



# About MNsure

*Minnesota's health insurance marketplace*

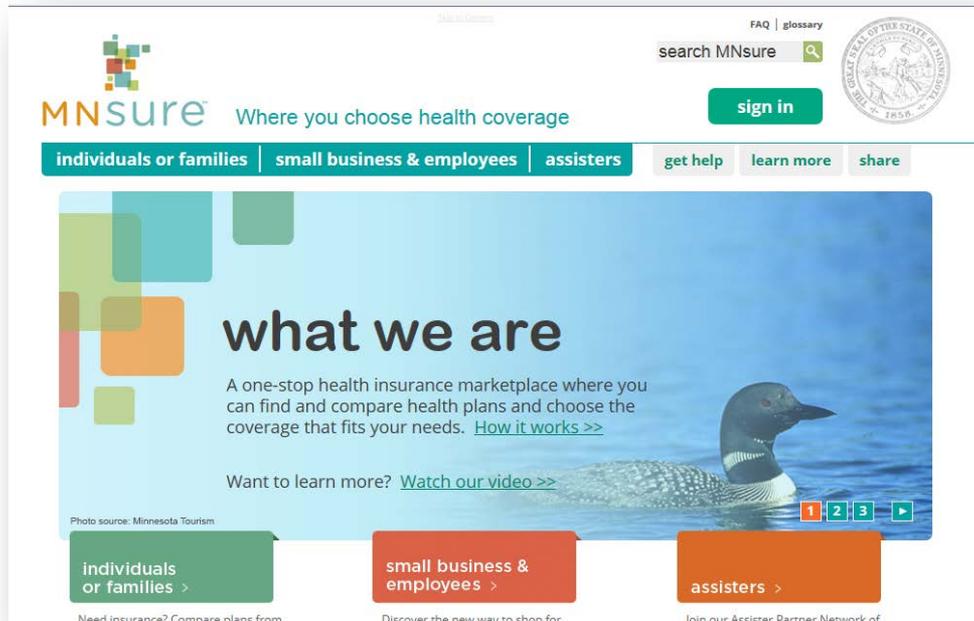
May 22, 2014

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# what is MNsure?

A new marketplace where Minnesotans can find, compare, choose and get quality health care coverage that best fits your needs and your budget...



...and the place to see if you qualify for financial assistance or Medical Assistance and MinnesotaCare.

# why MNsure?

Subject of ongoing dialogue in Minnesota since 2006

Provision within the federal **Affordable Care Act (ACA)** enacted in March 2010

State-based marketplace signed into law by Governor Dayton in March 2013



# general advantages

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- Transparent, competitive market with better information and more choices
- The ONLY place to qualify for a low-cost or free plan
- Lowest premiums in the country
- Larger risk pool from more Minnesotans being covered
- Defined contribution and employee choice of insurers and plans
- Easier administration for employers
  - One bill regardless of how many plan choices offered
  - MNsure handles billing, reconciliation and renewal

# MNsure is for you

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- Uninsured
- People who buy health coverage on their own
- People who are seeking a better option
- People who qualify for Medical Assistance (MA) or MinnesotaCare
- Small employers and employees



# your benefits

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- **Choice:** One-stop shopping with a broad range of plans from multiple insurance companies.
- **Clear Information:** MNsure describes each plan in plain language so you can compare them.
- **Streamlined Application:** You only need to fill out one application for you and your family for all coverage options in MNsure.
- Individuals can **no longer be denied coverage or be charged a higher premium** for coverage because of their medical history.
- **No annual or lifetime benefit limits** on coverage.
- **No exclusions or waiting periods** on medical plans for individuals with pre-existing health conditions.

