

The Essential Plan

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November 12, 2015



Agenda

- Essential Plan Background
- Eligibility
- Benefit Design
- Enrollment & Appeals
- Questions

Essential Plan BACKGROUND



Essential Plan Background

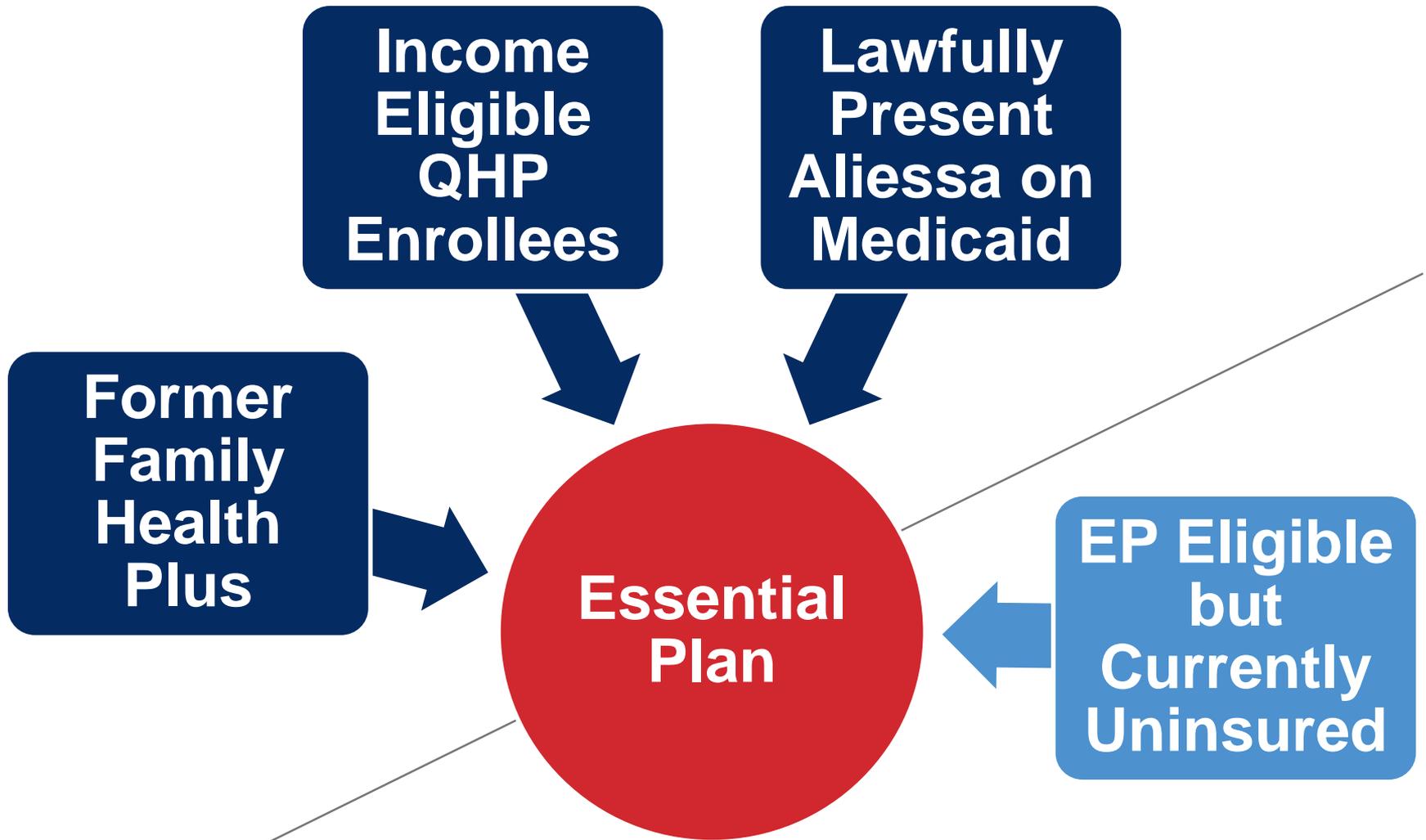
- ACA option for states to create a “Basic Health Program” to provide affordable insurance
 - Premiums more affordable than standard subsidized Marketplace coverage
 - Affordable cost sharing
 - Minimally provide essential health benefits available through QHP
- NY’s Basic Health Program is the **Essential Plan** (EP)
- Estimated savings to NY from EP: \$300 million annually

