

# Open Enrollment Starts Thursday for Delaware's Health Insurance Marketplace

*With shortened enrollment period and fewer assisters, Delawareans urged to sign up early on HealthCare.gov to see if they're eligible for financial help*

NEW CASTLE (Oct. 30, 2018) – With the open enrollment period for Delaware's Health Insurance Marketplace only six weeks long and fewer assisters on the ground this year to help with enrollments, Delawareans seeking coverage for 2019 are urged to sign up early in order to avoid any last-minute rush before the Dec. 15 deadline. Early enrollment is also important because the federal government has announced planned maintenance shutdowns of HealthCare.gov on most Sunday mornings during open enrollment.

The sixth open enrollment period, in which people can renew coverage or sign up for a new plan for 2019, runs from Nov. 1 through Dec. 15, at [www.HealthCare.gov](http://www.HealthCare.gov). Coverage for enrollees who sign up by Dec. 15 and pay their first month's premium will be effective Jan. 1.

The state will formally mark the Health Insurance Marketplace's sixth enrollment period with a press conference at 1 p.m. Nov. 5 at Westside Family Healthcare's Northeast Wilmington Health Center, 908-B E. 16th St. Westside is the only organization in Delaware to receive federal funding for navigators to help people enroll for coverage either in person or over the phone. In 2017, there were two federally funded organizations in Delaware, Westside and Chatman LLC.

“For Delawareans who don’t have access to health insurance through an employer or another form of coverage, the Health Insurance Marketplace offers them an opportunity to get covered,” Governor John Carney said. “That access provides a critical connection to quality care in our state and to better health. The availability of insurance through the marketplace is also one of the reasons that Delaware’s uninsured rate has been reduced to 5.4 percent. I urge people to shop early for a plan on the marketplace, meet with in-person assisters to explore your options and to sign up before the Dec. 15 deadline.”

Delaware currently has about 24,500 people enrolled for coverage through its Health Insurance Marketplace, including 77 percent who re-enrolled for 2018 and 23 percent who were new enrollees.

Enrollees will choose one of eight Highmark Blue Cross Blue Shield of Delaware plans that are available for purchase in 2019 or they will be automatically re-enrolled in a plan that is similar to the one they currently have.

In August, Insurance Commissioner Trinidad Navarro announced that the Department of Insurance had approved an average rate increase of 3 percent for 2019, the lowest increase since the marketplace began in 2014. Federal tax credits are available for those whose household income is between 138 percent and 400 percent of the Federal Poverty Level. For 2018, that’s between \$16,753 and \$48,560 for an individual, or between \$34,638 and \$100,400 for a family of four. For coverage in 2018, about 82 percent of enrollees in Delaware were eligible for tax credits, which help reduce the cost of the month premium.

“With so much uncertainty in Washington, there are many people who don’t realize that they can still get coverage through the marketplace and that there’s financial assistance available to

help them pay the monthly premiums for the plan they choose,” said Department of Health and Social Services (DHSS) Secretary Dr. Kara Odom Walker.

“If you need help walking through the enrollment process and understanding your options, we have in-person assisters who can help. I urge anyone who needs high-quality, affordable health insurance to go to [HealthCare.gov](https://www.healthcare.gov) to shop for a plan, and I encourage those who are already enrolled to go back to the website, update their information and compare plans to make sure they have the best plan to meet their health needs and their budget.”

“I am pleased we were able to achieve a historically low rate increase this year,” Commissioner Navarro said. “However, with the federal government again slashing the enrollment period and providing far fewer dollars to fund critical navigator assistance this year, it is imperative that consumers be as informed about their choices and options as possible. Given the low increase and use of silver-loading for this year’s filing, I strongly encourage consumers to look at their financials, log into [HealthCare.gov](https://www.healthcare.gov) and look at their choices as there may be a more affordable option for them for 2019.”

Plans on the marketplace are spread among metal-level categories – bronze, silver, gold, platinum and catastrophic – and are based on how enrollees choose to split the costs of care with their insurance company. Bronze plans have low monthly premiums, but high costs when you need care; gold plans have high premiums but lower costs when you need care. In a silver plan, the insurer pays about 70 percent of medical costs and the consumer pays about 30 percent, up to a maximum annual out-of-pocket cap of \$7,350 for an individual and \$14,700 for a family.

For 2019, Highmark Blue Cross Blue Shield of Delaware will offer a total of eight plans for individuals – one gold plan, three silver, two bronze, one catastrophic and one platinum.

Two insurers – Delta Dental of Delaware, Inc. and Dominion Dental Services, Inc. – will offer a collective 11 stand-alone dental plans on the Marketplace, five with a low actuarial level (70 percent) and six with a high actuarial level (85 percent).

Commissioner Navarro said the 2019 rates are silver-loaded, which means the highest premium increases are found on those plans because greater federal tax credits are adjusted to offset the increases and reduce the net cost of premiums to enrollees. Because of the increased federal tax credits received, silver-loading may result in reduced premiums for gold plans and low-cost or free premiums for some members who choose bronze plans, Navarro said.

Consumers who pick silver plans might also qualify for additional savings through discounts on deductibles, copayments, and coinsurance. In Delaware, about 45 percent of current enrollees qualify for cost-sharing reductions.

All plans cover essential health benefits such as coverage of pre-existing conditions, outpatient care, emergency services, hospitalization, prescription drugs, mental health and substance use disorder services, lab services, and pediatric services.