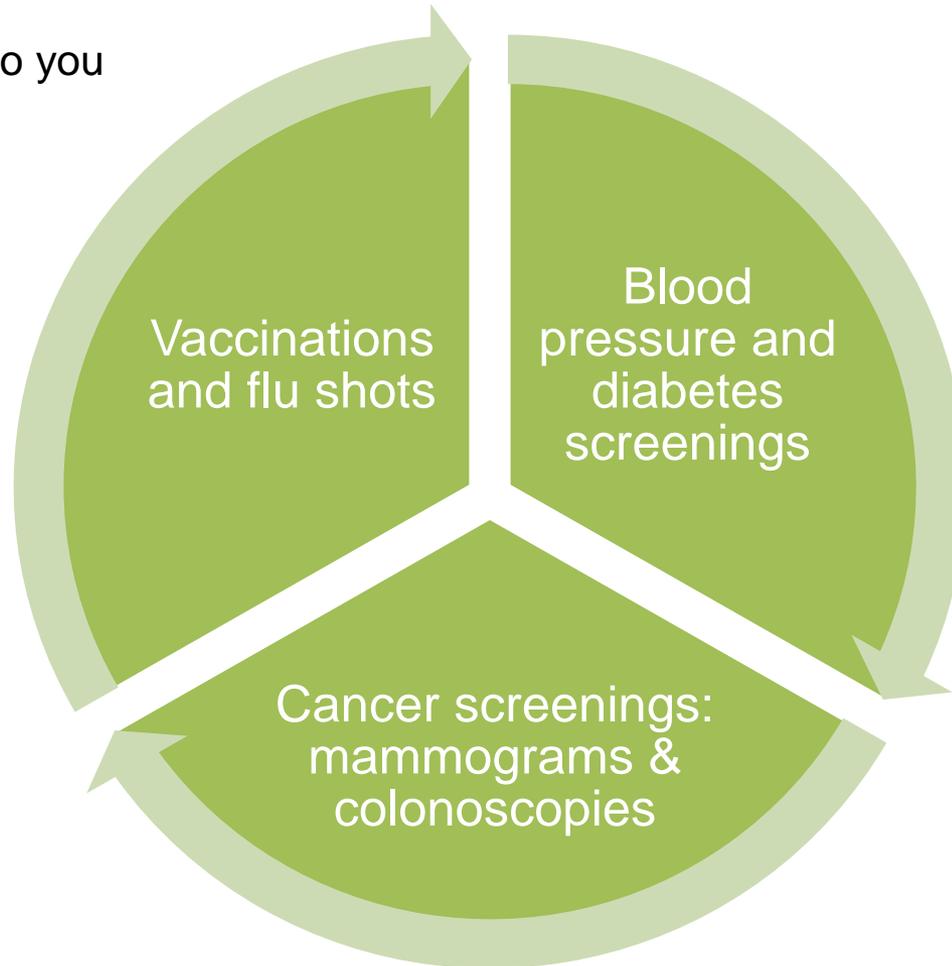
# health plans with quality benefits

- Hospitalizations
- Ambulatory services
- Rehabilitative and habilitative services and devices
- Emergency services
- Prescription drugs
- Laboratory services
- Maternity and newborn care (pregnancy, childbirth and breast-feeding support)
- Pediatric dental and vision care
- Mental and behavioral health



# preventive services

- At no cost to you



# American Indian benefits

## American Indians or those who qualify to use IHS or Tribal Health Services can expect:

- **Consistent Care.** Can continue to get care from IHS, Tribal or Urban Indian Healthcare Facility.
- **No cost-sharing.** Won't pay for any service from an IHS, Tribal or Urban Indian Healthcare Facility. May also qualify for cost-sharing at any in network doctor/provider for covered services depending on income.
- **Tribal sponsorship.** Some Minnesota Tribes will pay insurance premiums. Contact your tribal clinic.

