

# NY State of Health 2017 Renewal Improvements

Date:October 5, 2016Time:10:00am - 11:30amDial-In Number:1-855-897-5763Conference ID:81167935



### **TODAY'S WEBINAR**

- Dial in to listen to the audio portion of the webinar using the audio instructions on your WebEx control panel.
- All participants will remain muted for the duration of the program.
- Questions can be submitted using the Q&A function on your WebEx control panel; we will pause periodically to take questions.
- A recording of the webinar and any related materials will be available online and emailed to all registrants.

# Privacy and Security



### Here's what you said:

- More than 95% said it "increased my knowledge of the topic(s)".
- More than 96% said "the information will allow me to better assist consumers in a safe and secure manner".
- "1 think the webinars are great. They are informative and very helpful.
- "Having access to the Authorized Representative form is great"
- "It was very helpful. It re-enforced our accuracy in explaining to our consumers how important it is to protect their privacy."

"Can we have more than 1000 participants? I couldn't log-in."



### Welcome

Gabrielle Armenia

### Director, Bureau of Child Health Plus Policy & Exchange Consumer Assistance

### **Speakers**

Erin BacheldorMedical Assistance Specialist, Division of Eligibility and Marketplace<br/>IntegrationRuchika BajajProject Coordinator, Division of Eligibility and Marketplace Integration,<br/>Bureau of Eligibility, Notices and Quality AssuranceDanielle HolahanDeputy Director, NY State of HealthMark IrlandoAssistant Attorney, NY State of HealthSara OberstEligibility Program Manager 2, Division of Eligibility and Marketplace<br/>Integration



### **Important Dates**



Date	Action
Mid-October, 2016	<ul> <li>Renewal Notices mailed. These notices are sent to individuals eligible for renewal of their:</li> <li>QHPs (includes Full Pay QHP, APTC, and APTC CSR).</li> <li>Medicaid, Child Health Plus, and Essential Plan coverage ending on 12/31/16. <ul> <li>Annual renewal notices for Medicaid, Child Health Plus, and Essential Plan will be sent on a rolling schedule</li> </ul> </li> </ul>
11/1/2016	Open Enrollment begins for <u>new</u> applicants
11/16/2016	<ul> <li>Open Enrollment begins for individuals <u>renewing</u> coverage.</li> <li>Consumers can update their account if needed, and enroll in a plan for coverage starting on 1/1/2017.</li> </ul>
12/15/2016	Last day to enroll for January 1, 2017 coverage
1/31/2017	Open enrollment closes for QHPs

### Timeline for Open Enrollment and Renewals



- Individuals enrolling in coverage <u>for the first time during open enrollment</u> that want to select new plans can do so beginning November 1st.
- Individuals <u>renewing</u> coverage that want to select new plans can do so beginning November 16.

For	When Enrollment is completed	Coverage Begins
New Application	November 1 <sup>st</sup> - December 15 <sup>th</sup> , 2016	January 1 <sup>st</sup> , 2017
Renewal Application	November 16 <sup>th</sup> - December 15 <sup>th</sup> , 2016	January 1 <sup>st</sup> , 2017
New/Renewed Application	December 16 <sup>th</sup> - January 15 <sup>th</sup> , 2016	February 1 <sup>st</sup> , 2017
New/Renewed Application	January 16 <sup>th</sup> to January 31 <sup>st</sup> , 2016	March 1st, 2017

# **2017 Renewal Improvements**



# NY State of Health is making a series of improvements to improve continuity of coverage for the consumer.

- 1. Increase the number of consumers who can be automatically renewed by the system.
- 2. Use more <u>recent</u> income data to verify a consumer's income.
- 3. Add functionality for health plan auto-enrollment between programs.
- 4. Improve functionality so that more household members can renew together (synchronize renewal due dates) or renew at the time that each individual member is due for renewal.
- 5. Improve messaging to be more consumer friendly:
  - Updates to screens
  - Changes in the notices
  - Consumer friendly reminders (fliers, postcards, etc...)

## **Modification of Renewal Question**



- Consumers must answer "yes" to this question in order to give NY State of Health permission to automatically renew their coverage.
- NY State of Health is updating the screen below and consumers will have new language in an effort to encourage them to agree to have data sources used to automatically renew their coverage.
- Currently the question reads as follows:



# Renewal of Coverage Question

- This is the updated Question which will appear in the application at the start of Open Enrollment.
- New language (the question itself) was modeled after the question which appears on the Federally Facilitated Marketplace (FFM)

Renewal of coverage	
To make it easier to determine NY State of Health to use incom maximum number of years allo	my eligibility for help paying for health coverage in future years, I agree to allow ne data, including information from tax returns, for the next 5 years (the wed).NY State of Health will let me change my selection or opt out at any time.
Please select an answer	<ul> <li>Agree Disagree</li> <li>I give permission for my eligibility for help paying for health insurance to be renewed for a period of:</li> <li>5 years (the maximum number of years allowed), or for a shorter number of years</li> </ul>
	<ul> <li>4 years</li> <li>3 years</li> <li>2 years</li> </ul>
	<ul> <li>1 year</li> <li>Don't use tax data to automatically renew my eligibility for help paying for health coverage. I understand that NY State of Health will need to access tax data when I renew on my own. (Selecting this option may impact your ability to get help paying for health coverage at renewal.)</li> </ul>
9	9

### **Renewal Question**



- A flier was sent out to consumers in August encouraging them to take action by September 15<sup>th</sup>:
  - Update their accounts with their most current information and mark "yes" to allow the Marketplace to renew their coverage automatically.
- NY State of Health can then automatically renew more accounts, which will improve the continuity of coverage for the consumer.



Know that we will never share your information

with others or use it for any purpose except to

renew your health insurance.

findassistor to search on-line.

