



Media Clips

COVERED CALIFORNIA BOARD CLIPS October 9, 2015 – November 18, 2015

Since the Oct. 8 board meeting, high-visibility media issues included: the beginning of the third open-enrollment period; the Spotlight on Coverage Bus Tour; and a survey showing a historic low in the uninsured rate.

Since the Oct. 8 board meeting, the term "Covered California" was mentioned 17,300 times in a Google search and the phrase "California Health Benefit Exchange" was noted 295 times. The following clips represent a cross-section of media outlets and coverage.

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NEWS RELEASE

FOR IMMEDIATE RELEASE

Nov. 18, 2015

Media Line: (916) 206-7777

ENROLLMENT FIGURES SHOW ROBUST INTEREST IN HEALTH AND DENTAL COVERAGE OFFERED THROUGH COVERED CALIFORNIA

More than 33,000 Enrollees Have Purchased Optional Adult Dental Coverage Since Covered California Began Offering It One Month Ago, and 34,000 New Enrollees Have Selected Health Plans

SACRAMENTO, Calif. — Covered California announced Wednesday that it is seeing very strong interest in the new optional dental coverage offered for adults through the health exchange. More than 33,000 people have enrolled in family dental coverage since Covered California members began renewing their health insurance plans on Oct. 12.

“While we have long known that California consumers want insurance coverage for dental care, we have been surprised by the extraordinarily high enrollment, both by those who have health coverage through Covered California and by those signing up for health coverage for the first time,” Covered California Executive Director Peter V. Lee said.

This year, Covered California makes it possible for consumers to purchase optional dental coverage for 2016 as an “add-on” to the health coverage they purchase through the exchange. Pediatric dental benefits for members under 19 years of age continue to be included with health coverage.

As of Nov. 17, approximately 6,000 new enrollees had elected to purchase a family dental plan at the time of enrollment. In addition, more than 27,000 current members had chosen to purchase a family dental plan at the time of renewal.

The family dental plan offers adults the option of receiving dental coverage outside of the general health plans at an additional cost. Unlike premiums for health coverage, premiums for dental coverage through a family dental plan are not subsidized through Covered California, but dental plans offered through the exchange are actively purchased and must be offered on a “guaranteed issue” basis — meaning the coverage is available to anyone who wants it regardless of any pre-existing dental health conditions.

Open enrollment for health insurance coverage and for the new 2016 dental coverage for adults began on Nov. 1 and will continue through Jan. 31.

Covered California also announced Wednesday that more than 34,000 new consumers had selected a health insurance plan through the exchange since open enrollment began.

“Enrollment continues at a healthy pace, with thousands of people signing up for coverage every day,” Lee said. “Now is the time for anyone who does not have health insurance to visit CoveredCA.com and explore their options. Thousands of people stand ready to assist anyone interested in enrolling confidentially and at no cost.”

Lee emphasized that there is no requirement to enroll in a family dental plan. The family dental plan is optional and is primarily intended to offer affordable dental coverage to adults that was not previously available. Families should consider that adding their children to a family dental plan will result in an extra cost for the same dental services they already receive in their standard health insurance plan. The most likely reason to enroll a child in a family dental plan is if a dental provider they prefer for their child is not offered through their Covered California health plan.

Covered California is notifying existing enrollees of the availability of new family dental plans that include dental benefits for adults.

“We are working to get the word out to our current enrollees that even if they want to keep their health coverage just as it is, they have the opportunity to come in and add dental coverage for 2016,” Lee said.

Family dental plans are offered by Access Dental Plan, Anthem Blue Cross of California, Delta Dental of California, Dental Health Services and Premier Access.

Covered California is offering both dental health maintenance organization (DHMO) and dental preferred provider organization (DPPO) plans, giving consumers a choice in the type of plan that will work best for them. There is no financial assistance available for the optional family dental plans, and there is no tax penalty for choosing not to enroll.

Covered California’s third historic open-enrollment period is aimed at reducing the number of uninsured in California. An estimated 2.2 million uninsured Californians are eligible to get help to make insurance more affordable by enrolling in Covered California or Medi-Cal.

Those who need insurance should go to CoveredCA.com to learn about their options and find locations where they can go to get free, confidential help enrolling.

More information about family dental plans, including the rate booklet, is available at www.CoveredCA.com/individuals-and-families/getting-covered/dental-coverage.

About Covered California

Covered California is the state’s marketplace for the federal Patient Protection and Affordable Care Act. Covered California, in partnership with the California Department of Health Care Services, was charged with creating a new health insurance marketplace in which individuals and small businesses can get access to affordable health insurance

plans. Covered California helps individuals determine whether they are eligible for premium assistance that is available on a sliding-scale basis to reduce insurance costs or whether they are eligible for low-cost or no-cost Medi-Cal. Consumers can then compare health insurance plans and choose the plan that works best for their health needs and budget. Small businesses can purchase competitively priced health insurance plans and offer their employees the ability to choose from an array of plans and may qualify for federal tax credits.

Covered California is an independent part of the state government whose job is to make the new market work for California's consumers. It is overseen by a five-member board appointed by the Governor and the Legislature. For more information about Covered California, please visit www.CoveredCA.com.

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NEWS RELEASE

FOR IMMEDIATE RELEASE
Nov. 17, 2015

Media Line: (916) 206-7777

COVERED CALIFORNIA ANNOUNCES APPOINTMENT OF EXTERNAL AFFAIRS DIRECTOR

SACRAMENTO, Calif. — Covered California Executive Director Peter V. Lee has named Kelly Green as the agency's director of external affairs.

Green will lead Covered California's legislative policy on health insurance and health care issues. Her office will be the first point of contact for the state Legislature and other stakeholders in the health care community. She will advise Lee and the Covered California Board of Directors on pending legislation and provide testimony on proposed bills when appropriate.

"Kelly Green has a proven track record as an analyst of and advocate for effective health care policy in our state," Lee said. "She is a skilled representative who works collaboratively with elected officials, community stakeholders and public agencies for the benefit of all Californians."

Green comes to Covered California from the Assembly Health Committee, where she was a principal consultant, advising on policy issues covering commercial health insurance, Medi-Cal and Medicare.

Prior to that, she was a regulatory policy specialist for the California Nurses Association and deputy director for legislative and government affairs with the state Department of Health Care Services.

Green graduated with a Bachelor of Arts degree in international relations from the University of California, Davis.

The annual salary for Green's position is \$150,000.

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NEWS RELEASE

FOR IMMEDIATE RELEASE
Nov. 12, 2015

Media Line: (916) 206-7777
#SpotlightOnCoverage

COVERED CALIFORNIA OPEN-ENROLLMENT BUS TOUR CONCLUDES IN SACRAMENTO WITH SPOTLIGHT ON TOWER BRIDGE AND CITY HALL

*Spotlight Tour Focused on the Need for All
Californians to Enroll in Health Care Coverage*

SACRAMENTO, Calif. — Covered California's open-enrollment period is off to a strong start as its 38-stop, 2,000-mile bus tour prepares for a final stop at the State Capitol. The bus tour began in San Diego and made stops along the way in large cities and small communities throughout the state.

"The Covered California open-enrollment bus tour literally covered California and spotlighted enrollment with stops in large cities, like San Francisco and San Diego, and in small, rural towns, like Fortuna in Humboldt County and Watsonville in Santa Cruz County," Covered California Executive Director Peter V. Lee said. "Our message of putting the spotlight on coverage has spread all over the state with the help of hospitals, counties, community clinics, agent storefronts and our Navigators. These partners are on the front lines each day and see the true impact having affordable health care coverage means in their communities."

In the weeks ahead, Covered California will continue to spotlight the fact that open enrollment continues through Jan. 31, but the exchange is encouraging consumers to sign up before Dec. 15 to ensure they have coverage beginning Jan. 1.

"We can't stress enough that the sooner consumers sign up, the sooner they have access to world-class facilities; high-quality doctors; and real, affordable health care coverage. Enrolling by Dec. 15 guarantees them the peace of mind of knowing they and their family won't face financial strain should something unforeseen happen," said Lee.

(more)

During the tour, Covered California leadership heard numerous stories not only from the exchange's partners, but also from the people they aim to help — people like David from Salinas and Kelly of El Cajon. When David lost his job, his health insurance coverage was costing him \$1,500 a month. After signing up for coverage through Covered California, he now pays less than \$300 a month and is able to take good care of his diabetes. Kelly lost her health insurance coverage prior to January 2014 and was in the middle of receiving care after having spinal surgery the previous July. She was able to keep her doctors at Scripps Mercy Hospital by enrolling in a plan through Covered California.

Covered California is spotlighting enrollment because an estimated 2.2 million uninsured Californians remain eligible to get help to make their insurance affordable by enrolling in either Covered California or Medi-Cal. An estimated 750,000 uninsured Californians could enroll through Covered California.

“For the first time ever, the national rate of the uninsured has dropped below 10 percent,” said Lee. “California’s uninsured rate is even lower, at 8.6 percent, because California has used all the tools of the Affordable Care Act — expanding Medi-Cal and launching an exchange that is bringing real value to our residents — but there is still work to be done.”

Those who need insurance can go to CoveredCA.com to learn about their options and find locations in their community where they can get free, confidential help enrolling.

This year, Covered California has more than 500 storefront locations statewide where individuals can get help enrolling — twice the number available at the start of last year’s open enrollment.

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NEWS RELEASE

FOR IMMEDIATE RELEASE
Nov. 10, 2015

Media Line: (916) 206-7777
#SpotlightOnCoverage

COVERED CALIFORNIA'S BUS TOUR NEARS ITS COMPLETION, ARRIVES IN REDDING TO SPOTLIGHT OPEN ENROLLMENT

*Stops at Mercy Medical Center Redding to Put Focus
on Open Enrollment in the Region*

REDDING, Calif. — Covered California's 38-stop bus tour has been crisscrossing the state since Oct. 30, to get the word out about open enrollment. The latest stop came Tuesday in Redding, an area where there are many different ways consumers can learn about their enrollment options and ultimately find the plan that works best for them and their families.

"We're putting the spotlight on open enrollment, because we want everyone without insurance to know how important having coverage for them and their family really is," said Covered California Executive Director Peter V. Lee. "Mercy Medical Center Redding is one of our last stops on the open-enrollment bus tour, but we'll continue to spotlight the fact that open enrollment continues through Jan. 31."

Covered California is spotlighting enrollment because an estimated 2.2 million uninsured Californians remain eligible to get help to make their insurance affordable by enrolling in either Covered California or Medi-Cal. An estimated 750,000 uninsured Californians could enroll through Covered California, including about 32,000 in pricing region 1, which includes Shasta County.

"We're thrilled that Covered California chose to spotlight Mercy Medical Center Redding," said President of Dignity Health North State Mark Korth. "Shasta County residents should know that not only are we a great place to receive care, but that we can also help them find a health plan that is best for their personal situation, including those offered through Covered California."

Residents in this area will be able to see Mercy Medical Center Redding's commitment to getting everyone affordable health care coverage.

(more)

“At Covered California we’re literally putting spotlights up around the state to help get the message out that it’s open enrollment,” Lee said. “We couldn’t be more pleased that our logo will be up and visible at Mercy Medical Center Redding, because it will be a reminder that open enrollment is happening now.”

Open enrollment for 2016 coverage began Nov. 1 and ends Jan. 31.

UnitedHealthcare Benefits Plan of California will be joining Anthem Blue Cross of California, Blue Shield of California, Health Net and Kaiser Permanente as an option for consumers in region 1. UnitedHealthcare is the largest single health carrier in the United States and offers telehealth and mobile apps to help its consumers get treatment, manage their health needs, and get estimates for specific treatments and procedures.

“At Covered California we’re expanding the choices available, which benefits not only our members, but also those who buy off the exchange in the individual market,” Lee said. “With Covered California’s purchasing power and the addition of UnitedHealthcare, there is more competition, which means more choices available to everyone looking for insurance.”

Those who need insurance can go to CoveredCA.com to learn about their options and find locations in their community where they can get free, confidential help enrolling.

In the Redding area, there are more than 40 Certified Insurance Agents and community-based enrollers, including R.W. Hudson Insurance, Shasta Community Health Center, Viva Downtown Redding Inc., and Caring Choices. This year, Covered California has more than 500 storefront locations statewide where individuals can get help enrolling — twice the number available at the start of last year’s open enrollment.

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FOR IMMEDIATE RELEASE
Nov. 6, 2015

NEWS RELEASE

Media Line: (916) 206-7777

NEW SURVEY SHOWS HISTORIC LOW FOR NATIONAL RATE OF UNINSURED — CALIFORNIA IS BIGGEST CONTRIBUTOR TO HUGE REDUCTION

SACRAMENTO, Calif. — Covered California Executive Director Peter V. Lee hailed the results of a Centers for Disease Control and Prevention (CDC) survey that found that for the first time, the national uninsured rate fell to 9 percent, with California's rate being even lower — 8.6 percent. Previous CDC surveys showed California's uninsured rate at 12 percent in 2014 and 17 percent in 2013.

"Thanks to the Affordable Care Act, we have reached another milestone. For the first time ever, the national rate of the uninsured has dropped below 10 percent," said Lee. "California's uninsured rate is even lower because California has used all the tools of the Affordable Care Act — expanding Medi-Cal and launching an exchange that is bringing real value to our residents. We are proud to be by far the largest contributor to this historic improvement in the nation's health."

The survey comes on the heels of a U.S. Census report in September that showed that California had reduced the number of uninsured by more than 1.7 million people through 2014. The reduction was more than 1 million more than the next-closest state, Texas.

Covered California estimates that the number of uninsured people in the state has now dropped by approximately 3 million when the gains made during the first six months of 2015 are calculated.

"We are building a culture of coverage in California and helping people get the health care coverage and protection they deserve," said Lee. "But we are far from done, with more than 2 million Californians still uninsured and eligible for financial help through Covered California or to enroll in Medi-Cal."

Lee made his comments from San Francisco during Covered California's "Spotlight on Coverage" tour. The bus tour with dozens of stops is covering more than 2,000 miles of the state to promote Covered California's open-enrollment period, which started Nov. 1.

"If you or someone you know doesn't have health care coverage right now, this is the opportunity," Lee said. "Make sure you know about the financial help that is available, that is helping 350,000 consumers pay \$50 or less per month for their coverage. Make sure you know about the new plans and expanded coverage that will give you access to more doctors and more facilities than ever before."

Those who need insurance can go to CoveredCA.com to learn about their options and to find locations in their community where they can get free, confidential help to enroll, or they can get help enrolling over the phone. Open enrollment continues through Jan. 31, and Medi-Cal enrollment is year-round, but to have coverage take effect on Jan. 1, consumers must enroll by Dec. 15.

The full CDC survey can be viewed here:

<http://www.cdc.gov/nchs/data/nhis/earlyrelease/insur201511.pdf>.

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NEWS RELEASE

FOR IMMEDIATE RELEASE
Nov. 6, 2015

Media Line: (916) 206-7777
#SpotlightOnCoverage

COVERED CALIFORNIA SPOTLIGHTS OPEN ENROLLMENT AND CRITICAL CARE AT OAKLAND'S KAISER PERMANENTE

Data from Kaiser Hospitals Across the State Show How Covered California Members Are Getting Critical Care at the Right Places at the Right Time

OAKLAND, Calif. — Covered California's 38-stop bus tour reached the Bay Area on Friday, stopping at Kaiser Permanente's Oakland Medical Center to spotlight the historic third open-enrollment period and the care that's been received by Covered California members in the Oakland area and across the state.

"The care provided here at the Kaiser Permanente Oakland Medical Center, and at all of Kaiser Permanente's hospitals across the state, has truly changed the lives of thousands of our Covered California members," said Covered California Executive Director Peter V. Lee. "We want to make sure everyone gets covered, so that they, too, can have access to top-notch facilities across the state."

Covered California is collecting data from hospitals statewide about the care being delivered to its members, some of whom have insurance for the first time as a result of the Patient Protection and Affordable Care Act.

At Kaiser Permanente's Oakland Medical Center, 19,591 Covered California members have received care, including:

- 53,350 incidents of general outpatient care.
- 2,039 treatments for broken bones and trauma.
- 254 incidents of care for pneumonia, heart attacks, strokes and kidney infections.
- 160 incidents of maternal health and childbirth.
- 63 incidents of pediatric care (including in neonatal intensive care units).
- 23 incidents of gastrointestinal and urological surgeries and Rx.

(more)

“Here at Kaiser Permanente in Oakland, we know how important it is to have health care coverage, because we see the results every day,” said Senior Vice President and Area Manager for Kaiser Permanente East Bay Mark Fratzke. “We want to remind everyone not covered today to explore what’s available to you and your families.”

Dr. John Loftus, the physician-in-chief at Oakland Medical Center, pointed out that health coverage is also about the health of communities.

“Kaiser Permanente strives to provide not only expert medicine combined with ease and convenience, but we want everyone in the communities we serve to be healthy,” Loftus said. “Covered California members who have chosen Kaiser Permanente represent more than just numbers to us. They are our neighbors, our friends and our families. Our team of health care providers are here for all of them. We are providing important preventive care, such as cancer screening, and taking care of everything from minor bumps and bruises to serious diagnoses requiring specialty care.”

Covered California is spotlighting enrollment because an estimated 2.2 million uninsured Californians remain eligible to get help to make their insurance affordable by enrolling in either Covered California or Medi-Cal. An estimated 750,000 uninsured Californians could enroll through Covered California, including about 115,000 in the greater Bay Area within Alameda, Contra Costa, San Francisco, Santa Clara and San Mateo counties.

Those who need insurance can go to CoveredCA.com to learn about their options and find locations in their community where they can get free, confidential help enrolling.

This year, Covered California has more than 500 storefront locations statewide where individuals can get help enrolling — twice the number available at the start of last year’s open enrollment. Open enrollment for 2016 coverage began Nov. 1 and ends Jan. 31.

More information on the Covered California patient data from Kaiser Permanente’s Oakland Medical Center is at www.CoveredCA.com/news/PDFs/kp-oakland-delivering-on-the-promise-of-care.pdf.

