

### MARYLAND HEALTHBENEFIT EXCHANGE

# HEADING INTO OPEN ENROLLMENT 2017

NOV. 1, 2016 - JAN. 31, 2017

**SEPTEMBER 2016** 

# ACA IN MARYLAND AFTER THREE YEARS ...



- Uninsured in Maryland cut from 10.2% (593,000\*) in 2013 to 7.9% (463,000) in 2014 to 6.6% (389,000) in 2015 (Source: U.S. Census Bureau, \*civilian, non-institutionalized)
- **745,000 Marylanders lacked** health insurance pre-Affordable Care Act (*Source: Hilltop Institute, UMBC*)
- In 2016, 150,000 in private insurance and 270,000 Medicaid expansion adults = 420,000 covered
- Population eligible for Maryland Health Connection coverage trimmed by 40% in three years. Estimated 240,000 remain eligible of original 405,000 (Source: State Health Access Data Assistance Center)
- Including Medicaid, 1.1 million now insured through Maryland
   Health Connection 1 of every 6 people in Maryland

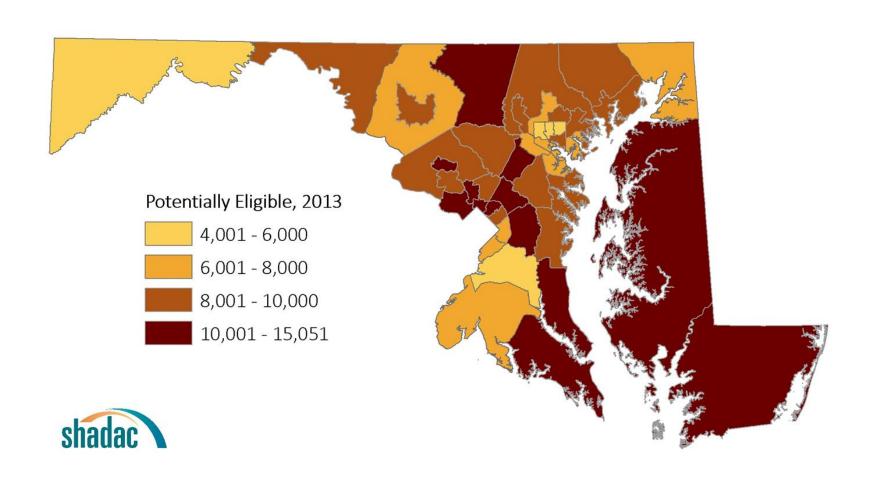
#### **AFTER THREE YEARS ...**



- Maryland achieved one of the fastest growth rates year-over-year of any state in 2016. (Source: ACASignups.net)
- 30% of 2016 enrollments were in the 18-34 year-old range, tied for ninth in the country.
- High uninsured rates for African-Americans and Hispanics in Maryland have decreased twice as quickly as for whites since the ACA, according to researchers at the <u>University of Maryland School of Public</u> <u>Health.</u>
- Nine out of 10 Marylanders enrolled through the state marketplace were determined eligible for federal assistance.
- Since January 2015, Marylanders have received \$320 million in Advanced Premium Tax Credits -- averaging about \$230 per month per household -- to offset out-of-pocket costs.

