



# Media Clips

## **COVERED CALIFORNIA BOARD CLIPS November 19, 2015 – January 19, 2016**

Since the Nov. 19, 2015 board meeting, high-visibility media issues included: the Dec. 15, 2015 deadline for coverage beginning on Jan. 1, 2016; the approaching 2016 open-enrollment deadline; and new figures on Covered California enrollees.

Since the Nov. 19 board meeting, the term "Covered California" was mentioned 22,600 times in a Google search and the phrase "California Health Benefit Exchange" was noted 426 times. The following clips represent a cross-section of media outlets and coverage.

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# NEWS RELEASE

Jan. 19, 2016

## **COVERED CALIFORNIA RELEASES REPORT ON ENROLLEES RECEIVING VITAL CARE IN PREMIER HOSPITALS SINCE THE HEALTH INSURANCE EXCHANGE OPENED IN 2014**

*Hospital Data Released Tuesday at UCSF with Democratic Leader Nancy Pelosi Show the Affordable Care Act Is Delivering on the Promise of Care*

SAN FRANCISCO — Democratic Leader Nancy Pelosi visited the University of California, San Francisco (UCSF), today to highlight a new report showing that thousands of Californians who have obtained health insurance as a result of the Patient Protection and Affordable Care Act have received vital treatment — including brain surgeries, heart transplants, cancer treatment and trauma care — since January 2014, when the health exchange opened its doors.

“Today’s report is the latest evidence that the Affordable Care Act is delivering on the promise of making health care a right for all, not just a privilege for the few,” Pelosi said. “Covered California has been an enormous success. Thanks to this historic law, nearly 1.3 million Californians now have affordable coverage through the Covered California marketplace — and this data today makes clear that Californians are using this coverage to access vital, high-quality health care.”

The preliminary report from Covered California, “Delivering on the Promise of Care: Early Indicators That Covered California Enrollees Are Getting Needed Care,” includes detailed data on the unique experiences of Covered California enrollees in 111 hospitals, as well as a statewide compilation of the data for some critical services. The 111 hospitals performed nearly 40 percent of inpatient care in 2014 in California and represent a portion of all hospitals serving Covered California enrollees (not all hospitals reported data). The report also highlights other independent studies that have found that Covered California enrollees are having easy access to care and are receiving needed primary care and preventive services.

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“People insured through Covered California have used their coverage to get care for broken bones, cancer treatment, elective surgeries and life-saving care at some of the best hospitals in our state,” said Covered California Executive Director Peter V. Lee. “It is this care, delivered at hospitals like UCSF Medical Center, that demonstrates how our members are getting not only emergency care, but also the critical follow-up and ongoing care they need and deserve.”

UCSF Chancellor Sam Hawgood, MBBS, said the medical center has seen firsthand how access to insurance is translating into life-saving and critical care.

“Covered California has been a model nationwide, thanks to the leadership of Democratic Leader Nancy Pelosi and others who have worked to make quality health care accessible for all,” Hawgood said. “At UCSF, we are proud to be the largest provider of cancer care for these patients among the medical centers surveyed and glad that UCSF is able to provide high-quality care to patients who otherwise might not have been diagnosed or treated.”

Highlights of the data reported to Covered California by hospitals include:

- 65,040 emergency room visits.
- 5,745 babies delivered to Covered California enrollees, including 473 babies who received care in neonatal intensive care units (NICUs).
- 3,741 incidents of trauma and broken bones treated, including inpatient orthopedic surgery and treatment for fractures in emergency rooms.
- 10,928 incidents of cancer treatment provided (including surgery and chemotherapy), including 1,218 treatments at UCSF Medical Center.
- 692 joint replacements (knee and hip), including 75 performed at UCSF Medical Center.
- 89 organ transplants performed for Covered California enrollees at eight hospitals in the state — with 33 at UCSF — including seven lung transplants, 34 bone marrow transplants, 18 kidney transplants, seven heart transplants and 22 liver transplants.

“I have had the good fortune of meeting individuals who stood before me sharing their individual health stories, and it is very powerful,” Lee said. “These data give an even fuller picture of the care being delivered across our state and bring home the fact that while health care is local, when something really bad happens, you want to be able to get to the best facility possible.”

The data included in the report represent a sample of care from 111 general acute care hospitals over an 18-month period from Jan. 1, 2014, to June 30, 2015 — the first 18 months of operation of Covered California.

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The report represents a cross-section of hospitals across the state, including some of the nation's mostly highly ranked<sup>[1]</sup> hospitals serving Covered California enrollees, such as Cedars-Sinai Medical Center, UCSF Medical Center, UCLA Medical Center, UC San Diego Medical Center, Scripps Memorial Hospital La Jolla, John Muir Medical Center facilities in Walnut Creek and Concord, and Kaiser Permanente's medical centers in Los Angeles and San Francisco. The report also includes data from community hospitals across the state that provide essential care and services to Covered California enrollees.