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(more)

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NEWS RELEASE

FOR IMMEDIATE RELEASE
Nov. 5, 2015

Media Line: (916) 206-7777
#SpotlightOnCoverage

COVERED CALIFORNIA SPOTLIGHTS OPEN ENROLLMENT AND VITAL CARE IN MONTEREY COUNTY

Data from Salinas Valley Memorial Hospital Show How Covered California Members Are Getting Critical Care at the Right Place at the Right Time

SALINAS, Calif. — Covered California's 38-stop bus tour reached Monterey County on Thursday, stopping at Salinas Valley Memorial Hospital to spotlight the care Covered California members have received and to encourage residents in the area to enroll in health care coverage during the historic third open-enrollment period.

"The most important part of Covered California is our members, and the data gathered from Salinas Valley Memorial indicate they are getting the best possible care available to them," said Covered California Executive Director Peter V. Lee. "Our hope now is that the uninsured residents will hear our message and learn about the importance of being covered."

Lee was joined by hospital leadership, physicians and patients to underscore the care being delivered in Salinas.

"Our patients receive outstanding, quality care, regardless of their insurance status," said Salinas Valley Memorial Healthcare System President and CEO Pete Delgado. "We are proud to partner with Covered California to ensure our community also has easy access to critical follow-up care and the preventative health and wellness services they need and deserve."

Covered California is collecting data from hospitals statewide about the care being delivered to its members, some of whom have insurance for the first time as a result of the Patient Protection and Affordable Care Act.

(more)

At Salinas Valley Memorial Hospital, 1,939 Covered California members have received care, including:

- 2,574 incidents of general outpatient care.
- 893 treatments for broken bones and trauma.
- 141 incidents of care for pneumonia, heart attacks, strokes and kidney infections.
- 138 incidents of maternal health and childbirth.
- 51 incidents of pediatric care (including in neonatal intensive care units).
- 29 incidents of gastrointestinal and urological surgeries and Rx.

Covered California is spotlighting enrollment because an estimated 2.2 million uninsured Californians remain eligible to get help to make their insurance affordable by enrolling in either Covered California or Medi-Cal. An estimated 750,000 uninsured Californians could enroll through Covered California, including about 15,000 in Region 9, which includes Monterey, Santa Cruz and San Benito counties.

UnitedHealthcare Benefits Plan of California will be joining Anthem Blue Cross of California, Blue Shield of California and Health Net in 2016 as an option for consumers in Region 9. UnitedHealthcare is the largest single health carrier in the United States and offers telehealth and mobile apps to help its consumers get treatment, manage their health needs, and get estimates for specific treatments and procedures.

“At Covered California we’re expanding the choices available, which benefits not only our members, but also those who buy off the exchange in the individual market,” Lee said. “With Covered California’s purchasing power and the addition of UnitedHealthcare, it allows for more competition and makes more choices available to everyone looking for insurance.”

Those who need insurance can go to CoveredCA.com to learn about their options and find locations in their community where they can get free, confidential help enrolling.

This year, Covered California has more than 500 storefront locations statewide where individuals can get help enrolling — twice the number available at the start of last year’s open enrollment.

Open enrollment began on Nov. 1 and ends on Jan. 31.

Salinas Valley Memorial Hospital Healthcare System partners with MedAssist to provide free in-person and over-the-phone assistance to help individuals and families explore their health insurance options and secure the best insurance plan to meet their needs. For more information, please visit <http://svmh.com/medassist>.

(more)

Salinas Valley Memorial Hospital contracts with Anthem Blue Cross and Blue Shield and will also contract with UnitedHealthcare for coverage in 2016.

More information on the Covered California patient data from Salinas Valley Memorial Hospital is at www.CoveredCA.com/news/PDFs/salinas-valley-memorial-delivering-on-the-promise-of-care.pdf.

About Covered California

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NEWS RELEASE

FOR IMMEDIATE RELEASE
Nov. 4, 2015

Media Line: (916) 206-7777
#SpotlightOnCoverage

COVERED CALIFORNIA SPOTLIGHTS OPEN ENROLLMENT AND VITAL CARE AT TWIN CITIES COMMUNITY HOSPITAL

*Data Show How Covered California Members Are Getting
the Right Care at the Right Time on the Central Coast*

TEMPLETON, Calif. — Covered California's 38-stop bus tour reached the Central Coast on Wednesday, putting spotlights on the historic third open-enrollment period and the care enrollees have received at Twin Cities Community Hospital.

"Our members are the most important part of Covered California, and the care they receive is of critical importance once they obtain coverage," said Covered California Executive Director Peter V. Lee. "Having coverage is a big step, but having access to care at facilities like Twin Cities Community Hospital is central to what Covered California is doing. While you never know when an accident or illness might occur, it's places like this that make the difference in the lives of their patients."

Covered California is collecting data from hospitals statewide about the care being delivered to its members, some of whom have insurance for the first time as a result of the Patient Protection and Affordable Care Act.

At Twin Cities Community Hospital, 853 Covered California members have received care, including:

- 870 incidents of general outpatient care.
- 827 treatments for broken bones and trauma.
- 15 incidents of care for pneumonia, heart attacks, strokes and kidney infections.
- 9 incidents of gastrointestinal and urological surgeries and Rx.

(more)

“As a community hospital, our doors are always open — and open to everyone,” said Twin Cities Community Hospital CEO Mark Lisa. “The patients we see never know when they will need us, but having insurance is critically important for not only emergencies, but for ongoing care.”

Covered California is spotlighting enrollment because an estimated 2.2 million uninsured Californians remain eligible to get help to make their insurance affordable by enrolling in either Covered California or Medi-Cal. An estimated 750,000 uninsured Californians could enroll through Covered California, including about 30,000 in Region 12, which consists of San Luis Obispo, Santa Barbara and Ventura Counties.

UnitedHealthcare Benefits Plan of California will be joining Anthem Blue Cross of California, Blue Shield of California and Kaiser Permanente in 2016 as an option for consumers in Region 12. UnitedHealthcare is the largest single health carrier in the United States and offers telehealth and mobile apps to help its consumers get treatment, manage their health needs, and get estimates for specific treatments and procedures.

“At Covered California we’re expanding the choices available, which benefits not only our members, but also those who buy off the exchange in the individual market,” Lee said. “With Covered California’s purchasing power and the addition of UnitedHealthcare, it allows for more competition and makes more choices available to everyone looking for insurance.”

Those who need insurance can go to CoveredCA.com to learn about their options and find locations in their community where they can get free, confidential help enrolling.

This year, Covered California has more than 500 storefront locations statewide where individuals can get help enrolling — twice the number available at the start of last year’s open enrollment.

Twin Cities Community Hospital currently contracts with Anthem and Blue Shield and will also contract with UnitedHealthcare for 2016 coverage.

More information on the Covered California patient data from Twin Cities Community Hospital is at www.CoveredCA.com/news/PDFs/twin-cities-community-delivering-on-the-promise-of-care.pdf.

(more)

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Covered California is an independent part of the state government whose job is to make the new market work for California's consumers. It is overseen by a five-member board appointed by the Governor and the Legislature. For more information about Covered California, please visit www.CoveredCA.com.

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NEWS RELEASE

FOR IMMEDIATE RELEASE
Nov. 2, 2015

Media Line: (916) 206-7777
#SpotlightOnCoverage

COVERED CALIFORNIA LAUNCHES NEW AD CAMPAIGN — 'IT'S LIFE CARE'

*Campaign Starts Airing Today and Highlights the Coverage,
Benefits and Affordability Available Through Covered California*

SACRAMENTO, Calif. — Covered California's new ad campaign begins airing statewide today, in a variety of languages, to promote the open-enrollment period that started Sunday. The ads promote the value of health insurance and aim to motivate uninsured Californians to enroll in health insurance through Covered California.

The ads are part of a \$29 million campaign and will air in English, Spanish, Mandarin, Cantonese, Korean and Vietnamese. The campaign also includes radio, print, out-of-home, direct mail, digital and social ads for English-speaking Californians, as well as targeted efforts for the African-American; lesbian, gay, bisexual and transgender; Spanish-speaking; and Asian-speaking communities.

"Reaching California's diverse population is critical," said Covered California Executive Director Peter V. Lee. "This year we are spending more than we ever have on a monthly basis to promote coverage and enrollment."

The campaign features new messages with the tag line "It's not just health care — it's life care."

"Life is unpredictable, and getting covered is more than just health care — it is life care. Covered California will be there for you through all of life's ups and downs," Lee said. "What's predictable is that millions of Californians now have financial help to bring health care within reach."

The first ad, "Moments," uses a high-speed camera that sweeps through a scene in three seconds to capture moments within the lives of everyday Californians. Additional ads will highlight the fact that four out of five who enrolled through Covered California received financial assistance to help pay for their health insurance and that dental coverage is now available for adults through Covered California.

(more)

In addition to the English and Spanish ads that were first unveiled on Friday, Covered California released new Mandarin and Cantonese ads today. All of the ads can be found online at <https://vimeo.com/coveredcalifornia>.

The ad campaign also coincides with Covered California's "Spotlight on Coverage" tour that is currently underway to promote open enrollment. Details of the tour can be found at <http://news.coveredca.com/2015/10/covered-california-kicks-off-statewide.html>.

Covered California's third open-enrollment period is aimed at reducing the number of uninsured in California. An estimated 2.2 million uninsured Californians are eligible to get financial help to make their insurance affordable by enrolling in Covered California or Medi-Cal.

Those who need insurance can go to CoveredCA.com to learn about their options and to find locations in their community where they can get free, confidential help to enroll, or they can get help enrolling over the phone. Open enrollment runs through Jan. 31.

About Covered California

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**COVERED
CALIFORNIA**

NEWS RELEASE

FOR IMMEDIATE RELEASE
Nov. 2, 2015

Media Line: (916) 206-7777
#SpotlightOnCoverage

COVERED CALIFORNIA SPOTLIGHTS OPEN ENROLLMENT AND VITAL CARE AT JFK MEMORIAL HOSPITAL

*Data Show How Covered California Members Are Getting
the Right Care at the Right Time in the Coachella Valley*

INDIO, Calif. — JFK Memorial Hospital hosted Covered California today, along with the mayors of Indio and La Quinta, as part of Covered California's 38-stop bus tour spotlighting the historic third open-enrollment period and the care that's been received by those already enrolled.

"Open enrollment is here, and it's a very important time for consumers in the Coachella Valley," said Covered California Executive Director Peter V. Lee. "But what's also important is getting the care afforded to them through their health care coverage. We want to spotlight that when someone enrolls they also have access to great care at hospitals like JFK Memorial."

Covered California is collecting data from hospitals statewide about the care being delivered to its members, some of whom have insurance for the first time as a result of the Patient Protection and Affordable Care Act.

At JFK Memorial Hospital, 653 Covered California members have received care, including:

563 incidents of general outpatient care.

376 treatments for broken bones and trauma.

16 incidents of care for pneumonia, heart attacks, strokes and kidney infections.

14 incidents of maternal health and childbirth.

6 incidents of pediatric care (including in neonatal intensive care units).

18 incidents of gastrointestinal and urological surgeries and Rx.

In total, 994 cases of care were delivered at JFK Memorial Hospital.

(more)

"Getting care at the right place at the right time is extremely important, and having coverage through Covered California helps to make that happen," said Gary Honts,

CEO of JFK Memorial Hospital. “Having that coverage makes it possible to get that critical care following some unforeseen accident or illness.”

“My constituents and neighbors throughout the Coachella Valley deserve to have quality health care coverage,” said Indio Mayor Lupe Ramos Watson. “They also deserve to get high-quality care at a place like JFK Memorial Hospital. I’m urging all those people who are currently without coverage to go out and get information to make the right decision for them and their family.”

Covered California is spotlighting enrollment because an estimated 2.2 million uninsured Californians remain eligible to get help to make their insurance affordable by enrolling in either Covered California or Medi-Cal. An estimated 750,000 uninsured Californians could enroll through Covered California, including about 92,000 in the Inland Empire alone.

Those who need insurance can go to CoveredCA.com to learn about their options and find locations in their community where they can get free, confidential help enrolling.

This year, Covered California has more than 500 storefront locations statewide where individuals can get help enrolling — twice the number available at the start of last year’s open enrollment.

More information on the Covered California patient data from JFK Memorial Hospital is at www.CoveredCA.com/news/PDFs/jfk-delivering-on-the-promise-of-care.pdf.

JFK Memorial Hospital contracts with Anthem Blue Cross of California, Blue Shield of California, Kaiser Permanente, Health Net and Molina Healthcare.

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NEWS RELEASE

FOR IMMEDIATE RELEASE

Oct. 30, 2015

Media Line: (916) 206-7777

#SpotlightOnCoverage

COVERED CALIFORNIA LAUNCHES OPEN ENROLLMENT BY PUTTING A SPOTLIGHT ON ENROLLMENT AND AFFORDABLE COVERAGE

*Spotlights Will Shine on Iconic Buildings and Enrollment Locations
Across the State to Promote Coverage and Care*

SAN DIEGO, Calif. — Kicking off a 38-stop bus tour of hospitals, clinics and storefronts where Californians can enroll in affordable health insurance, Covered California began spotlighting iconic buildings and hundreds of enrollment locations across the state today.

“We are ‘putting a spotlight on enrollment and coverage’ and highlighting care being delivered across the state to Covered California enrollees,” said Covered California Executive Director Peter V. Lee. “We want to make sure all uninsured Californians know that financial help is available to help people buy health insurance and that they can join thousands of Covered California consumers who are getting the care they need when they need it.”

Starting this week, hundreds of buildings and storefront locations will feature spotlights that say “Enroll Now” over the Covered California logo to raise public awareness about the opportunity to get health coverage.

Additionally, many iconic buildings throughout California —the Los Angeles, San Francisco and Sacramento city halls; the San Diego Convention Center; the Theme Building at Los Angeles International Airport; Coit Tower in San Francisco; and Sacramento’s Tower Bridge — will light up with the Covered California colors for specific nights during the first weeks of November to bring additional attention to open enrollment. See www.CoveredCA.com/news/PDFs/Spotlight.pdf for information.

“We still need to raise awareness that open enrollment is a regular part of the new culture of coverage for our state and the nation,” Lee said. “With research showing that more than a third of the uninsured don’t know they can get subsidies to help them buy insurance, we need to step up our efforts and make sure we get the word out in every way we can.”

(more)

New to the bus tour this year are events scheduled at five hospitals across California, to highlight data about medical treatments Covered California members are receiving.

“Since we opened our doors in 2014, patients have been getting critically important care — organ transplants, cancer treatment and surgeries that are improving and saving their lives,” Lee said. “We are delivering on the promise of care in California, helping people get the vital treatment they need at premier hospitals across the state.”

He added, “We need to remind those who are considering going without coverage that they are a diagnosis or an accident away from going broke or not getting the early intervention that can be life-saving.”

Also on Friday, Covered California released new television ads that will begin airing on Monday, Nov. 2. The series of ads is part of a \$29 million advertising campaign that will include new TV spots in English, Spanish, Mandarin, Cantonese, Korean and Vietnamese aimed at promoting the value of health insurance and motivating uninsured Californians to enroll in health insurance through Covered California. The advertising campaign also includes radio, print, out-of-home, direct mail, digital and social ads for English-speaking Californians, as well as targeted efforts for the African-American; lesbian, gay, bisexual and transgender; Spanish-speaking; and Asian-speaking communities.

The first ad to launch is “Moments,” which showcases a brief moment within the lives of everyday Californians. The ad, which was shot using a camera effect sweeping past the scene in three seconds, runs in slow motion, to draw in viewers and motivate them to explore health insurance through Covered California.

Additional ads for all targeted efforts will offer educational information about buying health insurance, such as the fact that four out of five who enrolled through Covered California got help paying for their health insurance and that dental coverage is now available for adults through Covered California.

“Some of the new ads drive home the message in a visually compelling way that health insurance is part of living a good life,” Lee said, “while others highlight basic facts that educate consumers about Covered California in ways that will encourage them to enroll.”

The ads can be found online at <https://vimeo.com/coveredcalifornia>.

Covered California’s third historic open-enrollment period is aimed at reducing the number of uninsured in California. An estimated 2.2 million uninsured Californians are eligible to get financial help to make their insurance affordable by enrolling in Covered California or Medi-Cal.

(more)

Lee said the “Spotlight on Coverage” bus tour will continue through Nov. 12, with 38 stops planned at hospitals, community clinics, enrollment locations and storefronts from San Diego to Eureka. This year, Covered California has more than 500 storefront locations statewide where individuals can get help enrolling — twice the number available at the start of last year’s open enrollment — and thousands of additional locations where consumers can get help.

Those who need insurance can go to CoveredCA.com to learn about their options and to find locations in their community where they can get free, confidential help to enroll, or they can get help enrolling over the phone. Open enrollment begins Nov. 1 and goes through Jan. 31.

More than 2 million Californians have purchased health insurance through Covered California since the exchange began offering coverage in 2014.

About Covered California

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NEWS RELEASE

FOR IMMEDIATE RELEASE
Oct. 30, 2015

Media Line: (916) 206-7777
#SpotlightOnCoverage

COVERED CALIFORNIA KICKS OFF STATEWIDE BUS TOUR AT SCRIPPS MERCY HOSPITAL BY HIGHLIGHTING VITAL CARE BEING DELIVERED

*San Diego Patients with Insurance Through Covered California
Have Received Lung and Kidney Transplants, Joint Replacements
and Cancer Treatment Since the Exchange Opened in 2014*

SAN DIEGO, Calif. — Covered California joined the leadership of Scripps Health, the California Department of Health Care Services and local community groups on Friday to highlight the health care that Covered California enrollees have received in premier facilities since the exchange opened in 2014.

As Covered California launches its third open-enrollment period under the Patient Protection and Affordable Care Act, it is releasing data on the number and types of services provided to Covered California enrollees over the first 18 months of coverage.

