Increase enrollments, especially among low-income and vulnerable populations
• Provide an easier way to locate in-person enrollment assistors using 311

Duration

• 3 weeks at end of open enrollment period (March 10th- March 31st)
NYC 2014 Get Covered! Media Campaign: Evaluation

- Survey of NYC adults with household income below $100K
  - Included those who were uninsured

- Recognition of campaign:
  - 44% recalled seeing “Get Covered!” campaign
  - 27% recalled seeing “Today’s the Day” campaign

- Campaign provoked those who saw one or more ads to:
  - **Think:** 70% of all respondents and 83% of uninsured pre campaign said the ads provoked them to think about their own or their family’s health insurance
  - **Act:** Seeing the ads motivated the person to:
    - Encouraged others to enroll - 44% of respondents
    - Visit NYStateofHealth.gov - 10% of respondents

- The total cost of reaching the target population was 18 cents per person
  - 44% of target population recognized the campaign= 2,000,000
  - Total cost of the campaign was $356,000
NYC 2014 Enrollment Campaign: Evaluation

Affordable Care Act 311 Call Volume By Date

- **20% Subway Cars (English & Spanish)**
- **Newspaper Ads (English & Chinese)**
- **Earned Media (Spanish)**
- **Radio (Spanish)**
- **TV Bumpers**

**Last Day for ACA Sign Up**

- **Total**
- **English**
- **Spanish**
- **Other**
NYC Enrollment Snapshot by Neighborhood

Total number uninsured by UHF34:
- 0 - 15,000
- 15,001 - 30,000
- 30,001 - 45,000
- 45,001 - 60,000
- 60,001 - 125,000
- Unreliable estimates
- Non-residential zones

Total number of enrollments by UHF34:
- 0 - 15,000
- 15,001 - 30,000
- 30,001 - 45,000
- 45,001 - 60,000
- 60,001 - 76,305

*Estimate should be interpreted with caution. Estimate's Relative Standard Error is greater than 30%, or the 95% Confidence interval half-width is greater than 10 or the same size is too small, making the estimate potentially unreliable.

*Source: NYC Community Health Survey, 2013, Bureau of Epidemiology Services, NYC DOHMH.

*Values presented exclude CHP enrollments. Source: New York State Interactive health insurance tool. Available at: https://app.box.com/s/28n5zflm3l74h5o1u36.
NYC 2015 Enrollment Campaign

• Goals for 2015 Campaign
  • Increase awareness and enrollments among lower-income New Yorkers
  • Provide enrollment support: 311, in-person assistors, enrollment education

• Key Activities in 2015
  • Enhanced media:
    • Increase televised media opportunities
    • Social media and texting strategy
  • Increased Outreach
    • Extend timeframe for outreach and scope of activities
    • Assess optimal placement for CACs during high enrollment periods
    • Create new cadre of outreach volunteers
  • New Partnerships
    • Establish partnerships to support DOHMH outreach and education about the ACA and enrollment efforts
Immigrant Health Access in NYC

• Affordable Care Act specifically excludes approximately 11 million undocumented immigrants from benefiting from any provisions
  - Excluded from Medicaid expansion
  - Cannot purchase insurance on state marketplaces

• Immigrants face barriers to access: language, cultural, and lack of knowledge on existing programs
  - There are lower numbers of signups for coverage and access to care for the immigrant population

• The Administration has convened meetings with city officials and advocates to address the barriers to health care access faced by the immigrant community
Resources

Information for constituents:

NYC based resources
- **311**: can help with finding an in-person assistor in NYC
- [www.nyc.gov/health](http://www.nyc.gov/health) search “health insurance” for information about enrolling
- [www.nyc.gov/hilink](http://www.nyc.gov/hilink) for more information about coverage options under the ACA in multiple languages

NYS Marketplace
- [www.nystateofhealth.ny.gov](http://www.nystateofhealth.ny.gov): enroll online, get information
- NY State Call Center: **1.855.355.5777** – can help with enrolling online, answering questions, and finding an in-person assistor

Ways to help spread the word:
- Post information on your website about open enrollment
- Use your social media channels to transmit enrollment events
- Have flyers and fact sheets available in your office
- Help spread the word about text campaign – (will share more information in the future)
- Invite OCHIA staff to present at community forums, workshops and events

Online zip code data tool: [http://info.nystateofhealth.ny.gov/ZipCodeLevelEnrollmentData](http://info.nystateofhealth.ny.gov/ZipCodeLevelEnrollmentData)
Preparing HHC for the Exchange

- HHC developed workgroups to outline implementation and new workflow prior to the launch of the exchange in New York State

- Key focus on staff training, workflow, systems and IT, eligibility and preserving HHC Options
  - Existing Medicaid application process (Pre-ACA) to change significantly
  - New application and eligibility process mainly through NY State of Health except for retroactive Medicaid coverage
Preparation

• Policies and procedures needed to be developed prior to the launch
  ✓ Making it more patient friendly
• Scripts developed to assist staff
  ✓ Enrollment in Qualified Health Plans requires new information from patients
• Close collaboration with MetroPlus
• Working with HRA
  ✓ Retroactive coverage; applications for Non-MAGI
• Hundreds of HHC staff needed training
  ✓ 570 Certified Application Counselors Trained and able to enroll patient including bilingual counselors
Preparation

- Developed pilot program to enroll patients at bedside and in emergency rooms using tablets

- Conducted on-site visits to provide assistance, share best practices and evaluate readiness

- Contracted with Community Service Society to have on-site Navigators

- Briefings for Community Advisory Board’s held at HHC facilities
Enrollment

- State takeover of Medicaid occurring at same time as ACA implementation
  - Resulted in two tier process where applications for retroactive Medicaid coverage go to HRA and new applications go through the portal
- MetroPlus tops 92,000 applicants
  - QHP: 56,000
  - Medicaid & Child Health Plus: 36,000
- HHC applications:
  - More than 24,000 to HRA (Medicaid)
  - More than 21,000 to Portal (Medicaid)
  - 1,390 to Portal (QHP)
HHC Options

- For those who cannot obtain coverage through the marketplace, **HHC Options** is available.

- HHC Options is a financial assistance program that provides affordable health care on a sliding fee scale system:
  - Materials offered in multiple languages.

- HHC Options provides an alternative for undocumented immigrants excluded from purchasing coverage through the Exchanges:
  - Information is kept confidential.
Challenges

- New processes require time to adapt
  - Increased turnaround time for retroactive Medicaid
- Enrollment and coverage are not the same. Applicants must pay their premiums to ensure ongoing coverage
  - Some applicants never made first payment
  - Others made initial payment, but not subsequent payments
- Ongoing training and education necessary for staff and for public
- Access to timely data