Ensuring Comprehensive Health Coverage through the COVID-19 Crisis

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Director, Marketing & Web Strategies, Maryland Health Connection

Tom Leibfried
Legislative Representative, AFL-CIO
• **Introduction:** Lauren Rosenbaum, Families USA

• **State projections for COVID-19 related insurance losses:** Stan Dorn, Families USA

• **Connecting newly uninsured to coverage:** Betsy Plunkett, Maryland Health Benefit Exchange

• **Federal policy priorities for comprehensive coverage:** Tom Leibfried, AFL-CIO

• **Tools to support action in your state:** Lauren Rosenbaum, Families USA

• **Q&A:** All
• Today’s presentation is being recorded
• The slides and recording will be made available
• To ask questions:
  • Type your question in the chat box or call-in during the Q&A period.
Stan Dorn
Director,
National Center for Coverage Innovation & Senior Fellow,
Families USA

@FamiliesUSA
25 million to 56 million people losing employer-sponsored insurance

Up to 15.8 M people becoming newly uninsured

Nearly one in six people under age 65 without any health coverage
Coverage gaps **spread COVID-19** and increase the toll taken by the virus.

Coverage gaps **undermine financial security** during recession.

Coverage gaps **prevent people from obtaining necessary care** for health problems, including non-COVID conditions.

  - **Cancer care, organ transplants, brain surgery, prevention and treatment of chronic disease are all experiencing major setbacks** due to COVID-19.

Coverage gaps **deepen and prolong the COVID-19 recession**.

  - Stay tuned for forthcoming Families USA report quantifying job loss, by state.
## States at Highest Risk (Projected Coverage Gaps)

<table>
<thead>
<tr>
<th>Rank</th>
<th>State</th>
<th>Projected % uninsured under 65*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Texas</td>
<td>30.5%</td>
</tr>
<tr>
<td>2</td>
<td>Oklahoma</td>
<td>25.2%</td>
</tr>
<tr>
<td>3</td>
<td>Georgia</td>
<td>25.1%</td>
</tr>
<tr>
<td>4</td>
<td>Florida</td>
<td>24.2%</td>
</tr>
<tr>
<td>5</td>
<td>Wyoming</td>
<td>22.5%</td>
</tr>
<tr>
<td>6</td>
<td>Nevada</td>
<td>22.0%</td>
</tr>
<tr>
<td>7</td>
<td>South Carolina</td>
<td>20.5%</td>
</tr>
<tr>
<td>8</td>
<td>Alaska</td>
<td>20.1%</td>
</tr>
<tr>
<td>9</td>
<td>Arizona</td>
<td>19.9%</td>
</tr>
<tr>
<td>10</td>
<td>North Carolina</td>
<td>19.8%</td>
</tr>
</tbody>
</table>

*Assumes heavy losses
## States at Highest Risk (Projected Coverage Losses)

<table>
<thead>
<tr>
<th>Rank</th>
<th>State</th>
<th>Number becoming uninsured*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Texas</td>
<td>2,510,000</td>
</tr>
<tr>
<td>2</td>
<td>California</td>
<td>1,405,000</td>
</tr>
<tr>
<td>3</td>
<td>Florida</td>
<td>1,254,000</td>
</tr>
<tr>
<td>4</td>
<td>Georgia</td>
<td>778,000</td>
</tr>
<tr>
<td>5</td>
<td>New York</td>
<td>606,000</td>
</tr>
<tr>
<td>6</td>
<td>North Carolina</td>
<td>592,000</td>
</tr>
<tr>
<td>7</td>
<td>Illinois</td>
<td>541,000</td>
</tr>
<tr>
<td>8</td>
<td>Pennsylvania</td>
<td>493,000</td>
</tr>
<tr>
<td>9</td>
<td>Ohio</td>
<td>468,000</td>
</tr>
<tr>
<td>10</td>
<td>New Jersey</td>
<td>460,000</td>
</tr>
</tbody>
</table>

*Assumes heavy losses
Laid-Off Workers are Hard to Reach

• **Past failures**
  - Health coverage tax credits (HCTCs), passed in 2002 Trade Act: *10-20% take-up*
  - **COBRA subsidies in 2009 stimulus legislation**: no statistically significant impact on coverage
  - **ACA coverage expansions in 2014**: most groups saw significant gains. One group that did not: people losing employer-sponsored health insurance (ESI)
  - Before the COVID-19 crisis, at least *95% of newly uninsured consumers were failing to take advantage of special enrollment periods* under the ACA

• **Past success**
  - **Significant, individualized assistance** with enrollment more than doubled take-up of HCTCs

• **Current challenge**
  - Can we go beyond providing information to providing individualized assistance, without expecting more from laid-off workers than they can realistically undertake?
Connecting Newly Uninsured to Coverage

Betsy Plunkett
Director, Marketing & Web Strategies,
Maryland Health Benefit Exchange

@marylandconnect
Betsy.Plunkett@maryland.gov
A special enrollment period was created in March 2020 when Gov. Larry Hogan announced that Maryland was in a State of Emergency, to ensure all Marylanders have access to affordable health care at this critical time.