Essential Plan ELIGIBILITY



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Populations That Are EP Eligible



Eligibility for EP

1. Not eligible for Medicaid, Child Health Plus, or affordable minimal essential coverage (e.g., employer insurance, Medicare)
2. Age 19*-64
3. Meet citizenship/immigration and corresponding income requirements

* All children under 19 are eligible for CHP and therefore not eligible for EP.

EP Eligibility: Citizenship / Immigration Status & Income

Federal Poverty Level (FPL)	Citizenship/ Immigration Status
138-200%	U.S. Citizens & “Lawfully Present” non-citizens
Up to 138%	“Lawfully Present” Aliessa immigrants*

* This population is currently Medicaid eligible. In 2016 they will be eligible for EP instead.

“Lawfully Present”

- Only U.S. Citizens and **Lawfully Present** immigrants and nonimmigrant visa holders are eligible for EP or QHPs
- “Lawfully present” is not an immigration term! It is a term used to classify whether non-citizens are eligible for certain benefits, like Medicaid.
- The ACA regulations (45 CFR § 152.2) define which non-citizens are considered lawfully present. Don't try to guess!

Who Are Aliessa Immigrants?

- The Aliessa v. Novello lawsuit established eligibility for state-only funded Medicaid for certain immigrants in NYS
- Aliessa immigrants are:
 - Qualified Aliens in their 5-year Medicaid waiting period
 - “Lawfully Present” Immigrants Permanently Residing Under Color of Law (PRUCOL) (includes people in valid nonimmigrant status)
 - PRUCOL-Only immigrants – these people are not considered “lawfully present”
- They are only eligible for NYS-funded (not federal) Medicaid (Exception: Children under 21 and pregnant women get federal Medicaid – they are not technically “Aliessa” immigrants)

Not All Aliessa Immigrants are “Lawfully Present”

- Certain Aliessa Immigrants are not considered “Lawfully Present” under federal regulations
 - They are “**PRUCOL-Only**” (aka “Residual PRUCOL”)
 - Includes DACA (Deferred Action for Childhood Arrivals) and DAPA (Deferred Action for Parents of Americans and Lawful Permanent Residents)
- **Aliessa Immigrants who are PRUCOL-Only are not eligible for EP or QHPs**
- PRUCOL-Only immigrants are eligible for and will remain in state-funded Medicaid if income eligible

Who is eligible for original DACA?

- To be eligible for deferred action under the DACA program, you must:
 - Have come to the United States before your sixteenth birthday.
 - Have lived continuously in the U.S. since June 15, 2007.
 - Have been present in the U.S. on June 15, 2012, and on every day since August 15, 2012.
 - Not have a lawful immigration status on June 15, 2012. To meet this requirement, (1) you must have entered the U.S. without papers before June 15, 2012, or, if you entered lawfully, your lawful immigration status must have expired before June 15, 2012; and (2) you must not have a lawful immigration status at the time of your application.
 - Be at least 15 years old at the time you apply for DACA. If you are currently in deportation proceedings, have a voluntary departure order, or have a deportation order, and are not in immigration detention, you may apply for DACA even if you are not yet 15 years old.
 - Have graduated or obtained a certificate of completion from high school, have obtained a general education development (GED) certificate, be an honorably discharged veteran of the Coast Guard or U.S. armed forces, or “be in school” on the date you submit your DACA application. See below for more information about meeting the “be in school” requirement.
 - Have not been convicted of a felony offense. A felony is a federal, state, or local criminal offense punishable by imprisonment for a term exceeding one year.
 - Have not been convicted of a significant misdemeanor offense or three or more misdemeanor offenses. See below for more information about offenses that may disqualify you.
 - Not pose a threat to national security or public safety. (DHS has not defined what these terms mean but has indicated that they include gang membership, participation in criminal activities, or participation in activities that threaten the U.S.)