“The theme of this open-enrollment period is ‘putting a spotlight on enrollment’ and ‘putting a spotlight on hospitals that are delivering on the promise of care,’” said Covered California Executive Director Peter V. Lee. “The statewide tour we are starting in San Diego will seek to bring home the fact that insurance is affordable to many who are now uninsured, and if people get covered they can get top-quality care from our state’s best hospitals and health providers when the worst happens.”

Covered California is spotlighting enrollment because an estimated 2.2 million uninsured Californians remain eligible to get help to make their insurance affordable by enrolling in either Covered California or Medi-Cal. An estimated 750,000 uninsured Californians could enroll through Covered California, including about 60,000 in San Diego County alone.

The spotlight on care is important because more than 2 million Californians have benefited from coverage since the exchange opened its doors, and many have received care and services.

(more)

“We need to remind those who are considering going without coverage that they are a diagnosis or an accident away from going broke or not getting the early intervention that can be life-saving,” said Lee.

Covered California collected data from hospitals statewide about the care being delivered to its members, some of whom have insurance for the first time as a result of the Affordable Care Act.

At Scripps Health’s five area hospitals, 7,584 Covered California members have received care, including:

- 10,280 incidents of general outpatient care.
- 3,946 treatments for broken bones and trauma.
- 611 incidents of care for pneumonia, heart attacks, strokes and kidney infections.
- 239 incidents of pediatric care, including in neonatal intensive care units.
- 227 cancer treatments, including surgeries and chemotherapy.
- 130 heart surgeries and procedures.
- 70 joints replaced (knee and hip).
- 14 organ and bone marrow transplants.

In addition, some 11,000 patients have received care at Scripps’ 28 ambulatory facilities.

“We want to spotlight that the Affordable Care Act is delivering on the promise of care, getting Californians the coverage they need to improve their lives,” Lee said.

“Here in San Diego County, Scripps has always welcomed all patients and provided emergency care to everyone who comes through our doors,” said Chris Van Gorder, Scripps’ president and CEO. “Now, more patients than ever have health coverage. More people with insurance means more people with access to quality care that is there for them when they are sick and — just as importantly — is there to help keep them well in the first place.”

Department of Health Care Services Director Jennifer Kent noted that while those eligible for Medi-Cal can enroll year-round, open enrollment is an important opportunity to get the word out.

(more)

“Open enrollment is a perfect time to reach Californians who don’t have coverage now but may qualify for Medi-Cal,” said Kent. “We want to give everyone the same opportunity as the nearly 4 million others who have enrolled in Medi-Cal since 2014 and are now enjoying the security of quality health care coverage.”

Friday’s event at Scripps Mercy kicked off Covered California’s 38-stop bus tour promoting open enrollment for Covered California, which begins Nov. 1 and continues through Jan. 31. Open enrollment is the time when all uninsured Californians can get health insurance through Covered California, many with financial help to pay their premiums.

Lee said the “Spotlight on Coverage” bus tour, as well as the actual spotlights lighting up iconic buildings, hospitals, medical centers and enrollment locations across the state, are designed to draw attention to open enrollment in Covered California’s historic third year and will seek to reduce the number of Californians without health insurance.

“We have made tremendous progress making Californians aware of Covered California, but one-third of those eligible to get financial help to buy insurance don’t know they qualify for it,” Lee said. “We urge those who need insurance and those who already have it to spread the word as we continue on our historic mission to reduce the number of uninsured in our state.”

Lee said the “Spotlight on Coverage” tour will continue through Nov. 12, with 38 stops planned at hospitals, community clinics, enrollment locations and storefronts from San Diego to Eureka.

Those who need insurance can go to CoveredCA.com to learn about their options and find locations in their community where they can get free, confidential help enrolling.

This year, Covered California has more than 500 storefront locations statewide where individuals can get help enrolling — twice the number available at the start of last year’s open enrollment.

More information on the Covered California patient data from Scripps Health is at: www.CoveredCA.com/news/PDFs/scripps-mercy-delivering-on-the-promise-of-care.pdf.

Scripps Medical Foundation contracts with Blue Shield of California under Covered California, and Scripps hospitals contract with Blue Shield, Health Net, Molina Healthcare and Anthem Blue Cross of California.

(more)

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NEWS RELEASE

FOR IMMEDIATE RELEASE
Oct. 28, 2015

Media Line: (916) 206-7777

COVERED CALIFORNIA LAUNCHES NEW MARKETING AND OUTREACH GAME PLAN TO BOOST AFRICAN-AMERICAN ENROLLMENT

African-American Communities Will See Enhanced Efforts That Highlight the Affordability and Accessibility of Quality Health Insurance

SACRAMENTO, Calif. — Covered California officials kicked off a new marketing and outreach campaign to increase African-American enrollments in the state's health coverage program. The campaign focuses on informing African-Americans about the affordability of quality health insurance, and the exchange will place particular emphasis on specific geographic areas across the state where higher numbers of uninsured and subsidy-eligible African-Americans live, work, play and pray.

Covered California is using a new data-driven approach to target specific ZIP codes across the state, pinpointing where higher numbers of uninsured and subsidy-eligible African-Americans live.

Research conducted by NORC at the University of Chicago in the spring of 2015 revealed that while California's African-Americans are aware of Covered California, they lag behind other ethnicities when it comes to awareness of the financial assistance that is available only through Covered California and that helps consumers pay for their monthly insurance premiums. Data can be found at www.CoveredCA.com/news/PDFs/AAEI-slides.pdf.

New data show that active enrollment among subsidy-eligible African-Americans is at 2.4 percent while African-Americans constitute 5 percent of the state's subsidy-eligible population. The exchange's focused efforts to increase the enrollment percentage begins with the third open-enrollment period, which runs from Nov. 1, 2015, through Jan. 31, 2016.

The campaign centers around establishing enrollment storefronts at highly familiar and visible locations; conducting marketing and outreach that is specific to African-American consumers; and engaging businesses, schools, churches and community organizations. The exchange will encourage uninsured Californians to stop coping with a lack of health coverage and instead enroll in a health insurance plan through Covered California.

(more)

“Changing our state from a culture of coping to a culture of coverage is a long-term proposition,” Covered California Executive Director Peter V. Lee said. “We’ve made great progress in helping African-Americans gain the coverage they need and deserve, but we recognize there is much more to be done to prove to the remaining uninsured the value of having health coverage.”

Outreach materials will advise African-American consumers that their health and well-being is worth insuring and that many Californians are receiving thousands of dollars each year to help with the cost of health insurance premiums — money that African-American consumers should not walk away from.

Covered California is targeting specific areas in Los Angeles and San Diego counties and the Inland Empire, where two-thirds of California’s 130,000 subsidy-eligible African-Americans reside, as well as targeting areas in Northern California in parts of Alameda, Contra Costa, Solano and Sacramento counties.

Covered California will push enrollment through service channels like storefronts in African-American communities where Certified Insurance Agents and Certified Enrollment Counselors will be on hand to assist consumers. With support from Covered California community partners, the agency will sponsor education and outreach campaigns, with resources for pastors at church enrollment events, informational materials for barbershops and hair salons, and “enrollment block parties” in high-priority African-American neighborhoods.

In addition, enhanced social media and marketing campaigns will be launched to reach African-Americans, and Covered California will have partnerships with local schools, businesses and community-based organizations that serve African-American communities.

“We’ll reach out to consumers where they live, work, pray and play,” Lee said. “Covered California will continue to focus on reaching the state’s diverse population and enrolling consumers in all communities during its upcoming open-enrollment period. We want to make sure we see the enrollment numbers in our African-American communities rise.”

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NEWS RELEASE

FOR IMMEDIATE RELEASE
Oct. 22, 2015

Media Line: (916) 206-7777

COVERED CALIFORNIA RELEASES REPORT ON CALIFORNIANS' KNOWLEDGE OF THE AFFORDABLE CARE ACT IN ADVANCE OF UPCOMING OPEN ENROLLMENT

*Awareness of Covered California Is High, but Many Who Are Uninsured
Still Don't Know They Are Eligible for Financial Help to Buy Insurance*

SACRAMENTO — With new research showing that many uninsured consumers who can benefit most still do not understand they can get financial help to buy health insurance, Covered California announced on Thursday that it will launch its third open-enrollment period Nov. 1 by spotlighting basic information about health insurance offerings, enrollment and care.

"We cannot ignore the reality that too many uninsured Californians still don't know they can get financial help to buy brand-name insurance through Covered California," said Covered California Executive Director Peter V. Lee. "We are going to take to the airwaves and hit the road with a new campaign to make sure consumers know what we offer and where they can enroll."

Open enrollment, which runs from Nov. 1 through Jan. 31, will kick off with "Enroll Here" spotlights illuminating storefronts, clinics and hospitals throughout the state, and with a statewide "Spotlight on Coverage" bus tour to bring additional awareness to where consumers can enroll and get care. In addition, a new \$29 million advertising campaign will begin Nov. 2.

Lee said the results from the third California Affordable Care Act "Consumer Tracking Survey" conducted by the independent research organization NORC at the University of Chicago contained important findings on Californians' knowledge of the Affordable Care Act, including:

- Awareness of Covered California has increased substantially since the exchange launched in 2013, and 85 percent of consumers now know about Covered California.
- Covered California is succeeding in reaching diverse audiences, with high awareness across racial and ethnic groups.

(more)

- Many Californians have learned about Covered California through coverage in the news media, which has been a critical tool for educating consumers. More Californians have been exposed to news coverage about Covered California (60 percent) than have seen advertising (56 percent).
- When Californians were exposed to news and advertising, most acted on that information: They discussed Covered California with friends and family, thought about purchasing and went to the CoveredCA.com website for more information.
- Of those who enrolled for the first time, the vast majority (85 percent) were very satisfied or somewhat satisfied with their experience on Covered California's website.

The full survey results can be found at <http://hbex.CoveredCA.com/data-research/library/2015CA-Affordable-Care-Act%20Consumer-Tracking-Survey.pdf>, and summary slides about the major findings can be found at www.CoveredCA.com/news/pdfs/CoveredCA-CaliforniansKnowledgeoftheACA.pdf.

"We feel good about the progress we are making on many fronts," Lee said, "but the survey results also underscore that we have much work still to do."

In particular, Lee highlighted the findings about uninsured consumers' knowledge of the subsidy and of the tax penalty:

- Even with growing awareness, too many of the eligible uninsured — more than one-third — are not aware that Covered California can provide financial help to reduce the cost of their insurance.
- More uninsured consumers know about the tax penalty than know about the subsidy, even though the subsidy is a more important factor for those making the decision to buy insurance.

"The fact that many uninsured still do not know they can get a subsidy to dramatically lower their monthly costs is one of the more striking findings," Lee said. "It's a reminder that the changes in the Affordable Care Act are sweeping and complex and that we need to be sure everyone understands how Covered California works and that significant financial help is available for low- and moderate-income consumers."

Based on the survey results, as well as a review of research from a wide range of other sources (including those who have enrolled), Covered California has refined its comprehensive outreach campaign aimed at reaching the uninsured in their communities, through Navigator grants to community organizations; support for more than 18,000 Certified Insurance Agents; and promotion of storefronts where consumers can get free, confidential help enrolling.

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The outreach campaign will include a new television, radio, digital and outdoor advertising campaign to reach multi-segment, Hispanic, Asian and African-American audiences. Details about the campaign and television ads, the route of the “Spotlight on Coverage” bus tour and new dental coverage will be released next week.

Other changes for Covered California’s third open-enrollment period include:

- Starting open enrollment with more than 500 storefront locations statewide — twice as many as at the start of last year’s open enrollment.
- Elevating brand names on the Covered California website to make sure people understand that the insurance they get through Covered California comes from insurers they know and trust.
- Changing the format of the online Shop and Compare Tool to make the bottom-line price for consumers more prominent.
- Promoting the fact that across the state Covered California will be offering optional adult dental coverage as an added benefit for those who enroll and that in some regions Covered California will offer coverage from two new health insurance companies, Oscar Health Plan of California and UnitedHealthcare Benefits Plan of California.

“Consumers will find new options and new innovations from the health plans offering coverage on the exchange,” Lee said. “Anyone who is uninsured or who buys in the individual market should visit our website at www.CoveredCA.com to explore their health insurance options.”

Lee said Covered California estimates that there are currently about 750,000 Californians eligible for subsidies, and it forecasts that between 295,000 and 450,000 consumers will newly enroll in coverage during open enrollment.

“We have a lot of momentum, and we are heading into our third enrollment season with a high level of public support,” Lee said. “The level of awareness is very high, but we still have work to do to get the word out that coverage is now affordable with financial help.”

Covered California has a vast network of enrollment locations, and it’s easy for consumers to sign up and get help to enroll. For a list of Certified Insurance Agents, Navigators and other enrollment opportunities in their area, consumers should visit the “Find Local Help” section of CoveredCA.com.

More than 2 million people have purchased private health insurance from Covered California since it opened its doors in 2014, and an additional 2 million people have enrolled in Medi-Cal because of changes made as a result of the Affordable Care Act. Most of Covered California’s 1.3 million active members began the renewal process on Oct. 12.

(more)

About Covered California

Covered California is the state's marketplace for the federal Patient Protection and Affordable Care Act. Covered California, in partnership with the California Department of Health Care Services, was charged with creating a new health insurance marketplace in which individuals and small businesses can get access to affordable health insurance plans. Covered California helps individuals determine whether they are eligible for premium assistance that is available on a sliding-scale basis to reduce insurance costs or whether they are eligible for low-cost or no-cost Medi-Cal. Consumers can then compare health insurance plans and choose the plan that works best for their health needs and budget. Small businesses can purchase competitively priced health insurance plans and offer their employees the ability to choose from an array of plans and may qualify for federal tax credits.

Covered California is an independent part of the state government whose job is to make the new market work for California's consumers. It is overseen by a five-member board appointed by the Governor and the Legislature. For more information about Covered California, please visit www.CoveredCA.com.

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NEWS RELEASE

FOR IMMEDIATE RELEASE
Oct. 8, 2015

Media Line: (916) 206-7777

COVERED CALIFORNIA SURPASSES TWO MILLION CONSUMERS SERVED IN NEW ERA OF HEALTH CARE

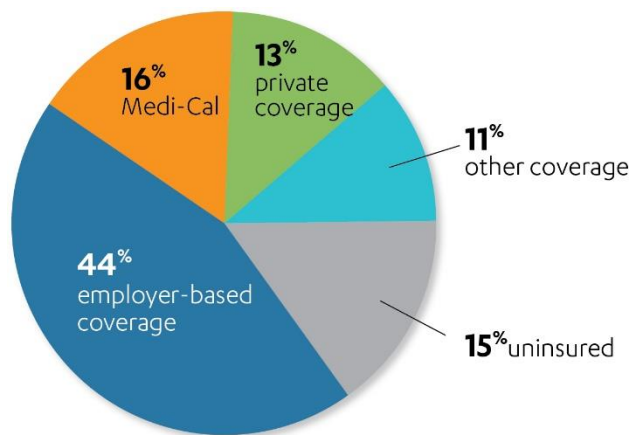
Exchange Also Releases First Comprehensive Report on Its Enrollment of 1.3 Million Consumers as Renewal Starts Oct. 12

SACRAMENTO, Calif. — As Covered California gears up for its renewal and open-enrollment periods, the exchange announced that it has served more than 2 million consumers since it began offering health care coverage in January 2014. The milestone occurred as Covered California released its first-ever comprehensive report on its consumers.

The “Covered California Active Member Profile” looks at the exchange’s 1.3 million current consumers based on ethnicity, age, income, region, county, ZIP code, carrier and metal tier. Covered California also provided new insight from a survey of consumers who moved on from the exchange.

“The data reveal that Covered California is not an end point for every consumer. Rather, it is part of their ongoing journey of ensuring they have health insurance, often moving from one source of coverage to another,” said Covered California Executive Director Peter V. Lee. “Covered California is serving as a vital part of the new health insurance landscape in our state.”

85 Percent of Consumers Who Move on from Covered California Remain Insured



(more)

Lee noted that this is the nature of every individual health insurance market. Consumers come and go depending on their needs and circumstances.

“While the majority of consumers stay with Covered California, the good news is that most of those who move on enroll in another source of coverage and remain insured,” Lee said.

The survey showed that of those who moved to another source of coverage, most gained health care coverage through an employer. Other consumers gained coverage through Medi-Cal; purchased a private plan outside of the exchange; or received health care coverage through another source, such as Medicare or a health exchange in another state.

Covered California also released the first in-depth look at its enrollees. Among the highlights in the “Covered California Active Member Profile”:

- Covered California has 1,307,155 actively enrolled consumers as of June 30, which puts the exchange slightly ahead of its projections for the end of fiscal year 2014-2015.
- The average consumer saves 70 percent off their monthly premium, thanks to financial assistance only available through Covered California.
- In addition to the financial help, 654,000 Californians are shopping smart and choosing Enhanced Silver plans, which make access to care even more affordable through reduced copayments for doctor visits, lab tests and more.
- Special enrollment remains strong, with an average of 40,000 enrollments per month, which exceeds the projection of 25,000 per month.

Covered California also released data on the ethnicity of its enrollment population, which illustrates the positive enrollment trends seen over the last 18 months. While Covered California is increasingly improving its enrollment to better reflect the diversity of subsidy-eligible Californians, this improvement will take time to be fully reflected in active membership, which accounts for all the consumers enrolled since January 2014.

“The data released today show why changing to a culture of coverage is a long-term proposition,” Lee said. “The improvements we have made with partners across California to enroll our diverse state are bearing fruit, and we need to build on the good work we have done.”

In addition, Lee noted the importance of doing additional work to understand the demographics of Covered California’s membership by the rates at which they pay their premium, the rates at which they enroll during special enrollment and where they get their coverage if they leave Covered California.

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Lee said Covered California will continue to focus on reaching the state's diverse population and enrolling consumers in all communities during its upcoming open-enrollment period.

Supporting graphics related to this press release and the "Covered California Active Member Profile" are posted online at: <http://hbex.coveredca.com/data-research/library/Active-Membership-Slides.pdf>.