The data report is available online at [www.CoveredCA.com/news/pdfs/Delivering\\_on\\_the\\_Promise\\_of\\_Care\\_hospital\\_data.pdf](http://www.CoveredCA.com/news/pdfs/Delivering_on_the_Promise_of_Care_hospital_data.pdf) and was released as Covered California continues in its third open-enrollment period, with 13 days remaining until the deadline for enrolling in coverage for 2016.

"Uninsured Californians need to act now so they can get the health coverage that gives them access to care in the very best hospitals in our state," Lee said. "It's clear from the evidence today that people who get covered are getting health care that's changing and even saving their lives."

Consumers who need coverage can go to [CoveredCA.com](http://CoveredCA.com) to explore their options. By entering four pieces of information, they can see if they qualify for financial help to pay their health insurance premium, and they can sign up for coverage online. Consumers can also find free, confidential assistance in their communities by clicking "Find Local Help to Enroll" on the [CoveredCA.com](http://CoveredCA.com) website.

Open enrollment ends Jan. 31. Consumers may be eligible to sign up at any time during the year if they have a life-changing event such as getting married, having a child or moving. Medi-Cal enrollment is year-round.

### **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.

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<sup>[1]</sup> U.S. News, "Best Hospitals in California," <http://health.usnews.com/best-hospitals/area/ca>.

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# NEWS RELEASE

Jan. 18, 2016

**COVERED CALIFORNIA “BIG SUNDAY” CONNECTS WITH MORE THAN  
500 AFRICAN AMERICAN CHURCHES STATEWIDE  
*Pastors Up and Down the State Encourage Consumers to  
Sign Up for Coverage Before the Jan. 31 Deadline***

LOS ANGELES, Calif. — Three of the largest churches in Los Angeles County – First African Methodist Episcopal Church of Los Angeles (F.A.M.E.), Faithful Central Bible Church, and City of Refuge Church – joined forces with Covered California over MLK Jr. Day weekend to reach the African American community with a message that health insurance is now a right that is available to everyone, and it is time to exercise that right by enrolling and getting family and friends to enroll.

Referred to as “Big Sunday,” the church communities on Sunday, Jan. 17, honored the legacy of Reverend Martin Luther King, Jr. by promoting the Affordable Care Act, also known as Obamacare, by urging worshipers to sign up for affordable health insurance before the deadline on Jan. 31.

Speaking to the congregations, Covered California Executive Director Peter V. Lee quoted Dr. King stating, “Of all the forms of inequality, injustice in health is the most shocking and the most inhuman.” He continued by stating that President Obama ended that injustice and now all Americans have access to the health care they need and deserve. No longer will people be denied health coverage because of a pre-existing condition or because treatment costs too much.

Lee was joined by leaders of more than 500 predominantly African-American churches representing approximately 100,000 African Americans throughout the state, including members of the African Methodist Episcopal Church, the California Missionary Baptist State Convention, and the Apostolic Churches of California who helped spread the word about Covered California using pulpit announcements, social media, bulletin items, and email messages and flyers to encourage individuals and families to enroll in a health plan.

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Congregants were informed of subsidies available to help eligible individuals and families cover the cost of health insurance premiums. Nearly 9 out of 10 enrollees in Covered California receive some level of financial assistance. More than half of enrollees paid less than \$100 per month for their coverage, and nearly half of those paid less than \$50 per month.

“Let’s make sure no one goes without health care,” Lee said, recognizing how churches are woven into the fabric of African American culture and influence. “Please take a moment and think about someone you know who is uninsured – a brother, nephew, grandchild or neighbor. Encourage them to get covered. They have two weeks before open enrollment ends.”

Covered California Certified Enrollment Counselors were at each church from 9 a.m. to 2 p.m. providing free, confidential enrollment assistance, while a Covered California van and street team canvassed surrounding neighborhoods to distribute information.

Big Sunday ended with a lasting message that it is time to end health disparities that have devastated the African American community for too long.

“We know that African Americans are five times more likely to hear about Covered California through their churches. This kind of commitment from church families to encourage enrollment is so critical to making sure African Americans have access to quality and affordable health care,” Lee said.

For those who have not yet enrolled, there is still time. Open enrollment ends on Jan. 31, which is the deadline to receive coverage starting March 1 and to avoid tax penalties. Covered California has storefront locations statewide where individuals can get help enrolling. Visit [CoveredCA.com](http://CoveredCA.com) to enroll, learn about health plan options or find locations in your community where you can get free, confidential help enrolling.

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## NEWS RELEASE

Jan. 13, 2016

### **COVERED CALIFORNIA ESTIMATES HUNDREDS OF THOUSANDS OF CALIFORNIANS FACE INCREASED TAX PENALTY IF THEY GO WITHOUT HEALTH INSURANCE IN 2016**

*Consumers Have Until Jan. 31 to Enroll and Avoid Increased Fine*

SACRAMENTO, Calif. — Covered California is reminding consumers that time is running out to avoid the increased tax penalty for those who do not have health insurance in 2016, and the exchange is encouraging Californians without coverage to explore their options and sign up to avoid a big tax bill.