Who is eligible for expanded DACA?

- To be eligible for the expanded DACA program, you must:
 - Have come to the United States before your sixteenth birthday,
 - Have continuously lived in the US since January 1, 2010,
 - Have been present in the US on June 15, 2012, and on every day since August 15, 2012,
 - Have graduated or obtained a certificate of completion from high school, have obtained a general education development (GED) certificate, or “be in school” on the date that you submit your deferred action application, and
 - Have not been convicted of certain criminal offenses.

How do you distinguish DACA from other deferred action?

- Look at the work authorization code:
 - DACA beneficiaries have a work authorization code of (c)(33)
 - These individuals will stay in Medicaid
 - Other deferred action beneficiaries have a work authorization code of (c)(14)
 - These individuals will move to EP

Who is eligible for DAPA?

- To be eligible for deferred action under DAPA, you must:
 - Be the parent of a U.S. citizen or lawful permanent resident
 - Have continuously lived in the U.S. since January 1, 2010,
 - Have been present in the U.S. on November 20, 2014. It's also likely that you will need to be present in the U.S. every day from Nov. 20, 2014, until you apply for DAPA,
 - Not have a lawful immigration status on November 20, 2014.
 - Have not been convicted of certain criminal offenses, including any felonies and some misdemeanors.

EP & “Lawfully Present”

Aliessa Immigrants \leq 138% FPL

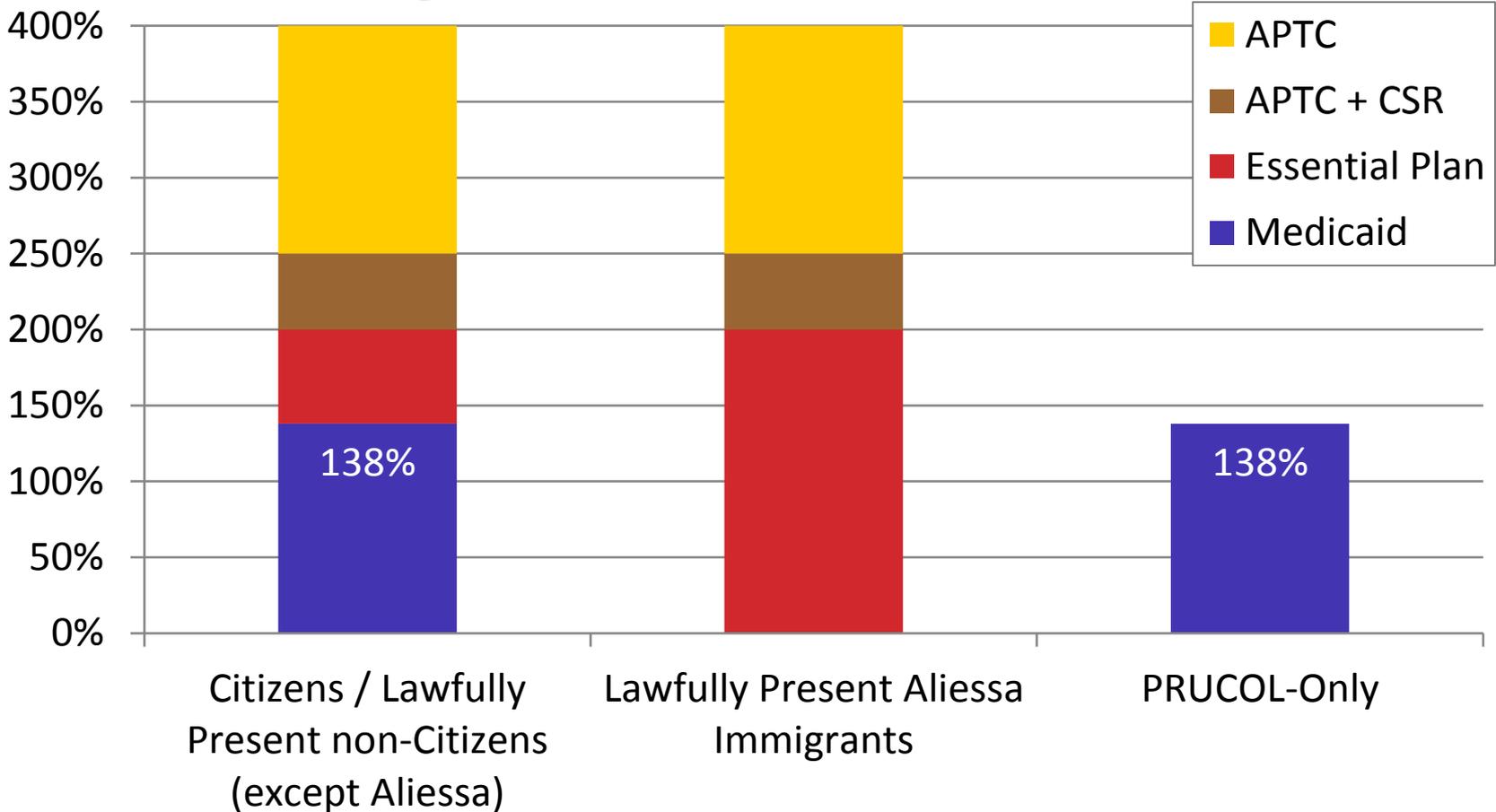
- Most “Lawfully Present” Aliessa Immigrants \leq 138% FPL will be moved to EP from Medicaid
- Moving them from NYS-funded Medicaid to EP means NYS will get federal assistance towards the cost of their healthcare