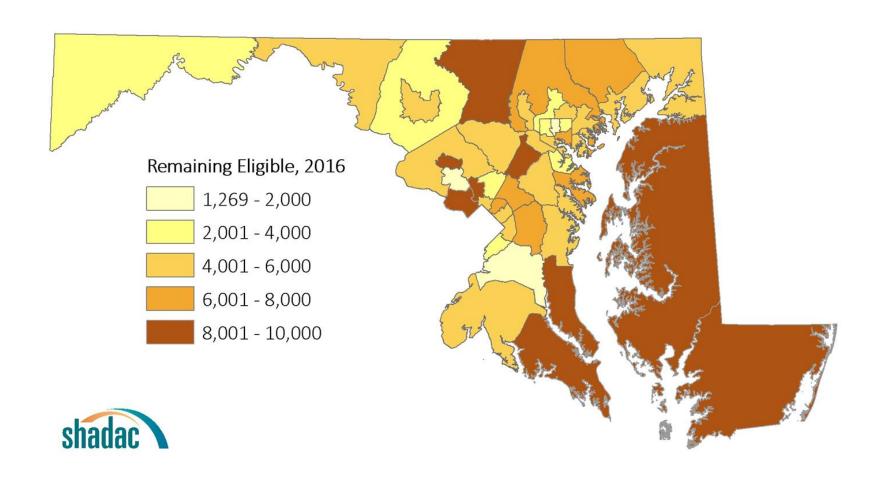
#### **HOW THE MAP LOOKED IN 2013 ...**





#### ... HOW THE MAP LOOKS IN 2016





#### **ENROLLMENT GROWTH BY COUNTY**



COUNTY	QUALIFIED HEALTH PLAN (QHP) OPEN ENROLLMENT		% <b>+</b>	MEDICAID  Enrollment in Medicaid is year-round. Increase largely reflects transfer of existing enrollees from legacy system into MHC HBX.		% +
	Nov. 15, 2014 to March 1, 2015	Nov. 1, 2015 to March 1, 2016		Nov. 15, 2014 to June 1, 2015	Nov. 1, 2015 to June 1, 2016	
Allegany	894	1,035	16%	3,736	10,495	181%
Anne Arundel	9,960	13,103	32%	19,888	45,616	129%
Baltimore	16,821	21,620	29%	38,512	96,378	150%
Baltimore City	9,369	11,938	27%	44,343	117,790	166%
Calvert	1,270	1,662	31%	3,001	7,340	145%
Caroline	592	717	21%	2,409	5,971	148%
Carroll	2,788	3,551	27%	5,163	11,769	128%

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	Nov. 15, 2014 to March 1, 2015	Nov. 1, 2015 to March 1, 2016		Nov. 15, 2014 to June 1, 2015	Nov. 1, 2015 to June 1, 2016	
Cecil	1,630	2,147	32%	6,045	13,876	130%
Charles	2,098	2,761	32%	6,435	16,083	150%
Dorchester	507	695	37%	2,274	6,205	173%
Frederick	4,599	6,266	36%	8,701	19,807	128%
Garrett	685	899	31%	2,024	4,189	107%
Harford	4,180	5,250	26%	10,155	22,489	121%
Howard	7,454	9,380	26%	11,015	22,162	101%
Kent	358	422	18%	1,054	2,546	142%

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	Nov. 15, 2014 to March 1, 2015	Nov. 1, 2015 to March 1, 2016		Nov. 15, 2014 to June 1, 2015	Nov. 1, 2015 to June 1, 2016	
Montgomery	30,998	41,032	32%	46,765	92,265	97%
Prince George's	18,573	24,430	32%	54,496	116,494	114%
Queen Anne's	995	1,275	28%	1,685	4,082	142%
Saint Mary's	1,136	1,457	28%	4,301	11,183	160%
Somerset	354	480	36%	1,779	4,310	142%
Talbot	826	1,143	38%	1,869	4,091	119%
Washington	2,238	3,083	38%	8,489	20,892	146%
Wicomico	1,732	2,288	32%	6,625	17,087	158%
Worcester	1,619	2,143	32%	3,343	7,121	113%
TOTAL	121,676	158,777	30%	294,117	680,241	131%

#### **QHP GROWTH IN YOUNG ADULTS**



COUNTY	18-	%+	
	Nov. 15, 2014 to March 1, 2015	Nov. 1, 2015 to March 1, 2016	
Allegany	199	244	23%
Anne Arundel	2,943	4,071	38%
Baltimore	4,970	6,722	35%
Baltimore City	3,436	4,577	33%
Calvert	354	473	34%
Caroline	137	198	45%
Carroll	701	927	32%
Cecil	402	566	41%
Charles	641	860	34%
Dorchester	103	165	60%
Frederick	1,241	1,719	39%
Garrett	122	186	52%