Until June 15, 2020, all uninsured Marylanders can enroll in private health plans through the Coronavirus Emergency Special Enrollment Period for coverage that starts June 1.

All plans on Maryland Health Connection cover testing and treatment of COVID-19.

As of June 3, about 38,000 Marylanders have enrolled in health coverage through the Coronavirus Emergency Special Enrollment Period.
Maryland Easy Enrollment Health Insurance Program

• Innovative program spearheaded by Stan Dorn of Families USA and others to encourage Marylanders who file taxes to get health coverage. Collaboration between Maryland Health Benefit Exchange and the Office of the Comptroller of Maryland.

• Maryland tax filers may check a box on their state tax form to share information with Maryland Health Benefit Exchange (MHBE).

• MHBE determines eligibility and sends a letter.

• Tax filer has 35 days from the date on the letter to apply for health coverage.

• Program began in January. Initially scheduled to run through April 15 state tax deadline but was extended through July 15 to mirror tax filing deadline extension.
• In addition to letter, this postcard is sent to eligible tax filers.

• Overshadowed by Coronavirus SEP.

• Media push planned to renew awareness in mid-June.

• Since January, nearly 4,000 people have enrolled.
Challenges in the Time of Coronavirus

Major budgetary constraints

• Marketing budget to promote six-week open enrollment: $3.3 million
• Marketing budget to promote three-month special enrollment: $70,000

Mixed messages

• Anyone can enroll now.
• Loss of health coverage has different parameters: 60 days after loss. Coronavirus SEP end date won’t apply to them or Medicaid eligible.

Virtual world

• In-person enrollment not possible.
• Enrollment and partner engagement events are not possible.
Digital Outreach is Key

Outreach is incredibly important for getting the right messaging out to the right people.

Maximize existing and new relationships to share targeted messaging appropriate for each group of community partners in English and Spanish.

- Customized emails
- Social media press kit
- Newsletter copy
- Press release templates
- Talking points
- Webinar presentations
- Coding for button to put on websites
Reach Underserved, Vulnerable Populations

Enlisted the help of partners to reach tens of thousands across the state.

• Baltimore Ravens
• Maryland Department of Health
• Maryland Food Bank
• Maryland Health Care Commission
• Maryland State Libraries
• MedChi
• Office of Minority Health & Health Disparities
• Rural Maryland Council
• Urban League of Greater Baltimore
Outreach to Recently Unemployed

Maryland Department of Labor

• Information about Maryland Health Connection included in email to employers who file.

• Rapid Response team switched to virtual. Webinars include navigator presenting information about how to enroll in plans through Maryland Health Connection.

• Double-sided insert included in 1099G with CASH campaign and MHC information.

• Share information about us on social channels.

• Pending: Button that links to MHC on DLR website, copy in emails to individuals who file for unemployment.
DO YOU HAVE HEALTH INSURANCE?

Get covered today.
Maryland Health Connection is a one-stop shop to enroll in a private health or dental plan, Medicaid or MCHIP. It’s the only place you can get financial help with the cost of health coverage. Last year, 9 out of 10 people qualified for free or low-cost coverage.

Many people can enroll now.
Even though open enrollment has ended for 2020 plans, you still may be able to get covered if you’ve recently experienced a major life event such as losing your health coverage, losing your job, getting married or divorced, or turning 26 and moving off your parent’s insurance. See if you’re eligible at MarylandHealthConnection.gov/LifeChanges.

- If you bought a health plan through Maryland Health Connection and got financial help paying your premiums, you MUST file taxes.
  Tell Maryland Health Connection about any changes in your income or household so you receive the right amount of financial help. Otherwise, you could owe more at tax time.

- Bring Form 1095 to your tax preparer.
  You’ll receive Form 1095 from anyone who provides you with health insurance, including your employer, your health plan, or Maryland Health Connection.

For more information, visit:
www.marylandhealthconnection.gov
and
www.irs.gov/Affordable-Care-Act
Digital is most cost-effective way to reach target populations right now.