A link to the complete "Covered California Active Member Profile" can be found here: <http://hbex.coveredca.com/data-research>.

The health exchange also announced that current consumers can begin actively renewing their health insurance coverage on Monday, Oct. 12.

"Covered California consumers will benefit from an increased choice of plans and have access to more providers in 2016," Lee said. "This new era of health care is working in California and around the country."

Consumers can log into their Covered California online accounts to update their personal information, provide consent to verify their income, review their options and shop around if they are looking for a plan that better suits their needs. Consumers who do not take action by Dec. 15 will be automatically renewed into their existing plan.

"If you're happy with your plan, and you want to maintain the level of coverage that you've enjoyed in 2015, you don't have to do anything," Lee said. "In addition, we know that about 20 percent of consumers who choose to keep their current plan will see a decrease in their premiums. However, some consumers may be able to save money and keep the same level of coverage if they shop around."

Earlier this year, Covered California announced that thanks to its aggressive negotiating with health plans, the average rate increase was only 4 percent, and many consumers may be able to limit any premium increase, or reduce their current payments, by shopping around and switching to the lowest-cost plan in their same metal tier.

Consumers renewing their coverage for 2016 will have more health plans to choose from and access to more providers. Covered California previously announced that two health insurance companies, Oscar Health Plan of California and UnitedHealthcare Benefits Plan of California, will be offering products on the exchange. In addition, Blue Shield of California, Health Net and Molina Healthcare will be expanding to serve new areas. As a result, every Covered California consumer will have at least two plans to choose from, and 99.6 percent of consumers will have at least three options.

In 2016, more than 90 percent of hospitals ("general acute centers," as designated by the California Office of Statewide Health Planning and Development) in California will be available through at least one health insurance company, and now about three-quarters (74 percent) will be available through three or more companies.

(more)

“We have also increased the number of services that are no longer subject to a deductible,” Lee said. “This will make it easier for consumers to see their doctor and get the right care at the right time.”

For consumers who are currently uninsured, Covered California’s open-enrollment period resumes on Nov. 1 and continues through Jan. 31, 2016. Right now consumers can find out if they qualify for financial help, compare the various plans available in their area and get a preliminary estimate of costs by using Covered California’s Shop and Compare Tool (at www.CoveredCA.com/shopandcompare/#calculator).

Individuals who have health coverage through Medi-Cal renew their coverage throughout the year, on a rolling monthly schedule. Medi-Cal will contact them directly if they need to take action. Unless they are contacted by Medi-Cal, these individuals do not need to go to the Covered California website to renew or apply.

About Covered California

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Los Angeles Times

Officials push for more Californians to sign up for health insurance

By: Abby Sewell

Oct. 31, 2015



Public officials have planned a promotional bus tour to get more Californians to enroll in the state's health insurance exchange, Covered California, with the first day of this year's open-enrollment period beginning Sunday.

Residents will have three months during open enrollment to sign up for the exchange. Covered California has 1.3 million consumers, about 90% of whom receive subsidies to help cover their premiums.

About 4 million Californians remain uninsured. Of those, officials estimate that 1.4 million would qualify for Medi-Cal, the state's Medicaid program for low-income

residents, and 750,000 others would be eligible for subsidies toward private health insurance.

The statewide bus tour is intended to draw more people to sign up for the exchange and begins Sunday at the AltaMed Medical Group's Boyle Heights office, with Covered California Executive Director Peter V. Lee to be joined by elected officials, including U.S. Rep. Lucille Roybal-Allard (D-Los Angeles), state Sen. Ed Hernandez (D-West Covina), Assemblyman Jimmy Gomez (D-Los Angeles) and county Supervisor Hilda Solis.

Free health and dental screenings will be offered until noon. The bus then will continue on to St. Brigid Catholic Church in Vermont Square, where a health fair will offer health screenings, flu shots and HIV testing, followed by stops in Baldwin Hills, Lynwood and downtown Los Angeles.

Officials are hoping to enroll 295,000 to 450,000 more Californians during the enrollment period.

Health Affairs Blog

Health Risk Continues To Improve In Covered California

By: Zachary Goldman, John Bertko, and Jim Watkins
Oct. 26, 2015



The recent release of [risk corridor results](#) by the Centers for Medicare and Medicaid Services (CMS) has highlighted a national issue for health insurers offering coverage in the individual market under the Affordable Care Act (ACA). In many states, some insurers did not project premium rates at sufficient levels to account for the risk of the newly insured population. Thus, there were insufficient risk corridor “payables” available from conservatively-priced plans to cover all risk corridor “receivables” for underpriced plans to compensate for risk corridor-eligible losses.

However, this phenomena is highly state-specific. In contrast to most of the country, [Covered California](#), California's health insurance exchange, had much greater success enrolling a diverse population and did not have a market that allowed the continuation of low-risk, remaining “transitional” plans once the ACA was implemented. As a result, the health risk scores of enrollees for individual plans in the exchange have stabilized in the second year (regressed to the mean), with risk being more evenly distributed across all of the plans.

At the same time, the overall risk score statewide for enrollees with chronic conditions has decreased, indicating that the 2015 cohort of enrollees is slightly healthier than the 2014 cohort. Understanding a population's health risk, which is a proxy for anticipated health care costs, is critical to accurately setting the next year's premiums. As an [active purchaser](#), Covered California used this information to better negotiate 2016 premiums on behalf of Californians.

2016 Premium Growth Is Lower Than 2015

Each of the actuaries from the ten major insurance carriers participating in Covered California in 2015 used the risk score analysis along with claims data to set 2016 premium rates lower than anticipated and lower than the [individual market's historical average](#). (The exchange added two more health insurers—United Healthcare Group and Oscar—for 2016.) Partly as a result of sharing these analyses with carriers, Covered California's premiums in 2016 are only increasing by a [weighted average of 4.0 percent](#), which is less than the 2015 weighted premium growth of 4.2 percent. This also benefits the entire individual insurance market, since Covered California's negotiated rates carry over into off-exchange premiums also.

The health risk findings disprove what many ACA detractors once opined: that health insurance exchanges will not be able to attract healthy enrollees, and the resulting death spiral will increase premiums to unsustainable levels. The ACA is working in California. Other health insurance exchanges can also use a comparative risk score analysis in conjunction with active purchasing tactics to reduce premium increases.

Developing The Risk Scores

An [initial study](#) analyzed the risk scores of Covered California's 2014 enrollee population, finding that risk scores varied considerably by plan but that the overall enrollment group had a relatively low number of people with chronic conditions. Using the same approach, we updated the analysis for the 2015 enrollee cohort with more recent hospital discharge and emergency department data.

Using individual-level unique identifiers, we combined two datasets: data from Covered California's enrollment system as of May 2014 and April 2015; and, the 2013 data files (the most recent available) from the California Office of Statewide Health Planning and Development (OSHPD) emergency department and inpatient discharge datasets (a statewide all-payer claims database).

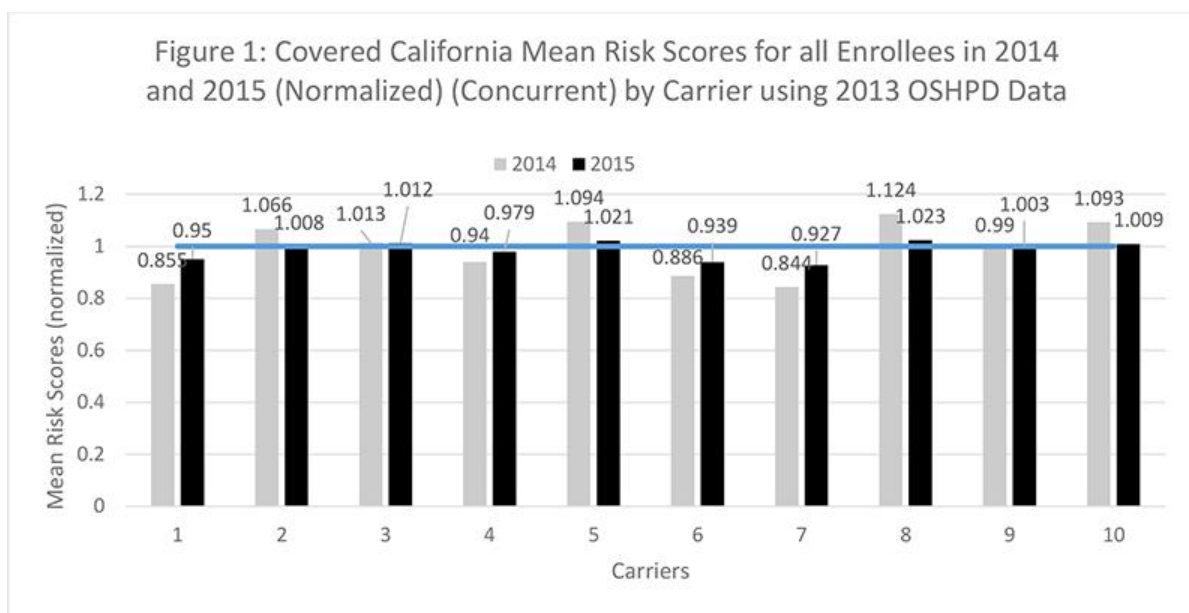
Next, we derived risk scores for each plan based on the individual-level diagnoses contained in the OSHPD datasets, when present, and the age and sex of each enrollee derived from Covered California eligibility data. In calculating these the scores, we applied risk weights developed using the Chronic Illness and Disability Payment System (CDPS) for the Temporary Assistance for Needy Families (TANF) population under California's Medicaid program (MediCal). This allowed us to better align the derived risk scores with the Covered California population, the majority of whom earn less than 250 percent of the Federal Poverty Level and are non-disabled (similar to a TANF population). For the vast majority of individuals who did not have either a hospitalization or an emergency department visit in 2013, we derived the risk weights based on enrollees' age and sex only.

As a side note, we used the already-available risk weights from MediCal in our 2014 analysis because of time constraints. To have risk scores available in time for the 2015 premium negotiating sessions, one of the authors had his team from the MediCal program use the available TANF risk adjustment weights, rather than use a longer process to input the more complex Hierarchical Condition Categories risk adjustment system used by the U.S. Department of Health and Human Services. In updating the analysis for 2016 premium negotiations, we continued to use the CDPS/TANF weights to provide consistent results and better year-over-year comparisons.

We then standardized the risk scores by dividing the unadjusted score for each health insurance carrier by the average risk score for Covered California's entire population. The resulting adjusted risk score normalizes the distribution to 1.00 for the Covered California enrollment (but doesn't include any off-exchange enrollment), such that scores below 1.00 are relatively lower risk than scores above 1.00. Comparing the normalized risk score of enrollees in each of the ten health insurance carriers allowed us to assess any differences in average risk scores across the carriers. Lastly, we compared the two-year historical trend to evaluate how risk scores changed.

Risk Scores Are Stabilizing And Improving

Figure 1 shows the 2014 and 2015 mean risk scores by carrier. Without exception, every carrier's population mean risk score moved closer to 1.00 in Covered California's second year, which is good news for the stability of premiums. It means that the enrollment of each specific carrier is moving towards the statewide average risk, so no carrier appears to be attracting mainly "good risks" or mainly "high risk" individuals. This enrollment pattern is important for Covered California's long-term stability.



Source: Covered California

Additionally, overall hospitalization and emergency department data showed that enrollees had less severe conditions in 2015, compared with 2014. The raw (non-normalized) risk scores for those who were hospitalized decreased by over 9 percent from 2014 to 2015, even though the percent of enrollees who were hospitalized or had an emergency department visit remained stable. (In 2014, 9.2 percent of enrollees had a hospitalization or emergency department visit, compared to 9.3 percent of the 2015 enrollee cohort.)

The hospitalization and emergency department visits and the derived risk scores provide only proxies for an individual's or a population's risk, and do not perfectly reflect the actual health risk for each individual enrollee. The risk score analysis is not a crystal ball and will not predict the future, but the approach is rooted in actuarial science and accepted as an important gauge of future health costs.

The leveling off of risk scores across carriers and the overall reduction in hospitalizations and emergency department severity mean that Covered California has enrolled enough people, and enough healthy people, to stabilize premiums and keep premium growth within reasonable limits, which is great news for Californians.

Working By Design

Covered California is working by design. The Affordable Care Act was designed to level the playing field for all health insurers, regardless of the relative health of the enrollees they might attract, in comparison to their competitors. Health insurance carriers in a state must use a single risk pool with both exchange and non-exchange enrollees to avoid adverse risk selection. The guaranteed issue requirement allows individuals to buy much-needed health insurance even if they have pre-existing conditions. Subsidies

in the form of premium tax credits provide financial assistance to those who do not have health insurance through employer sponsored coverage.

In Covered California, there is no death spiral. Premiums are not skyrocketing. In fact, premium growth is lower in 2016 than it was last year, and the number of uninsured Californians is [decreasing](#). Also by design, Covered California serves as a sort of “way station” for those who are in between other sources of health coverage. These shorter-term enrollees are a critical part of Covered California’s stability and success.

If the risk score analysis provided the *justification* to lower 2016 premiums, it was Covered California’s role as an active purchaser that served as the *mechanism* to do so. Covered California opted early on to use all of the tools available under the ACA, including the ability to select the health plans with the highest value to be sold in the exchange; to standardize all plans’ health benefits so that health insurance companies had to compete on price, provider network, and quality; and to actively negotiate premiums with carriers to get the best value for Californians.

Covered California also opted to require health plans contracting with the exchange in 2014 to immediately transition all of their policies to ACA-compliant products (with no “transitional grandfathered” products remaining), thereby making a short-term political sacrifice to gain long-term market stability. Health insurance exchanges in other states do not employ all the tools available in the ACA, and many states prolonged the transition of non-ACA compliant health plans.

California, like a few other states, also benefits from a state-wide all-payer claims database, which is needed for a population-level risk score analysis. But many other states have access to the federal government’s [Healthcare Cost and Utilization Project](#) data, which can be used in place of a state-specific claims database.

Covered California is an “early adopter” of the new tools, but only because the size of the state and its exchange allow it to leverage all of the tools available. Other states, too, can use similar methods to calculate the enrollee population’s risk and the relative health risk among insurance carriers. The critical step, though, is to use those data to ensure any premium increases are proportional to the anticipated cost of delivering health care. Other states’ health insurance exchanges can also take more actions to achieve low premium increases; exchanges can be sources for data-driven and actuarially sound analysis that keeps health insurance premiums affordable.

How Navigators Plan To Insure the Remaining Uninsured

By: Heather Drost
Oct. 14, 2015

The Affordable Care Act's third open enrollment period begins on Nov. 1.

According to the latest HHS data, an estimated 10.5 million uninsured U.S. residents are eligible to sign up for health coverage via the exchanges. That remaining uninsured population, along with the millions of others looking to enroll or re-enroll in exchange coverage, are the prime targets for this year's navigators.

While some obstacles, like technical glitches, to enrolling the uninsured have been eliminated, navigators don't necessarily have an easy task. This edition of "Road to Reform" takes a look at what navigators will have to tackle as open enrollment kicks off.

What Navigators Do

For the last three years, CMS has awarded navigator grants to organizations located in states that rely on HealthCare.gov or operate an exchange in partnership with the federal government. The grants support ACA outreach, as well as navigators who offer in-person, impartial information about health plans, federal subsidies and how to enroll in coverage. States operating their own exchanges also support their own programs to fund navigators. For example, California's health insurance exchange -- Covered California -- has announced plans to dole out more than \$10 million in navigator grants to 68 organizations.

Last month, CMS awarded \$67 million in navigator grant awards to 100 organizations in 34 states. However, unlike past navigator grants -- which expired after one year -- the new grants cover a 36-month period, funded in 12-month increments. A CMS spokesperson said the change in funding period aims to improve efficiency, partly by reducing annual startup time, and to provide navigator grant recipients with more consistency each year.

This Year's Enrollment Challenges

Navigators face some unique challenges in the ACA's third open enrollment period. Zach Reat -- director of work supplies initiatives at the Ohio Association of Foodbanks, which has received federal navigator grants for each enrollment period -- said, "Many of the most severe barriers to enrollment that we experienced in the first [open enrollment] period (website failure, lack of coordination between state and federal agencies,

inadequate time to prepare navigators and other assisters) have been addressed by this point."

However, he noted, "We continue to encounter major barriers related to understanding of the law, particularly provisions that help to make coverage affordable." He added, "People are still making decisions about the law based on false or misleading information."

Oddly enough, one of the biggest challenges for navigators this year is the direct result of the past years' efforts to enroll U.S. residents in coverage: a smaller, harder to reach uninsured population.

At the national level, the Obama administration in August announced that the uninsured population had dropped by about 33% since 2013.

Tia Whitaker, statewide director of outreach and enrollment at the Pennsylvania Association of Community Health Centers, noted that Pennsylvania's uninsured rate has fallen from about 11% in 2013 to 10.3% in 2014.

In California, the U.S. Census report showed the uninsured population had fallen from 17.2% in 2013 to 12.4% in 2014. However, the decline makes the uninsured population increasingly harder to reach, according to Camey Christenson -- director of business and partnership development at 2-1-1 San Diego, which is expected to receive a \$250,000 grant from Covered California.

According to Reat, Ohio's uninsured population "is smaller, has a higher income due to enrollment in Medicaid expansion, and may still be unaware of financial assistance available to help make health insurance affordable."

The New Approaches

To better address the needs of this year's uninsured population, navigators are adjusting their strategies and data-tracking efforts.

For example, Whitaker said her organization will conduct "focused outreach on special populations," such as immigrants, seasonal and migrant workers, and the lesbian, gay, bisexual and transgender community.

Reat said his organization will continue to focus efforts on "getting the message about the ACA out in communities with limited English proficiency and rural communities." He said his organization is going to work with "trusted messengers" -- agencies or individuals that are trusted within communities -- to share information about available services, particularly in minority communities. In addition, the Ohio Association of Foodbanks manages a multiplatform campaign -- called "Are You Covered?" -- that aims to raise awareness about enrollment and help state residents find local assistance.

