Nov 1 - Dec 15: Open Enrollment for Delaware's Health Insurance Marketplace

With state's new reinsurance program in place, premiums for 2020 will be down 19%; biggest impact for those not eligible for financial help

NEW CASTLE (Oct. 31, 2019) — With the state's new reinsurance program in place and premiums declining for the first time since Delaware's Health Insurance Marketplace opened for enrollment in 2013, Delawareans are urged to take another look at marketplace plans during open enrollment for 2020 coverage, beginning Friday. The 19 percent drop in rates is especially significant for Delawareans who are not eligible for financial assistance on the marketplace.

The seventh open enrollment period, in which people can renew coverage or sign up for a new plan for 2020, runs from Friday, Nov. 1, through Dec. 15, at 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 seventh enrollment period with a press conference at 10 a.m. Nov. 4 at Westside Family Healthcare's Dover Clinic, 1040 Forrest Ave. For the second straight year, 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.

"The reduction in rates for 2020 offers an important incentive to compare and shop for plans on our marketplace, especially for Delawareans who own small businesses, are independent contractors or who don't have access to health insurance through an employer," Governor John Carney said. "I want to thank everyone who helped create Delaware's new reinsurance program as a critical tool to reduce rates in the individual market. It's another way that we can connect people to quality care in our state and to better health."

Under Delaware's reinsurance program, a portion of high-cost health care claims that drive up insurance rates for everyone will be reimbursed through a \$27 million fund, using a mix of federal funding and assessments collected by the Delaware Department of Insurance from health insurance carriers. The Delaware Health Care Commission will administer the program. The reinsurance program required multiple approvals at the state and federal levels. In June, Governor Carney signed enabling legislation (House Bill 193) approved by Delaware's General Assembly that same month. In August — after public comment periods at the state and federal levels — the federal Centers for Medicare and Medicaid Services (CMS) approved Delaware's application providing for a reinsurance program through 2024. In October, Insurance Commissioner Trinidad Navarro announced that he had approved an average rate decrease of 19 percent for the sole insurer on Delaware's Marketplace - Blue Cross Blue Shield of Delaware. Enrollees will choose one of eight Highmark Blue Cross Blue Shield of Delaware plans that are available for purchase in 2020 or they will be automatically re-enrolled in a plan that is similar to the one they currently have.

Last year, about 22,562 people enrolled for coverage through Delaware's Health Insurance Marketplace, including about 78 percent who re-enrolled for 2019 and 22 percent who were new enrollees.

Federal tax credits are available for those whose household income is between 138 percent and 400 percent of the Federal Poverty Level. For 2020, that's between \$17,236 and \$49,960

for an individual, or between \$35,536 and \$103,000 for a family of four. For coverage in 2019, about 85 percent of enrollees in Delaware were eligible for tax credits, which help reduce the cost of the month premium.

"When premiums decline in the individual market — both on and off the marketplace — that often helps to reduce health insurance costs for everyone," said Department of Health and Social Services (DHSS) Secretary Dr. Kara Odom Walker. "With premiums down 19 percent for the 2020 marketplace plans in Delaware, I urge everyone to shop for coverage on Delaware's marketplace or to talk with their insurance agent or broker. For those who already have coverage, I encourage them to go back to HealthCare.gov or to their agent, update their information and compare plans to make sure they have the best coverage to meet their health care needs and their budget."

"This year, our team working with the Department of Health and Social Services, utilized the Federal 1332 Waiver to see if we could further reduce health insurance rates on the ACA Market," Commissioner Navarro said. "I'm pleased that with the waiver, we were able to reduce rates by 19 percent. The initial rate filing by Highmark Blue Cross Blue Shield of Delaware indicated a rate reduction of 5 percent. Our team at the Department carefully scrutinizes all rate requests, even the ones that reduce rates, to determine if they can be reduced further. In addition, we utilize an outside actuarial firm with no ties to insurance companies to make sure the approved rate is the lowest possible rate after taking into consideration all actuarial factors. I urge all Delawareans to log on to ChooseHealthDE.com and check the plan that best works for their situation."

