

FEDERAL HEALTH CARE REFORM RESOURCE PAGE

This page contains basic resources for consumers and employers about the federal Patient Protection and Affordable Care Act (PPACA) or (ACA). More information is available from the federal government at www.HealthCare.gov or www.Marketplace.cms.gov.

Federal Resources

- www.HealthCare.gov Consumer site for eligibility, plan comparisons, subsidy and cost sharing reductions, enrollment and Q&A.
 - **Individuals, employees, agents/brokers:** Toll-free FFM Call Center available 24/7 @ 1-800-318-2596 or TTY 1-877-871-6594.
 - **Employers, agents/brokers:** Toll-free FF-SHOP Call Center M-F 8-4PM CDT @ 1-800-706-7893 or TTY 1-800-706-7915
- Timeline: What's Changing and When (<http://www.hhs.gov/healthcare/facts/timeline/index.html>) provides a year by year summary of PPACA provisions.
- FAQ's: Prepared Jointly by the Department of Health and Human Services, Labor and the Treasury. (<http://www.dol.gov/ebsa/healthreform/>)
- Taxes: Internal Revenue Service (IRS) (<http://www.irs.gov/uac/Affordable-Care-Act-Tax-Provisions>) provides a summary of tax-related provisions.
- Regulations: Center for Consumer Information and Insurance Oversight (CCIIO) (<http://www.cms.gov/cciiio/resources/regulations-and-guidance/index.html>) is a source for federal regulations and guidance.
- Compilation of Patient Protection and Affordable Care Act: <http://housedocs.house.gov/energycommerce/ppacacon.pdf> the full text of the law.

Federal Reform Insurance Provisions

- A federally-created marketplace is scheduled to begin Open Enrollment for individuals and small employer coverage on October 1st, 2013 for coverage beginning January 1st, 2014. People with incomes between 100 and 400

percent of federal poverty level may be eligible for premium and cost sharing reductions. (<https://www.healthcare.gov/will-i-qualify-to-save-on-monthly-premiums/>)

- Find more information on www.healthcare.gov

Essential Health Benefits

- The health care reform law requires individual and small employer group plans to cover a minimum package of essential health benefits beginning in 2014. (<https://www.healthcare.gov/what-does-marketplace-health-insurance-cover/>)
- The essential health benefits package is based on the coverage offered in the most popular plan in Oklahoma small group market BCBSOK Blue Options. Oklahoma Plan Summary and More Information (<http://www.cms.gov/ccio/resources/data-resources/ehb.html#oklahoma>)
- Preventive Care – Individual and small and large employer plans are required to provide certain preventive care service without cost sharing. (<https://www.healthcare.gov/how-does-the-health-care-law-protect-me/#part=8>)

Preexisting Conditions

- In 2014, health insurers must offer coverage to all individuals and employer groups, regardless of health status. More information on pre-existing conditions. (<https://www.healthcare.gov/what-if-i-have-a-pre-existing-health-condition/>)

Individual Mandate

- Beginning January 1, 2014, most consumers will be required to have qualifying health insurance coverage. More information on the Individual Mandate. (<https://www.healthcare.gov/what-if-someone-doesnt-have-health-coverage-in-2014/>)

- Consumers without coverage may have to pay a tax penalty of the higher of \$95 or 1 percent of household income in 2014; \$326 or 2 percent in 2015; and \$695 or 2.5 percent in 2016.

Employer Mandate

- Beginning January 1, 2015, employers with 50 or more full time equivalent employees will be required to pay tax assessments if their employees receive subsidized coverage through the marketplace because the employer doesn't offer minimum essential coverage or because the coverage offered is unaffordable. For more information on employer responsibilities. (<http://www.irs.gov/uac/Newsroom/Questions-and-Answers-on-Employer-Shared-Responsibility-Provisions-Under-the-Affordable-Care-Act>)
- Employers with 25 or fewer full time equivalent employees may be eligible for tax credits if they provide health coverage.
- General Information for Employers with less than 50 full-time equivalent employees – FF-SHOP. (<https://www.healthcare.gov/small-businesses/>)

Grandfathered Plans

- Plans issued before March 23, 2010 are not subject to many of the requirements of the federal reforms and will not include many of the required coverage. For more information on grandfathered plans. (<https://www.healthcare.gov/what-if-i-have-a-grandfathered-health-plan/>)

Questions? Contact:

- Oklahoma Insurance Department – Consumer Assistance Program @ 1-800-522-0071

Are individual health insurance premium rates going up in Oklahoma?

Yes, individual premium rates overall are higher than last year. Based on information obtained directly from insurers, premium rates generally will range from 30 percent to 100 percent more than they were last year. This means that it will cost insurers more to provide health insurance to Oklahomans than in the past.

Why are premium rates going up?