Not all Lawfully Present Aliessa Immigrants will move to EP

Some Lawfully Present Aliessa Immigrants with incomes $\leq 138\%$ FPL will not move to EP from Medicaid:

- Need long term home or personal care
- Need long term nursing home care
- Health and Recovery Plan (HARP) enrollees
- Medicaid waiver recipients

Adult* Marketplace Coverage by Immigration Status 2016+



* Chart does not cover 19 & 20 year olds and pregnant women.

Special Population: 19 & 20 Year Olds

- 19 & 20 year olds who live with a parent:
 - Get **Medicaid** if their income is $\leq 155\%$ FPL (except undocumented immigrants)
 - Get **EP** if their income is 156-200% FPL (except undocumented and PRUCOL-Only immigrants)
- 19 & 20 year olds who don't live with a parent:
 - Get **Medicaid** if their income is $\leq 138\%$ FPL (except undocumented immigrants)
 - Get **EP** if their income is 139-200% FPL (except undocumented and PRUCOL-Only immigrants)

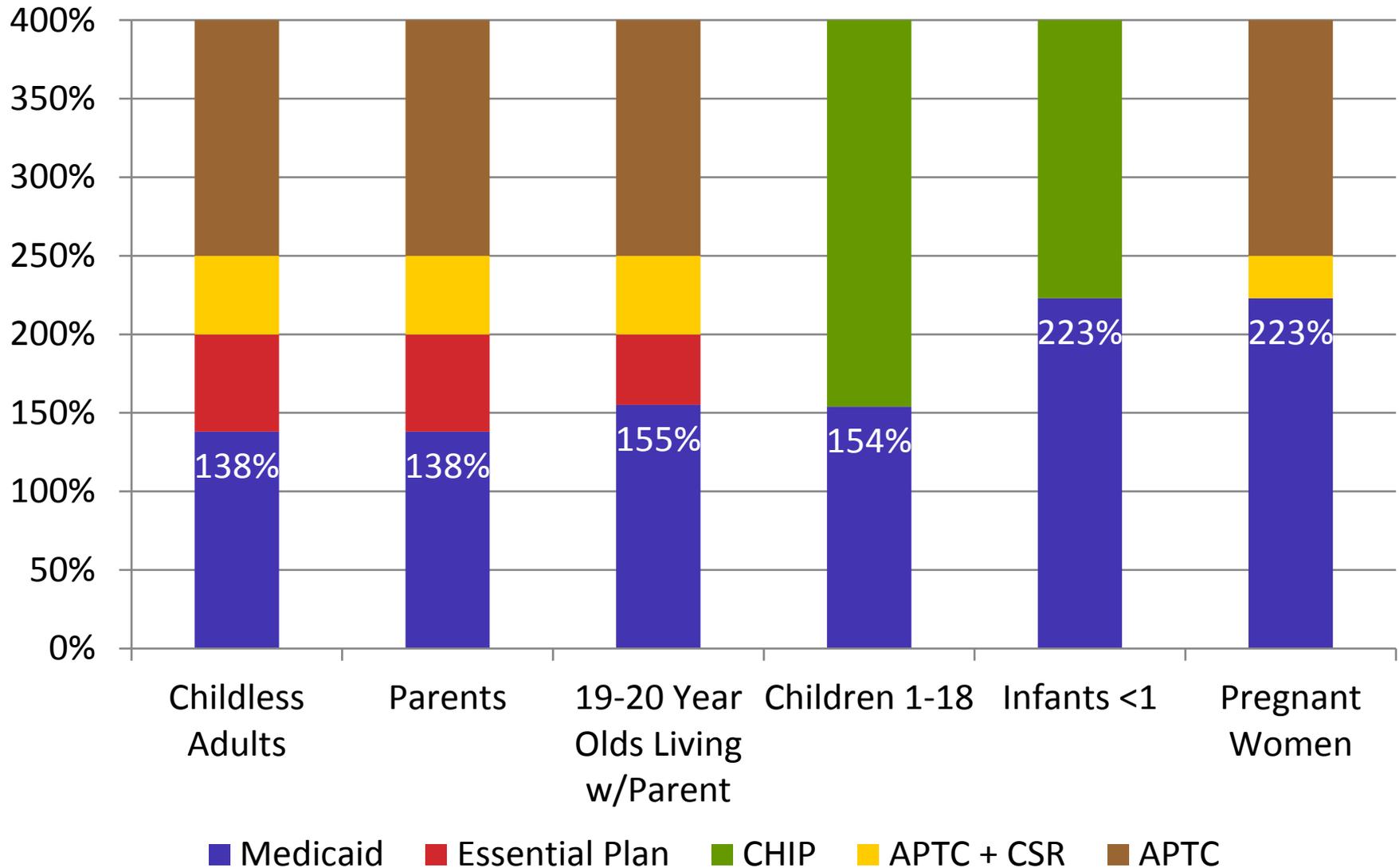
Special Population: Pregnant Women

- Pregnant women get Medicaid, not EP
- All pregnant women get Medicaid if their income is $\leq 223\%$ FPL
 - True of pregnant Lawfully Present Aliens Immigrants too. They will not be moved from Medicaid to EP.
 - Also true of undocumented pregnant women
- Because they can get Medicaid, pregnant women are not eligible for EP.

Cannot Choose between Essential Plan and QHP w/APTC

- A person eligible for EP cannot decline EP and select a Qualified Health Plan with Advanced Premium Tax Credits and Cost Sharing Reductions instead
- A person eligible for EP may choose a full pay QHP
- **Special Population:** People 65+ are not eligible for EP. But people 65+ with income between 100-200% FPL who are eligible for APTC/CSR, can get a QHP with APTC/CSR.
 - E.g, an individual 65+ who is not eligible for free Medicare Part A and not receiving Medicare.

Marketplace Coverage 2016+



Health Coverage & Immigration Status is Complicated!