# **Poll Question #1**



Torrina calls her Assistor after receiving her renewal notice stating that she needs to update her account. Her current QHP coverage is ending on 12/31/2016. Torrina would like to meet on November 1<sup>st</sup>, which is the first date of Open Enrollment. What is the most appropriate response of the Assistor?

- A) I have many meetings on that day, but I will do my best to squeeze you in.
- B) I have many meetings that day, so we will have to explore times later in the week.
- C) Help Torrina to review her notice to see that she needs to wait until November 16<sup>th</sup> for the appointment.
- D) Explain to Torrina that she has until January 31<sup>st</sup> to enroll and there is no rush to make the appointment.

For	When Enrollment is completed	Coverage Begins
Brand New Application	November 1 <sup>st</sup> - December 15 <sup>th</sup> , 2016	January 1 <sup>st</sup> , 2017
A Renewal	November 16 <sup>th</sup> - December 15 <sup>th</sup> , 2016	January 1 <sup>st</sup> , 2017
New/Renewed	December 16 <sup>th</sup> - January 15 <sup>th</sup> , 2016	February 1 <sup>st</sup> , 2017
New/Renewed	January 16 <sup>th</sup> to January 31 <sup>st</sup> , 2016	March 1st, 2017

# **Overview: Types of Marketplace Renewals**



- 1. Automatic Renewal with Auto-Enrollment
  - No action required:
    - Individual gave NY State of Health permission to use data sources to automatically renew their coverage
    - Eligibility was renewed based on data sources
    - Health plan enrollment automatically completed (health plan is available for autoenrollment)

### 2. Automatic Renewal without Auto-Enrollment

- Action Required: Consumer must select and enroll in a plan.
  - Individual gave NY State of Health permission to use data sources to automatically renew their coverage
  - Eligibility was renewed based on data sources
  - o Plan selection is required

### 3. Manual Renewal

- Action Required: Consumer must update their application
  - Individual may or may not have given NY State of Health permission to use data sources to automatically renew coverage
  - o Information is required for an eligibility determination
  - Plan selection may be required



- No action required:
  - Individual gave NY State of Health permission to use data sources to automatically renew their coverage
  - Eligibility was renewed based on data sources
  - Health Plan enrollment automatically completed (health plan is available for autoenrollment)



- 1. Automatic Renewals with Auto-Enrollment:
  - Consumer must have given NY State of Health permission to renew eligibility using data sources.
  - Consumer will have their eligibility renewed systematically using documented income from the consumer, state data sources, and federal data sources.
    - Documented income from the consumer must have been verified by the Marketplace within the past three (3) months.
  - Consumer will receive notice with enrollment information including APTC applied (if applicable) before the end of the year.
    - No action is needed if consumer agrees with information in their notice.
    - If the consumer does <u>not</u> agree with their automatic renewal determination, they will be able to update their application.
      - □ The update can be made starting 11/16/2016. It should be completed by 12/15/2016 to ensure coverage on 1/1/2017.
  - Enrollment into plan will be automatically completed for coverage effective date of January 1, 2017 (if available).



- When eligibility changes from one program to another, if the same health plan exists, in most cases, the individual will be auto-enrolled in that plan.
  - □ MMC to CHPlus (Subsidized only)
  - MMC to EP
  - □ MMC to MMC in another county
  - □ CHPlus to CHPlus in another county
  - CHPlus to MMC
  - CHPlus to EP
  - EP to MMC
  - **EP** to EP in another county
  - **QHP all types to MMC**
  - **QHP all types to CHPlus (Subsidized only)**
  - **QHP** all types to EP
  - Consumers will also have the option to switch plans if they choose.
  - Exception: Auto-Enrollment is not possible when an individual is newly eligible for:
    - Full-Pay CHPlus

15

- **QHP** (Subsidized or Full-Pay)
  - These Individuals will be renewed without Auto-Enrollment. They will need to go in and pick a plan during the timeframe specified in their notice.

The purpose of this change is to have more consumers automatically reenrolled with the same health plan to improve the continuity of coverage.



- The "**How We Made Our Decision**" section of the notice will display the data sources that NY State of Health used to renew the account. Below are the data sources being used:
- User Attested When an account has been determined as fully eligible (no outstanding documents needed) for enrollment within three months of the renewal cycle, based on projected or current annual household income, user attested data will be used and the consumer will <u>not</u> be required to update eligibility or re-upload documentation that has been verified in that three month time period.
  - Example: Standard QHP Renewal for 1/1/2017 coverage. If the account had a LSC run in July, August, or September and the member was determined to be fully eligible, then data source will display as "User Attested".
- Wage State Data Sources The Marketplace will only use the latest two (2) income quarters (yearly annual amount) for the determination.
- FTI Federal Tax Information The Marketplace will use the most recent IRS data for the determination.

nystateofhealth The Official Health Plan Marketplace

October 3, 2016 Account ID: AC0000000123

Janet Smith

123 New Ave 2G

New City, NY 10001

·

Help at: 1-855-355-5777

TTY: 1-800-662-1220

October 2, 2016.

All decisions described in this

notice are based on information

about you from state and federal data sources obtained as of

Your Insurance Details

John Jones

Insurance Provider: MVP Health Care Plan Name: Essential Plan 1 Start Date: January 1, 2017

NOTICE

#### IT'S TIME TO RENEW YOUR NY STATE OF HEALTH COVERAGE

If you want to keep your present health plan for the next year and the information on your application is still accurate, here's good news! We've re-enrolled you in your current health plan for another year and you don't have to do anything more.