In San Diego, Christenson said that her organization is "using social media messaging, targeted outreach events and community partnerships to seek the remaining uninsured."

Christenson also noted that her organization has updated its metrics to gauge success focusing on the number of individuals who renew health plans through Covered California, as opposed to outreach and enrollment numbers.

Meanwhile, Whitaker's organization -- which has relied on an online, HIPAA-compliant database to track enrollment data -- has expanded the metrics it collects to include breakdowns of language categories and Healthy PA enrollments. Healthy PA is Pennsylvania's expanded Medicaid program.

The Future of Navigators

While navigators across the country have helped enroll millions of U.S. residents in exchange coverage, some have raised questions about the program's sustainability. Austin Bordelon of Leavitt Partners in a blog post wrote that some state-run health insurance exchanges -- including Colorado, Hawaii, Massachusetts and Vermont -- have experienced budget deficits or raised concerns about staying on budget in the future.

HHS also has acknowledge some budget issues, noting that premium assessments charged to participating insurers are not sufficiently covering the federal exchange's operating costs, according to Bordelon.

Although he noted that navigator programs will continue because they are required under the ACA, he expects "marketplaces to prioritize funding for alternative outreach programs that are capable of reaching a broader audience at a lower incremental cost," adding, "This could include giving preference to dollars used for marketing and media ad-buys, or even system enhancements that encourage additional involvement from agents and brokers."

Tracy Gnadinger in a Health Affairs policy brief also raised concerns about the sustainability of navigators and the growing role health insurance brokers will play in enrollment. She noted that when funding for navigators decreased for the second open enrollment period, "some states began cultivating a closer relationship with brokers to maximize enrollment."

Gnadinger highlighted the potential conflicts brokers, who typically are paid a commission from insurers, present, as they are not required by law to inform consumers about all available policies.

The role of navigators in "educating the public on the [ACA's] requirement to have insurance, assisting with enrollment, answering difficult eligibility questions, engaging hard-to-reach populations and helping people understand how to use their insurance once they purchase a policy" is "as important as ever," Gnadinger argued.

Marin's uninsured population shrinking thanks to Obamacare

Nov. 14, 2015

By: Richard Halstead

Marin health officials say the number of uninsured residents in the county is dwindling as the Affordable Care Act's third open-enrollment season begins this month.

But consumer advocates say medical insurance customers face an uphill battle when trying to figure out which plan is the best buy for them. They say insurance costs, especially in Northern California, are increasing while the network of doctors offered in plans is narrowing.

Since the initial enrollment period in 2013, 16,774 Marin residents have purchased insurance through Covered California, the state's health insurance exchange, and another 14,563 Marin residents have gained access to medical care via Medi-Cal, said Heather Ravani, human services director in the county's Department of Health and Human Services.

"Those are pretty high numbers for this county," Ravani said. "It begs the question of how deep can your saturation go."

Ravani said there is no data on precisely how many Marin residents remain without medical insurance. In August 2013, the Sacramento Bee reported that Marin was the California county with the lowest rate of uninsured residents: 12 percent. Given that Marin's population in 2013 was 258,365 that 12 percent would amount to about 31,000 people, roughly the same number that has gained coverage since implementation of the Affordable Care Act.

Ravani said the 12 percent figure "was the number we were working off of in 2013, and we've exceed that."

She added, however, "I think it would be a stretch for me to say that virtually everybody in Marin is now insured because it's a moving target."

USE CAUTION

Carmen Balber, executive director of Consumer Watchdog, a nonprofit based in Santa Monica, said people purchasing health insurance for the first time or switching plans during this enrollment period need to proceed with caution.

Earlier this month, the California Department of Managed Health Care fined Anthem Blue Cross \$250,000 and Blue Shield \$350,000 for inaccurate provider directories. After receiving numerous complaints between January and May 2014, the department surveyed the plans' provider networks. It found that for Blue Shield, about 18 percent of the physicians listed in Blue Shield's provider directory were not at the location listed and, of those who were at the location listed, 8.8 percent were not willing to accept members enrolled in Blue Shield's Covered California products. For Anthem, 12.5 percent of the physicians were not at the location listed in the provider directory and, that of those who were at the location listed, 12.8 percent were not willing to accept patients enrolled in Anthem's Covered California products.

The Department of Managed Health Care said both insurers must reimburse policyholders who were negatively affected. It said Blue Shield had already reimbursed more than \$38 million to enrollees who incurred out-of-network costs.

Lindy Wagner, a spokeswoman for Blue Shield, said, "The settlement addresses past issues raised in 2014, and our members should not be concerned about their current plan or its networks."

CONFUSION

In the spring of 2014, Marin residents scheduling medical procedures at local hospitals reported that they were having trouble determining if medical groups supplying ancillary services to the hospitals — anesthesiologists, radiologists, pathologists and hospitalists — had contracted with Blue Shield and Anthem Blue Cross to serve their new Affordable Care Act customers. Calls to medical groups and insurance companies elicited sometimes contradictory responses regarding whether the groups were contracting with the insurance companies.

Representatives of Anthem and Blue Shield say that Marin Medical Laboratories, California Advanced Imaging Medical Associates, Medical Anesthesia Consultants, Anesthesiology Consultants of Marin, Marin Hospitalists Medical Group and Marin Emergency Physicians Medical Group are currently part of their networks. But it is impossible to verify that using the insurance companies' online search tools. Both companies said that customers need to contact their customer service departments if they want to confirm that a medical group providing ancillary services belongs to their networks.

Consumer Watchdog's Balber said, "We always recommend that consumers contact both their health plan, their health insurance company and their physician to double-confirm that the doctors they want to see are in the network they're choosing."

NARROW NETWORKS

Balber said that while consumers can research whether a specific doctor is part of the plan they're thinking of purchasing, "one of the biggest problems that is now emerging is how narrow networks are to begin with."

A University of Pennsylvania study released in August ranked California as one of the top four states with the most narrow networks. The study rated 75 percent of California health insurance networks as "narrow."

"You can confirm your existing doctors are in the network, but you have no way of knowing what kind of specialists you might need six months from now," Balber said.

But Darrel Ng, a spokesman for Anthem, said, "Studies show that narrow networks cut costs, but not quality. The head of Covered California is on the record supporting narrow networks. "

And as networks grow narrower the price of health insurance is rising.

"Northern California is seeing the largest rate increases by far, as high as an average of 12.8 percent in some counties," Balber said. "So consumers need to shop around."

The Modesto Bee

modbee.com

Covered California exchange offers dental coverage for adults in 2016

By: Ken Carlson
Nov. 11, 2015

The Patient Protection and Affordable Care Act will brighten smiles among adults in California in 2016.

For the first time, the Covered California health exchange will offer dental coverage for adults through optional family dental plans available in 2016. While dental benefits for children have been included in the cost of Covered California health plans, the adult dental benefits come at an additional expense.

To purchase the dental coverage, adults must be enrolled in a Covered California health plan.

The period for signing up for health insurance through Covered California, or making changes to coverage, began this month and continues through Jan. 31.

More than 2 million California residents have obtained coverage through the state exchange since it began offering affordable health plans in 2014. The state exchange was created to administer provisions of the Affordable Care Act, which was signed into law by President Barack Obama in 2010.

Five carriers are offering the family dental plans within Covered California's pricing Region 10, which includes Stanislaus, San Joaquin, Merced, Mariposa and Tulare counties. Adults are eligible for a family dental plan regardless of whether they have children.

The preferred provider plans of Anthem Blue Cross and Delta Dental are available throughout the five-county region; the others, including the Access Dental HMO, Delta Dental HMO, Dental Health Services HMO and Premier Access PPO, are offered only in parts of the region.

The dental plans have comprehensive coverage for children and adults. According to a Covered California booklet, parents can enroll in a family dental plan without including the whole family.

Covered California created standard dental benefits and cost-sharing for patients under the HMOs and PPOs.

With the health maintenance organization coverage, there is no charge for adults and children for diagnostic and preventive services such as X-rays, exams, cleanings and sealants. The co-payments for children and adults are \$25 for a filling; \$300 for a root canal; \$65 for a tooth extraction; and \$300 for a crown. For a family with two or more children, the annual out-of-pocket maximum is \$700, though it does not apply to adults.

The patient cost-sharing is different with the preferred provider organization plans. There is no charge for diagnostic and preventive services, but patients are expected to pay 20 percent of the cost for fillings and 50 percent for root canals, extractions and crowns. Annual deductibles are \$65 for children and \$50 for adults. The childrens' out-of-pocket maximum is \$700 for the year; adults have an annual benefit limit of \$1,500.

According to the "shop and compare" tool at www.Coveredca.com, an adult in Modesto earning \$50,000 a year can purchase the Access Dental HMO for \$13 a month; the Delta Dental HMO for \$14 monthly; the Dental Health Services HMO for \$14 monthly; and Delta Dental PPO for \$31 monthly. The other plans listed cost \$49 to \$56 a month.

In Modesto, parents with two children, with a household income of \$60,000 a year, can purchase the Access Dental HMO for \$26 a month; the Delta Dental HMO for \$28 a month; or the Dental Health Services HMO for \$28 a month. Quotes for other plans were much higher. Remember that a child's dental benefits are included in Covered California health insurance plans at no extra charge.

REGISTER-PAJARONIAN

Covered California launches statewide campaign

By: Todd Guild
Nov. 6, 2015



WATSONVILLE — Before President Barack Obama's Patient Protection and Affordable Care Act became law in 2010, an estimated 30 percent of Watsonville's population lacked medical insurance.

That number has been reduced to nine percent, thanks to efforts by local nonprofit organizations, health workers and others who helped spread the word about the controversial system that has come to be known as Obamacare.

It was for that reason that the Covered California bus rolled into Watsonville Thursday afternoon, part of a 38-stop tour honoring communities that most drastically reduced uninsured rates by enrolling residents.

Monterey County **The Herald**

Covered Cal makes stop at Salinas Valley Memorial to tout sign-up period

By: Jim Johnson
Nov. 5, 2015



Salinas >> More than 1,900 patients with health insurance purchased through the Covered California health exchange made more than 4,400 visits to Salinas Valley

Memorial Hospital through the first 18 months of the Affordable Care Act's full implementation, according to hospital records.

From Jan. 1, 2014 to June 30, those patients sought and received care ranging from general outpatient visits and treatment for broken bones, cancer and heart attacks to maternal care and childbirth, heart surgeries and pediatric care, among other health needs.

On Thursday, Covered California executive director Peter Lee cited those numbers during a visit to Salinas Valley Memorial as part of a 38-stop bus tour to promote the exchange's third open enrollment period, which runs from Nov. 1 to Jan. 31. Those who want coverage starting Jan. 1 must sign up by Dec. 15.

Lee said the statistics showed that patients insured through the exchange, most of them with subsidized premiums, were able to access a variety of care they needed.

"We're seeing people getting the best care right here in Salinas," Lee said. "In the end, it's not about insurance but about getting the right care at the right time."

Salinas Valley Memorial CEO Pete Delgado told a small gathering at the hospital's entrance to mark the Covered California stop that efforts are under way to expand health care access to the some 13,000 Monterey County residents insured through Covered California.

In addition to entering into a partnership last summer with the county's largest primary and specialty care organization, PrimeCare Medical Group, Delgado said the hospital opened a rural health center, Taylor Farms Family & Wellness Center in Gonzales, an "underserved" area.

"We're doing everything we can to expand access to care," Delgado said. "We're very pleased to have the Covered California campaign here and to partner with them to ensure our community has easy access to critical follow-up care and the preventative health and wellness services they need and deserve."

According to Covered California, about 30,000 people have signed up for health insurance through the exchange in Region 9, including Monterey, Santa Cruz and San Benito counties, and another 15,000 are eligible to do so. Another 28,000 are eligible for expanded Medi-Cal, according to Covered California.

Lee said the bus stop made a return visit to Salinas, following last year's stop at Natividad Medical Center because of the importance of reaching out to the Latino community to get them insured. Just as the success of national health care reform depends on California, so does the state's success depend on Latino participation.

Salinas Valley Memorial employs MedAssist, a contract firm, to help its patients navigate the Covered California website and sign up for health insurance, while Natividad and Community Hospital of the Monterey Peninsula offer staff assistance.

For the first time, Monterey County residents will have a choice of health insurance providers through the exchange as Blue Shield and United Health Care have joined Blue Cross in offering local plans.



THE TRIBUNE

Covered California has insured 11,000 in San Luis Obispo County

By: Tonya Strickland
Nov. 4, 2015

About 11,000 people in San Luis Obispo County, primarily from the North and South counties, are enrolled today in individual health insurance policies through Covered California, County Health Officer Dr. Penny Borenstein said Wednesday.

Before Covered California was established in 2014, about 43,000 people, or 16 percent of the county's total population, were uninsured. Today, that figure is down to 10 percent, Borenstein said.

"We have made a huge dent in that 43,000 number," she said.

Borenstein's message was part of a morning event promoting Covered California at Twin Cities Community Hospital in Templeton, when the state health exchange's executive director stopped there as part of a 38-city bus tour across California to let the public know that open enrollment has started for 2016. The event attracted a few dozen attendees.

Morro Bay resident Nate Hedges is among the 11,000 county residents who have bought an individual health insurance policy through Covered California. Also a certified Covered California enrollment counselor, Hedges spoke at the event.

"My family and I have had Covered California since the beginning, and we've benefited from having access to great doctors," Hedges said. "I recall a time where we missed an

appointment with one doctor in San Luis Obispo. And I picked up the phone and made two phone calls and was able to find an excellent specialist right here and that worked out very well for us.”

As a certified enrollment counselor, Hedges said he’s been able to help several people sign up for an insurance policy and to explain the income-based federal subsidies available to offset the cost of monthly premiums. About 90 percent of the 1.3 million Californians enrolled in a health plan through Covered California this year receive some type of subsidy.

Hedges noted that under the federal Affordable Care Act, no one can be denied coverage for a pre-existing condition. Before the health care law went into effect, many people with chronic conditions, such as diabetes, were denied coverage or paid exorbitant amounts for health insurance. Today, that’s not the case, “with many of them paying under \$100 a month (for monthly premiums), which is just incredible,” he said.

Open enrollment to buy a 2016 individual health insurance policy through Covered California started Sunday and continues through Jan. 31.

San Luis Obispo County residents can choose from three insurance providers for the first time. This year, as in the past, people can compare and purchase a policy on the Covered California website and by calling its information line, or through insurance agents and enrollment counselors certified by Covered California to assist people free of charge. In San Luis Obispo County, about 150 insurance agents and six community agencies have been certified.

Covered California Executive Director Peter Lee spoke at Wednesday’s event.

Afterward, Lee said that this year’s bus tour has a dual focus: making sure Californians know that federal subsidies exist to help cover premiums and to communicate that plans offered through Covered California offer consumers local referral access to big-name medical providers, such as Stanford and Cedars-Sinai medical centers.

“Twin Cities is a front-line hospital, but if you have the worst conditions possible, you have access to ... the best hospitals in the world,” Lee said.

Lee said Covered California redesigned its website this year to better highlight the real out-of-pocket costs of the health care plans. For example, in its “shop and compare” online tool, entering a person’s annual income, age and zip code brings up information on what health care plans are available to them and the cost of each plan’s monthly premiums.

The average health care premium cost for an individual is about \$600 a month, but subsidies can reduce the out-of-pocket cost for many consumers to \$150 per month and as low as \$50 depending on income. In previous years, the website didn’t make clear

upfront that most of that \$600 cost would be covered by subsidies, which may have meant the program lost some sign-ups.

“People just had sticker shock and clicked away,” Lee said. “Now we’ve been pounding the pavement saying that the subsidies exist.”

THE SACRAMENTO BEE

Covered California to throw spotlight – literally – on Sacramento's Tower Bridge

By: Claudia Buck
Oct. 29, 2015



Covered California officials are launching a 10-day, 29-city bus tour this week that will include shining nightly spotlights on iconic California buildings, including Sacramento's Tower Bridge and the LAX airport.

Starting Friday in San Diego, the tour will visit several dozen hospitals, community clinics and enrollment sites, part of the state's third annual open-enrollment season under Obamacare. It ends Nov. 12 in Sacramento.

Dubbed a "spotlight on enrollment," the tour is illuminating small storefronts as well as well-known buildings, such as San Francisco's Coit Tower, that will be splashed at night with the Covered California logo. In Sacramento, the lights will be on Sacramento City Hall and the Tower Bridge.

"The point of the bus tour is to bring home the message that health care is local. We still have 2 million Californians who can get health care if they understand what's available to them," said Peter Lee, Covered California's executive director. The 2016 open-enrollment season runs Nov. 1 through Jan. 31.

Most of the estimated 2 million uninsured are eligible for Medi-Cal coverage. It's the remaining 750,000 – who are eligible for subsidies to reduce their premiums – that state officials are going after. There's an emphasis this year on African Americans, who represented only 3.6 percent of enrollees last year.

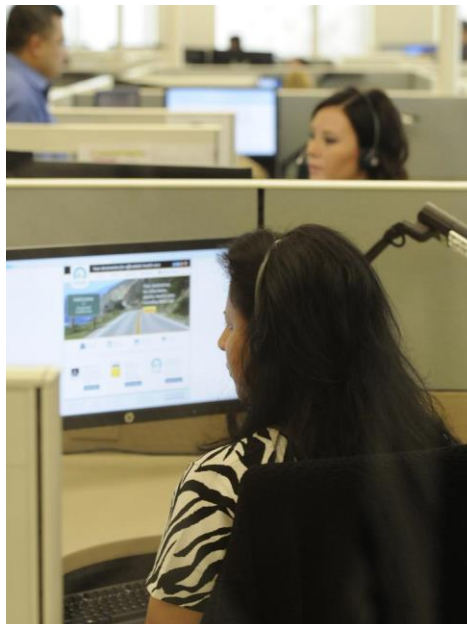
For more information on enrolling: CoveredCa.com or call 800-300-1506.