Information on health coverage options by immigration status is available in Empire Justice's Health Coverage Crosswalk:

<http://www.empirejustice.org/assets/pdf/publications/reports/health-coverage-crosswalk.pdf>

HEALTH COVERAGE CROSSWALK: ELIGIBILITY BY IMMIGRATION STATUS



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Benefit Related Immigration Classifications	Immigration Status	EXCHANGE/ BHP ¹	FEDERAL MEDICAID	NYS MEDICAID ²	ADAP CHIP ³ (<19)	EMERGENCY MEDICAID ⁴	
Lawfully Present ⁵	Qualified Aliens	Lawful Permanent Resident (LPRs)	Yes	5 year bar unless pregnant or child<21	Yes	Yes	Only while subject to 5 year bar for Fed Med
		Refugees and Asylees⁷	Yes	Yes	Yes	Yes	No
		Granted withholding of deportation or removal under the Immigration and Nationality Act (INA)	Yes	Yes	Yes	Yes	No
		Battered Spouses / children of U.S. citizens or LPR w/ pending VAWA or family petition	Yes	5 year bar unless pregnant or child<21	Yes	Yes	Only while subject to 5 year bar for Fed Med
		Cuban/Haitian Entrant	Yes	Yes	Yes	Yes	No
		Paroled for period of one year or more	Yes	5 year bar unless pregnant or child< 21	Yes	Yes	Only while subject to 5 year bar for Fed Med
		Lawfully residing armed services connected noncitizens and their dependents⁸	Yes	Yes	Yes	Yes	No
		Iraq / Afghan Siv.⁹	Yes	Yes	Yes	Yes	No
		Canadian born Native Americans¹⁰	Yes	Yes	Yes	Yes	No
	PRUCOL ⁶	Amerasians	Yes	Yes	Yes	Yes	No
		T Visa Holders and Certified Victims of Trafficking	Yes	Yes	Yes	Yes	No
		In valid nonimmigrant status	Yes, if state resident	Only if pregnant or child <21 and state resident	Yes, if state resident	Yes, if state resident	Yes, unless eligible for Fed Medicaid ¹¹
		Approved Visa and Pending Application for Green Card	Yes	Only if pregnant or child <21	Yes	Yes	Yes, unless eligible for Fed Medicaid
	Granted withholding of removal under CAT (Convention Against Torture)	Yes	Only if pregnant or child <21	Yes	Yes	Yes, unless eligible for Fed Medicaid	

Health Coverage & Immigration Status is Complicated!

You can use a new questionnaire that will help consumers and enrollers better assess their potential health insurance eligibility.

https://docs.google.com/forms/d/1gLkCX6ahK2-VppClbV-mPmLUMZBDVNJIsR6NtTtr7bY/viewform?usp=send_form



Marketplace Eligibility Questionnaire

This questionnaire is designed to help enrollment assistors and consumers better assess their potential eligibility for Marketplace coverage based on immigration status, age and income.

This questionnaire is not an official assessment of eligibility. To receive an official determination of eligibility contact the New York State of Health Marketplace at <http://www.nystateofhealth.ny.gov> or 1-855-355-5777

Click on the "Continue" button below to begin the questionnaire.

This tool was created jointly by the Children's Defense Fund - New York, the Empire Justice Center, and the Community Service Society through their work in the Health Care for All New York coalition.

The information in this tool is a representation of the Empire Justice Center's Immigrant Eligibility Crosswalk, which can be found here: <http://www.empirejustice.org/assets/pdf/publications/reports/health-coverage-crosswalk.pdf>.



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Essential Plan

BENEFIT DESIGN



Covered Benefits

- Same Essential Health Benefits as QHPs
 - Option to **buy** dental and vision if >138% FPL
- Care coordination and care management
- Lawfully Present Aliessa Immigrants $\leq 138\%$ FPL also get additional benefits:

- Non-prescription drugs
- Orthotic devices
- Orthopedic footwear
- Vision care
- Dental

Use EP Card

- Non-emergency medical transportation
- “Free Access Policy”
Family planning & reproductive health services

Use Medicaid Card

Costs to Beneficiaries

	Citizens/Lawfully Present Non-Citizens		Lawfully Present Aliessa Immigrants \leq 138% FPL	
	EP1	EP2	EP3	EP4
Eligibility	150-200% FPL	138-150% FPL	100-138% FPL	Below 100% FPL
Premium	\$20	\$0	\$0	\$0
Deductible	\$0	\$0	\$0	\$0
Max out of pocket	\$2,000	\$200	\$200	No out of pocket
Cost Sharing	Varies by service	Only for Drugs	Only for Drugs	\$0