#### Your Insurance Details

Janet Smith

Insurance Provider: Oscar Level of Insurance: Bronze Plan Name: Oscar Simple, Bronze, NS, INN, Dep25, \$20 Generic Drugs, \$20 PCP/Mental Health Visits, Wellness Rewards, Step Tracking, Free Telemedicine Cost: You qualify for a maximum of \$146.80 of advance premium tax credit to apply all or part of this credit to your monthly premium for this plan. Please Note: Any income-based cost-sharing reductions (lower copayments, coinsurance and deductibles) with your current plan will no longer be available after December 31, 2016. Start Date: January 1, 2017 Call NY State of Health at 1-855-355-5777 (TTY: 1-800-662-1220) to get help in other languages or for help reading this notice. This notice is also available in other formats. Call for more information. To find a navigator or certified application assistor near you, visit <u>https://www.nystateofhealth.ny.gov</u> or call us.



• Individuals who were automatically renewed and enrolled in a subsidized QHP in 2016, and remain eligible for a QHP should read their notice carefully. This information may include their APTC amount, which could be changed from last year.

f you want to keep yo application is still accura or another year and you	our present health plan for the next year and the information on your ate, here's good news! We've re-enrolled you in your current health plan u don't have to do anything more.	
our Insurance Det	ails	
Janet Smith	Insurance Provider: Oscar Level of Insurance: Bronze Plan Name: Oscar Simple, Bronze, NS, INN, Dep25, \$20 Generic Drugs, \$20 PCP/Mental Health Visits, Wellness	
	<b>Cost:</b> You qualify for a maximum of \$146.80 of advance premium tax credit to apply all or part of this credit to your monthly premium for this plan.	>
	(lower copayments, coinsurance and deductibles) with your current plan will no longer be available after December 31, 2016	
	Start Date: January 1, 2017	



	IT'S IMPORTANT FOR How we made our decision	YOU TO KNOW on.
	Marketplace ID: HX000	You qualify for a tax credit up to \$0.00 per month to help pay for your health coverage. You can apply all or part of this credit to your monthly bill.
n		This eligibility is effective January 1, 2017.
e (no		
eeded) for		You qualify for a tax credit for two reasons:
nonths of		<ul> <li>because you are not eligible for Medicaid and</li> </ul>
on ial ittested		<ul> <li>because the household income listed in your application submitted on September 14, 2016 is between \$33,534.00 and \$97,200.00. This is the income range for tax credits based on your household size.</li> </ul>
consumer date		The nousehold income listed in your application is \$71,671.96. Update your application if your household income has changed since you last updated your application.
een th time		You cannot receive reductions in out-of-pocket costs like deductibles and co-pays because your income is above the allowable income limit of \$60,750.00. You are not eligible for coverage through Essential Plan because in order to qualify for Essential Plan you must:
		Be under 65 years of age
		Not be eligible to enroll in other coverage

 Have income below \$48,600.00. This is the income threshold for the Essential Plan.

### User Attested

When an account has been determined as fully eligible (no outstanding documents needed) for enrollment within three months of the renewal cycle, based on projected or current annual household income, user attested data will be used and the consumer will <u>not</u> be required to update eligibility or re-upload documentation that has been verified in that three month time period.



When the consumer receives this message their account was renewed using either:

• State Data Sources

and/or

• Federal Data Sources

John Jenkins Marketolace ID: HX00000	You qualify for a tax credit up to \$101.88 per month to
marketplace ID. 1100000	help pay for your health coverage. You can apply all or part of this credit to your monthly bill.
	This eligibility is effective January 1, 2017.
	You qualify for a tax credit for two reasons:
	· because you are not eligible for Medicaid and
	<ul> <li>because federal and state data sources show your income is between \$16,395.00 and \$47,520.00. This is the income range for tax credits based on your household size.</li> </ul>
	You cannot receive reductions in out-of-pocket costs like deductibles and co-pays because your income is above the allowable income limit of \$29,700,00
	You are not eligible for coverage through Essential Plan because in order to qualify for Essential Plan you must:
	Be under 65 years of age
	Not be eligible to enroll in other coverage
	Have income below \$23,760.00. This is the income
	threshold for the Essential Plan.



The "Status of Your Renewal" screen should <u>always</u> be reviewed with the consumer.

- Reviewing the renewal checklist may help remind the consumer about changes in their lives that they may need to report to the Marketplace.
- If something has changed in their life, they should update their application regardless of the fact that they have already been automatically renewed.

#### Status of Your Renewal

You or members of your household can get coverage for the upcoming year from NY State of Health. Review the Renewal Checklist to see if you need to take an action to continue your health coverage for the upcoming year.

NY State of Health must have the most up-to-date information about you and your household members. Make sure your application has the most recent information about:

- Your address;
- Income;
- · Access to or enrollment in the New York State Health Insurance Program (NYSHIP);
- · Eligibility for health insurance from a job or other health insurance;
- Cost of health insurance Premiums from job;
- Everyone who lives in your household and changes in household size, for example, if you get
  married or divorced, become pregnant, have a child(ren) or adopt a child(ren); or if a child(ren) is
  placed for adoption with you;
- · Changes in full-time student status (if applicable to application members);
- · Changes in immigration status;
- How you plan to file your taxes.

Changes may effect what program you are eligible for and what plan you can enroll in.



"Renewal Checklist" will be visible on the consumer's "Overview" tab starting November 16<sup>th</sup>.

- While automatic renewal with auto-enrollment has been completed, the checklist indicates that <u>Action is Needed</u>.
- Assist the consumer by clicking on the "Plans" tab to review coverage information and any applicable premiums.
  - If the consumer wants to select a different plan, that can do so here as well. (see 2<sup>nd</sup> chart on slide 6 for timeline of enrolling in new plan)
- If the consumer disagrees with their determination and would like to update their application, click on "Update Application".
- Information in the "Application", "Eligibility", and "Plans" tabs are for the upcoming year.
- Any changes made to application will affect coverage for upcoming year.

					Logged	d in as rgardini	a_demo	Account	Sign O
Overview	Application	Account	Eigbilt	Plans	Inbox	Documents	Appeals		

#### Renewal Checklist

Click on a household member to see what still must be done to renew that person's coverage.