## In addition, American Indians are:

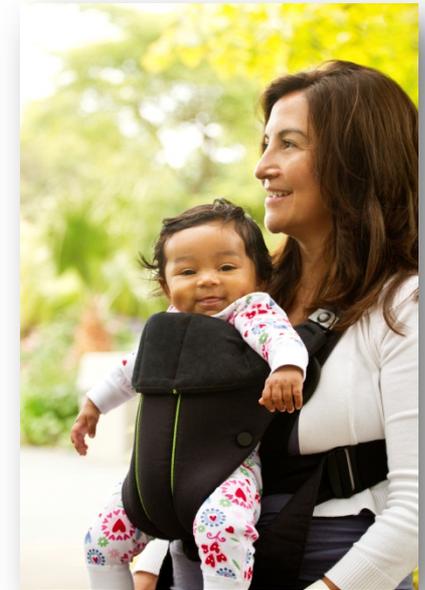
- Entitled to change health plans once a month, if desired.
- Exempt from the federal mandate requiring all individuals to purchase health insurance.
- Exempt from federal tax penalties for not having coverage.



# tax credits

Only through MNsure can you qualify for a tax credit that can lower your monthly premium.

- Individuals making up to \$22,980 - \$45,960
- Families of 4 with incomes between \$47,100 - \$94,200



# cost-sharing reduction

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- People within 200-250% of FPL will get support to pay co-pays, deductibles and/or co-insurance
  - Individuals earning \$22,980 - \$28,725
  - Families of 4 earning \$47,100 - \$58,875
- Everyone who buys coverage through MNsure will have a cap on their total out-of-pocket spending (includes deductibles, co-pays, co-insurance) for covered services offered by in-network providers
  - Maximum for individual is \$6,350
  - Maximum for family is \$12,700
  - Some plans offer lower out-of-pocket maximum costs

# Medical Assistance (MA) and MinnesotaCare

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- Qualification has been both expanded and made simpler
- Find out if you qualify through MNsure
- Costs are either free or minimal
- Benefits are comparable to private insurance and include other services (e.g. transportation)
- You can also get information from county or community organizations

# MinnesotaCare premiums

FPG Greater Than or Equal To	FPG Less Than	Individual Premium Amount (per month)
130%	140%	\$21
140%	150%	\$25
150%	160%	\$29
160%	170%	\$33
170%	180%	\$38
180%	190%	\$43
190%	200%	\$50

# what you pay

In 2014, factors that affect health plan premiums:

- If you are an individual or family
- Where you live (geographic area)
- Your age
- Whether you use tobacco



# what you pay

People in Household	Annual Income				
	Up to	Up to	Up to	Up to	More than
1	\$15,282	\$22,980	\$31,597	\$45,960	\$45,960
2	\$20,628	\$31,020	\$42,652	\$62,040	\$62,040
3	\$25,975	\$39,060	\$53,707	\$78,120	\$78,120
4	\$31,322	\$47,100	\$64,762	\$94,200	\$94,200
5	\$36,668	\$55,140	\$75,817	\$110,280	\$110,280
For each additional person, add	\$5,347	\$8,040	\$11,055	\$16,080	

MA for adults - \$0 cost per month.

MinnesotaCare for adults - \$21-\$50 monthly cost per adult

Tax credits for private coverage for adults. Monthly cost as low as \$0 after tax credits.

As low as \$77 per month per adult and lower for kids. Not eligible for tax credits.

MA for children ages 0-18 and pregnant women - \$0 cost per month.

Tax credits for private coverage for children.

