

October Messaging

Talking Points

October 2015

- Open Enrollment begins in less than a month on November 1st and will run through January 31st. Open Enrollment is the time for anyone without insurance to apply for coverage, and for current members to switch plans for any reason, particularly if their needs have changed or if their premium has changed significantly. It is also the time of year when individuals and families can shop for health insurance for any reason without needing a qualifying event.

Renewal Notice

- In the beginning of October, the Health Connector will begin the process of determining final eligibility related to 2016 coverage that will create Health Connector members' renewal notices.
- In mid – late October, Health Connector members eligible for 2016 renewal will receive their renewal notice from the Health Connector, detailing their 2016 plan and eligibility information, including monthly premium rates and tax credit amount (if they are eligible). (See attached for talking points dedicated to this notice).
- Members will be informed in the October renewal notice as to whether their plan is still available in 2016. If the same plan is not available in 2016, members will have the option to renew into a similar plan that offers benefits that most closely resemble their current plan. If their carrier is still available to them, they will stay with the same carrier. This plan will be displayed in their renewal notice and will also be highlighted in a green box when the member logs into their online account on or after November 1st to review 2016 plans.
- MassHealth members will not be affected by the renewals process done by the Health Connector; however, mixed households with MassHealth and Health Connector members will receive notices related to the Health Connector enrollees.

Choosing a 2016 Plan

- Even if a member can remain in the same plan for 2016, they should review any changes that may have been made to that plan, including premium changes. Members can review differences between the 2015 and 2016 out-of-pocket costs for health services in their plans by visiting www.MAhealthconnector.org/compare-plans starting on October 12th.
- If members are happy with their current plan or the plan they given the option to renew into for 2016, they need only pay their premiums to remain enrolled for 2016. Members should review their plan for 2016 and consider any premium changes or changes in benefit needs for them or their family. If their premium has changed for 2016, they should make sure to pay the new premium in December. If they are enrolled in recurring EFT payments, the new amount for 2016 will automatically be deducted in December.
- If a member decides that they would like to review other options to shop during Open Enrollment, 2016 plans can be reviewed and selected starting November 1st when Open Enrollment begins.

- Members are encouraged to discuss their plan options with an Enrollment Assister if necessary, in order to ensure they are getting the plan that best meets their needs in 2016. A list of Enrollment Assisters can be found at www.MAhealthconnector.org/help-center

Eligibility Changes

- Members who are not eligible will receive a Health Connector denial notice. Members who receive a denial notice are individuals who were determined eligible for MassHealth Limited, Health Safety Net (HSN), or Children's Medical Security Plan (CMSP) but **ineligible** for Health Connector plans. Due to the renewal process, there will be an increase of denial notices sent to members. (see attached talking points)
- A number of members may be found newly eligible for other types of insurance, such as Medicare or Employer-Sponsored Insurance (ESI), causing them to lose subsidized coverage through the Health Connector.
- Members who are found newly eligible for MassHealth for 2016 will not receive a renewal notice and, rather, will be sent additional information from MassHealth.

Department of Revenue (DOR) Letter

- Throughout October and early November, DOR, on behalf of the Health Connector, is sending a letter to self-reported uninsured residents of Massachusetts, educating them about affordable coverage available through the Health Connector. (See attached for talking points dedicated to this letter).
- Key messages in this letter are:
 - Coverage through the Massachusetts Health Connector is affordable and high quality.
 - Apply through MAhealthconnector.org to find out if you qualify for coverage through the Health Connector or MassHealth.
 - There are many locations where you can get free, in-person help with applying and enrolling.

Key Takeaways:

- Open Enrollment starts in about three weeks, on November 1st, and is the time when anyone without health insurance can apply for coverage through the Health Connector.
- Remember, members who are happy with their health insurance plan, and do not have any reason to change their information and their plan, do not have to take action. As long as they **continue to pay their premiums**, they will be able to stay in their same plan (or a similar renewal plan) into 2016.
- Encourage members to review their renewal plans, including monthly premium, out-of-pocket costs, and provider networks, even if they have the same plan as they did in 2015. While it

may be the same plan or the most similar to their 2015 plan, some details in the plan benefit design may be different next year. New online tools, including the plan comparison website (www.MAhealthconnector.org/compare-plans) and Find a Provider tool (ProviderDirectory.MAhealthconnector.org), make it easier for members to find the information they need in order to make an informed choice about their 2016 coverage.

- Of note, if members have an eligibility change that makes them eligible for a new program in 2016, they should pay special attention to the changes in their out-of-pocket costs and monthly premiums. Some members may need help in understanding why changes are happening and what their options are for finding a plan they can afford that meets their needs for 2016.