•	Renewal Complete			
Program Eligibility	Marketplace ID			
Essential Plan	01/01/2017	HX0000251389		
		Mans tab to review volur coverage		
information, including any premi	into a pran for the upcoming year. Click on the r ums you may owe.	Ponoural Completer		
Action Needed: You are enrolled information, including any premi	into a plan for the upcoming year. Click on the i ums you may owe.	<ul> <li>Renewal Completed</li> </ul>		
Program Eligibility	Eligibility Start Date	<ul> <li>Renewal Completed</li> <li>Marketplace ID</li> </ul>		





- Action Required: Consumer must select and enroll in a plan.
  - Individual gave NY State of Health permission to use data sources to automatically renew their coverage
  - o Eligibility was renewed based on data sources
  - Health plan selection is required for a variety of reasons



- 2. Automatic Renewal without Auto-Enrollment This could happen because:
  - The consumer became newly eligible for a QHP.
  - The consumer moved to a different county and their current plan does not offer coverage in that county.
  - The consumer's program eligibility changed and their current plan does not offer a plan in the new program.
  - The consumer's current plan will no longer be offered in NY State of Health for the upcoming year.
  - The consumer became newly eligible for full-pay CHPlus.
    - Assistor/Consumer should carefully review the notice in order to return to the account during the specified time period to help the consumer enroll in a plan.



The notice will specify that action is required:

• consumer must return to their account to select a health plan.

#### Your Insurance Details

Willie Weaver

Action Required: We cannot enroll you in your current health plan for the next coverage year. You must select a different health plan between November 16, 2016 and December 15, 2016 to continue your coverage.

Renewal Checklist will be visible on the consumer's "Overview" tab starting November 16th.

- Renewal To-Do List tells consumers that their renewal is <u>not</u> complete
  - Consumer needs to pick a plan
  - Consumer can select a plan without going through application
  - Go directly to the "Plans" tab to do this. (see 2<sup>nd</sup> chart on slide 6 for timeline of enrolling in new plan)
- If the consumer disagrees with their determination and would like to update their application, click on "Update Application"
- Information in the "Application" and "Eligibility" tabs are for the upcoming year
- Any changes to the application will affect coverage for upcoming year



		Logged in as DuringEmma Ac	count Sign Out
Overview Application	Account Eligibility	Plans Inbox Documents Appeals	
Renewal Check	dist		
Click on a househol	d member to see	what still must be done to renew that p	erson's coverage.
• Willie Weave	н		Renewal Not Completed
Program Eligibility		Eligibility Start Date	Marketplace ID
Essential Plan		01/01/2017	HX0000251396
Action Needed: Pic coverage for the up	ck a New Plan. Do coming year will n	tween 11/16/2016 and 12/15/2016 for of start until you pick a plan.	the upcoming coverage year. Your
Weaver,Willie			
	Gondor	Social Security Number	Market Place Id
Date of Birth	Gender		





27

# Manual Renewals

- Action Required: Consumer <u>must</u> update their application
  - May or may not have given NY State of Health permission to use data sources to automatically renew coverage
  - Information is required for an eligibility determination (such as income)
  - Health plan selection may be required



- 3. Consumers MUST update information on or before 12/15/2016 in order to remain enrolled in their financial assistance health insurance program effective 1/1/2017.
- Consumers who do not update their information may:
  - Lose their applied tax credit toward their QHP as of 1/1/2017.
    - Not updating information may lead to gaps in coverage or months where FULL premium is due instead of having tax credits applied.
  - Not be enrolled in Child Health Plus as of 1/1/2017.
  - Not be enrolled in the Essential Plan as of 1/1/2017.
  - Not be enrolled in Medicaid (MA) as of 1/1/2017.



- 3. Consumers MUST update information on or before 12/15/2016 in order to remain enrolled in their financial assistance health insurance program effective 1/1/2017.
  - Exception for Manual renewal accounts where Medicaid Managed Care (MMC) enrollment is not completed until <u>after</u> 12/15/2016.
  - Example: Consumer's MMC coverage end date is 12/31/2016. Consumer fails to renew by 12/15/2016 (timely). However if:
    - $\circ$  the consumer returns to their application between 12/16 12/31
      - □ if found MA MMC eligible, and the consumer enrolls in the same MMC plan they had last year, then they will be reinstated in their MMC plan starting 1/1/2017.
      - This consumer will <u>not</u> be enrolled in Medicaid Fee-For-Service (FFS) only, for the month of January.



Status of Your Renewal	'our Renewal	FYour	of	tus	Sta		
------------------------	--------------	-------	----	-----	-----	--	--

To make it easier to see if I qualify for help paying for health coverage in future years, I agree to allow the NY State of Health did not have enough information from state and federal data sources to determine Marketplace to use income data, including information from federal tax returns. The Marketplace will send me a tice and let me make any changes, and I can opt out at any time. if you can get help paying for your insurance or what coverage you can have next year. renew my eligibility automatically for the next: You must provide more information on your application by 12/15/2016 so you will be covered in the 5 years (the maximum number of years allowed), or for a shorter number of years upcoming year. To continue from where you left off in the application, click Update Application. To make changes to your current coverage, call NY State of Health at 1-855-355-5777. No, do not renew my eligibility automatically. Update Application

If a consumer has given the Marketplace permission to use data sources to automatically renew their eligibility for the upcoming year, they may still be required to manually renew their coverage. This occurs when the Marketplace was not able to automatically renew using their using recent data sources.

#### Important Renewal Information

NY State of Health did not have enough information from state and federal data sources to determine if you can get help paying for your insurance or what coverage you can have next year. You must return to your account at www.nystateofhealth.ny.gov and provide more information so you will be covered in the upcoming year.

Renewal of coverage

4 years 3 vears 2 years

1 vear



The notice will specify that action is required:

• consumer must update their account.