Harford	1,188	1,507	27%
Howard	2,103	2,729	30%
Kent	63	98	56%
Montgomery	8,949	11,941	33%
Prince George's	6,046	8,056	33%
Queen Anne's	227	286	26%
Saint Mary's	343	455	33%
Somerset	74	112	51%
Talbot	149	262	76%
Washington	510	710	39%
Wicomico	420	588	40%
Worcester	372	530	42%
TOTAL	35,693	47,982	34%

#### QHP ENROLLMENT BY RACE

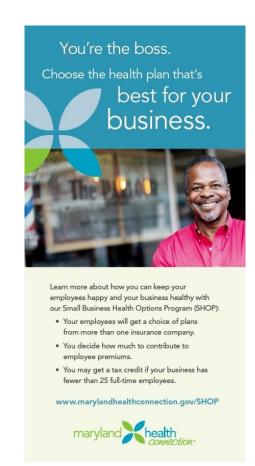


11/1/2015 - 7/1/2016						
American Indian or Alaska Native	452	Native Hawaiian	16			
Asian Indian	3,275	Other Asian	2,985			
Black or African American	26,561	Other Pacific Islander	87			
Chinese	3,254	Samoan	10			
Filipino	1,170	Vietnamese	2,107			
Guamanian or Chamorro	30	White	53,274			
Hispanic	13,892	Undefined	37,548			
Japanese	133					
Korean	3,565	Total	148,359			

#### SHOP FOR SMALL BUSINESS



- In July, MHBE chose BenefitMall as administrator for the Small Business Health Options Program (SHOP) offered through Maryland Health Connection.
- As of June 1, 119 small businesses were using SHOP to cover 1,000+ individuals.
- 83% have < 10 employees</li>
- 12% have < 20 employees.</li>
- Businesses with < 25 full-time (equivalent) employees may be eligible for a tax credit for plans purchased through the SHOP marketplace for any two consecutive tax years beginning in 2014.



#### 1,000+ POINTS OF IN-PERSON ASSISTANCE



- 125 Navigators: Regions expanded from 6 to 8 to help focus support in areas such as Western Md., Prince George's, Montgomery counties.
- 70 Application Counselor Sponsoring Entities, 389 Certified Application Counselors
- 943 Authorized Brokers (Producers)

REGION	CONSUMER-ASSISTANCE CONNECTOR	JURISDICTIONS
FAR WEST	AHEC West (Non-Gov't. Organization)	Garrett, Allegany, Washington
CENTRAL	Healthcare Access Maryland (NGO)	Baltimore City, Baltimore County, Anne Arundel
MIDWEST	Healthy Howard (NGO)	Howard, Carroll, Frederick
LOWER SHORE	Worcester Co. Health Dept.	Worcester, Wicomico, Somerset
MONTGOMERY	Montgomery Co. Dept. of Health and Human Services	Montgomery
PR. GEORGE'S	Prince George's Co. Dept. of Social Services	Prince George's
UPPER SHORE	Seedco (NGO)	Harford, Cecil, Kent, Queen Anne's, Talbot, Caroline, Dorchester
SOUTHERN	Healthy Howard (NGO)	St. Mary's, Calvert, Charles

#### "ENROLL MHC" MOBILE APP

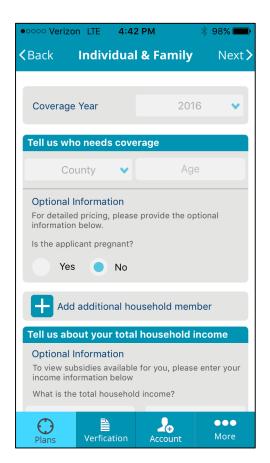


 The mobile app features the online application, not the full website.