Silver CSR 2015 vs. EP1

150-200% FPL

	Silver CSR 151-200% FPL	Essential Plan 1 151-200% FPL
Monthly Premium	≈ \$57-121	\$20
Deductible (single)	\$250	\$0
MAX OUT-OF-POCKET (single)	\$2,000	\$2,000
COST SHARING –SERVICES		
Inpatient Facility	\$250 per admission	\$150 per admission
Outpatient Facility, Surgeon	\$75	\$50
PCP	\$15	\$15
Specialist	\$35	\$25
PT/OT/ST Therapies	\$25	\$15
ER, Ambulance	\$75	\$75
Urgent Care	\$50	\$25
DME/Medical Supplies	10% cost sharing	5% cost sharing
Rx Drugs	\$9/\$20/\$40	\$6/\$15/\$30

Silver CSR 2015 vs. EP2

138-150% FPL

	Silver CSR 139-150% FPL	Essential Plan 2 139-150% FPL
Monthly Premium	≈ \$44-57	\$0
Deductible (single)	\$0	\$0
MAX OUT-OF-POCKET (single)	\$1,000	\$200
COST SHARING –SERVICES		
Inpatient Facility	\$100 per admission	\$0 per admission
Outpatient Facility, Surgeon	\$25	\$0
PCP	\$10	\$0
Specialist	\$20	\$0
PT/OT/ST Therapies	\$15	\$0
ER, Ambulance	\$50	\$0
Urgent Care	\$30	\$0
DME/Medical Supplies	5% cost sharing	\$0
Rx Drugs	\$6/\$15/\$30	\$1/\$3

Essential Plan ENROLLMENT & APPEALS



Overview of EP Roll Out

April 1, 2015

- EP billed behind scenes for Lawfully Present Aliessa Immigrants in Medicaid – no change for enrollee

November 1, 2015

- Open Enrollment Begins

November 16, 2015

- Renewal: People renewing can begin making changes to / updating information in their Accounts and enroll in an EP plan

January 1, 2016

- Essential Plans begin covering services. Use EP card!

Renewals: Transition from QHP & Marketplace Medicaid to EP

- October: Renewal notices sent. Some may have to update information for eligibility determination
- People with incomes 138-200% FPL at Renewal
 - Must update info and/or select EP plan between November 16 and December 15 for January 1, 2016 EP start date
 - Some individuals will be auto enrolled in EP
- Lawfully Present Aliessa Immigrants enrolled in Marketplace Medicaid who are still $\leq 138\%$ FPL
 - October: Notified of EP eligibility effective January 1, 2016
 - Choose EP plan or will be auto enrolled to sister EP plan of MMC
 - If no sister EP plan, must select EP by December 31 for January 1, 2016 start date

Key

*	EP with dental/vision option
	Insurer carries all products
	Insurer carries EP and MMC
	Insurer carries EP and QHP
	Insurer does not have EP

Health Plan	MMC	EP	QH P
Affinity Health Plan	Yes	Yes	Yes
Amerigroup (Empire BlueCross BlueShield HealthPlus)	Yes	Yes*	No
Capital District Physicians Health Plan	Yes	No	Yes
Crystal Run Health Plan	No	Yes*	Yes
Empire BlueCross and Empire Blue Cross Blue Shield	No	No	Yes
Excellus (Excellus Blue Cross Blue Shield in Central NY and Univera in Western NY)	Yes	Yes	Yes
Fidelis Care	Yes	Yes	Yes
Health Insurance Plan of Greater New York (EmblemHealth)	Yes	Yes*	Yes
Healthfirst New York	Yes	Yes*	Yes
HealthNow New York, Inc. (Blue Shield of Northeastern NY; Blue Cross Blue Shield of Western NY)	Yes	No	Yes
Hudson Health Plan	Yes	No	No
Independent Health	Yes	Yes	Yes
MetroPlus Health Plan	Yes	Yes*	Yes
MVP Health Plan, Inc.	Yes	Yes	Yes
North Shore LIJ (CareConnect)	No	No	Yes
Oscar Insurance Corporation	No	No	Yes
Total Care (Today's Options)	Yes	No	No
United Healthcare of New York, Inc.	Yes	Yes*	Yes
Wellcare	Yes	Yes*	Yes
YourCare Health Plan	Yes	Yes*	No