Covered California signs \$12M call center deal; hiring blitz starts Wednesday

By: Kathy Robertson
Oct. 27, 2015

The scramble is on for up to 500 temporary call-center workers to answer questions and help enroll consumers in Covered California.

Virginia-based Faneuil Inc., in partnership with InSync Consulting Services in Roseville, won a \$12 million contract for the business early this month. Open enrollment starts Sunday at Covered California and runs through Jan. 31, 2016.



The contract, down from \$14 million last year, augments the work done at Covered California's existing call center in Rancho Cordova. There were discussions this spring

about eliminating the extra help, but Covered California released a request for proposals in September. Faneuil won it this month.

The company offers quick-response call center deployment and did work for the Federal Emergency Management Agency after Hurricane Katrina. InSync, a national provider of IT staffing and consulting services, is a partner on the project and will help staff the call center.

Faneuil will host two hiring events this week from 9 a.m. to 3 p.m. The first will be held Wednesday at Faneuil's call center at 7405 Greenhaven Drive. The second is Thursday at the Sacramento Employment and Training center at 925 Del Paso Blvd.

Faneuil is looking for workers with a minimum of six months of customer-service or call-center experience who are able to pass a background check and work 40 hours a week. Schedules may include evenings and weekends, said Tim Coxen, who manages InSync's Roseville office.

"We're back in the hiring mode," Coxen said. "We already hired several hundred customer service reps and are looking to bring on 400 to 500 more in the next week."

San Jose Mercury News

Amid debate on drug prices, California leads way on cost controls

By: Tracy Seipel
Oct. 24, 2015

A pharmaceutical firm's recent decision to hike the cost of a prescription drug that treats foodborne illness from \$18 to \$750 per tablet outraged millions of Americans.

The move prompted Democratic presidential candidate Hillary Clinton to accuse the Swiss-American company Turing of "price gouging." The following day, Clinton unveiled her national plan to rein in drug prices -- and borrowed an idea from California: cap out-of-pocket costs for some prescriptions to save patients with chronic or serious health conditions thousands of dollars.

The Golden State's effort to tackle the issue of skyrocketing drug prices is among the most aggressive in the nation, opening up a wider debate over an industry whose sales account for 10 percent of the nation's \$3 trillion in annual health care costs.

There seems little doubt that the controversy over rising drug prices will rage on and become a key issue in the presidential race. Though average generic drug prices have fallen by more than half since 2008, costs for the name-brand prescription drugs that treat chronic and life-threatening diseases have more than doubled over that period, up 127 percent, far more than the 11.24 percent inflation rate.

For 28-year-old Sacramento resident Charis Hill, who suffers from a type of arthritis that causes lower back pain and stiffness, California's new rules mean she won't have to fear a \$2,000 monthly price tag for Enbrel, a specialty drug she needs to live as normal a life as possible.

"I feel very relieved, not just for me, but for so many people who have chronic health conditions," Hill said. "This program will allow people to access drugs they could not afford."

Critics counter that such price controls could backfire, leading to higher insurance premiums for everyone and discouraging drug development.

"It's sort of a popular thing to say, 'I want lower drug prices,' " said Geoffrey Joyce, chairman of the pharmaceutical and health economics department at the University of Southern California School of Pharmacy. "That's like saying, 'I'm against crime,' and who's not in favor of that? But the reality is there are implications and consequences."

California's game-changing moves began early this year after Covered California, the state's health insurance exchange marketplace established under the Affordable Care Act, became the first in the nation to apply a cap for most plans on outpatient prescription drug costs to treat life-threatening conditions such as multiple sclerosis, epilepsy, cancer and AIDS. The cap limits co-payments to \$250 per drug per month.

Then a few weeks ago, Gov. Jerry Brown signed into law Assembly Bill 339, which mimics the exchange's prescription drug co-payment cap and covers those who get their insurance outside the exchange.

Both plans, however, are aimed only at outpatient prescriptions -- people who get their medication at a pharmacy or through the mail. People who receive "inpatient" lifesaving medications that must be administered intravenously at clinics or hospitals will not benefit from California's new caps.

"The percentage of Californians this law will effect is not huge, but it's huge for each one of these individuals -- we're talking about people whose lives depend on these drugs," said Assemblyman Richard Gordon, D-Los Altos, who carried AB 339.

Relief for up to 26,000 of Covered California's 1.3 million enrollees who confront at least one monthly drug prescription that costs them more than \$250 arrives on Jan. 1. And for about 134,000 Californians in the same boat who buy private health insurance plans on their own or get them through their employer, AB 339 kicks in Jan. 1, 2017.

The two top Democratic presidential candidates -- Clinton and self-proclaimed socialist Sen. Bernie Sanders of Vermont -- already are pounding away on the subject of controlling drug prices. Even Republican candidate Sen. Marco Rubio of Florida this week criticized those drug manufacturers whose practices he said amount to "pure profiteering." However, most political experts say Republican presidential hopefuls will be wary of advocating for federal regulation of prices.

Some critics say placing price caps on co-pays will increase the cost of premiums for everyone else, though a state analysis concluded that any increase would be less than 1 percent under AB 339 and the Covered California policy.

Still others note that the price caps don't solve an underlying problem: Unlike most other major industrialized countries, most of which have national health plans that regulate drug prices, the U.S. imposes no such regulations.

At the Washington, D.C.-based Pharmaceutical Research and Manufacturers of America, a trade group that represents at least 50 pharmaceutical companies in the

U.S., member firms are worried about the thrust of the debate, said spokeswoman Priscilla VanderVeer.

"We are concerned about any effort designed to artificially cap the price of drugs because it will impact innovation and have the potential to affect access to needed medication," she said.

VanderVeer added that the trade group issued a statement about Turing, the company that boosted the price of Daraprim, which treats parasitic infections, by 5,000 percent "as not representing PhRMA or the values of its membership."

The furor over the price increase led the company to say it would back down on its price. But Turing's CEO also defended the price hike, saying it was a result of increased costs, and that the firm would use the money to develop new and better drugs to replace Daraprim.

Particularly worrisome to the industry, VanderVeer said, are legislative efforts in California and around the country demanding drug manufacturers explain their pricing to patients.

The legislative proposals "don't have any accounting for the failure inherent in the work our companies do," VanderVeer said, noting that only 12 percent of all potential new drugs make it to the market.

On average, it takes at least eight years for a new medicine to get to the marketplace, with the average cost to research and develop each successful drug estimated to be \$2.6 billion.

Regulating drug prices, VanderVeer said, "would significantly impact our ability to innovate and develop new drugs because you are curbing the amount that can be reinvested back into research and development."

VanderVeer and Joyce at USC noted that both Medicaid -- called Medi-Cal in this state - - and drug companies offer deep discounts on drug prices for the poor. Many doctors argue, though, that if patients can't afford the drugs, they will get sicker and end up in the hospital -- which adds even more costs to the health care system.

Dr. Steven Coutre, a professor at Stanford University School of Medicine who specializes in blood-related cancers such as leukemia, said it's hard to justify the stratospheric costs of many cancer medications -- some of which cost \$100,000 per year or more. Although most of the cost is covered by health insurance, he said many patients are still responsible for a substantial share of the charges.

Without some type of reform, such as government regulation, Coutre said, "The situation is only going to get worse."

Los Angeles Times

Obamacare: 36% of California's uninsured don't know the feds can help pay their premiums

By: Chad Terhune
Oct. 23, 2015



Heading into Obamacare's third open enrollment starting Nov. 1, uninsured Californians know more about the stick of federal tax penalties than the carrot of premium subsidies.

Officials at the Covered California exchange say that's a problem because consumers regularly cite high costs as the reason they don't sign up.

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Survey data released Thursday show that 36% of uninsured Californians are unaware of the premium subsidies available under the Affordable Care Act. In contrast, only 16% didn't know about the tax penalty for lacking health coverage.

About 90% of the 1.3 million Covered California enrollees receive subsidies, and more than 200,000 people pay less than \$50 a month thanks to that financial assistance.

Peter Lee, executive director of Covered California, said subsidies are the most important factor in persuading people to buy insurance.

"We cannot ignore the reality that too many uninsured Californians still don't know they can get financial help to buy brand-name insurance," Lee said. "Even after years of work, we still haven't gotten through to all Californians."

75% of Obamacare plans in California use narrow networks, study shows
75% of Obamacare plans in California use narrow networks, study shows
On the state website, officials have found some consumers stop shopping when they see the total insurance premium pop up and they don't look farther down where it shows the discounted amount they would actually pay every month.

Lee said the exchange is making changes to its website and advertising to better promote the potential savings to consumers. That new message will be part of the state's \$29 million marketing campaign for open enrollment, which runs Nov. 1 to Jan. 31.

Consumers qualify for subsidies if they make less than four times the federal poverty level — about \$47,000 for a single adult and \$97,000 for a family of four.

The federal tax penalties for being uninsured are increasing for 2016, too.

For next year, an uninsured individual would pay a minimum penalty of \$695 or up to \$2,500, depending on their household income.

Overall, there are about 4 million Californians who remain without health coverage. Nearly half of them are not eligible for health-law subsidies or an expansion of Medicaid because they are residents living in the country illegally.

About 1.4 million of the uninsured qualify for Medi-Cal, the state's Medicaid program for low-income residents, but they haven't enrolled.

Lee said that leaves about 750,000 uninsured Californians who are eligible for subsidies toward private health insurance.

He said the state wants to add 295,000 to 450,000 new enrollees by the end of January. At the same time, some current policyholders are expected to leave the exchange as people get benefits through work or Medi-Cal or decide to drop coverage altogether.

The Washington Times

California eyes people eligible for health care subsidies

By: Judy Lin
Oct. 22, 2015

SACRAMENTO, Calif. (AP) - Heading into a third enrollment season with less fanfare and a more modest budget, California health exchange officials said Thursday they will strategically target about 750,000 uninsured people who qualify for health insurance subsidies but haven't signed up for coverage.

The agency will spend \$29 million on an advertising campaign aimed at lower-income and middle-class residents who don't know there's help available to pay for health insurance, Covered California Executive Director Peter Lee said. That compares to a \$43 million advertising budget last year and \$55 million the first year.

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Celebs you didn't know passed away: #17 is Shocking

In addition, Covered California will host enrollment drives at more than 500 storefronts as well as clinics and hospitals throughout the state.

A bus tour will begin in Los Angeles on Nov. 1, the first day of the three-month enrollment season.

"It's big news that Californians still don't know the basics that they can get financial help to get coverage," Lee said Thursday in a call with reporters.

The state-run health exchange launched in October 2013 under the federal Affordable Care Act. It offers sliding-scale subsidies for private coverage to people with no access

to health care on the job and directs low-income people to Medi-Cal, the state's health program for the poor.

As a result, California has reduced the number of uninsured by millions.

Covered California estimates about 4 million Californians do not have health insurance, half of whom don't qualify because they are in the country illegally. Another 1.4 million are eligible for Medi-Cal but haven't signed up.

Lee said the agency will use the upcoming enrollment season to target a remaining pool of about 750,000 Californians eligible for Covered California subsidies. The campaign will advertise to Hispanics, African-Americans, younger people and those who make higher incomes.

While people who are lower-income have been signing up in high numbers, those who qualify for less subsidy because they make more money have not been signing up as fast. Officials don't know why they have not been enrolling.

"They may be signing off the exchange without subsidies and that's a piece of information we don't know," Lee said.

He said Covered California has done a good job reaching minorities but acknowledges there's more work to do. For example, Lee said the agency found it was effective at reaching African-Americans through church partnerships.

Also, a survey commissioned by Covered California found more Californians learned about the exchange through the news than through paid advertising, which Lee said was surprising.

Last season, Covered California fell short of its goal to sign up 1.7 million people for private insurance. Currently, the exchange has 1.3 million active members and the state is expecting to add between 295,000 and 450,000 people during the third enrollment period.



Covered California gears up for 3rd year of health care signups

By: Claudia Buck
Oct. 22, 2015



Gearing up for a third year of health care sign-ups, Covered California officials announced Thursday they are doubling efforts to reach an estimated 2 million residents who are uninsured, primarily Latinos and African Americans.

Those efforts include staffing 500 storefront locations, employing thousands of enrollment counselors, launching a \$29 million advertising campaign and a statewide

bus tour, starting Nov. 1 in East Los Angeles, all designed to encourage more Californians to come under the health care umbrella.

One of the biggest hurdles, said Covered California Executive Director Peter Lee, is that more than a third – 36 percent – of uninsured Californians don't realize they're eligible for financial subsidies, according to a recent survey. That compared with 84 percent of uninsured who were aware of the existing federal tax penalty for going without health care coverage.

"This lack of understanding of the subsidy is a striking finding," said Lee, who said too many still feel health care is unaffordable for them. Noting that roughly 200,000 Covered California enrollees currently pay less than \$50 a month in premiums, "That is affordability made real," Lee said.

Last year, Lee said Covered California focused on Latino communities and was able to increase the number of enrollees from 2014. As of June, the ethnic breakdown of current Covered California enrollees is 37.6 percent white, 29.8 percent Latino, 22.9 percent Asian and 2.4 percent African American.

The official enrollment period runs Nov. 1 through Jan. 31, when uninsured Californians can officially sign up for 2016 health care coverage. Until then, the 1.3 million current enrollees can renew their policies, and anyone can go online to compare policies and find walk-in sites for in-person help. On the Covered California website, there are lookups to find local events, insurance agents and storefront counselors.

Lee also noted that tax penalties for not having health care coverage will increase again in 2016. Under the federal health care law, those without health insurance in 2016 may be subject to a federal tax penalty, which starts at \$695 per person in a household or 2.5 percent of income, whichever is greater. For a family of four earning \$70,000 a year that chooses not to purchase health care coverage for 2016, the tax penalty could be \$2,085, according to Covered California.

Covered California offers help in 12 languages, including Armenian, Farsi, Hmong, Tagalog and Vietnamese, both by phone and online. For help, call 800-300-1506 (Monday through Saturday) or go online to: coveredca.com.

Covered California touts subsidies as it prepares for third open enrollment

By: Kathy Robertson
Oct. 22, 2015



The good news, as Covered California prepares to launch its third open enrollment period, is that most Californians know there's a tax penalty if they don't have insurance. The bad news is about a third of the remaining people without insurance in California still don't know there are subsidies available to help them pay for coverage, according to a new study released Thursday.

Covered California's headquarters at 1601 Exposition Blvd. The health exchange is preparing to launch its third open enrollment period.

"Why does that matter?" said Peter Lee, executive director of the health benefit exchange. "The most important reason to buy insurance (through Covered California) is

the subsidy.” About 90 percent of the 1.3 million people currently in the program get subsidies and more than 200,000 of them spend less than \$50 a month for coverage.

Covered California will kick off an aggressive campaign next week to tell people where and when to enroll — and that most people can get a subsidy to help pay for insurance. Open enrollment starts Nov. 1 and runs through Jan. 31.

A statewide “Spotlight on Coverage” tour will start in east Los Angeles on Nov. 1 and a \$29 million advertising campaign will launch Nov. 2. More than 500 storefront locations will open the same day, including 16 in the Sacramento area. To find out where, click [here](#).

Nearly 4 million Californians remain uninsured, Lee said in a call with reporters Thursday morning. Almost half — 1.795 million — are ineligible, mostly because they are undocumented. More than 1.4 million are eligible for Medi-Cal. About 750,000 uninsured residents are considered eligible for Covered California and Lee is looking for somewhere between 295,000 and 450,000 people to sign up and pick a plan in open enrollment this time around.

Those eligible for the program today are different than the population targeted when the program launched two years ago. They are more likely to be Hispanic, African American, younger and have slightly higher incomes. “People with lower incomes have been signing up (already),” Lee said.

Awareness of the program is high. About 12 percent of Californians knew about Covered California in 2013. Now 85 percent do, according to a study by the independent social research group NORC at the University of Chicago.

Get Covered in 2016



Life-saving changes are well under way through federal health care reform, or the Affordable Care Act, and we must stand up to the challenge. We all know someone with no insurance or inadequate health care. We can help them get high-quality, affordable health care starting next month.

The enrollment challenge ahead is greatest in the LGBT community, whose members are more likely to be uninsured.

A Gallup poll conducted last year found one-quarter of LGBT adults do not have enough money for health care, compared with 17 per-cent of non-LGBT individuals. Additionally, 29 percent of LGBT adults lack a personal doctor compared to 21 percent of their non-LGBT peers. This gap is widest among women, with 29 percent of LGBT women lacking a personal doctor compared with 16 percent of non-LGBT women.

Among uninsured LGBT people, the Center for American Progress found that 67 percent were without insurance for over two years and 60 percent had put off medical care in the past 12 months because they could not afford it. Complicating these figures is the lack of awareness about new insurance options now available through health care reform. Only 29 percent of uninsured LGBT people have heard about them.

For these reasons, it is important to acknowledge the progress made in getting more Californians insured and that there is a lot more work to be done.

During the first Covered California open enrollment period, in 2013, 1.3 million Californians obtained health care. Over 319,000 of them were in the nine-county Bay Area. Last year, we added another 495,000 individuals across California and over 93,000 of them are in the Bay Area.

In order to help more people get insured this year, I am hosting an enrollment fair with Covered California on November 1 to kick off their open enrollment period. Please come join us from 1:00–4:00pm at the Richmond Recreation Center located at 251 18th Ave, in San Francisco. Bring your Social Security number, legal identification (driver's license or state ID), proof of income (tax return, W-2, pay stub) and proof of citizenship or legal residency.

If you are not sure what kind of coverage is right for you, we will have counselors on hand to advise you about health insurance options and eligibility for financial assistance to help meet insurance costs. Certified Covered California agents will also be on hand to enroll attendees into health plans on the spot.

If you or a loved one are thinking of skipping open enrollment, consider these figures. Before the Affordable Care Act, medical emergencies were the leading cause for personal bankruptcy—over 60%. And, living without health insurance in 2016 will cost you money. When filing your federal income taxes, penalties will be assessed at \$695 per person and \$347.50 per child under the age of 18.