Marley Janson	Based on the information from federal and state sources, we cannot make a decision about whether or not you qualify for financial help paying for your health coverage.
	Please update the information on your NY State of Health account by December 15, 2016 so we can make an appropriate decision. If you miss this deadline, the financial assistance you are getting now may end. Be aware that you may be able to buy a health plan at NY State of Health at full cost. See the section of this notice titled <i>"How and when to make changes to your account or plan"</i> .



Renewal Checklist will be visible on the consumer's "Overview" tab starting November 16th.

- Renewal Checklist List tells consumers that their renewal is <u>not</u> complete
  - Consumer cannot select a plan without updating their application
- Consumer must update their application in order to have their eligibility determined for the upcoming year.
- Information in the "Plans" and "Application" tab are for the current year.

#### Renewal Checklist

Click on a household member to see what still must be done to renew that person's coverage.

### o Allison Randall

#### Renewal Not Completed

Action Needed. Update the information in your application by 12/15/2016 to renew your coverage for the upcoming year. Be sure to tell us if your income, family size or address has changed. If you miss this deadline, the financial assistance you are getting now may end.





#### **Euture Disenrollments**

When a consumer does a LSC and their program eligibility changes (e.g. QHP to Medicaid), this page:

- Informs the consumer, before they select a new plan, that they will be disenrolled from their current plan,
- Shows the current plan, the members who will be disenrolled and the end date of enrollment,
- When the consumer clicks on the "Next " button on this page, it takes them to the "Plan Details" page

### Future Disenrollments

These individuals made a change that affects their choice of health plan. They must now pick a NEW health plan for health insurance coverage to continue. They will be disenrolled from the plan they are now in by the date listed below. Click on Next to compare and select a health plan.

If you have any questions, please call New York State of Health at 1-855-355-5777.

### Disenrollments

Plan Name	Excellus Health Plan, Inc	
Plan Type	Medical with Dental	
Coverage End Date	10/31/2016	

Next



After helping the consumer update their application and become determined, enrollment in a plan may be automatically completed by the system (if available).

- Many accounts will be auto-enrolled.
- Some accounts will still need plan selection.

### Assistor Key Responsibility:

 Assistors should <u>always</u> help the consumer proceed to plan selection after completing a manual renewal.

### **Plan Selection:**

- Consumer will see if a plan has already been selected for them and they have been auto-enrolled in that plan.
- Consumer can change their plan if they choose.
- Consumer will see that plan selection may still be needed.

# **Key Takeaways**



The Assistor should check the account whenever possible as this is the best place to find up to date information on what action, if any, is need for a consumer to complete their renewal without any gaps in coverage.

Name		Renewal Completed	
Program Eligibility	Eligibility Start Date	Marketplace ID	
Advance Premium Tax Credit	01/01/2017 HX0000237		
Action Needed. You are enrolled in a coverage information, including any coverage you had before with this in of the plan you are enrolled in is diffe doctors/health care providers particip	a plan for the upcoming year. Click on the premiums you may owe. You are enrolled surance company. While this is the same rent. Please check with your insurance c pate in this plan.	Plans tab to review your d into a plan that is similar to the insurance company, the name ompany to make sure that you	
o Name		Renewal Not Completed	
Program Eligibility	Eligibility Start Date Marketplace ID		
Qualified Health Plan	01/01/2017	HX0000237379	
Action Needed: <u>Pick a New Plan</u> bet coverage for the upcoming year will not	ween 12/16/2016 and 01/15/2017 for the upc start until you pick a plan.	oming coverage year. Your	
Name	Renewal Not Complete		
Action Needed: Update the informa upcoming year. Be sure to tell us if ye deadline, the financial assistance you	tion in your application by 12/15/2016 to our income, family size or address has ct u are getting now may end.	renew your coverage for the hanged. If you miss this	
Name	Not Due for Renewal		
No Action Needed: You will get a pro-	Vice about renewing your coverage in No.	wember 2017	

# **Poll Question #2**



Justin calls his Assistor on January 10<sup>th</sup> stating that he received an abnormally high bill from his QHP provider. He can't recall receiving any renewal notices, but is sure that the premium amount is incorrect. What is the most appropriate way for the Assistor to help?

- A) Tell Justin to contact the plan directly about the premium amount.
- B) Log-into the account to review Justin's overview page and any notices posted to his account.
- C) Explain to Justin that he has been enrolled in a Full-Pay QHP and he will need to pay this higher premium for the rest of the year.
- D) Ask Justin if he has access to his own account.

Manual Renewals	
3. Consumers MUST update information prior to 12/15/2016 in order to remain enrolled in their financial assistance health insurance program effective 1/1/2017.	
Consumers that do not update their information may:	
<ul> <li>Lose their tax credit         <ul> <li>Not updating information may lead to gaps in coverage or months where FULL premium is due instead of having tax credits applied.</li> </ul> </li> </ul>	



# **Questions?**





# Improved Messaging for Consumers: Reminders

# **Take Action - Reminder**



 As was discussed in Slide 9, the "Get Ready" flier was sent out in August encouraging consumers to take action by September 15<sup>th</sup>.



#### WHY YOU'RE GETTING THIS

Because it is almost time to renew your health insurance coverage for next year, 2017. Take steps now and avoid a gap in your coverage.

#### WHAT YOU SHOULD DO

#### TELL US WHAT HAS CHANGED IN YOUR LIFE.

- Your income?
- The size of your family?
- Where you live?

Changes like these may let you buy different health insurance plans or even sign up for cost-free insurance next year. And, the more up-to-date your information is, the less you'll have to do to renew your insurance.

By <u>September 15th</u>, go to nystateofhealth.ny.gov/ individual and login to your account to update your information or call us at 1-855-355-5777 and we will do it for you.