“We want to make sure everyone understands the new connection between health care and taxes,” Covered California Executive Director Peter V. Lee said. “Consumers still have time to take action now, to avoid a significant penalty when they file their taxes next year and protect themselves if something goes wrong.”

The Federal Patient Protection and Affordable Care Act requires most Americans to have health insurance or pay a penalty known as the “shared responsibility payment.” A recent report from the Henry J. Kaiser Family Foundation (<http://kff.org/health-reform/issue-brief/the-cost-of-the-individual-mandate-penalty-for-the-remaining-uninsured>) estimates that the average household penalty in 2016 will be \$969, which is a 47 percent increase from 2015. The report also estimates that those subject to the penalty include “75% of people who are eligible for premium subsidies.”

The fine is calculated two different ways, and uninsured consumers will pay whichever amount is higher. The first calculation is 2.5 percent of household income, with a maximum of the total yearly premium for the national average Bronze health insurance plan premium. The second calculation is \$695 per adult plus \$347.50 per child under the age of 18, with a maximum of \$2,085.

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The following table shows the potential range of penalties for not having insurance in 2016.

<b>Estimated Annual Penalties for Not Having Health Insurance in 2016</b>		
<b>Household Size</b>	<b>Minimum</b>	<b>Maximum*</b>
<b>1</b> ( <i>single filer</i> )	\$695 (\$58 per month)	\$2,484 (\$207 per month)
<b>2</b> ( <i>single filer with one dependent under 18</i> )	\$1,043 (\$87 per month)	\$4,968 (\$414 per month)
<b>3</b> ( <i>married filing jointly with one dependent under 18</i> )	\$1,738 (\$145 per month)	\$7,452 (\$621 per month)
<b>4</b> ( <i>married filing jointly with two dependents under 18</i> )	\$2,085 (\$174 per month)	\$9,936 (\$764 per month)

Source: Taxpayer Advocate Service, Individual Shared Responsibility Provision — Payment Estimator, [www.taxpayeradvocate.irs.gov/estimator/isrp](http://www.taxpayeradvocate.irs.gov/estimator/isrp).

\*Maximum penalties are based on the national average Bronze plan for an individual in 2015.

These will most likely increase slightly in 2016.

“At the beginning of open enrollment, we estimated there were 750,000 uninsured Californians eligible for financial assistance through Covered California,” Lee said. “While we are reducing that number by enrolling thousands of consumers every day, those who choose to remain uninsured face a fine and take the gamble that they may rack up tens of thousands of dollars in medical bills if they get sick or are injured.” Covered California detailed the costs of some of the most common conditions treated in an emergency room in this fact sheet: [www.CoveredCA.com/news/pdfs/costs-of-being-uninsured.pdf](http://www.CoveredCA.com/news/pdfs/costs-of-being-uninsured.pdf).

“A trip to the hospital can cost thousands per day, and breaking a bone or tearing a ligament can cost as much as \$50,000,” Lee said. “It’s a huge roll of the dice that consumers do not need to take because of the financial assistance that is available to help bring quality health care coverage within reach.”

Nearly nine out of every 10 Covered California enrollees receive some level of financial assistance. Covered California says that 670,000 enrollees paid \$100 a month or less for their coverage in 2015 and 350,000 enrollees paid \$50 or less per month.

The deadline to sign up for a health insurance plan that starts on Feb. 1 is Friday, Jan. 15. Open enrollment runs through Jan. 31, and anyone signing up between Jan. 16 and Jan. 31 will have their health care coverage start on March 1.

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Consumers can sign up for coverage in a variety of ways, including enrolling online at [www.CoveredCA.com](http://www.CoveredCA.com), calling (800) 300-1506 to enroll over the phone or finding in-person help in their communities. In-person enrollment assistance can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code.

In addition, Covered California previously announced that more than 500 enrollment events are planned across the state for the final month of open enrollment. All enrollment assistance is provided confidentially and at no cost.

The Taxpayer Advocate Service of the Internal Revenue Service (IRS) has developed an estimator ([www.taxpayeradvocate.irs.gov/estimator/isrp](http://www.taxpayeradvocate.irs.gov/estimator/isrp)) where consumers can get an estimate of the amount they may have to pay if they do not have minimum essential coverage during the year. It's important to note that the penalty only applies to consumers who can afford to purchase the lowest-priced coverage available to them, as long as it does not exceed more than 8.13 percent of their household income.