Plans on the marketplace are spread among metal-level categories — bronze, silver, gold and platinum — 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. For any marketplace plan, the maximum annual out-of-pocket cap for 2020 is \$8,200 for an individual and \$16,400 for a family.

For 2020, Highmark Blue Cross Blue Shield of Delaware will offer a total of eight plans for individuals — two gold plan, two silver, three bronze 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, six with a low actuarial level (70 percent) and five with a high actuarial level (85 percent).

Consumers who pick silver plans might also qualify for additional savings through discounts on deductibles, copayments, and coinsurance. In Delaware, about 36 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

Cosumers can go to HealthCare.gov or CuidadodeSalud.gov now to check out their options for 2020, and can enroll at any time between Nov. 1 and Dec. 15. The Centers for Medicare and Medicaid Services (CMS) announced earlier this month that the online application has been streamlined and that for the first time quality ratings will be displayed on plans on HealthCare.gov, using a five-star rating system, with five stars representing the highest quality. The rating will be based on medical care, member experience and plan administration. In some cases — when plans are new or have low enrollment — ratings may not be available. A rating of three

stars or above means a health plan is considered average or above average. For 2020, 80 percent of plans eligible to receive a rating have at least three stars.

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. You can enroll in marketplace coverage at 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-five 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 \$842, with the average premium reduced to \$202 per month after tax credit. For the 85 percent of Delawareans who currently receive financial assistance, the average premium after tax credit is \$110 per month.
- Among the more than 22,562 current enrollees, 78 percent were re-enrollees and 22 percent were new enrollees for 2019.
- Financial help is available for individuals with annual incomes up to \$49,960; for a family of four the income limit is \$103,000.
- About 75 percent of Delaware's current enrollees signed up during the final three weeks in 2019, Nov. 25-Dec. 1, Dec. 2-8, and Dec. 9-15.
- •Beginning in 2019, there is no longer a federal tax

penalty for individuals who can afford coverage, but who choose not to buy it.

Support from Congressional Delegation

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

"Lower average premiums across the country and a double-digit drop in Delaware shows that we should be focused on building on the success of the ACA - not tearing it down," U.S. Senator Tom Carper said. "By making common sense improvements, like our state has done with the reinsurance program, we can continue to provide Delaware families with access to quality, affordable health insurance which in turn can lead to better health outcomes and reduced costs. I often say, find out what works and do more of that — and the Affordable Care Act is working. Now, we must continue to build on this progress to achieve even lower costs for families across the country and protect the Affordable Care Act that insures over 20 million Americans, including more than 20,000 Delawareans, from continued partisan attacks and attempts to scrap the law entirely. This open enrollment season, I encourage Delawareans who need health insurance to look to the marketplace and get covered."

"Open enrollment gives Delawareans the chance to explore the different health care coverage options that are available to them each year," said U.S. Senator Chris Coons. "Even if you have already enrolled, I encourage everyone to take this opportunity and visit the Health Insurance Marketplace at HealthCare.gov. You can update your information, compare plans, and make sure you and your family are enrolled in the plan that best fits your needs. Thanks to the Affordable Care Act, open enrollment offers folks throughout the country access to affordable, comprehensive health care coverage, regardless of how old you are, where you're from, or whether

you have a pre-existing condition."

"Despite repeated actions from the federal government to shorten the enrollment period and cut critical outreach programs that inform consumers, I'm pleased to see such a substantial drop in premiums this year," said Congresswoman Lisa Blunt Rochester, a member of the House Energy & Commerce Committee. "With this shortened enrollment window, it's critical that anyone who needs coverage go to HealthCare.gov to explore what options best suit them."

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 or call 1 (800) 706-7893 (TTY: 711).

In addition to the Health Insurance Marketplace, some residents might be eligible for coverage though 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 <u>Delaware ASSIST</u>.

Both the Health Insurance Marketplace and the Medicaid expansion have helped to reduce Delaware's uninsured rate, decreasing from 10 percent in 2008 to 5.7 percent in 2018, 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 adding a level of transparency to our health care system so we all can better understand where that spending is going and how those costs relate to the outcomes patients are receiving," Secretary Walker said.