# health plans



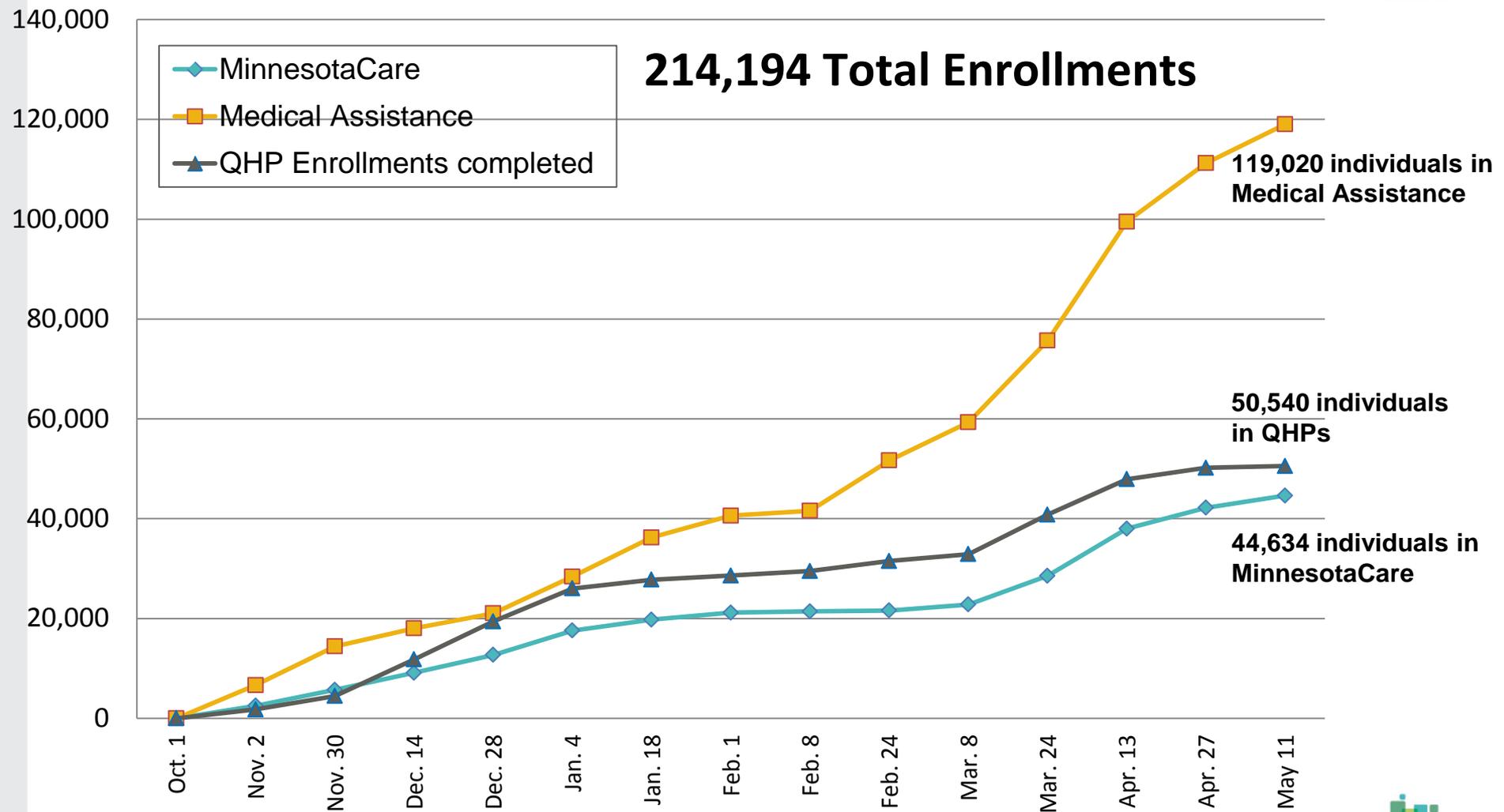
Insurance Companies with individual/family plans:

- Blue Cross Blue Shield
- PreferredOne
- HealthPartners
- UCare
- Medica

Levels of Coverage	Plan Pays on Average	Enrollees Pay on Average (in addition to the monthly plan premium)
Bronze	60 %	40 %
Silver	70 %	30 %
Gold	80 %	20 %
Platinum	90 %	10 %