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# NEWS RELEASE

Jan. 7, 2016

## **COVERED CALIFORNIA OPENS ENROLLMENT CENTER TO ASSIST THE UNINSURED IN GETTING AFFORDABLE HEALTH INSURANCE**

*The First-of-Its-Kind Center Establishes Regular Hours During Open Enrollment and Houses Certified Enrollers, Health Insurance Companies and Covered California Under One Roof*

SACRAMENTO, Calif. — Covered California, its community partners and several insurance companies operating in the agency’s exchange are hosting the opening of a comprehensive enrollment center in Hawthorne where Los Angeles-area consumers can immediately enroll for health coverage.

The center, inside the Hawthorne Memorial Center at 3901 West El Segundo Blvd., is the first of its kind in establishing regular hours, having prominent signage and having health insurance companies on site to provide information about benefits.

The Covered California Enrollment Center brings certified enrollers, health insurance companies and Covered California together in one location to make enrollment as smooth as possible for the consumer by offering face-to-face, one-on-one enrollment processing. Certified Plan-Based Enrollers, Certified Enrollment Counselors and Certified Insurance Agents will be on hand throughout open enrollment to answer questions about benefits, types of plans, provider networks and costs. Additional literature and information will be available for consumers to take with them.

“This center will provide consumers with visible, convenient and consistent access to enrollment support in Covered California qualified health plans,” said Covered California Director of Outreach and Sales Kirk Whelan. “It will help us reach and enroll important segments of the population that remain uninsured, bringing them health care they need and deserve. The cities of Torrance, Gardena, Inglewood, Carson and Hawthorne are target markets.”

This Covered California Enrollment Center was placed in the southern part of Los Angeles County because Covered California’s “hot spot” maps identified several of its communities as having higher numbers of remaining uninsured and subsidy-eligible consumers — particularly African-Americans and Latinos.

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The enrollment center is open 11 a.m. to 7 p.m. Wednesday through Friday and noon to 5 p.m. on Saturdays through Jan. 31, when open enrollment ends.

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# NEWS RELEASE

Jan. 7, 2016

**MORE THAN 238,000 PEOPLE SIGNED UP FOR HEALTH COVERAGE  
IN FIRST TWO MONTHS OF OPEN ENROLLMENT; MORE THAN  
500 ENROLLMENT EVENTS ARE PLANNED FOR FINAL MONTH**

*Dental Enrollment Is Strong — More Than 120,000 New and Renewing Covered California Members Have Signed Up for Dental Coverage*

SACRAMENTO, Calif. — With less than one month remaining in this year’s open-enrollment period, Covered California announced Thursday that more than 238,000 new consumers had enrolled in health care coverage by the end of Jan. 2. Covered California also announced that more than 124,000 new and renewing consumers had enrolled in the new optional family dental coverage.

“Throughout the state, we’re seeing Californians signing up for health care in storefronts, health clinics and insurance agent offices,” said Covered California Executive Director Peter V. Lee. “The deadline is coming up, so anyone who does not have health insurance should visit [CoveredCA.com](http://CoveredCA.com) and find out where they can get help enrolling before the deadline.”

During this final month of open enrollment, more than 500 events are scheduled to help consumers get enrolled in health insurance through Covered California.

“The fact that so many enrollment events are scheduled at libraries, health centers, malls and churches is a testament to the fact that the Affordable Care Act is becoming part of the fabric of local communities across the state,” Lee said.

Enrollment events in January include:

- More than 110 enrollment events scheduled at libraries across the state, including Oceanside Public Library, Paradise Library, Moreno Valley Public Library and Ceres Public Library.
- More than 160 enrollment events planned in Los Angeles County.

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- More than 60 enrollment events scheduled at community health clinics, medical centers or hospitals, including Asian Health Services in Oakland, Tiburcio Vasquez Health Center in Hayward, Placentia-Linda Hospital in Placentia and Herald Christian Health Center in San Gabriel.
- More than 50 events scheduled at community and resource centers, including Chavez Resource Center in Oceanside, Community Health Centers Casa Street in San Luis Obispo and South Orange County Family Resource Center in Lake Forest.
- Events at locations such as the Asian Pacific Lunar Festival in Riverside; the Walnut Creek Farmers' Market; the East Hills Mall in Bakersfield; the campus of California State University, San Marcos; the Mount Moriah Baptist Church in Los Angeles; and the Boys and Girls Clubs of Oakland.

There are already 66 enrollment events scheduled throughout the state on the last weekend of open enrollment, Jan. 30-31, and others will be added to the calendar in the coming days and weeks.

Most events feature individuals who can assist consumers in more than one language, with three-quarters of the events offering Spanish-language assistance. Other events offer help in Mandarin, Cantonese, Korean, Vietnamese, Russian, Armenian, Hmong, Farsi, Tagalog and Arabic.

“We’ve seen an incredible demand for the affordable coverage that Covered California is bringing within the reach of so many consumers,” Lee said.

This year, Covered California made 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.

Covered California estimates that there are currently about 750,000 uninsured Californians eligible for subsidies, and it has forecasted that between 295,000 and 450,000 new consumers will enroll in coverage during open enrollment. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal.

