

Implementation of the ACA

Where we are now and what still has to be done

Kate Breslin
President and CEO



February 7, 2013

Context for Change

- ☐ Implementation of Affordable Care Act (ACA)
- ☐ New York Medicaid Redesign, Waiver
- ☐ Medicaid Managed Care
- ☐ Payment reform
- ☐ Care coordination
- ☐ Electronic Health Records
- ☐ Focus on quality and outcomes

ACA Refresher

- ☐ States establish Exchanges as “places” to buy coverage.
- ☐ Tax credits for individuals and small businesses to purchase coverage.
- ☐ Medicaid expansion.
- ☐ CHIP reauthorized through 2019.
- ☐ Extended Medicaid for foster youth.
- ☐ Requires pediatric dental & vision benefit for kids.

ACA Opportunities

- Continuity of coverage/seamlessness.
- One-stop portal and increased outreach.
- Connect kids and parents to coverage and care.
- Robust benefits for kids/mental health.
- Focus on measuring and reducing disparities.
- Focus on measuring and improving quality.
- Maternal, infant, early childhood home visiting.

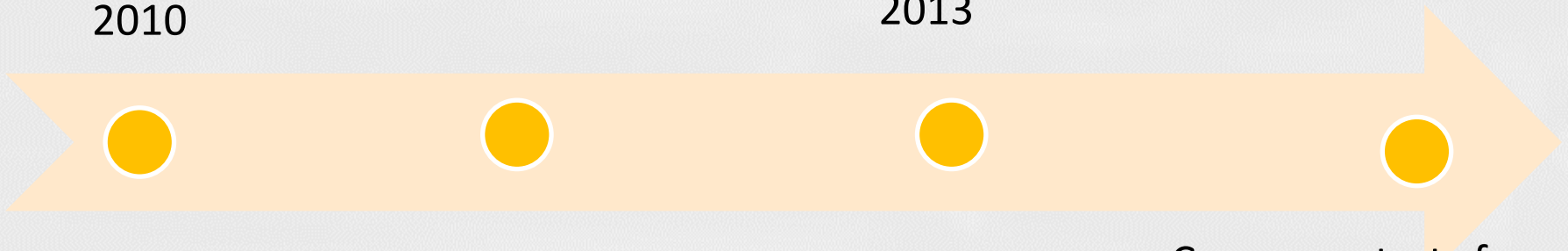
Timeline

ACA signed
March
2010

Supreme Court
Ruling
June 2012

Exchange
Enrollment
October
2013

Coverage starts for
Exchange/Medicaid
Expansion Starts
January 1, 2014



Reform



Exchange

- Eligibility & Enrollment
- Tax Credits



Medicaid

- Expansion
- Good benefits



Child Health Plus

- Continued until 2016
- Up to 400% FPL

ACA Provisions In Effect

- Medicaid Expansion
- Age 26
- Prohibition of lifetime limits
- Pre-existing conditions for children
- Free preventive services
- Increased support for health centers
- Funding for School-Based Health Centers

The Big Picture of the ACA

- Primary care workforce: scholarships, increased payments, diversity incentives.
- Prevention & Public Health Fund.
- Funding for community health centers and rural providers.
- Innovation in delivering quality at lower costs.
- EHR and electronic information exchange.

ACA Coverage and Enrollment

- New insurance infrastructure for low- and moderate-income individuals without employer coverage.
- Seamless and transparent processes for determining eligibility for subsidies and or enrolling people in health insurance coverage.
- New York will vertically integrate across income levels so there is “no wrong door” for publicly subsidized or private coverage.

To be done this year...

- Conform New York State laws to ACA.
- Exchange up and running October 1 for enrollment.
- Develop Navigator and Assistor Programs.
- Roll out public awareness campaign.

New York State Executive Budget

- Changes to state law to conform with ACA:
 - ☐ Definition of covered populations
 - ☐ Defining household and income
 - ☐ Eligibility verification and renewal
- Defines Medicaid Benchmark Benefit for expanded population.
- Eliminates Family Health Plus in 2015.
 - ☐ No new enrollees after December 31, 2013
 - ☐ Transfers to Medicaid or Exchange in 2014

Navigators and In Person Assistors

- Teach people insurance options and assist in enrollment.
- Trained to provide accurate information.
- Culturally competent and language accessible.
- One-stop for all programs.
- Should be in every county.

Public Awareness

- Branding and Marketing.
- Develop materials and campaigns.
- Outreach to communities and populations.

ACA Implementation Resources

■ Federal Healthcare Reform

□ <http://www.healthcare.gov>

■ New York State's Reform Website

□ www.healthcarereform.ny.gov

■ New York's Exchange Website

□ <http://healthbenefitexchange.ny.gov/>

■ Health Care For All New York

□ www.hcfany.org

Foster Care

- Expands Medicaid coverage to former foster care youth to age 26.
- Had to be in state's care and in Medicaid at 18.
- Proposed regs out now.
 - Will be eligible for full Medicaid.
 - All you who turned 18 in foster care between 2007 and 2013 should be eligible.
 - As long as they have not turned 26 on 1/1/2014.

Kate Breslin

kbreslin@scaany.org

www.scaany.org