#### **HELP US HELP YOU!**

Help us make renewing your coverage easier than ever. Go into your NY State of Health on-line application and at the end — in the "Terms, Rights & Responsibilities" section — mark the "yes" box next to the question asking you to allow us to renew your coverage *automatically*. Or call us and we will do it for you. If we need any more information, we'll let you know. Know that we will never share your information with others or use it for any purpose except to renew your health insurance.

#### WATCH THE MAIL.

In October 2016, you will receive a Renewal Notice by mail or an email telling you to read the Notice online. It will explain:

- What health insurance program you qualify for in 2017.
- What you will likely pay for coverage in 2017.
- What action you should take, if any, to renew your coverage for next year. It is important that you take these actions to avoid any gap in coverage.

#### DON'T FORGET ABOUT YOUR TAX RETURNS.

Remember, we can't offer you help paying for a Qualified Health Plan in 2017, even if you qualify, if you have not filed your tax return for 2015.

- If you've already filed your 2015 Federal Income Tax Return, great!
- If you asked for more time to file your 2015 taxes but didn't file them yet, do it now.
- If you haven't taken steps to file or extend your 2015 taxes, or for any other questions, contact a tax preparer or get free tax help at www.irs.gov.

#### HELP IS AVAILABLE IN YOUR OWN LANGUAGE.

- Call the NY State of Health Customer Service Center at 1-855-355-5777.
- Or visit a certified in-person assistor. To find an assistor, call us or visit info.nystateofhealth.ny.gov/ findassistor to search on-line.

# **Renewal Reminder**



- A renewal reminder flier will be sent by email only to consumers:
  - Who were automatically renewed but still need to enroll in a plan. The flier will be sent to this group in Mid-November.
  - Who must manually renew their coverage but have yet to do so. The flier will be sent to this group between December 1<sup>st</sup> – 5<sup>th</sup>. This gives time to enroll by the 15<sup>th</sup> of the month to maintain coverage on January 1<sup>st</sup>.



#### ACT NOW TO RENEW YOUR HEALTH PLAN FOR 2017.

Recently, you received a notice from NY State of Health about what actions you need to take, if any, to renew your health plan for 2017. It is important that you take these actions to avoid any gap in coverage.

- 1. TELL US...wHAT'S NEW IN YOUR LIFE? Did your income, family size or address change? Tell us at nystateofhealth.ny.gov or 1.855-355-35777. It could make a big difference in what insurance you can buy or how much you'll pay, if anything.
- 2. DECIDE... TO KEEP THE HEALTH PLAN YOU HAVE NOW OR CHANGE PLANS.

If you decide to change plans for 2017, visit nystateofhealth.ny.gov to see your choices and pick a new plan.

3. MAKE THESE CHANGES...sy DEC 15. This is the only way you can be sure that your coverage will continue, without any gaps, right through the New Year — 2017.

#### ONE MORE THING!

40

HELP IS AVAILABLE IN YOUR OWN LANGUAGE.

Call the NY State of Health Customer Service Center at 1-855-355-5777.

 Or visit a certified in-person assistor. To find an assistor, call us or click here to search on-line. Consumers who are receiving this flier have already received their renewal notice and have yet to update their account, and/or enroll in a plan.

• It is possible that some of the dates will overlap (examples to follow).

# **QHP Pick a Plan Reminder**



 Fliers will be sent <u>by email</u> to consumers who have a 2017 QHP eligibility determination during Open Enrollment, but have yet to select and enroll in a plan.



#### GOOD NEWS FROM NY STATE OF HEALTH

You took the first step toward getting health coverage for 2017.

#### HERE'S WHAT YOU NEED TO DO NEXT

Come back today and select your health plan for 2017. View your health plan choices here.

#### SIGN UP

- nystateofhealth.ny.gov
- 1-855-355-5777 or TTY: 1-800-662-1220
- Visit an in-person assistor. Find one here.

Consumers who are receiving this flier have already received their renewal notice and have yet to enroll in a plan.

- This flier will start to be sent out starting at the beginning of Open Enrollment.
- Will be sent twice per month during Open Enrollment.

# Essential Plan (EP) Pick a Plan Reminder



 Fliers will be sent <u>by email</u> to consumers who have been found newly eligible for Essential Plan in the past month, but have yet to select and enroll in a plan.



#### GOOD NEWS FROM NY STATE OF HEALTH... YOU'RE ELIGIBLE FOR THE ESSENTIAL PLAN!

The Essential Plan has great coverage, a monthly cost of \$20 or less and lots of health plans to choose from.

You took the first step toward getting health coverage for 2017.

#### HERE'S WHAT YOU NEED TO DO NEXT

Come back today and select your health plan for 2017.

View your health plan choices here

#### SIGN UP

- nystateofhealth.ny.gov
- 1-855-355-5777 or TTY: 1-800-662-1220
- Visit an in-person assistor. Find one here.

- This flier will be sent out starting in October, 2016.
- May be sent twice per month.
- May be expected throughout the year as it is sent to new EP eligible individuals
  - Reminder: Essential Plan has continuous enrollment.

# Reminders

## Key Takeaways:



- Consumers may receive multiple reminders advising them to take action.
- Ignoring these reminders may lead to a gap in coverage.
- It is possible that there will be some timing overlap.
  - Example: Consumer enrolls in a plan on December 2<sup>nd</sup>, and receives a renewal reminder flier the next day. If this consumer inquires to their Assistor, the Assistor should check the account to be sure that this is just a timing overlap and no action is still needed.





#### GOOD NEWS FROM NY STATE OF HEALTH... YOU'RE ELIGIBLE FOR THE ESSENTIAL PLAN!

The Essential Plan has great coverage, a monthly cost of 20 or less and lots of health plans to choose from.

You took the first step toward getting health coverage for 2017.

#### HERE'S WHAT YOU NEED TO DO NEXT

Come back today and select your health plan for 2017.