Consumers should know there are multiple ways to enroll, including enrolling online at [www.CoveredCA.com](http://www.CoveredCA.com), calling (800) 300-1506 to enroll over the phone or finding in-person help in their communities. Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code.

In addition, hundreds of locations with Covered California signage mark storefronts where consumers can enroll confidentially and at no cost. The deadline to enroll for coverage starting Feb. 1 is Jan. 15, and the last day of open enrollment is Jan. 31.

(more)

## **About Covered California**

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# NEWS RELEASE

Jan. 4, 2016

## **COVERED CALIFORNIA AND THE NATIONAL COUNCIL OF ASIAN PACIFIC ISLANDER PHYSICIANS PARTNER TO SPUR ENROLLMENT UNDER THE AFFORDABLE CARE ACT**

*Prominent Physicians Group Again Assists in the Effort  
to Reduce the Number of Uninsured Californians*

SACRAMENTO, Calif. — Covered California and the National Council of Asian Pacific Islander Physicians have again joined forces to raise awareness of the third open-enrollment period under the Patient Protection and Affordable Care Act.

The National Council of Asian Pacific Islander Physicians partnered with Covered California during open enrollment for the second consecutive year by sending out a letter to more than 3,000 council members that featured ways to get the word out about open enrollment in physicians' offices and on social media sites.

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

"We are proud to be partnering again with the trusted members of the National Council of Asian Pacific Islander Physicians," Covered California Executive Director Peter V. Lee said. "Their voices help us highlight the importance of the open-enrollment period and our shared goal of getting as many Californians health insurance coverage as possible."

An estimated 750,000 uninsured Californians remain eligible to enroll in a health insurance plan through Covered California, and approximately 1.4 million uninsured Californians qualify for Medi-Cal coverage.

Cultivating a culture of coverage is also a goal of physicians across California.

"We recognize how significant open enrollment is for our patients and consumers across California and the nation," National Council of Asian Pacific Islander Physicians President and CEO Dr. Ho Luong Tran said. "We want to do our part to ensure more Californians have health care coverage than ever before."

(more)

Covered California has served more than 2 million consumers since it began offering health coverage in January 2014. Last year, nine out of 10 Covered California enrollees received financial assistance to help pay for their coverage.

### **About Covered California**

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### **About the National Council of Asian Pacific Islander Physicians (NCAPIP)**

NCAPIP is a national organization of Asian-American, Native Hawaiian and Pacific Islander physicians who advocate for the health and well-being of our patients and communities. Its board members are leaders in national, state, and local physician organizations and medical groups. They are primary and specialty care physicians practicing across a wide variety of settings from small and solo practices, multi-specialty medical groups, community health centers, private and public hospitals, integrated health delivery systems, academic health centers, and state and local health departments.

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# NEWS RELEASE

Jan. 4, 2016

## **COVERED CALIFORNIA AND NATIONAL HISPANIC MEDICAL ASSOCIATION PARTNER TO SPUR ENROLLMENT DURING THIRD OPEN ENROLLMENT UNDER THE AFFORDABLE CARE ACT**

*Prominent Physicians Group Again Assists in the Effort  
to Reduce the Number of Uninsured Californians*

SACRAMENTO, Calif. — Covered California and the National Hispanic Medical Association have again joined forces to raise awareness of the third open-enrollment period under the Patient Protection and Affordable Care Act.

The National Hispanic Medical Association partnered with Covered California during open enrollment for the second consecutive year by sending out a letter to more than 1,100 association members that featured ways to get the word out about open enrollment in physicians' offices and on social media sites.

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

"We are proud to be partnering again with the trusted members of the National Hispanic Medical Association," Covered California Executive Director Peter V. Lee said. "Their voices help us highlight the importance of the open-enrollment period and our shared goal of getting as many Californians health insurance coverage as possible. They have been invaluable partners to Covered California during this process."

An estimated 750,000 uninsured Californians remain eligible to enroll in a health insurance plan through Covered California, and approximately 1.4 million uninsured Californians qualify for Medi-Cal coverage.

Cultivating a culture of coverage is also a goal of physicians across California.

"We recognize how significant open enrollment is for our patients and consumers across California and the nation," National Hispanic Medical Association President and CEO Elena Rios said. "We want to do our part to ensure more Californians have health care coverage than ever before."

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Covered California has served more than 2 million consumers since it began offering health coverage in January 2014. Last year, nine out of 10 Covered California enrollees received financial assistance to help pay for their coverage.

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### **About the National Hispanic Medical Association (NHMA)**

Established in 1994 and based in Washington, D.C., the NHMA is a nonprofit association representing 50,000 licensed Hispanic physicians in the United States. The NHMA's mission is to empower Hispanic physicians and other health care professionals to improve the health of Hispanic populations with Hispanic medical societies, resident and medical student organizations, and its public and private sector partners. The vision of the NHMA is to be the national leader to improve the health of Hispanic populations. For more information about the NHMA, please visit [www.nhmamd.org](http://www.nhmamd.org).