# Enrollments by Program

## May 11, 2014

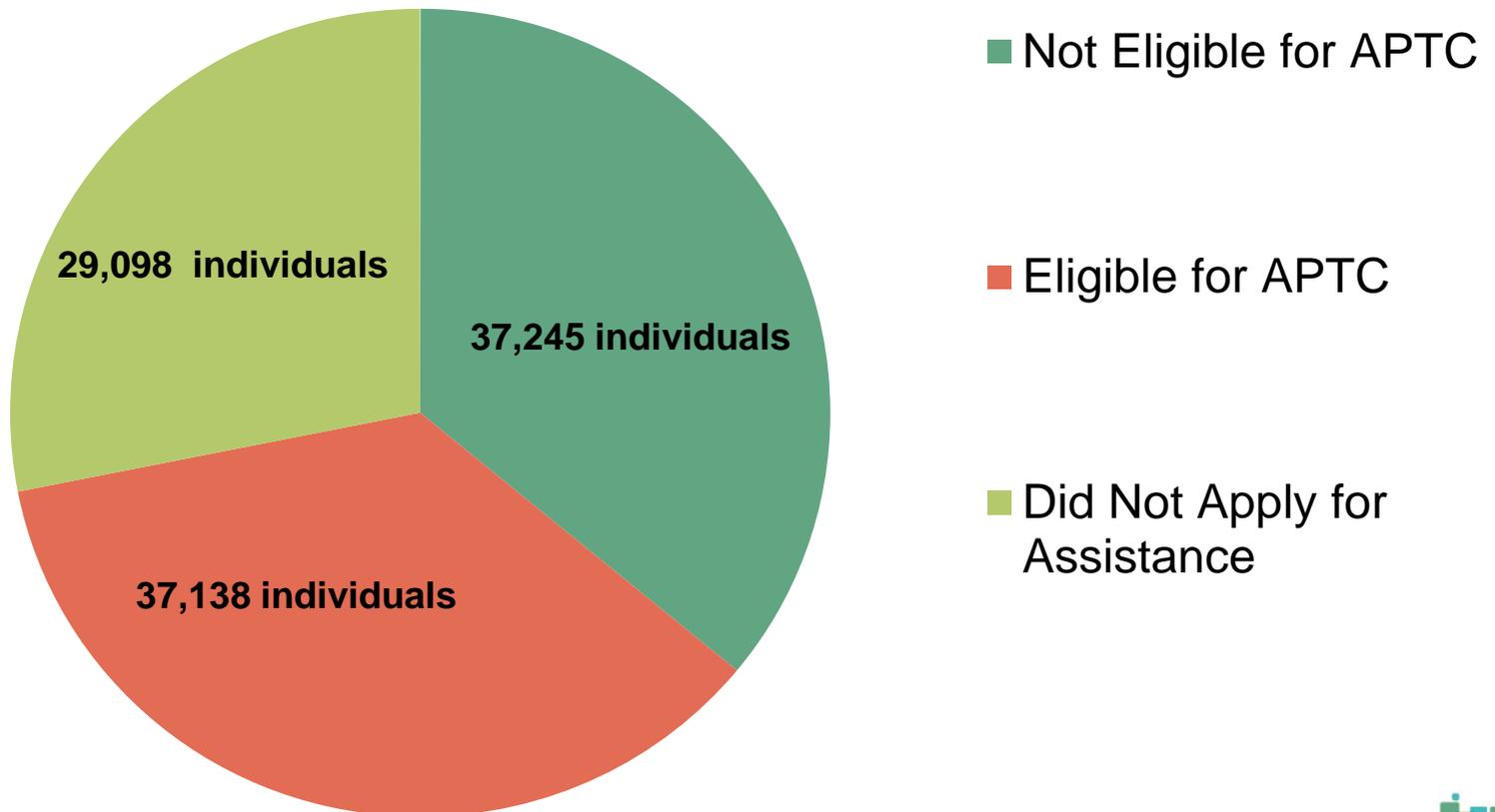


Note: Manual QHP enrollments have been included since March 23

# Eligibility of QHP Applicants