#### Key Features:

- Browse plans and enroll
- Log into your account, view notices, and access your personal inbox
- Submit verifications using your phone's camera
- It's secure and has a setting to ensure that no personal information is stored on device
- Conveniently reach call center





#### **OTHER CUSTOMER SERVICE IMPROVEMENTS**



- A streamlined Interactive Voice Response (IVR) menu with fewer prompts is being designed to direct callers to appropriately skilled consumer service representatives (CSR) for more efficient service.
- Navigator programs are committed to evening and weekend hours during open enrollment to better serve consumers unable to go inperson on weekdays.
- Call-center phone support for Certified Application Counselors will allow them to be more effective and complete more enrollments start to finish. (CSRs can give CACs a view into the worker portal.)

#### **OTHER CUSTOMER SERVICE IMPROVEMENTS**



- A new locator tool is being built for MarylandHealthConnection.gov to help people more easily sort and find in-person assistance by language preference at more than 1,000 locations.
- Consumers who contact the call center and want additional guidance on choosing the right plan can request to be transferred directly to an MHC-authorized broker through the BATphone (Broker Assistance Transfer). In a limited pilot program last open enrollment, more than 3,100 callers were transferred from the call center to brokers who completed more than 2,000 enrollments and provided 1,000 hours of consumer support.
- Support will also be provided to consumers through social media throughout open enrollment. Facebook recognized Maryland Health Connection for its speed of response to customers through its social network this year.

#### **OE4 MARKETING OBJECTIVES**



- Improved User Experience: Streamlined and redesigned website based on consumer testing and inception of mobile app to apply for insurance.
- Simplified Message: Revamped language and look of website, collateral and fact sheets with the aim of demystifying process of choosing coverage and applying for financial assistance to lower outof-pocket costs.
- Targeted Outreach: Three statewide initiatives aimed at audiences with the greatest number of eligible, uninsured remaining. Interfaith, Library and College events to reach African-American, Hispanic, rural communities and 18-34 year-olds.

#### **OE4 MARKETING: OUTREACH**



#### **Statewide Events:**

- College Enrollment Day
   Nov. 14-18, Enrollment events
   statewide at community
   colleges, HBCUs and
   universities. Target audience
   includes students as well as
   adjunct faculty.
- Library Enrollment Day
   Dec. 10, Enrollment events
   libraries statewide
- "Extol & Enroll"
   Jan. 21-22, Enrollment events statewide at faith organizations

Partner with Civic, Corporate and Cultural Organizations, including: Athletic Clubs, Maryland Retail Association, Salisbury University & Morgan State University, Alpha Kappa Alpha (PG County chapter) & Delta Sigma Theta (Baltimore chapter); Gay, Lesbian, Bisexual and Transgender Community Center of Baltimore and Central Maryland (GLCCB), PrEP Maryland Collaborative; Social & other adult leagues; Betamore & Tech Council of Maryland; Garrett Community Action Committee; Garrett County Health Department; Mountain Laurel Medical Center; Allegany County Health Department; Allegany Health Right; Tri- State Community Health Center; Family Healthcare of Hagerstown; Washington Co Health Department; Chase Brexton Health Services; Health Care for the Homeless; Partnership for a Healthier Carroll County; Judy Center of Frederick County; Frederick County Community Action Agency; FIRN; Chase Brexton Health Services, Catastrophic Health Planners, Howard Co Dept of Corrections; Chinese Culture and Community Service Center, Inc.; Community Health and Empowerment through Education and Research (CHEER); Ethiopian Community Center in Maryland; Korean Community Service Center of Greater Washington, Inc.; Maryland Vietnamese Mutual Association; The Primary Care Coalition of Montgomery County: Help Africa, Pride Youth Services, Inc.; Prince George's Co Health Dept; Healthcare Dynamics International (HCDI); Mary's Center; Primary Care Coalition (PCC); Community Clinic, Inc. (CCI); CASA de Maryland; Heart to Hand; Triangle Health Alliance; Eastern Shore Area Health Education Center: West Cecil Health Center: Calvert Healthcare Solutions ...