Freedom from these problems and the accompanying peace of mind are just some of the reasons why it is so important for Californians to take advantage of open enrollment.

For further information, please visit www.coveredca.com

Analysis: Narrow networks don't sacrifice quality for cost

By: Joanne Finnegan
Oct. 14, 2015

An analysis of narrow networks on the Covered California health plan marketplace found that in most cases consumers don't need to worry that they are trading quality of care for lower costs.

While Covered California plans did offer narrower hospital networks, there was no significant relationship between raw network size and performance, according to the analysis published on the Health Affairs Blog.

The one major caveat the authors noted "is that some extremely narrow networks with overall lower-performing hospitals probably would benefit from a more inclusive network structure or a marked improvement in performance of the participating hospitals."

It's not the size of the network but in what region of the state the hospitals are located that influences quality, the analysis found. For instance, Covered California customers living in San Francisco had better-performing networks than residents living in Orange or Kern counties. The authors wrote that this is less a factor of narrow networks and more a result of Southern California hospitals struggling to meet the quality of "more heavily concentrated, better resourced" hospitals in the northern part of the state.

The narrow-network debate tied to the Affordable Care Act has focused on whether health plans are trading quality by limiting access to fewer physicians and hospitals in the network for low monthly premiums. Covered California plans typically offer pared-down but more cost-effective provider networks, the report noted, and recently announced average premium increases of just 4 percent.

California, Georgia, Florida and Oklahoma have the highest percentage of narrow network plans, with at least 75 percent of plans having narrow networks that cover 25 percent or fewer of all area physicians.

The analysis is good news for consumers, as a report issued earlier this year found more and more people are enrolling in narrow network plans, apparently willing to forego greater choice and access to doctors and hospitals for better-priced plans.

WALL STREET JOURNAL

Covering the Remaining Uninsured: Not Just a Red-State Issue

By: Drew Altman
Oct. 14, 2015

About 32 million people in the U.S. remained uninsured as of early 2015, a Kaiser Family Foundation analysis of federal survey data has found, with about half of them eligible for Medicaid or subsidies under the Affordable Care Act. With the high-profile resistance in some states to Medicaid expansion and the ACA generally, you may think those places are the main obstacle to covering more of the uninsured. But the uninsured remain a problem in both red and blue states.

About half of the remaining uninsured, 16 million people, are in mostly blue states that have expanded Medicaid. The other 16 million are in states that have not expanded Medicaid and where there is strong anti-ACA sentiment. Consider the examples of California and Texas, the states with the largest populations of remaining uninsured, to understand the different challenges.

There were 3,845,000 uninsured in California, a famously blue state, in early 2015. The largest share of those, about 1,428,000, were eligible for Medicaid but not enrolled; 623,000 were eligible for federal tax credits to help purchase coverage in the Covered California marketplace; and 1,795,000 were ineligible because of their immigration status, or an offer of insurance through work, or because their incomes were too high to qualify for assistance. There is no “Medicaid gap” in California. The state has expanded its Medicaid program, called Medi-Cal, under the ACA. The 1.4 million residents eligible for Medi-Cal but not enrolled represent the largest opportunity to extend coverage to a low-income population. But California is already struggling to pay for unexpected and unbudgeted Medicaid enrollment. Proposals in the legislature would make undocumented residents eligible for Medicaid at state expense, but the legislation’s

prospects are unclear. Next year California will begin extending Medi-Cal coverage to about 170,000 undocumented immigrant youths up to age 19.

Now consider Texas, where there were 4,425,000 uninsured in 2015, the largest uninsured population in any state. Of those, 495,000 were eligible for Medicaid and more than twice that many—1,035,000 people—were eligible for tax credits. About 2,132,000 of the uninsured in Texas were ineligible for ACA assistance, and 766,000 were in the “coverage gap.” Texas is an anti-ACA state that has resisted expanding Medicaid. Aggressive outreach by community organizations and insurers to provide federally funded tax credits to the 1 million eligible Texans to help them purchase coverage on the federally operated marketplace would seem to be the best opportunity to expand coverage in that state, unless political changes create a more favorable environment for Medicaid expansion.

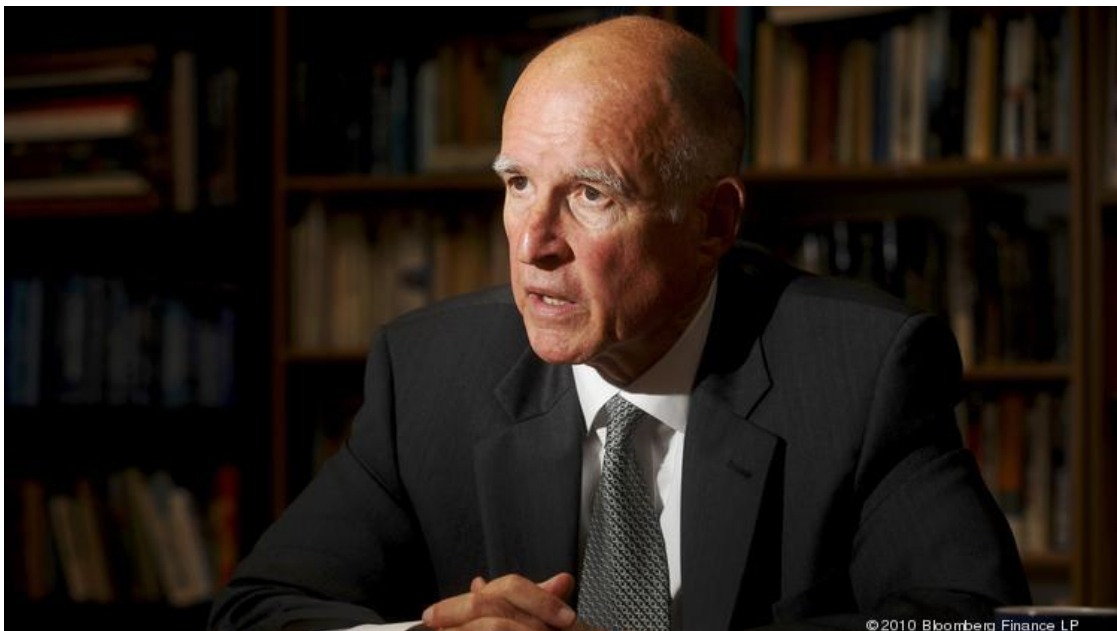
Some elements of the remaining uninsured problem are uniquely a red state issue. The most prominent of these are 3.1 million people—or one in 10 of the uninsured—who fall in the “coverage gap” in 20 red states that have chosen not to expand Medicaid coverage. But as the examples of Texas and California demonstrate, progress on covering the remaining 32 million uninsured will depend on action in both red and blue states.

Gov. signs legislation to cap out-of-pocket costs on prescription drugs

By: Kathy Robertson
Oct. 13, 2015

Gov. [Jerry Brown](#) has signed legislation that requires insurers to cover medically necessary prescription drugs and caps consumer out-of-pocket costs.

Assembly Bill 339 by Democratic Assemblymember [Richard Gordon](#) from Menlo Park caps a single 30-day outpatient prescription at \$250, except for consumers with high-deductible plans, who would have pay \$500. The new drug rules and limits are consistent with rules adopted by Covered California in May — but apply them to health plans in the private sector.



The new law responds to the skyrocketing cost of new specialized prescription drugs that retail for as much as \$1,000 a pill. The [intent is to maintain access](#) to needed specialty drugs while keeping premiums affordable.

AB 339 was sponsored by the consumer nonprofit group Health Access. Supporters include consumer groups, organized labor, legal rights advocates and groups that represent patients with chronic disease.

“This bill limits the extreme cost-sharing for specialty drugs that is not just a financial burden, but leads to patients not taking the medications they need to maintain their health,” said [Anthony Wright](#), executive director at Health Access, in a news release. “This will help patients with chronic conditions get the medications they need.”

Health plans, retail pharmacy chains and business groups opposed the bill.

“While the legislation protects patients from out-of-pocket costs, we still have to address how rising drug costs affect premiums,” said [Nicole Kasabian Evans](#), a spokeswoman for the [California Association of Health Plans](#). “Now is the time to hold drug companies accountable.”

Covered California: We're still going to add small biz groups with 51-100 employees

By: Kathy Robertson
Oct. 12, 2015

The Affordable Care Act's small-business expansion — slated to take effect Jan. 1, 2016 — is now optional, but Covered California expects to move ahead with the change.

President Barack Obama signed legislation Oct. 7 that gives states flexibility to expand the small-group market up to 100 employees or keep it at 50.



Business interests had widely opposed the mandatory expansion. The new law repeals that requirement and gives states the flexibility to determine the size of their small-group market. The current definition is up to 50 employees.

Expansion may offer mid-sized companies more choice and insurance options, but employers would have to comply with essential health benefit mandates and strict rating rules that could make coverage more expensive.

The Sacramento Association of Health Underwriters called the change a “huge win” for states and small groups, in a statement released after Congress passed the measure. “Our current market structure for small, mid-size and large employers works well and recognizes that there are some significant structural differences between a company with 15 employees and one with 85 employees, both of which would be constricted with a very wide brush into one market segment (until the initial mandate in the ACA),” SAHU president Marcy McCulloch said in a news release.

Asked about the issue at a Covered California board meeting Oct. 8 in Sacramento, exchange director Peter Lee said, “In absence of changes in state law, we’re moving ahead.”

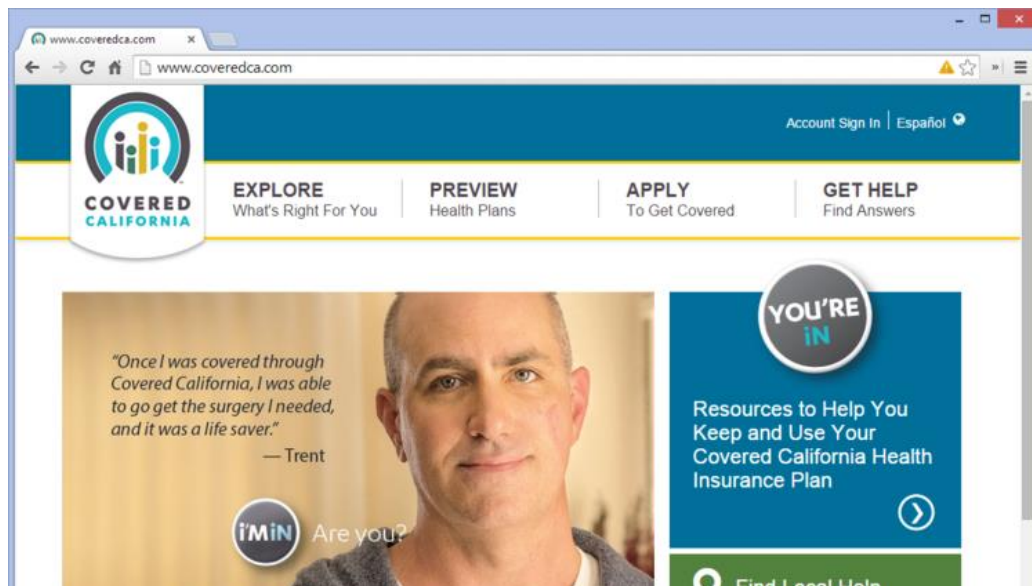
The federal government recognizes the contradiction and has taken bipartisan action to correct the issue, former SAHU president Cerrina Jensen added Monday.

“SAHU would like to see California follow suit and conform state law post haste, as time is of the essence,” she said.

Is Covered California's lower enrollment good news?

By: Kathy Robertson
Oct. 12, 2015

Covered California has 1.3 million actively enrolled customers, slightly lower than previous estimates. But that isn't necessarily a bad thing, says executive director Peter Lee – it may be a sign of the recovering economy.



One explanation relates to churn: About a third of people who get coverage move out of the program. Of those who leave, almost 85 percent are still insured, the state health benefit exchange found in a survey.

Covered California has 1.3 million actively enrolled customers, slightly lower than previous estimates.

Covered California has 1.3 million actively enrolled customers, slightly lower than... more

The biggest chunk — 44 percent of the folks who left — got employer-sponsored health insurance. Others went on Medi-Cal (16 percent), got private coverage (13 percent) or other coverage (11 percent.)

“For many, Covered California is not the endpoint but part of a journey through insurance,” Lee said last week. “We are becoming a vital part of the new insurance landscape.”

Covered California has served more than 2 million consumers since it began offering coverage in January 2014. About 700,000 of those were no longer active enrollees on June 30, 2015, according to new data from the exchange. That translates to an annual disenrollment rate of about 33 percent.

California Extends Health Coverage To Undocumented Immigrant Children

By: Adolfo Flores
Oct. 9, 2015



California Gov. Jerry Brown on Friday signed into law a bill that extends healthcare coverage to thousands of undocumented immigrant youth.

Senate Bill 4, which goes into effect in May 2016, sets aside \$40 million for public healthcare coverage for 170,000 undocumented immigrants 18 and under. It is projected to cost \$132 million each subsequent year.

Sen. Ricardo Lara (D-Bell Gardens), who introduced the bill, said the move will make California the state with the largest immigrant population to provide healthcare to low-income undocumented children.

California already affords some immigrants without legal documentation state-funded financial aid and driver's licenses. The state is home to about 2.6 million immigrants without legal documentation, according to the Public Policy Institute of California. "This is a tremendous victory that will send a message across the country that says compassion should always trump bigotry when we're talking about our immigrant population," Lara said in a statement. "But we're not done. We still have work to do to cover the remaining uninsured. This major victory for the health of our state is only a down payment on achieving true health for all.

A previous incarnation of the bill would have provided full health coverage to all undocumented immigrants in the state. But the proposal stalled against an estimated start-up price tag of \$1.3 billion. Lara then re-introduced the bill to give full Medi-Cal coverage to undocumented immigrants who are 18 or younger.

A joint report in 2014 by UCLA and UC Berkeley found that expanding Medi-Cal to all undocumented immigrants would cost up to \$370 million the first year. But a recent state Senate analysis pegged the annual cost at up to \$740 million.

The measure also allows children who are currently receiving limited public healthcare to apply for full-scope Medi-Cal.

Lara also introduced Senate Bill 10, a proposed law he hopes will advance next year, that would allow adults through a capped enrollment program to be eligible for public healthcare. It also requests a federal waiver allowing immigrants to purchase health care through Covered California, the public health insurance exchange.

Los Angeles Daily News

California bill that requires accurate health provider directories signed into law

By: Susan Abram
Oct. 10, 2015

A bill that requires health care insurers to update their provider directories with accurate information has been signed by Gov. Jerry Brown and will take effect in July.

The bill, introduced by state Sen. Ed Hernandez, D-West Covina, and sponsored by three statewide health advocacy and consumer groups, was proposed in response to numerous complaints by California residents who enrolled into health plans through Covered California beginning in October 2013 only to find inaccurate provider directories, no doctors in the networks chosen and other mistakes.

Among the bill's requirement, the Department of Managed Health Care and the Department of Insurance must develop uniform provider directory standards, update directories weekly rather than the monthly federal standard and offer information on languages spoken by providers.

The bill was sponsored by the California Pan-Ethnic Health Network (CPEHN), Consumers Union and Health Access California.

California consumers need to know which doctors and hospitals are in plan networks when they are choosing and using their health coverage, to keep care affordable and avoid surprise out-of-network charges," said Betsy Imholz, special projects director for Consumers Union, the advocacy and policy arm of nonprofit Consumer Reports. "By setting uniform standards for directory elements, with frequent updates, this bill lays the groundwork for creating a consolidated statewide directory across plans for truly informed consumer choice."

Results of a state audit on Medi-Cal released in June found that Anthem Blue Cross, Health Net and Partnership Health Plan had many errors in their directories, including incorrect telephone numbers and addresses, or information about whether they were accepting new patients.

The bill places pressure on health insurance providers by making them reimburse an enrollee who ends up paying for out-of-network service because of inaccurate

information. The bill goes further, suggesting penalties if there is a lack of communication between health insurers and providers.

It would “authorize a plan or health insurer to delay payment or reimbursement owed to a provider or provider group, as specified, if the provider or provider group fails to respond to the plan’s or health insurer’s attempts to verify the provider’s or provider group’s information.”

Some physicians groups and the California Hospital Association voiced opposition to the bill, saying those penalties went too far.

But the changes were needed, especially after thousands of people who began to enroll into plans through Covered California discovered that an online directory contained many inaccuracies. Covered California, the state’s health exchange established under the Affordable Care Act, discontinued the directory in February 2014.

“The new law will make it easier for consumers shopping for health coverage to find a doctor who speaks their language or ensure their current bilingual provider is in their plan,” said Sarah de Guia, executive director of the CPEHN. “The law also strengthens consumer protections by requiring health plans to include a notice in the directory informing consumers about language assistance services. SB 137 is a critical tool for all Californians and will help improve access to care.”

Anthony Wright, executive director of Health Access California, said the new law will help consumers make better decisions.

“Just as we don’t allow grocery stores to sell food mislabeled with the wrong ingredients we shouldn’t allow insurers to sell health plans without accurate provider directories,” Wright said. “Our hope is that over time this will make the marketplaces more responsive to consumer demand for accessible, high-quality care.”

Los Angeles Times

Many Obamacare dropouts in California picked up employer coverage, state says

By: Paul Sisson
Oct. 8, 2015



Nearly half of the estimated 700,000 Californians who have dropped their Obamacare policies during the past two years have enrolled in an employer-based plan, a new report from the Covered California exchange shows.

In a news conference Thursday, Peter Lee, the organization's executive director, said there were about 1.3 million Californians enrolled in the exchange's plans as of June 30.

That was about two-thirds of the 2 million who have enrolled in the exchange since it opened Oct. 1, 2013.

Lee said the exchange always expected that a range of circumstances would cause many of those who initially signed up to depart.

“This finding underscores that for many, Covered California is not an endpoint,” Lee said.

According to the exchange, 44% of the 700,000 who left did so for policies offered by their employers; 16% enrolled in Medi-Cal, the state’s insurance program for the poor; 15% returned to the ranks of the uninsured; 13% obtained private coverage outside of the exchange; and 11% enrolled in health plans from other sources.