## May 11, 2014

### Number of Applicants Applying for Coverage



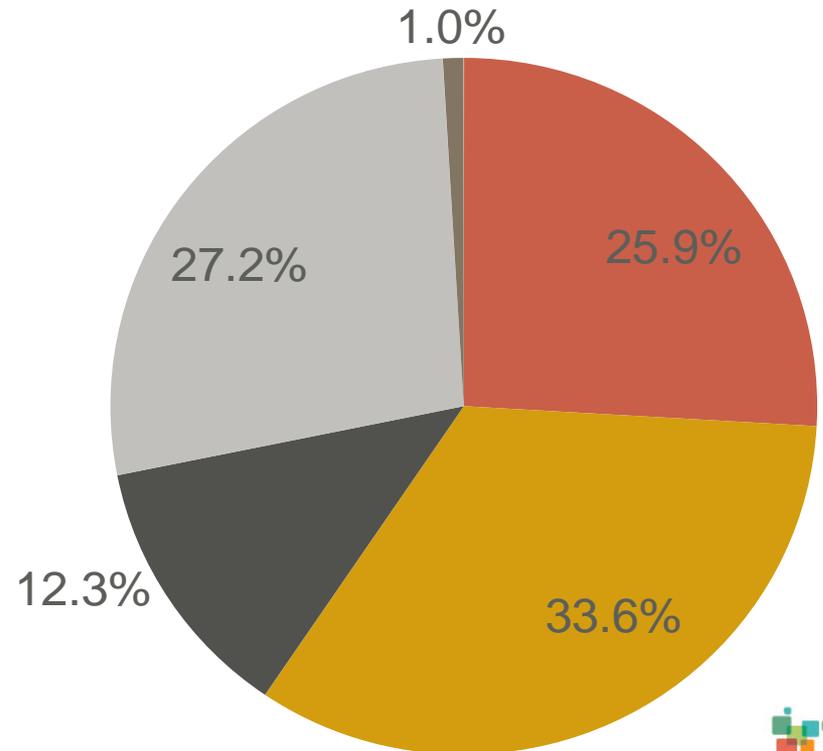
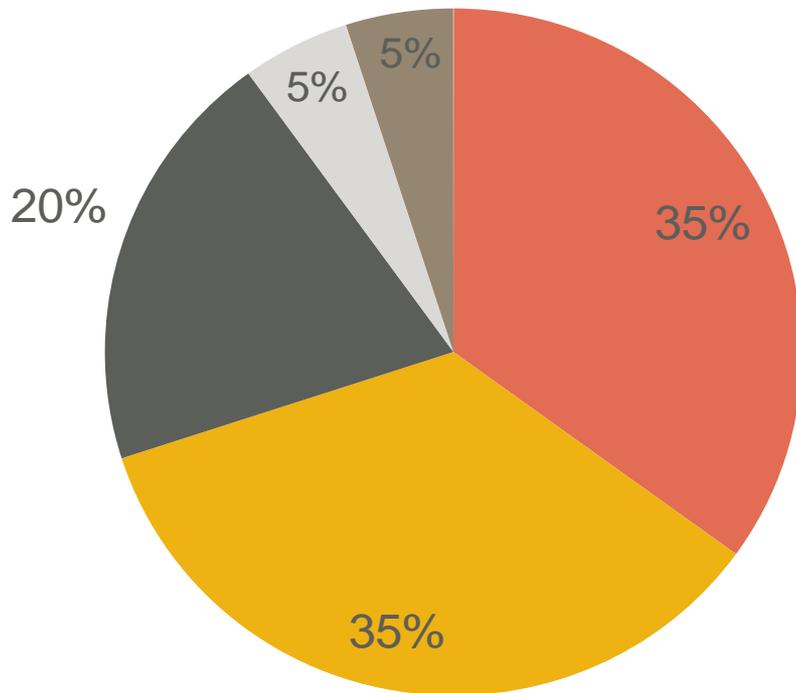
# Individual Market: Metal Levels