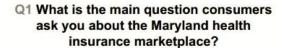
### **OE4 MARKETING PLAN: RESEARCH AND MEDIA**

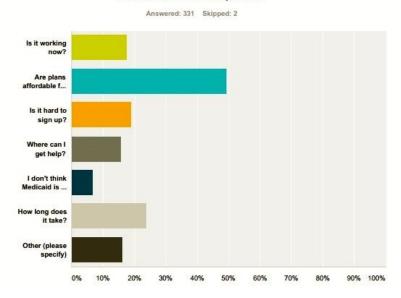


Research: Field awareness benchmark survey of 800 consumers, first survey of that scope in 2 years, assessing perceptions of marketplace; if still uninsured, why? Draft report by mid-Sept.

Also surveyed 330 front-line assistance workers and brokers on feedback they're hearing from consumers >

Television, Radio and Print ads aimed at general audience as well as Hispanic and African-American markets





Q1 What is the main question consumers ask you about the Maryland health insurance marketplace?

Answered: 331 Skipped: 2

Qualify Subsidy Sign Premium Cost Hard Coverage
Documents Expensive Deductible Plans
Enrollment Understand Application
Health Insurance Questions Exchange
Income

# OE4 MARKETING PLAN: SOCIAL MEDIA



TOP STATE GOVERNMENT ACCOUNTS						
ACCOUNT	A	<b>9</b>	TOTAL			
GOVERNOR HOGAN	134,693	27,700	162,393			
STATE POLICE	63,193	25,000	88,193			
MTA	24,902	16,953	41,855			
COMMERCE	6,369	20,600	26,969			
MD SEAFOOD	23,827	2,080	25,907			
MD HEALTH CONNECTION	19,971	4,736	24,707			

Connecting with young adults through Periscope videos, Twitterstorms

### OE4 MARKETING: DIGITAL



Website: Revamped website design in response to User Experience research conducted during OE3. Simpler look and language, clearer path to enrollment. Also, mobile app version in development for OE4 with ability to photograph and download req. documents.

E-mail subscribers to website/blog grew tenfold last year to 400,000+.



#### **OE4 MARKETING: EDUCATION**



Collateral: Revamped suite of collateral and fact sheets to simplify and make less intimidating. Revised 10-15 existing fact sheets on website and added 10-15 some geared to specific audiences/needs such as LGBT and opioid addiction.

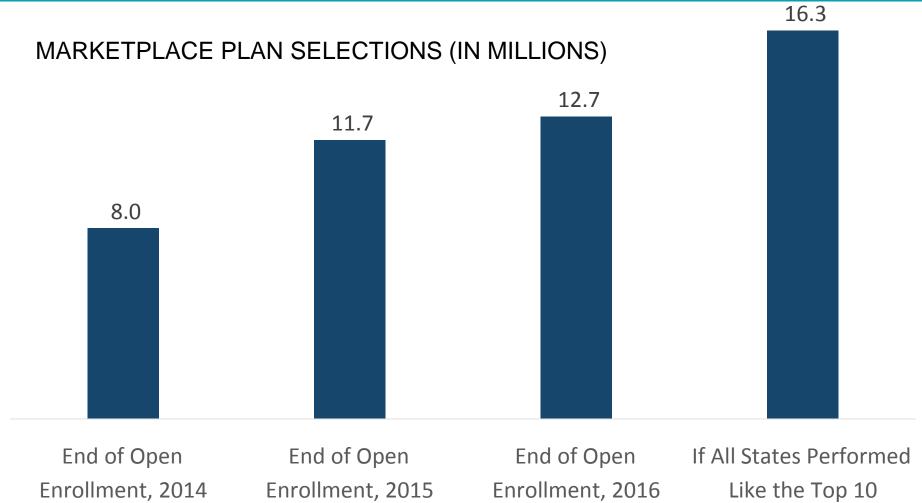
Video: 3-4 animated videos (:30 or less) in development explaining commonly misunderstood concepts such as household size, co-insurance, Special Enrollment Periods, etc. in English and Spanish. Surveyed 175 consumer assistance workers on key topics.