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# NEWS RELEASE

Dec. 29, 2015

## **COVERED CALIFORNIA HIGHLIGHTS MAJOR HEALTH INSURANCE CHANGES FOR THE NEW YEAR — NEW PENALTIES, NEW REQUIREMENTS AND, FOR THOSE WITH COVERAGE, IMPROVED BENEFITS, MORE OPTIONS AND MORE ACCESS TO CARE**

*New Tax Forms and New Rules for Small Businesses Will Begin in 2016*

SACRAMENTO, Calif. — With the new year right around the corner, Covered California is reminding consumers and small businesses about important changes that will take place in 2016.

“There are big changes taking effect in 2016 that will affect thousands of small businesses and millions of consumers,” said Covered California Executive Director Peter V. Lee. “Covered California consumers have reason to celebrate as we enter the new year, and we want to make sure that everyone knows how to get the right coverage at the best price. Those insured with us will have new and improved benefits with their coverage and ways to be sure they get the care they need and deserve.”

Starting Jan. 1, Covered California will be increasing access to plans and providers, as well as giving consumers more health plans to choose from and improving the number of benefits that are not subject to a deductible.

What follow are some of the major changes taking effect in 2016. Some affect the 1.3 million insured through Covered California, while others will benefit all Californians.

### **Most California Consumers to Get New Forms for 2015 Tax Year**

- This year, for the first time, consumers who are insured through their employer or a government-sponsored program, like Medi-Cal, will receive a Form 1095-B or Form 1095-C. The forms show who maintained minimum essential coverage and is therefore not liable for the individual shared responsibility payment, or tax penalty. Consumers insured through Covered California will continue to receive a Form 1095-A, which details when they had coverage and is used to file their federal taxes. For more information on the 1095 tax forms and how to use them when filing your taxes, visit <https://www.irs.gov/Affordable-Care-Act/Questions-and-Answers-about-Health-Care-Information-Forms-for-Individuals>.

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## **The Penalty for Not Buying Affordable Insurance Is Going Up — A Lot**

- The penalty, which is payable to the Internal Revenue Service by individuals who go without insurance when they could afford to buy it, will increase for 2016 to at least \$695 per adult and \$347.50 per child under the age of 18 or 2.5 percent of household income, whichever is greater. A recent study by the Henry J. Kaiser Family Foundation (<http://kff.org/health-reform/issue-brief/the-cost-of-the-individual-mandate-penalty-for-the-remaining-uninsured>) estimated that the average household penalty in 2016 would be \$969, which is a 47 percent increase from the average estimated penalty of \$661 in 2015. For more information on the penalty, and to calculate what they may owe, consumers can visit [www.taxpayeradvocate.irs.gov/estimator/isrp](http://www.taxpayeradvocate.irs.gov/estimator/isrp).

## **New Requirements and New Options for Many of California's Small Businesses**

- Employers with more than 50 full-time-equivalent (FTE) employees will be required to offer health insurance to their employees or pay a penalty. Through 2015, this requirement applied only to businesses with more than 100 employees. Additionally, any of these employers with an employee who does not take their offer of coverage will have to pay a penalty if that employee goes on to receive financial assistance to purchase coverage through Covered California. For more information on the requirement that employers must offer coverage, visit <https://www.irs.gov/Affordable-Care-Act/Employers/ACA-Information-Center-for-Applicable-Large-Employers-ALEs>.
- Covered California for Small Business will expand beyond the current ceiling of 50 employees to serve companies employing 100 or fewer FTE employees. Through Covered California for Small Business, employers have more control over their costs, with increased flexibility, by being able to offer their employees multiple carriers across multiple metal tiers, or coverage levels. Covered California for Small Business also relieves employers of the administrative burden by handling much of the payment distribution to health plans across multiple carriers and metal tiers. For more information on Covered California for Small Business, visit [www.CoveredCA.com/ForSmallBusiness](http://www.CoveredCA.com/ForSmallBusiness).

## **Major Improvements in Choice, Access and Benefits for Consumers with Covered California Coverage**

Covered California used its power as an “active purchaser” to hold rate changes down for a second consecutive year. Prior to the Patient Protection and Affordable Care Act, consumers regularly experienced double-digit increases to their health insurance premiums. For 2016, Covered California successfully negotiated a weighted average change of 4 percent, which is lower than last year's change of 4.2 percent.

In addition, nearly 90 percent of Covered California enrollees receive some measure of financial assistance to help them pay for their premiums. On average, those subsidies resulted in more than \$5,200 for each household in 2014.