## May 11, 2014

### Projected Metal Level Selection

### Actual Metal Level Selection

■ Bronze ■ Silver ■ Gold ■ Platinum ■ Catastrophic

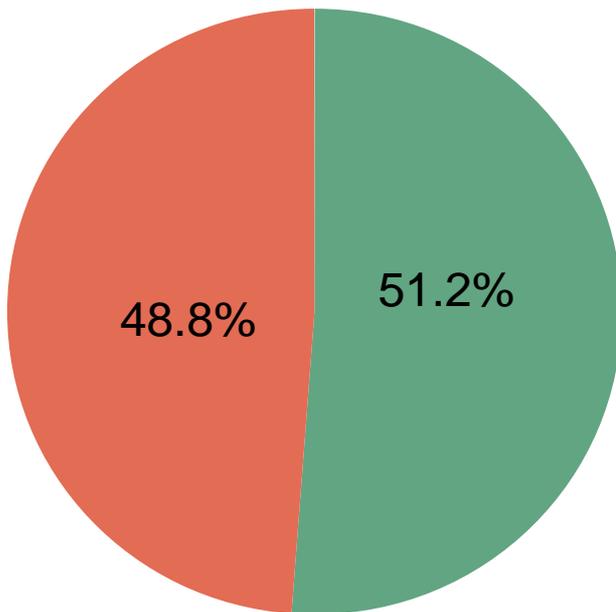


# Individual Market: QHP Enrollee Demographics

## May 11, 2014

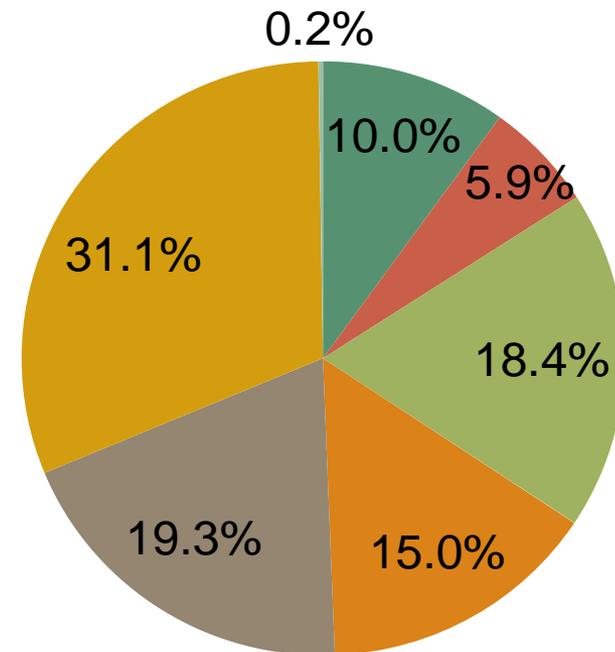
### Gender in QHPs

■ Female ■ Male



### Age of Enrollees

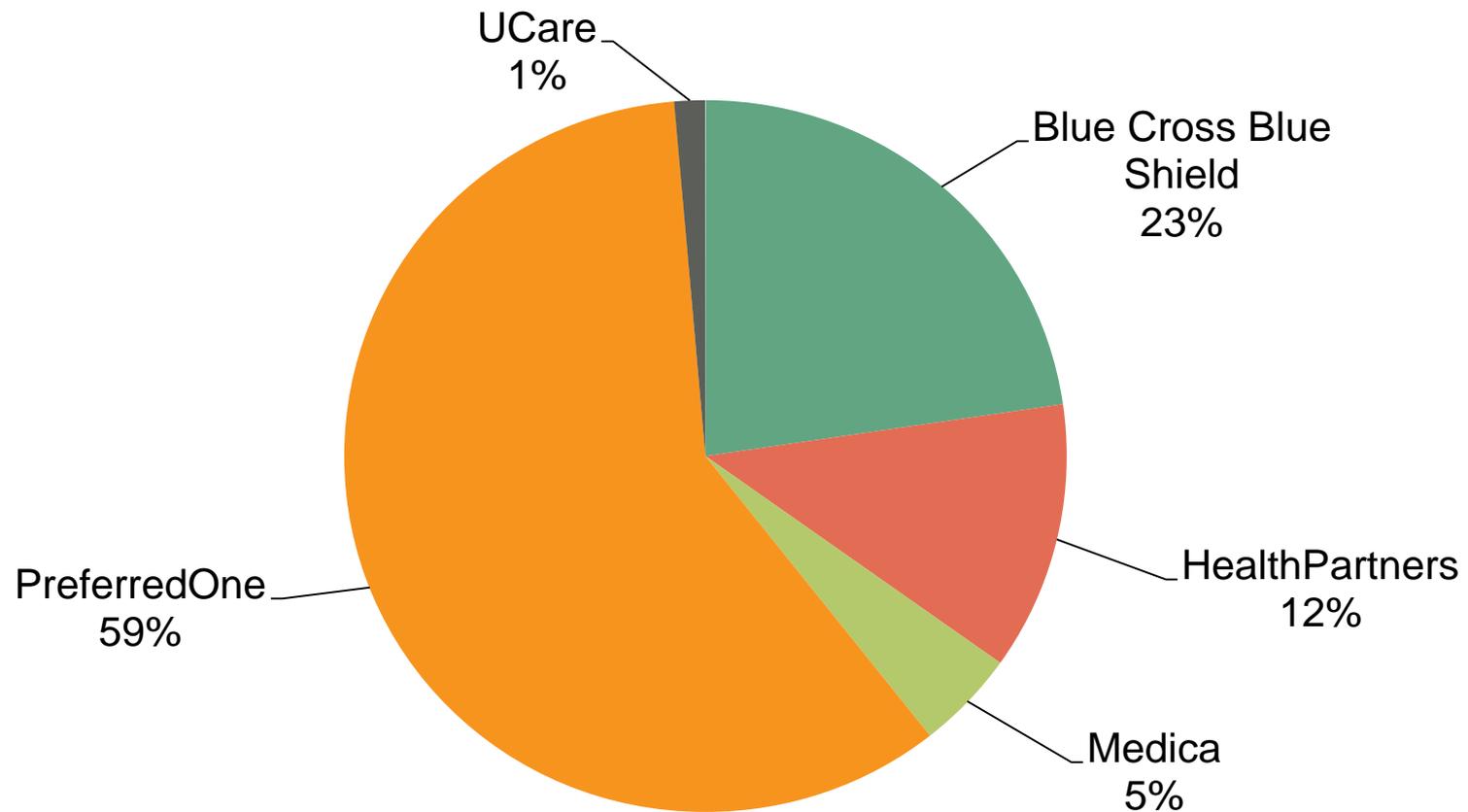
■ 0-18 ■ 19-25 ■ 26-34  
■ 35-44 ■ 45-54 ■ 55-64



# Individual Market: Enrollees by Carrier

## May 11, 2014

### Percent of Enrollees by Carrier



# Individual Mandate



Beginning January 1, 2014, all U.S. citizens and legal residents will be required to obtain health insurance coverage.

## Exceptions

- Individuals and families below a certain income
- People who cannot afford the coverage that is available
- Individuals who have been uninsured for less than 3 months
- Member of American Indian tribes
- People who do not obtain coverage because of religious objection

Starting in 2014, if you don't have health insurance, you will pay a tax penalty. The penalty will increase over time.

- In 2014, it will be the greater of \$95 per adult, or 1% of taxable income
- In 2015, it will be the greater of \$325 per adult, or 2% of taxable income
- In 2016, it will be the greater of \$695 per adult, or 2.5% of taxable income
- After 2016, the tax penalty increases annually based on a cost-of-living adjustment
- The penalty for a child is half that of an adult

# when to enroll

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- First Open Enrollment for individuals and families ended March 31, 2014. Next Open Enrollment period begins November 15, 2014.
- Individuals with qualifying life events can enroll year-round.
- Members of federally-recognized tribes may enroll or change plan designations one time per month
- Small employers can enroll/renew throughout the year at one time of their choosing
- Individuals may apply and be eligible for Medical Assistance and MinnesotaCare throughout the year

# Questions?

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**mnsure.org**

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