Open Enrollment: New EP Applicants

- November 1, 2016: Open Enrollment Begins. New applicants can begin selecting EP plan for January 1, 2016 start date
- Applicants with incomes 138-200% FPL
 - Must select EP plan between November 1 and December 15 for January 1, 2016 EP start date
- Applicants who are Lawfully Present Aliessa Immigrants (\leq 138% FPL)
 - Must select EP plan between November 1 and December 31 for January 1, 2016 EP start date

Transition from Medicaid at LDSS/HRA to EP

Lawfully Present Aliens Immigrants on Medicaid at LDSS will be formally transitioned to EP at their 2016 Medicaid recertification

Enrollment Generally

- Enroll through Marketplace
- Enroll at any time (not restricted to open enrollment or special enrollment periods)
- Income discrepancies – If there are income discrepancies, enrollment in EP will be permitted while the person is given 90 days to clarify discrepancy
- Redetermination every 12 months
- Life status and income changes reported through the Marketplace
- No 12 month continuous coverage

No Reconciliation!

If a person is found eligible for EP and it later turns out their income was too high for the program, there is no reconciliation at tax time like there is for advanced premium tax credits.

Effective Date of Enrollment

- Incomes between 138-200% FPL → Enrollment is prospective like QHPs:
 - If enroll in EP plan prior to the 15th of the month, coverage effective 1st of next month
 - If enroll in EP plan after the 15th of the month, coverage effective 1st of the second month after enrollment
- Incomes at or below 138% FPL →
 - EP effective 1st of the month in which EP plan selected
 - Option to get 3 months retroactive Medicaid

Enrollment Scenario 1 - Elena

- Elena's household income is at 149% FPL
- She applies for and selects an EP on May 14, 2016
- The start date of her EP is June 1, 2016

Enrollment Scenario 2 - Joao

- Joao is in a lawfully present Aliessa status
- His household income is at 130% FPL
- He applies for and selects an EP on May 30, 2016
- The start date of his EP is May 1, 2016
- He may also be eligible for retroactive Medicaid for February, March & April 2016

Enrollment Scenario 3 - Ella

- Ella is in a lawfully present Aliessa status
- Her household income is at 130% FPL
- She applies on the Marketplace on May 30, 2016
- She selects an EP on June 10, 2016
- The start date of her EP is June 1, 2016
- She may also be eligible for retroactive Medicaid for March, April & May 2016

Appeals

Follow same procedures as QHPs:

- Eligibility issues → Marketplace appeal
 - Right to aid continuing
- Service-related issues →
 - Internal plan appeal
 - External appeal to Department of Financial Services
 - No aid continuing rights

EP will be different from Medicaid

	Medicaid	Essential Plan
Service Appeals		
Process & Options	Internal plan appeal DFS appeal OTDA Fair Hearing	Internal plan appeal DFS appeal
Standard of Review	Broad Medical Necessity definition	Medically Necessary
Aid-continuing	Yes	No
Eligibility		
12 month continuous	Yes	No
Income considered	Current monthly income	Projected 12 month income

Useful Links

EP benefits and cost sharing:

<http://info.nystateofhealth.ny.gov/sites/default/files/Attachment%20F%20-%20BHP%20-%20Benefits%20and%20Cost-Sharing%2C%205-15-15.pdf>

Immigration Coverage Crosswalk:

<http://www.empirejustice.org/assets/pdf/publications/reports/health-coverage-crosswalk.pdf>

Questions?

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