The Affordable Care Act has created new requirements for both consumers and insurers. Consumers are required to obtain health insurance that has a broad set of benefits and covers a specific percentage of the costs of these benefits, regardless of their individual health and financial needs. Consumers who do not have this mandatory insurance will be required to pay a penalty that varies based on income. In addition, consumers can no longer receive a lower premium for maintaining good health, and instead will have to pay an amount based on the average health of the community. Consumers must also pay for health insurance that allows any individual to incur an unlimited amount of medical costs. Insurers will also have to pay additional fees and taxes for selling plans through the federal exchange and based on the amount of health insurance they provide.

Will I have to pay more for my health insurance?

There are many factors that will affect how each individual consumer's health insurance costs will change. In general, younger and healthier consumers can expect to see increases due to new federal laws that tie the minimum costs for younger consumers to the maximum costs for older consumers and prohibit a person with good health from paying a lower rate. Catastrophic plans were created under federal law for these younger adults that offer lower premiums but generally require consumers to pay all of their medical costs up to a certain amount, usually several thousand dollars. Because of these factors, older consumers and consumers with serious medical conditions may be likely to see their own health insurance premiums go down.

Some individuals will be able to obtain federal subsidies for paying for a portion of their insurance premiums. The two primary types of federal subsidies are called premium tax credit subsidies and cost sharing reduction subsidies. Eligibility for these subsidies is based on several factors including family size, income, and the health insurance being purchased, and is determined by the federal government.

What is a premium tax credit subsidy?

A premium tax credit subsidy is an advance tax credit that can be applied to monthly premium costs in advance of filing a tax return. Consumers who are eligible may choose how much advance credit payments to apply to their premiums each month, up to a maximum amount. If the amount of advance credit payments received for the year is less than the tax credit due, consumers will get the difference as a refundable credit when they file their federal income tax returns. If the advance payments for the year are more than the amount of the credit, consumers must repay the excess advance payments with their tax returns.

What is a cost sharing reduction subsidy?

A cost sharing reduction subsidy is a discount that lowers the amount consumers have to pay out-of-pocket for deductibles, coinsurance, and copayments. Consumers can get this reduction by purchasing health insurance through the Marketplace if their income is below a certain level and they choose a health plan from the Silver plan level. Members of federally recognized tribes may qualify for additional cost-sharing benefits.

Who can I contact with more questions?

FEDERAL INSURANCE MARKETPLACE

See the information provided below if you have questions or need contact information for:

Insurance Exchange
Insurance Marketplace
Healthcare Reform Law
Patient Protection and Affordable Care

Marketplace

The Federal Marketplace can provide individuals and small businesses with information about how to apply for health insurance and enroll through the insurance Marketplace.

Contact information for the Federal Marketplace:

- ◆ www.HealthCare.gov
- ◆ LocalHelp.HealthCare.gov
- ◆ Individuals: 1-800-318-2596 (24/7)
1-855-889-4325 (TTY)
- ◆ Businesses: 1-800-706-7893 (M-F, 8 am-4 pm)
1-800-706-7915 (TTY)

Navigator Program

The following entities have received grants from the federal government to develop Navigator programs and assist applicants with the Federal Marketplace:

- ◆ Oklahoma Community Health Centers
 - ◆ www.OKPCA.org/Marketplace
 - ◆ 2-1-1 Oklahoma
 - ◆ 405-424-2282
- ◆ Little Dixie Community Action Agency
 - ◆ www.LittleDixie.org
 - ◆ 580-326-6441

SOONERCARE (MEDICAID)

See the information provided below if you have questions or need contact information for:

SoonerCare
Medicaid
Insure Oklahoma
Oklahoma Health Care Authority

SoonerCare

SoonerCare provides health care services for low-income children and pregnant women, people with disabilities, the elderly and some other adults who meet qualifications.

SoonerCare can also provide information about how to find out if you qualify for or need to renew enrollment in SoonerCare.

Contact information for SoonerCare:

- ◆ www.MySoonerCare.org
- ◆ 1-800-987-7767 (7-1-1/TTY)
M-TH, 8 am-7 pm; F, 8 am-5 pm; S, 9 am-1 pm

Insure Oklahoma

Insure Oklahoma, a program that assists business and individuals with purchasing health insurance, is available through December 31, 2014. Contact information for Insure Oklahoma:

- ◆ www.InsureOklahoma.org
- ◆ Individual Plan: 1-888-365-3742 (7-1-1/TTY)
M-TH, 8 am-7 pm; F, 8 am-5 pm; S, 9 am-1 pm
- ◆ Employer Sponsored Insurance: 1-888-365-3742
M-TH, 8 am-7 pm; F, 8 am-5 pm

COMMUNITY HEALTH CENTERS / FQHCs

If you do not have health insurance and are unsure if you qualify for coverage through the Marketplace or Medicaid, you may contact any local Community Health Center (CHC) or Federally Qualified Health Center (FQHC). Contact information for local health centers is provided on the reverse.

