

Navigating Health Insurance:

What Non-Profits Need to Know

Presented in partnership with



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Health Insurance today:

“On-Exchange”

“Off-Exchange”

Health Insurance Mandate

Premiums, Subsidies & Out-of-Pocket Maximums

“SHOP”

Open Enrollment vs. Special Election Period

Provider Networks - Application Process

Tax Penalties

Group vs. Individual Coverage

***Health Insurance today = Expensive and
Confusing***

Brave New World

How does this apply to non-profits?

- It depends on the entity
- Large groups have different needs than small groups
- Small groups: Do you “need” to offer health insurance?
- Financials matter – Health insurance is expensive
- Different organizations have different needs
- ***NEW! Group vs. Individual option***
- Various approaches, new strategies available

A question for non-profits:

“To offer coverage or not to offer coverage...that is the question”

...and you have options

Some more detail: Small group

- A good selection of “small group” plans available
- Plan Tiers – Bronze, Silver, Gold, Platinum, but with varying plan designs **(8 insurers in CT, 100+ plans)**
- The “business entity” holds – and controls - the contract
- Benefits – and premiums – are slightly more robust than in the individual market
- SHOP Exchange & other platforms
 - CBIA
 - AccessHealthCT Small Biz*
 - Other “private” exchanges

Questions for non-profits to ask...



Do we need to offer benefits?

If so, which ones, and how?

How much will it cost?

Who manages the plan?

Do we want the obligation?

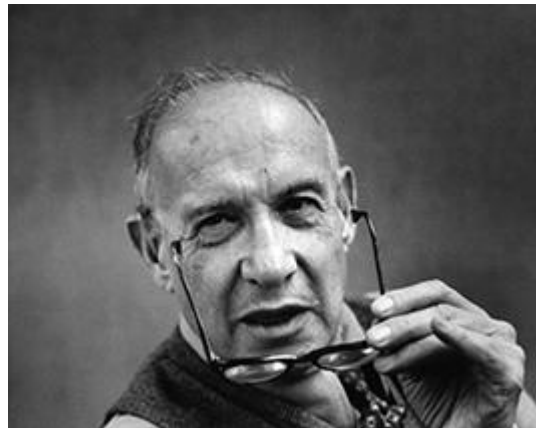
***What about other benefits,
such as dental?***

*Various options, creative
approaches*

Options in the individual market

“With the advent of the ACA, there are more options than ever for individual consumers – but navigating the choices can be a maze”

Peter Drucker



“On exchange” vs. “Off exchange”

- “On exchange”: AccessHealthCT (4 carriers, 38 plans)
- “Off exchange”: Go “direct” (8 carriers, 75+ plans)
- The only reason to go through the exchange is if you qualify for a federal premium subsidy or HUSKY (Medicaid)
- Applying through the exchange can be a detailed process – government programs / funding involved – but the “carrot” could be a significant cost reduction through tax credits
- Applying directly with an insurance company is reasonably streamlined process – however you pay full price

A word on premium subsidies

Only available through the Exchange, based on 2015 income



# People in Family / Household	Income* threshold
1	\$46,680
2	\$62,920
3	\$79,160
4	\$95,400
5	\$111,640
6	\$127,880
7	\$144,120
8	\$160,360

*Modified Adjusted Gross Income

Subsidies can range from \$100 to over \$2,000 per month!

Note: Premium Subsidies = Advanced Premium Tax Credits

“On exchange” vs. “Off exchange”: Case studies

Case Study #1: “On-exchange” broker-assisted review and application through AccessHealthCT:

- Client: Family of 3, parents age 55 and one child age 15; self-employed
- Expected 2015 income \$70,000 (“MAGI”) - approved for a \$958 per month Advance Premium Tax Credit
- Result: Enrolled in a United Healthcare Silver plan for \$641 per month
- Total premium for this plan would have been \$1,599 per month; the \$958 federal premium subsidy reduces the billed premium to \$641

“On exchange” vs. “Off exchange”: Case studies

Case Study #2: “Off-exchange” broker-assisted review of health plans available in the direct market:

- Client: Family of 4, parents age 50 and two children ages 12 and 14; currently between jobs
- Expected 2015 income is unclear and did not want to enroll in HUSKY. Their COBRA coverage costs \$1,650 per month and they wanted to switch during Open Enrollment
- Result: Enrolled in an off-exchange ConnectiCare plan with a similar deductible for \$1,028 per month
- The family was delighted to save \$622 per month by shopping around

Glossary of Acronyms

ACA = Affordable Care Act (aka “Obamacare”)

QHP = Qualified Health Plan

APTC = Advance Premium Tax Credit (aka subsidy)

EHB = Essential Health Benefits

HUSKY = CT Medicaid Program

QHP Issuer = Health Insurance Company

PDP = Prescription Drug Plan (Medicare)

MA = Medicare Advantage Plan (aka “Part C” plan)

In closing...with Health Insurance...

***“Everything’s changing...
...all the time”***

Thank you!



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