1-855-355-5777 or TTY: 1-800-662-1220

Visit an in-person assistor, Find one here

View your health plan choices here.

nystateofhealth.ny.gov

SIGN UP

# NEED TO DO

GOOD NEWS FROM NY STATE OF HEALTH

You took the first step toward getting health coverage for 2017.

HERE'S WHAT YOU NEED TO DO NEXT

Come back today and select your health plan for 2017.

View your health plan choices here.

#### SIGN UP

- nystateofhealth.ny.gov
- 1-855-355-5777 or TTY: 1-800-662-1220
- Visit an in-person assistor. Find one here

# Reminders



### More Key Takeaways:

- If the consumer contacts you because they received one of these fliers, <u>or any</u> <u>message they have received about their coverage</u>, log into their account and check the "To Do" list on their overview screen.
  - The Call Center can also assist the consumer to check their account and see if action is needed.
- Assist the consumer with the renewal, if necessary.
- Assist the consumer in enrolling in a plan timely to avoid any gaps in coverage.



#### ACT NOW TO RENEW YOUR HEALTH PLAN FOR 2017.

Recently, you received a notice from NY State of Health about what actions you need to take, if any, to renew your health plan for 2017, it is important that you take these actions to avoid any gap in coverage.

- 1. TELL US...WHAT'S NEW IN YOUR LIFE? Did your income, family size or address change? Tell us at nystateothealth.ny,gov or 1.855-355 5777. It could make a big difference in what insurance you can buy or how much you'll pay, if anything.
- 2. DECIDE...TO KEEP THE HEALTH PLAN YOU HAVE NOW OR CHANGE PLANS. If you decide to change plans for 2017, visit nystateoThealth.ny.gov to see your choices and pick a new plan.
- 3. MAKE THESE CHANGES...BY DEC 15. This is the only way you can be sure that your coverage will continue, without any gaps, right through the New Year — 2017.

#### ONE MORE THING!

- HELP IS AVAILABLE IN YOUR OWN LANGUAGE.
- Call the NY State of Health Customer Service Center at 1-855-355-5777.
   Or visit a certified in-person assistor. To find an assistor, call us or
- Or visit a certified in-person assistor. To find an assistor, call us or click here to search on-line.



#### GOOD NEWS FROM NY STATE OF HEALTH... YOU'RE ELIGIBLE FOR THE ESSENTIAL PLAN!

The Essential Plan has great coverage, a monthly cost of \$20 or less and lots of health plans to choose from.

You took the first step toward getting health coverage for 2017

#### HERE'S WHAT YOU NEED TO DO NEXT

Come back today and select your health plan for 2017.

View your health plan choices here.

#### SIGN UP

nystateofhealth.ny.gov
 1-855-355-5777 or TTY: 1-800-662-1220

Visit an in-person assistor. Find one here



#### GOOD NEWS FROM NY STATE OF HEALTH

You took the first step toward getting health coverage for 2017.

#### HERE'S WHAT YOU NEED TO DO NEXT

Come back today and select your health plan for 2017.

View your health plan choices here.

#### SIGN UP

- nystateofhealth.ny.gov
- 1-855-355-5777 or TTY: 1-800-662-1220
- Visit an in-person assistor. Find one here



# Households Members with Different Renewal Dates

# **Renewal – Details**



46

### Household Members with Different Renewal Dates

- The system will try to renew any/all members of a household who can be renewed. This will occur even if that member is not due to renew yet.
- This aligns the renewal dates for the household.

Example: Tom and Courtney have 2 children ages 3 and 1 month old (born September 1, 2016)

	Household Member	Current Program Eligibility	Coverage end date
	Tom	QHP	12/31/2016
	Courtney	Medicaid — She was re- determined MA eligible when she reported her pregnancy on 2/2/2016. She gets continuous coverage from that date.	1/31/2017
	Estrella - 3 year old child	Child Health Plus	6/30/2017
	Mona - <sup>Baby</sup>	Medicaid — "Deemed" Medicaid baby born on 9/1/2016.	9/30/2017

### Household Size of 4 - 175% FPL

Renev Househ Account is automatic	wal – Detail old Members v s eligible for c renewal	<b>S</b> <b>vith Differe</b> 10/15/2016 - Fan Estrella have been Tom: EP: 1/1/201 Courtney: in MA of Estrella: CHPlus: 1 Mona: in MA con	nily receives notice that n automatically renewed n - 12/31/2017 continuous 1/1/2017 – 12/31/2017 tinuous	Tom and	The Offic 11/15/2016 - Courtney, Tom automatically Tom: EP: 2/1/2 Courtney: EP: Estrella: CHPlu Mona: in MA office	<b>teofhea</b> ial Health Plan Mark Family receives n n, and Estrella ha renewed. 2017 – 1/31/201 2/1/2017 – 1/31 us: 2/1/2017 – 1/	etplace otice that ve been 8 /2018 31/2018
			2016	Òctob	er	Nove	mber
All informa HH: 4 - FP	ation remains the same PL: 175%		/	7/15/2017 - Fa Courtney, Tom been automati Tom: EP: 10/1/ Courtney: EP: 1 Estrella: CHPlus Mona: CHPlus:	amily receives no an Estrella, and N ically renewed. /2017 – 9/31/20 10/1/2017 – 9/3 s: 10/1/2017 – 9/ 10/1/2017 – 9/	otice that Iona have 018 81/2018 9/31/2018 0/31/2018	
			2017 July				
				7/15/2018 - Fa	mily receives no	otice that they	
Household Member	Current Program Eligibility	Coverage end date	/	all have been a / Tom: EP: 10/1/ Courtney: EP: 1	automatically rei /2018 – 9/31/20 10/1/2018 – 9/3	newed. )19 31/2019	
Tom	QHP	12/31/2016	Estrella: CHPlus: 10/1/2018 – 9/31/201 Mona: CHPlus: 10/1/2018 – 9/31/2019		9/31/2019 ′31/2019		
Courtney	Medicaid — She was re-determined MA eligible when she reported her pregnancy on 2/2/2016. She gets continuous coverage from that date.	1/31/2017	2018 July		6		
Estrella - 3 year old child	Child Health Plus	6/30/2017					
Mona - <sup>Baby</sup>	Medicaid — "Deemed" Medicaid baby born on 9/1/2016.	9/30/2017				29	47
47						Seller,	