You can find a local health center at:

- ◆ <http://Findahealthcenter.hrsa.gov>
- ◆ 1-888-275-4772—*Select Option 1*
M-F, 7:30 am-4 pm
- ◆ 1-877-489-4772 (TTY)

Certified Application Counselors (CACs)

CACs are persons who have been trained and certified by the Federal Marketplace to assist individuals and businesses with health insurance. CACs are available through all Oklahoma Community Health Centers and FQHCs.

Reporting Insurance Fraud and Abuse

If you suspect possible fraud or abuse or need to file an insurance related complaint, contact the Oklahoma Insurance Department (OID):

- ◆ www.ok.gov/oid
- ◆ 1-800-522-0071 (M-F, 8 am-5 pm)

Community Health Centers / FQHCs

Arkansas Verdigris Valley Health Centers, Inc.
505 South Main
Porter 74454
Phone: (918) 483-0111 – Health Clinic
Phone: (918) 483-0012 – Dental
Website: <http://porterhealthclinic.com>

Caring Hands Healthcare Centers, Inc.
1558 South Main Street
McAlester 74501
Phone: (918) 426-0900

Central Oklahoma Family Medical Center, Inc.
527 West 3rd Street
Konawa 74849
Phone: (580) 925-3266
Website:
http://konawa.k12.ok.us/community/medical_center/medical_center.html

Community Health Connection, Inc.
9912 East 21st Street
Tulsa 74129
Phone: (918) 622-0641
Website: <http://www.communityhealthconnection.org>

East Central Oklahoma Family Health Center, Inc.
401 South Washita
Wetumka 74883
Phone: (405) 452-5400
Website: <http://www.ecofhc.com>

Fairfax Medical Facilities, Inc.
Robert Clark Family Health Center
212 North Main Street
Fairfax 74637
Phone: (918) 642-3100
Website: <http://www.fairfaxclinic.com>

Family Health Center of Southern Oklahoma
610 East 24th Street
Tishomingo 73460
Phone: (580) 371-2343
Website: <http://www.fhcso.org/>

Great Salt Plains Health Center
405 South Ohio
Cherokee 73728
Phone: (580) 596-2800
Website: <http://www.gsphealth.org>

Health and Wellness Center, Inc.
1505 East Main Street, Suite A
Stigler 74462
Phone: (918) 967-3368
Fax: (918) 967-3351
Website: <http://www.thwcinc.com>

Kiamichi Family Medical Center, Inc.
500 Main Street
Battiest 74722
Phone: (580) 241-5294
Website: <http://www.kiamichimed.org>

Lawton Community Health Center
Great Plains Medical Square
3811 West Gore Blvd.
Lawton 73505
Phone: (580) 248-5242 – Adult Clinic
Phone: (580) 355-5242 – Pediatric Clinic
Website: <http://www.lawtoncommunityhealthcenter.com/>

Community Health Centers, Inc.
12716 NE 36th Street
Spencer 73084
Phone: (405) 769-3301
Website: <http://www.chciokc.org>

Morton Comprehensive Health Services
1334 North Lansing Avenue
Tulsa 74106
Phone: (918) 587-2171
Website: <http://www.mortonhealth.org>

Northeastern Oklahoma Community Health Centers, Inc.
Hulbert Health Center
124 East Main Street
Hulbert 74441
Phone: (918) 772-2879
Website: <http://www.neohealth.org/>

Community Health Centers / FQHCs

Pushmataha Family Medical Center, Inc.
109 Stanley Road
Clayton 74536
Phone: (918) 569-4143
Website: <http://www.pfmcok.com>

Shortgrass Community Health Center, Inc.
400 East Sycamore Street
Hollis 73550
Phone: (580) 688-2800

South Central Medical & Resource Center, Inc.
216 South Main Street
Lindsay 73052
Phone: (405) 756-1414
Website: <http://www.okscmr.org>

Variety Care Family Health
1025 Straka Terrace
Oklahoma City 73139
Phone: (405) 632-6688
Website: <http://varietycare.org/>

American Indians/ Alaskan Natives

American Indians and Alaskan Natives (AI/ANs) have special provisions under the federal healthcare reform law. Additional contacts for AI/ANs include the following:

- ◆ Your Tribe
- ◆ Your Local I/T/U facility
- ◆ www.HealthCare.gov

Referral Resources

Federal Health Insurance Marketplace

The Federal Health Insurance Marketplace (Marketplace) is a website where individuals can buy health insurance plans. The Marketplace is a requirement of the federal healthcare reform law passed in 2010. The federal government through the United States Department of Health and Human Services (HHS) will implement and operate a Federal Health Insurance Marketplace in Oklahoma.

The Marketplace will provide qualified individuals and families with federal subsidies in the form of tax credits and lower co-pays. These subsidies are based on household income and family size.

Individuals and employers may begin shopping for plans when Open Enrollment for the Marketplace begins October 1, 2013.

As October 1 approaches, you may have questions about the Marketplace. This referral resource has been developed and made available to assist Oklahomans by providing consistent and accurate contact information for the Marketplace, Navigators, the state Medicaid agency, and other healthcare resources.