



NC Get Covered Coalition Meeting – OE4 Updates and Engagement Strategies

Friday, December 16, 2016, 10:00 a.m. to 11:30 a.m.

Wake County Commons Building, Room 100A, 4011 Cary Drive, Raleigh

Meeting Notes

NC Department of Insurance Update on CMS Award

- **Please find PPT slides attached.**
- New position available at DOI – Looking for someone with a mental health background who can speak authoritatively about the issues
- This award from CMS cannot be pulled back through budget reconciliation. The law allows for the use of money left over for premium rate review.

OE4 Marketplace Data & Connector Update

- Getting a lot of positive media/ want to talk to people who like the ACA
- Over 45,000 appointments made available (8,000 more than OE3) and 6,600 appointments filled
- HHS released data on Wednesday/ fewer people have enrolled/ went from 6,700 per day to about 6,000
- Not a lot of people are actively re-enrolling
- Tricky to get message out about enrollment deadlines for United Health Care and Aetna customers
- Emphasize key messages – e.g., pay your premium!
- Factors contributing to decline in enrollment: Media, political environment, and fewer agents and brokers

Partner Updates – OE4 Activities, Successes and/or Challenges

- Brendan Riley, NC Justice Center – Focusing on story collection and scenario planning
- Jan Plummer, Mountain Projects – Averaging 2 enrollment events per week with 40-60 people per event/ 1,800 people have enrolled in western NC so far.
- Linda Cecarelli, Aetna – In the Triangle, members got mapped to Cigna (UNC-based vs. Duke-based)/ reaching out to members on chronic meds/ working with BCBSNC
- Lance Goller, Blue Ridge Community Health Services – Issues with consumers who fall in the Medicaid gap
- Andy Landes – Community event on Wednesday, December 21 at 1:30pm at Capital Towers in Raleigh – What is the ACA?
- Mary Powell, Alcohol/Drug Council of NC – First ACA Christmas Parade float/ wore superhero costumes and danced
- Joe Langley, UNC Wayne Health – Set up 12 iPads in kiosks/ 120 people said they wanted to be contacted

- Chery Hallock, Access East – Enrolled 90 consumers

Binder Payments and Key Dates

- Most 2017 Marketplace consumers must make a binder payment to effectuate coverage. This is important because the insurance company needs the binder payment in order to start coverage.
 - This includes 2016 Aetna or United consumers transitioning to Blue Cross or Cigna. **They must make a binder payment to start January 1 coverage (whether they actively select a plan or are automatically enrolled into a plan).**
- If binder payment is not received by due date, application is terminated. Grace periods do not generally apply to this first payment. No coverage, no insurance ID card, uninsured. Consumer will need to through application process again before the end of Open Enrollment to get coverage. Coverage won't start until later in 2017.
- Blue Cross Blue Shield & Cigna—payment due by December 31st for coverage effective January 1.
 - According to Blue Cross-- To help ensure that your ID cards arrive on time, however, it's best to make your first payment by early December.
- More information about Blue Cross Blue Shield payments can be found on their blog: <http://blog.bcbsnc.com/updates/>

Q&A with BCBSNC representative

- **Q:** If a consumer enrolls in a plan in which their portion of the premium is nothing (\$0), do they need to do anything to effectuate coverage?
A: \$0 premiums are automatically enrolled once we receive the 834 file from healthcare.gov.
- **Q:** Is there some sort of threshold under which consumers with very low premiums wouldn't have to pay the binder (or being late would be ok)?
A: There is no threshold for small binder payments. All has to be made by the deadline.
- **Q:** If a 2016 Aetna or UnitedHealthCare consumer enrolls from December 20-December 31 through the Special Enrollment Period, do they still need to pay the binder by December 31 or will they have additional time? If they enroll on December 30 or 31 (less than 48 hours before the deadline), how can they go about making sure the payment gets in if they can't pay online?
A: For Blue Cross Blue Shield, any enrollments done from the 20th-31st fall under SEP rules; the individual has 30 days from the date of transaction (when the application is submitted) to make the binder payment. Cigna enrollees should check with Cigna to confirm due dates.
- **Q:** If a consumer misses the binder payment and has to go through the process again, it is believed they must redo their application and plan selection on the Marketplace. Logistically, how does this happen?
A: The Marketplace should still show the plan selected details, and the individual will just have to "re-choose" the plan.

- **Q:** Since December 31 is a Saturday, will folks still be able to pay over the phone on that day? Will there be any Blue Cross call center representatives available to talk to people if they have issues on that day?

A: BCBSNC will have limited customer service support, primarily for members that need emergency assistance (i.e. getting an Rx filled), but not any support for application issues.

Update on Story Collection Efforts

- Please help the NC Justice Center collect consumer stories and educate lawmakers about the importance of coverage by logging onto www.keepnccovered.org
- You can participate even if you are not allowed to advocate
- Sign your name on the petition
- If you have questions or concerns, please contact Brendan Riley at brendan@ncjustice.org