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Other benefits for the 2016 coverage year:

- The majority of Bronze plan consumers will now get three office visits a year to a primary care provider or specialist that will no longer be subject to a deductible. Other needed services, such as lab tests and rehabilitation, will also no longer be subject to a deductible.
- Covered California's Silver plan will be simplified by combining copay and coinsurance into a single product. Every doctor visit, lab test and prescription will not be subject to a deductible in this single product. Consumers with chronic conditions will be protected by a cap on specialty drugs. The vast majority of consumers will see their specialty drugs capped at \$250 per month, per prescription. Plus, because of Covered California's standard benefit design, the caps must be offered by every health insurance plan in the individual market as well as by all plans offered by the exchange. For more information, visit <http://news.CoveredCA.com/2015/05/covered-california-board-protects.html>.
- Adult dental coverage is now offered as an "add-on" to the health coverage consumers purchase through the exchange. Pediatric dental benefits for members under 19 years of age continue to be included with all Covered California health insurance plans.
- Thanks to the addition of two new health insurance companies — UnitedHealthcare Benefits Plan of California and Oscar Health Plan of California — and the expansions of Blue Shield of California and Health Net, 99.6 percent of Covered California consumers will be able to choose from at least three health insurance companies.
- 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 74 percent will be available through three or more companies.

### **Medi-Cal Coverage for Undocumented Children Starting in May 2016**

- Medi-Cal will be expanded to all children regardless of their immigration status. The new law goes into effect in May 2016. Please contact the California Department of Health Care Services for more information.

### **Health Care Improvements for All Californians**

There will also be several improvements to California's health care system that benefit all Californians, not just Covered California enrollees.

- Starting July 1, 2016, California state law will require health plans to publish and maintain printed and online provider directories and will set requirements that health plans must meet to maintain accurate provider directories, including routine updates. For more information, visit [http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill\\_id=201520160SB137](http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201520160SB137).

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- A new state law will require health plans and insurers to implement formulary tier requirements and cost-sharing caps similar to products offered through Covered California. Assembly Bill 339 also requires plans and insurers to have formularies that do not discourage the enrollment of individuals with certain health conditions, and sets requirements regarding access to in-network retail pharmacies, standardized formularies, and coverage for certain single-tablet HIV and AIDS treatments. For more information, visit [http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill\\_id=201520160AB339](http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201520160AB339).

Open enrollment in the individual market runs through Jan. 31. Consumers can enroll online by visiting [www.CoveredCA.com](http://www.CoveredCA.com), or they can get in-person enrollment assistance by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) to find the nearest certified enroller. Enrollment assistance is free, confidential and available in a variety of languages. Consumers can also enroll over the phone by reaching Covered California at (800) 300-1506, between 8 a.m. and 8 p.m. on weekdays and from 8 a.m. to 6 p.m. on Saturdays.

Once open enrollment ends, consumers can enroll in Covered California if they experience a qualifying life event. The most common qualifying life events are getting married, having or adopting a child, losing your health care coverage or moving. For more information on special enrollment through Covered California, visit [http://hbex.CoveredCA.com/toolkit/PDFs-Collateral/SEP-Fact-Sheet\\_English-\(customizable\).pdf](http://hbex.CoveredCA.com/toolkit/PDFs-Collateral/SEP-Fact-Sheet_English-(customizable).pdf).

Enrollment into Medi-Cal or into Covered California for Small Business occurs year-round.

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# NEWS RELEASE

Dec. 22, 2015

## **COVERED CALIFORNIA URGES FEDERAL OFFICIALS TO LOOK TO STANDARD BENEFIT DESIGN AND ROBUST MARKETING AS KEYS TO AFFORDABLE CARE ACT SUCCESS**

*Lessons Learned from State Exchanges  
Can Help Build Long-Term National Success*

SACRAMENTO, Calif. — Covered California Executive Director Peter V. Lee urged U.S. Secretary of Health and Human Services (HHS) Sylvia Mathews Burwell on Monday to consider specific strategies to build on the Patient Protection and Affordable Care Act's success. Covered California shared some key insights and lessons learned with Burwell so that health exchanges nationwide can continue their success in 2017 and beyond.

In written comments submitted Monday in response to proposed federal regulations, Covered California weighed in on three key elements of the proposed regulations, related to standard benefit design, ensuring federal and state exchanges have resources to do effective marketing and the role of Web-based entities in enrollment. As Covered California, the federal marketplace and exchanges in other states enter the third historic year of operations, lessons learned in 2014 and 2015 can be applied to future years.

**Standard Benefit Design** — Proposed regulations related to the federal marketplace in 2017 contemplate the standardization of benefits under the Affordable Care Act. Covered California currently offers standardized benefits so that consumers can easily compare health insurance plans knowing that every plan within the same metal tier has the same cost-sharing amounts and benefits. With standardized benefits, consumers can also rest assured knowing that some services will always be affordable and accessible. For example, every health plan available through Covered California has primary care visits that are not subject to the deductible, which means primary care is affordable and accessible.