Blue Shield's deal with regulators on \$1.2-billion acquisition draws fire
Blue Shield's deal with regulators on \$1.2-billion acquisition draws fire
Covered California did not specify why some of its enrollees became uninsured again.

Anthony Wright, executive director of Health Access, a nonprofit group that advocates for increasing the number of Californians with health insurance, said these people deserve more attention.

“We need to know what caused these folks to drop out. Was it confusion, affordability or something else?” he said.

Finding enough new enrollees to not only replenish the lost ranks but also expand membership is important if the exchange is to reach its long-term goal of insuring more than 2 million people statewide.

Enrollment is now at the low end of projections made in early 2014, which ranged from 1.3 million to 1.7 million people, according to Covered California. Estimates for the coming year are more conservative than they were for the previous year -- from 1.3 million to 1.5 million by June 30, 2016.

The individual insurance market, which includes Covered California, is known industry-wide to have some enrollment volatility, said Cynthia Cox, assistant director of health reform and private insurance for the Kaiser Family Foundation. She added that although getting a large number of Californians signed up for coverage is vital, it is not everything.

“Raw numbers are important because you look attractive to insurance companies so that they will continue to participate and compete with each other. At the same time, these enrollment goals are not meant to be set in stone,” Cox said.

She said a more significant measure is whether enough young and healthy people are enrolled to make up for the costs incurred by older policyholders, who are more likely to use healthcare services.

“That is the key to keeping premiums low,” she said. “So far, California is stronger than a lot of states in terms of enrolling its potential market.”

Lee said while the percentage of young enrollees in California has not reached its full capacity, actuaries have judged the overall mix of enrollees to be healthy enough to hold statewide premium increases to 4%.

In addition to the breakdown of those who have left the exchange’s plans, Covered California released more data on who has remained enrolled. It said 9 in 10 enrollees are receiving subsidized coverage.

A breakdown of race and ethnicity showed that 37% of Covered California policyholders are white, 29% are Latino, 23% are Asian and 2.4% are African American.

THE ORANGE COUNTY REGISTER

Covered California: Over 2 million sold. In O.C., more women are enrolled than men and more Asians than Latinos

By: Courtney Perkes
Oct. 9, 2015



More than 2 million Californians have been covered by health insurance through Covered California since it opened for business on Jan. 1, 2014, the state's Obamacare health exchange said Thursday.

Detailed demographic data released by Covered California showed 125,950 Orange County residents were enrolled in the exchange as of June. Among them, women

outnumbered men, most policyholders were English speakers, and Asian enrollees outnumbered Latinos.

Of the 2 million state residents who have been covered by health insurance through Covered California since the opening, only 1.3 million are still enrolled. For those who left, 85percent reported gaining coverage elsewhere, most commonly through an employer.

“For many, Covered California is not an end point but rather it’s part of a lifetime journey to make sure people have coverage,” Executive Director Peter Lee said. “We’re a way station for many.”

Cynthia Cox, an associate director at the nonprofit health research group Kaiser Family Foundation, in Washington, D.C., highlighted the 15 percent who were uninsured after disenrolling.

“That can speak to affordability of the premium and the perceived value from the plan,” she said.

The exchange reported gains in ethnic diversity, although Latinos are still underrepresented. They are now nearly 30 percent of enrollees, but that falls short of the estimated 37 percent of Latinos statewide who would qualify for financial assistance.

“It will be something that they have to continue to work on for equity and to make sure people who are eligible know about it and are able to sign up,” Cox said.

Lee said 90 percent of enrollees are receiving subsidies and pay an average of \$150 a month. He said that, as expected, the coverage pool has attracted more old than young, with 53.5 percent of enrollees ages 45 to 64.

“Even though we’re skewing older, we’re skewing way healthy,” Lee said, noting the modest 4 percent average premium increase for next year.

Covered California Targets African Americans, Latinos In Obamacare Open Enrollment

By: Barbara Feder Ostrov
Nov. 2, 2015



Covered California still faces major challenges in enrolling African-Americans and Latinos as the state's health insurance exchange launched its third open enrollment period Sunday.

“We know we’ve come up short in who’s enrolled today,” Covered California Executive Director Peter Lee said at a recent media briefing on the exchange’s marketing and outreach plans. “Of those who are still uninsured, we want to make sure we reach them.”

About 2.4 percent of the exchange’s approximately 1.3 million enrollees are African-American, only about half of the blacks considered eligible for subsidies because of their income. Another 30 percent are Latino; 37 percent are considered eligible for subsidies, according to Covered California data.

In contrast, enrollment of whites and Asians has exceeded eligibility projections, meaning that Covered California was better able to reach those groups. The state’s enrollment data is not exact, because more than a quarter of enrollees decline to state their race.

While many more California Latinos and African-Americans have become insured since the passage of the Affordable Care Act, including through the state’s Medi-Cal expansion and employer-based insurance, Covered California’s experience echoes that of other states trying to ensure that their minority populations get the health coverage they need, said Larry Levitt, senior vice president at the Kaiser Family Foundation.

About 55 percent of the nation’s remaining 32.3 million uninsured under age 65 are people of color, including 34 percent who identify as Hispanic/Latino and 14 percent who identify as black, according to Kaiser Family Foundation data.

In California, about 2.2 million Californians remain uninsured but are eligible for Medi-Cal or Covered California insurance plans, Lee said. They are more likely to be Latino and African-American, and younger and slightly more affluent than current enrollees, who may have qualified for subsidies or Medi-Cal, the state’s version of Medicaid.

Covered California has earmarked about \$50 million for marketing and another \$13 million for navigators — trained counselors who help people learn about and sign up for coverage. The exchange unveiled its new advertising campaign Friday, including ads specifically targeted to Latinos and African-Americans. Covered California’s open enrollment runs from Nov. 1 to Jan. 31, 2016.

Explanations for the disproportionately low enrollments of eligible African-Americans and Latinos vary. “We’ve got people who don’t trust the government,” said Dan Daniels, coastal area director of the NAACP California State Conference, who oversaw Affordable Care Act outreach in his region.

Daniels also cited attitudes among “young invincibles,” who are healthy enough to think they don’t need coverage and are willing to pay the mandatory penalty for not having health insurance. That penalty will rise in 2016 to \$695 per person or 2.5 percent of income, whichever is higher.

1.4 Million Californians Sign Up For Obamacare, But State Falls Short of Goal
Among some Latinos who are legal residents, there is fear that applying for health insurance through Covered California will jeopardize the immigration status of other family members, Levitt said.

And affordability remains a looming concern for higher-income people of color who may not be eligible for subsidies or Medi-Cal.

For example, Kemisha Roston, a 38-year-old contract lawyer from Riverside, said she makes too much money to qualify for those programs, but not enough to afford Covered California unsubsidized premiums – which top \$300 per month — while she pays off student debt.

“I’m living check to check, because the market for attorneys is very saturated,” Roston said. “My health is pretty good right now, so I don’t need to go to the doctor. When I do, I go to free clinics or Planned Parenthood. I’m dismayed, because if something does happen and I don’t have health insurance, I could be wiped out.”

In addition, some community leaders and health advocates have criticized Covered California’s previous marketing and outreach efforts to both African-American and Latino communities as too generalized and impersonal. The exchange has spent more money on marketing and outreach than other exchanges, with less to show for it, said Hector De La Torre, executive director of the Transamerica Center for Health Studies.

“You have these challenges in these communities and it takes a lot more than a TV commercial to make them aware of what they need to do — you can’t do that in 30 seconds,” De La Torre said, referring to the need to educate people about the basic value of health insurance. “That’s where Covered California has not done as much as it could in reaching out to these folks. It’s a face-to-face communication effort that needs to take place.”

Charla Franklin, community outreach liaison for Healthy African American Families, an advocacy group in Los Angeles, said Covered California did well in reaching out to California’s black churches and community groups to get the word out. But the advertising campaign in her area was “so bland it was ridiculous,” she said. The exchange really needed to better inform people about specific community events and places where people could get in-person help with the complicated and time-consuming online enrollment process, she said.

Lee has told reporters recently that Covered California is stepping up its ground game and changing its messaging. Consumer surveys have shown that potential enrollees need more education on how subsidies can lower their out-of-pocket costs, he said. The U.S. Department of Health and Human Services said it will pursue a similar strategy of publicizing financial help available to many people.

“We cannot take it as a given that Californians understand that health care is more affordable because subsidies are available,” he said. “We’ll be getting back to basics.”

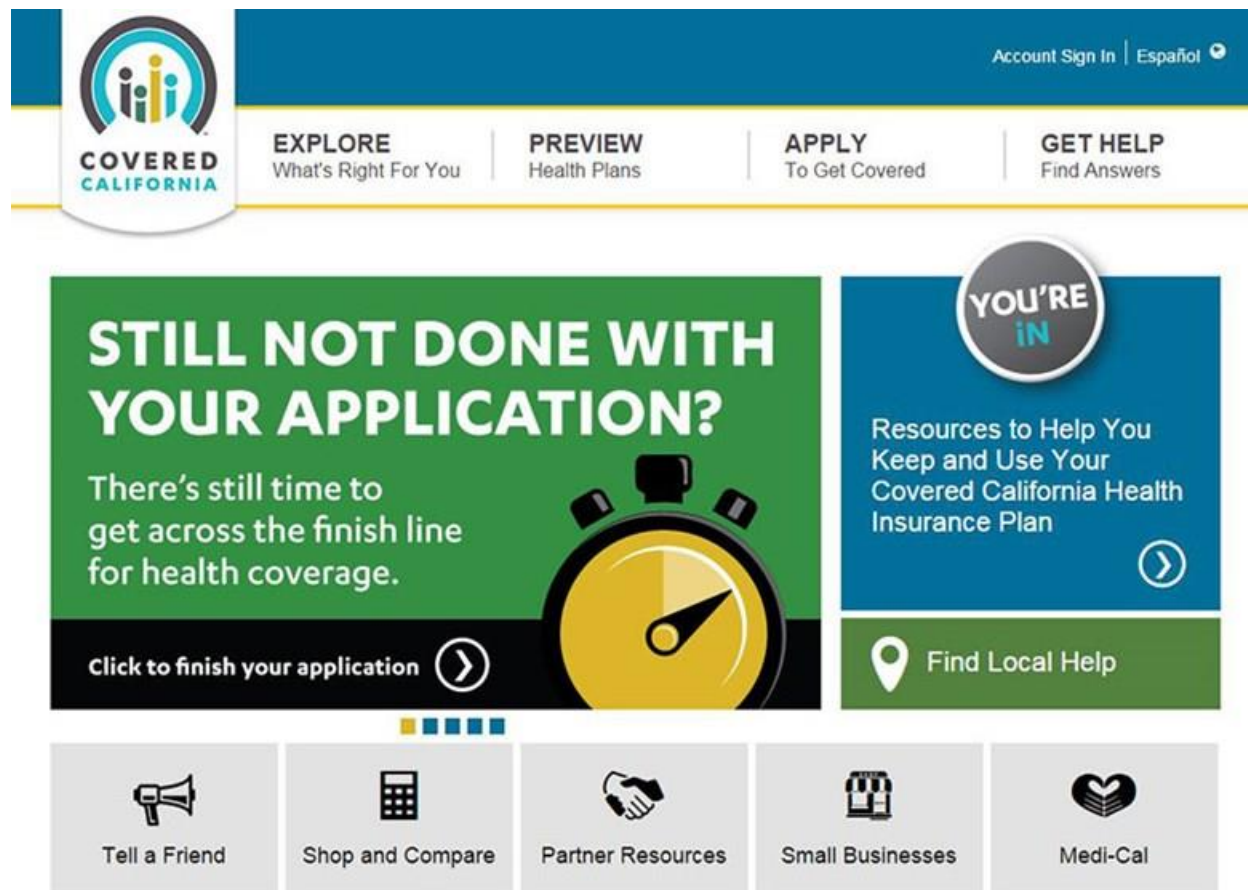
The exchange is also expanding its direct outreach efforts, more than doubling the number of Covered California storefronts where people can get help to enroll to 500, Lee said.

But while Lee promised “a more intense ground game,” he also cautioned against overly high expectations for the exchange’s third open enrollment season.

“We have millions of Californians who’ve adopted a culture of coping. They don’t understand they have subsidies available to them and are making do. It’s going to be years to change to a culture of coverage.”

Many Uninsured Unaware Of Insurance Subsidies

By: Katie Orr
Oct. 22, 2015



The screenshot shows the Covered California website. At the top left is the Covered California logo. To its right is a navigation bar with four links: **EXPLORE** (What's Right For You), **PREVIEW** (Health Plans), **APPLY** (To Get Covered), and **GET HELP** (Find Answers). In the top right corner, there are links for "Account Sign In" and "Español". Below the navigation bar is a large green banner with the text "STILL NOT DONE WITH YOUR APPLICATION?" and "There's still time to get across the finish line for health coverage." It features a stopwatch icon and a button that says "Click to finish your application" with a right arrow. To the right of the banner is a blue box with a circular icon containing the text "YOU'RE IN" and the text "Resources to Help You Keep and Use Your Covered California Health Insurance Plan" with a right arrow. Below this is a green box with a location pin icon and the text "Find Local Help". At the bottom, there is a row of five buttons: "Tell a Friend" (megaphone icon), "Shop and Compare" (calculator icon), "Partner Resources" (handshake icon), "Small Businesses" (store icon), and "Medi-Cal" (heart icon).

Eighty-five percent of consumers know about Covered California, according a survey released by the health insurance exchange today. But nearly a third of uninsured Californians are not aware they may be eligible for federal insurance subsidies.

Covered California Executive Director Peter Lee says the exchange will work to educate consumers ahead of the coming open enrollment period. But Lee says it could take awhile for the message to sink in.

"The one-third of the Californians that don't understand that they've got subsidies available to them are used to coping and making do," he says. "It's not going to change overnight."

Lee says efforts to reach consumers through their community organizations have been successful. The survey shows high rates of exchange awareness across racial groups.

Open enrollment begins November 1 and runs through January. Covered California estimates between 295,000 and 450,000 people will apply for coverage during the enrollment period.



Covered California: Many uninsured still unaware of financial help

By: Stephanie O'Neill
Oct. 22, 2015



For the past two years, many Californians have been eligible for financial help to offset the cost of health insurance, but a study released Thursday finds more than one third of the state's uninsured are still unaware of this fact, according to Peter Lee, executive director of the state's health insurance marketplace, Covered California.

The findings, by the University of Chicago's National Opinion Research Center, are "big news," said Lee, noting that they underscore the need for his agency to return to basics when informing Californians about health insurance during the third open-enrollment period under the Affordable Care Act.

Open enrollment begins on Nov. 1 and lasts through Jan. 31, 2016.

The researchers found 36 percent of uninsured Californians don't understand that federal tax subsidies to offset the monthly cost of insurance are available to eligible consumers. The survey, conducted for Covered California, randomly sampled about 2,200 legal state residents aged 18 to 34.

In response to the survey's finding, Covered California will be targeting its new ad campaign on the basics of health insurance, with an emphasis on the financial assistance available to eligible consumers, said Lee.

"The most important thing to help a consumer buy health insurance is that subsidy," he said.

The Affordable Care Act requires most Americans to get health insurance or face a tax penalty. That penalty increases in 2016 to either \$695 per adult (\$347.15 per child under 18) or 2.5 percent of a family's taxable income, whichever is greater.

Of the 4 million uninsured Californians, about 2 million are in the U.S. illegally and thus are not eligible either for subsidies through Covered California or for low- to no-cost Medi-Cal coverage, Lee said. Medi-Cal will be available to unauthorized immigrants under 19 beginning next May, under a law signed by Gov. Jerry Brown earlier this month.

Dec. 15 is the last day to buy coverage that takes effect beginning Jan. 1, 2016.



Covered California adds Medi-Cal option for some pregnant women

By: Rebecca Plevin
Oct. 14, 2015

As of this week, uninsured pregnant women who make a moderate income can now apply through Covered California for a special Medi-Cal program for expectant mothers.

The Medi-Cal Access Program is designed for pregnant women who make too much to qualify for regular Medi-Cal and between 213 and 322 percent of the federal poverty level (\$33,936 and \$51,312 a year). Those are the qualifying amounts for a family of two, but under the rules of the program, a pregnant woman counts as at least two people for income purposes.

The program has been available through private insurers outside of Covered California, but until now it was not an option for those shopping on the state exchange. As a result, many women who would have qualified for Medi-Cal Access enrolled in more expensive plans.

Under the Medi-Cal Access Program, pregnant women with no other household members pay monthly premiums ranging from \$42 to \$64, depending on their income, according to the Los Angeles-based Maternal and Child Health Access. There are no copays or deductibles for any services provided through the program. Private plans purchased through Covered California tend to charge hospital copays and deductibles for labor and delivery, though subsidies are available to lower-income women.

The Medi-Cal Access Program is distinct from Medi-Cal. Enrollees don't have access to Medi-Cal's benefits or provider network.

Covered California's three-month open enrollment period begins November 1, but enrollment for the Medi-Cal Access Program is year-round.



Covered California Enrolled 2 Million Since January 2014

By: Kenny Goldberg

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More than two million people — that's how many consumers have enrolled in a Covered California health plan since it opened for business in January 2014, according to a new report from the exchange.

There are currently 1.3 million people signed up. But the report reveals 85 percent of those who are no longer enrolled have found coverage elsewhere.

The exchange's executive director, Peter Lee, said many former enrollees are on Medi-Cal, have employer-based coverage, or have purchased a private plan.

"This finding underscores that for many, Covered California is not an endpoint," Lee said. "Rather, it is part of their journey of assuring they have insurance coverage, often moving from one source of coverage to another."

The report also showed 41 percent of people who've signed up for a Covered California plan have gone through a certified insurance agent, 28 percent have enrolled on their own, and 20 percent have enrolled with the help of a service representative in the call center.

Covered California is gearing up for its third open enrollment period, which begins Nov. 1, and runs through the end of January.