### **Assistance for Delaware enrollees**

Consumers can go to [HealthCare.gov](https://www.healthcare.gov) now to check out their options for 2019, and can enroll at any time between Nov. 1 and Dec. 15. The federal Centers for Medicare and Medicaid Services (CMS) announced earlier this month that [HealthCare.gov](https://www.healthcare.gov) is scheduled to be offline for maintenance from midnight to noon each Sunday during open enrollment, except for the final Sunday, Dec. 9. CMS officials said they expect the actual downtime to be much less, citing last year when the site was offline for only a total of 21.5 hours out of a scheduled 60 hours.

Delawareans who need help enrolling in coverage will have access to free in-person assistance from federally funded and trained specialists at Westside Family Healthcare, and by certified applications counselors at Henrietta Johnson Medical Center in Wilmington and La Red Health Center in Georgetown.

State-licensed insurance agents and brokers are also available to help individuals re-enroll and to help employers update their coverage, at no extra charge.

For more information, go to [www.ChooseHealthDE.com](http://www.ChooseHealthDE.com). You can enroll in marketplace coverage at [www.HealthCare.gov](http://www.HealthCare.gov) or by calling 1 (800) 318-2596 (TTY: 1 855 889-4325).

According to the U.S. Department of Health and Human Services:

- Eighty-two percent of Delaware's current marketplace enrollees receive financial assistance to help pay their monthly premiums and/or deductibles and co-pays.
- The overall current average monthly premium in Delaware is \$750, with the average premium reduced to \$223 per month after tax credit.
- For the 82 percent of Delawareans who currently receive financial assistance, the average premium after tax credit is \$122 per month.
- Among the more than 24,500 current enrollees, 77 percent are re-enrollees and 23 percent are new enrollees for 2018.
- Financial help is available for individuals with annual incomes up to \$48,560; for a family of four the income limit is \$100,400.
- About two-thirds of Delaware's current enrollees signed up during the final two weeks in 2017, Dec 3-9 and Dec. Dec. 10-15.

### **No penalty for going without coverage**

Starting in 2019, there no longer will be a federal tax penalty for individuals who can afford coverage, but who

choose not to buy it. The penalty is still in force for 2018, and when people pay their 2018 taxes they will pay a penalty for not having health insurance that is equal to the higher of these amounts: 2.5% of your annual household income or \$695 per person (\$347.50 per child under 18). For 2018, the maximum penalty will not exceed \$2,085 per household.

Delaware's U.S. senators and representative urged uninsured Delawareans to find out what's available for them on the marketplace.

"Despite constant partisan attacks and efforts to sabotage its effectiveness, the Affordable Care Act remains the law of the land because it is providing high-quality health insurance for millions of Americans," said U.S. Sen. Tom Carper. "During open enrollment, I encourage all Delawareans to go to [HealthCare.gov](https://www.healthcare.gov) or meet with marketplace navigators, positioned throughout the state, for free assistance exploring your health insurance options. Don't delay – there is no time like the present to find a health insurance plan that keeps you and your family covered, regardless of any pre-existing conditions or special health care needs."

"Open enrollment is a great opportunity for Delaware families to shop around in the Health Insurance Marketplace and find a plan that works best for them," U.S. Sen. Chris Coons said. "Whether you have insurance already or not, I encourage all Delawareans to visit [HealthCare.gov](https://www.healthcare.gov) and explore plans and financial assistance that may be available to them. While we have more work ahead to improve the ACA and bring down overall health care costs, open enrollment is an important opportunity for families to get the comprehensive health care they need, regardless of age, background or pre-existing conditions."

"As the open enrollment period for 2019 begins, I encourage any Delawarean looking to find coverage to take advantage of [HealthCare.gov](https://www.healthcare.gov) to find a quality health care plan that meets each family's needs," said Congresswoman Lisa Blunt Rochester.

“The health care exchange is a valuable resource that help Delawareans navigate the marketplace, research discounts or subsidies that may be available, and select coverage for the upcoming year. Ensuring that every family has access to health care that protects them regardless of pre-existing conditions is an essential right worth protecting. Our health care marketplace is stronger when we all get covered, so I encourage all Delawareans to take advantage of the free, in-person help available in finding the right coverage for you and your family.”

Businesses with 50 employees or fewer can offer plans to their employees starting any month of the year through the Small Business Health Options Program (SHOP). Go to [HealthCare.gov](http://HealthCare.gov) or call 1 (800) 706-7893 (TTY: 711).

In addition to the Health Insurance Marketplace, some residents might be eligible for coverage through Delaware’s expanded Medicaid program, which is open year-round. More than 10,000 Delawareans have received coverage under the Medicaid expansion. To be screened for or to apply for Medicaid benefits, go to Delaware ASSIST.

Both the Health Insurance Marketplace and the Medicaid expansion have helped to reduce Delaware’s uninsured rate, decreasing from 10 percent in 2008 to 5.4 percent in 2017, according to a recent Census Bureau report. That decline includes Delawareans who could not get coverage before the Affordable Care Act because of pre-existing conditions. Increasing access to health care coverage is the first step toward a healthier Delaware, Secretary Walker said.

“Through our work on the health care spending and quality benchmarks for Delaware, we are working to ensure that our health care system enhances the experience for patients, produces better health outcomes, slows the growth of health care spending and improves the experience of health care providers,” she said.