You can get free help applying for coverage.

#### NATIONAL MARKETPLACE TRENDS





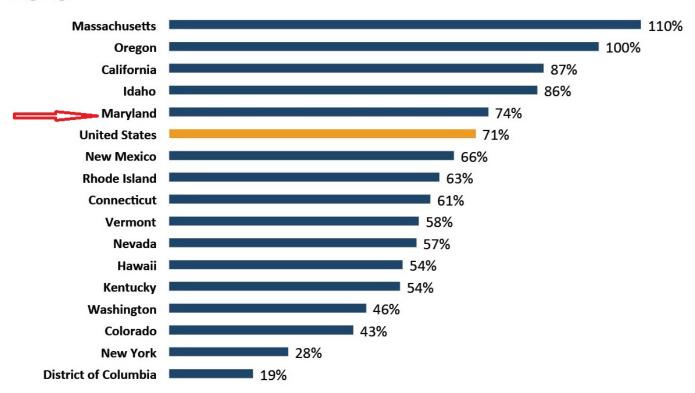
Source: Levitt Insurance, HHS data and Kaiser Family Foundation estimate.



### SUBSIDIZED MARKETPLACE SIGNUPS AS A SHARE OF ELIGIBLES, 2016



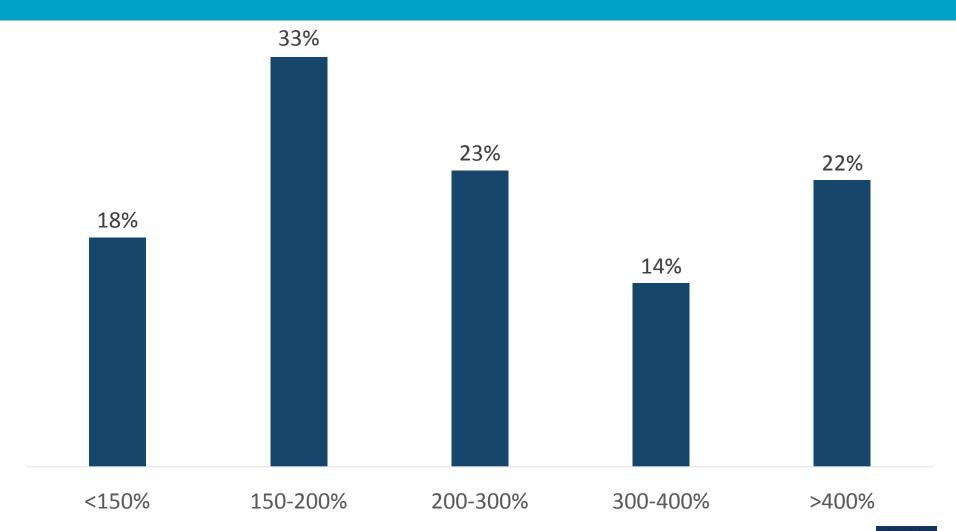
### Subsidized marketplace signups as a share of eligibles, 2016





### REDUCTION IN MARKETPLACE-ELIGIBLE UNINSURED BY POVERTY LEVEL, 2013-2014







Source: Kaiser Family Foundation analysis of Current Population Survey

# MOST WHO HAD PROBLEMS PAYING MEDICAL BILLS WHILE INSURED SAY COST-SHARING WAS MORE THAN THEY COULD AFFORD



#### AMONG THOSE WHO HAD PROBLEMS PAYING HOUSEHOLD MEDICAL BILLS IN THE PAST 12 MONTHS WHO WERE INSURED WHEN TREATMENT BEGAN

Percent who say each of the following was a reason they had problems paying medical bills:

Copays, deductibles, or coinsurance were more than they could afford

**75%** 

Received care from an out-of-network provider, and insurance would not cover or would only cover a portion

32%

Submitted a claim to insurance company, but the claim was denied

26%



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