Household Member	Current Program Eligibility	Coverage end	da
Tom	QHP	12/31/2016	
Courtney	Medicaid — She was re-determined MA eligible when she reported her pregnancy on 2/2/2016. She gets continuous coverage from that date.	1/31/2017	
Estrella - 3 year old child	Child Health Plus	6/30/2017	
Mona - <sup>Baby</sup>	Medicaid — "Deemed" Medicaid baby born on 9/1/2016.	9/30/2017	



October 2, 2016 Account ID: AC0000

te

Help at: 1-855-355-5777 TTY: 1-800-662-1220

#### NOTICE

#### IT'S TIME TO RENEW YOUR NY STATE OF HEALTH COVERAGE

Congratulations! You or members of your household can get health coverage through NY State of Health. Please read this notice carefully as some household members may need to take an action to continue their coverage for another year. Come back to our website, <u>www.nystateofhealth.ny.gov</u> between November 16, 2016 and December 15, 2016 to pick a plan.

#### Your Insurance Details

Courtney Snyder	Insurance Provider: Fidelis Care Type of Program: Medicald Coverage End date: Your coverage will end on January 31, 2017. <u>No Action Needed:</u> You will get a notice about renewing your coverage in December 2016.
Tom Snyder	Plan Name: Fidelis Care Type of Program: Essential Plan 1 Start Date: January 1, 2017
Estrella Snyder	Insurance Provider: Fidelis Care Type of Program: Child Health Plus Start Date: January 1, 2017
Mona Snyder	Insurance Provider: Fidelis Care Type of Program: Medicald Coverage End date: Your coverage will end on September 30, 2017
	No Action Needed: You will get a notice about renewing your coverage in July 2017.



# **Additional Information on Renewals**

# Renewal – Details

### Incarcerated individual on the account



- When an account is due to renew and one (1) member of the household is currently incarcerated and enrolled in Medicaid inpatient coverage only:
  - The incarcerated individual will not be eligible for automatic renewal.
  - The rest of the household will go through renewal (including automatic renewal) without the incarcerated individual's eligibility changing.



## **Renewal – Details** Aliessa details



- When an EP eligible individual's 5-year bar is ending, that individual will have their EP coverage terminated effective the last day of the month that the end of the 5-year bar is reached.
- When an individual age 20 with an Aliessa immigration status who is enrolled in Medicaid (FFP), their Medicaid coverage will terminate effective the last day of the month in which they turn 21.
  - The application will go through renewal (manual or automatic) in order to re-determine eligibility for these individuals.
  - This may occur even if this account has already been renewed within the past 12 months.

# Renewal – Details APTC – did not reconcile



- Under federal regulation, consumers may be found ineligible for tax credits in 2017 if they received APTC in previous years but:
  - o did not reconcile these credits using form 8962 when filing their 2015 taxes.
  - $\circ~$  did not file a return in 2015 or request an extension.
  - o did not file their 2015 taxes yet, but has requested an extension.
- Check "How We Made Our Decision" section of the notice which will include:
  - Step-by-step instructions on how to reconcile.
  - Assistor cannot assist with tax reconciliation or provide any information further than what is in the notice.
    - □ Also true for Customer Service.

# Renewal – Details APTC – did not reconcile



### The notice will say:

You're not eligible for a tax credit and income-based cost-sharing reductions (lower copayments, coinsurance and deductibles) for coverage through NY State of Health. This is because we're missing information about your taxes. This could be for one of the following reasons:

- You told us you don't plan to file a tax return.
- You're married and you told us you'll file taxes separately from your spouse.
- Advance payments of the premium tax credit were made to your health insurance company to reduce your premium costs in a prior year and we can't tell if a tax return was filed for that year.

### What Should I do Next?

- If a 2015 tax return with "Form 8962" wasn't filed for this household you must file a 2015 federal income tax return with "Form 8962" as soon as possible.
- If you filed a tax return in 2015, but didn't include "Form 8962" you may need to file an amendment to your tax return.
  - **Resources:** IRS, Federally Facilitated Marketplace, NY State of Health

### After you complete these steps:

• Log into your account and update your application.

# **Poll Question #3**



### When you log into the consumer's Marketplace account and you see this message,



### How should you proceed?

54

- A) Explain to the consumer that you cannot help them until their address is fixed and ask them to call the Call Center.
- B) Have the consumer verify the address in the account. If verified, explain that then they cannot re-gain coverage due to this system error.
- C) Verify with the consumer that the address in the account is <u>wrong</u>, then sign them up for electronic noticing.
- D) Review the address information with the consumer and update the information ASAP.

#### Invalid Mailing Address

- If a notice is mailed to the consumer and is returned by the US Postal Service as undeliverable with no forwarding address, the mailing address will show as invalid in the consumer's account.
- A notice will be posted to their account indicating the eligibility determination made based on the invalid address.
  - $\circ~$  MA/CHPlus eligible consumers will be determined ineligible for coverage.
  - APTC/APTC CSR/APTC-PP consumers will have their eligibility changed to Full Pay QHP.
- Consumer should update their address ASAP.
- If consumer verifies that address is correct Assistor should assist consumer in signing up for electronic noticing.



# **Questions?**





# Reminder Recertification Process

- All Assistors must view all webinars to be recertified.
  - Please keep track of the date that you watch this webinar
- The reporting process for recertification is currently being finalized and information will be forthcoming.





# Thank you for joining us! <u>Next Recertification Training:</u> Title: 2017 QHP Line-Up Date: October 26, 2016