- $70,000 budget split between digital banner ads on targeted websites and Facebook ads.
- Additional $10,000 from one of our consumer assistance organizations.
- Additional $30,000 from Maryland Health Care Commission.

Earned media:

- Executive director has interviewed with state and national media regularly after periodic press releases updating special enrollment numbers.
- 100+ media hits
Our Coronavirus Special Enrollment Toolkit offers resources that are quick and easy to share.

Social Press Kit includes:

• Social media posts for Facebook, Twitter and Instagram in English and Spanish.
• Newsletter content in English and in Spanish.
• Consumer with details on special enrollment periods.
• HTML code to add a Maryland Health Connection button to a website. The button will link directly to MarylandHealthConnection.gov.
• The Social Press Kit also has information on other special enrollment periods including Easy Enrollment for tax filers and loss of job-based coverage.
Blogs to Address Coronavirus Pandemic

Maryland Health Connection has several blogs for consumers explaining what the coronavirus special enrollment period is, deadlines to enroll, how to get covered and more:

• **Coronavirus emergency extends special enrollment period until June 15**

• **Emergencia de Coronavirus extiende el período de inscripción especial hasta el 15 de junio**

• **Take care of your mental health during the coronavirus pandemic**

• **Your health coverage and the coronavirus**
What’s happening in your state?

Use the **chat function** or the **Q&A** at the end of the presentation to share:

- Efforts currently underway to connect newly uninsured to coverage
- Changes you are advocating for to better support residents in getting enrolled
Tom Leibfried

Legislative Representative AFL-CIO

@AFLCIO
State of Play

• HEROES Act (H.R. 6800) passed by House on May 15 by largely party-line vote

• Senate action in June or July ??

• White House: few signals of interest in additional relief
<table>
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<tr>
<th><strong>Policies for Comprehensive Coverage</strong></th>
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<tbody>
<tr>
<td><strong>Consumer Assistance</strong></td>
</tr>
<tr>
<td>• Essential for workers overwhelmed by job loss</td>
</tr>
<tr>
<td>• Only successful approach in previous recessions</td>
</tr>
<tr>
<td><strong>Special enrollment period</strong></td>
</tr>
<tr>
<td>• Should be available to consumers regardless of their state</td>
</tr>
<tr>
<td>• CMS has offered SEPs in other crises (e.g. 2017 hurricanes)</td>
</tr>
<tr>
<td>• Add new SEP for all job loss</td>
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<tr>
<td><strong>Testing &amp; treatment</strong></td>
</tr>
<tr>
<td>• Medicaid coverage for COVID-19 testing AND treatment for uninsured</td>
</tr>
<tr>
<td>• Regardless of immigration status</td>
</tr>
<tr>
<td><strong>Federal matching rates</strong></td>
</tr>
<tr>
<td>• States seeing surge in Medicaid enrollment</td>
</tr>
<tr>
<td>• FMAP needs to be greatly enhanced, remain available until economic recovery</td>
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<tr>
<td>• Maintenance of effort to preserve coverage</td>
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<tr>
<td><strong>COBRA subsidies</strong></td>
</tr>
<tr>
<td>• Particularly important for those with chronic conditions</td>
</tr>
<tr>
<td>• Families faced with starting over with new deductible, providers</td>
</tr>
<tr>
<td><strong>Affordability assistance</strong></td>
</tr>
<tr>
<td>• Many uninsured lack access to COBRA and Medicaid</td>
</tr>
<tr>
<td>• Increase premium tax credits</td>
</tr>
<tr>
<td>• Subsidies for low-income adults in non-expansion states</td>
</tr>
</tbody>
</table>
Needed Advocacy

• Pressure Republican senators

• Push Senate Democrats to seek substantial funding for coverage expansions & consumer assistance

• Tell President Trump that affordable, comprehensive coverage is needed now
Tools to Support Action in Your State

- Leave-behind for congressional offices

- State-by-state analyses:
  - *50-state analysis of projected health insurance losses due to COVID-19*
  - 50-state analysis of health insurance information on uninsurance websites
  - Economic Policy Institute analysis of insurance losses as of May 9

- Consumer-facing resource to understand coverage, testing and treatment options

- *Maryland Coronavirus Special Enrollment Toolkit*

- Comprehensive COVID-19 response toolkit

*Highlighted in today’s webinar*
Wednesday, June 10, 3 p.m. ET
Test, Trace, and Space: investing in a health workforce to prevent pandemic spread

Special guest: Rep. Lauren Underwood (D-IL)
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@AFLCIO

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Questions?
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