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“Covered California developed the standard benefit designs with input from consumers and health care advocates, health plans and policy experts,” said Lee. “Our goal is always to promote consumer understanding and access to needed care as well as encourage consumers to get the right care at the right time.”

Lee applauded the secretary for taking important steps in the right direction to build on the Affordable Care Act’s essential health benefits by promoting standard benefit designs created for consumers. Encouraging health insurance companies to offer health plans with standardized benefits in the federally facilitated exchange could allow consumers to compare plans more easily, decrease the complexity of buying insurance and encourage the use of appropriate medical services.

**Federal Assessment on Plans to Ensure Ongoing Enrollment** — Recent reports from HHS, California and other states’ exchanges show that enrollment for the upcoming third coverage year of the Affordable Care Act is strong, which bodes well for continued improvement of the “risk mix” and for ensuring long-term affordability.

The proposed federal regulations, which would not take effect until 2017, present the assessment on health plans to support all marketplace functions, including a small portion for marketing and outreach costs. While California has no plans to use the federal enrollment platform, Covered California believes making investments in marketing and outreach is vital to promoting larger enrollment and retention, which have direct correlation to fostering a better risk mix that keeps premiums low for the entire market by encouraging healthier consumers to buy health insurance.

“Covered California believes strongly that strategic and adequate investments in marketing, outreach and sales are critical factors to ensuring that the marketplace grows and, more importantly, maintains a good risk mix,” Lee said.

Covered California believes robust marketing has been essential to attracting members who are healthy, young and cost less to serve, as well as patients who are sicker, higher-cost and often older, as demonstrated by California having the best risk mix in the nation as of the end of 2014. Lee said ongoing marketing in the years ahead will be essential to the long-term success of the health reform law.

“The importance of sales and marketing efforts will only increase in the coming years as the free, earned media garnered by the historic nature of the Affordable Care Act subsides and the efforts of foundation-supported enrollment and marketing efforts decrease,” he said. “While both the federal exchange and state exchange have been doing an effective job attracting members, success over the long haul will require continued, robust marketing.”

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**Web-Based Entities** — Lee affirmed the important role that licensed insurance agents have and continue to play in promoting enrollment, while he commented on proposed standards for the federal marketplace related to the role of those agents who sell online — referred to as “Web-based entities.” Covered California believes that having clear standards and expectations of Web-based entities’ “choice architecture” is of critical importance to making outreach work for consumers.

“In the absence of clear standards, consumers may experience confusing displays of health plan options, make less optimal plan and product choices, be routed to off-exchange products, or not get appropriate in-person support when it is needed,” Lee wrote. “Having poor or confusing plan choice display runs the risk of resulting in smaller enrollment and a worse risk pool.”

While it is unclear from the rules whether they would apply to state-based marketplaces, Covered California voiced specific concerns about the inappropriate nature of applying such rules to state-based marketplaces, and provided specific suggestions for how the federal marketplace could ensure Web-based entities serve consumers, and about the need for federally established standards for Web-based entities regarding how consumers choose plans and get support from these agents. Covered California strongly believes that Web-based entities and other direct enrollment vendors should have to support consumers in all aspects of the application, display available health plans with additional consumer tools such as filtering and sorting options, and meet other requirements.

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# NEWS RELEASE

Dec. 16, 2015

## **COVERED CALIFORNIA EXPERIENCES RECORD-BREAKING ENROLLMENT FOR CONSUMERS SEEKING JAN. 1 COVERAGE**

*More than 55,000 Sign Up Over Two Days As Covered California Extends Deadline for Consumers*

SACRAMENTO, Calif. — Covered California announced Wednesday that more than 197,000 consumers had enrolled in health care coverage by the end of Tuesday, Dec. 15, including more than 22,000 on Monday and more than 32,000 on Tuesday.

The two-day total of more than 55,000 surpassed the enrollment figures seen last year during the same two day period when more than 35,000 people signed up for coverage on Dec. 14-15, 2014.

“The interest we have seen over the last two days is further proof of the continued demand that Californians have for quality, affordable health care coverage,” said Covered California Executive Director Peter V. Lee. “We want to make sure that everyone who is working to get in the door has the time they need to get the coverage they deserve.”

In response to the huge demand, Covered California is giving consumers until Dec. 17 to sign up for health care coverage that will begin on Jan. 1.

“Based on the incredible demand we are seeing, we are encouraging consumers to avoid the last-minute rush,” Lee said. “Get in now and get covered for 2016.”

Consumers can enroll online by visiting [www.CoveredCA.com](http://www.CoveredCA.com), or they can get in-person enrollment assistance by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) to find the nearest Certified Enroller. Enrollment assistance is free, confidential and available in a variety of languages. Consumers can also enroll over the phone by reaching Covered California at (800) 300-1506, between 8 a.m. and 8 p.m.

(more)

Open enrollment runs through Jan. 31. Consumers who enroll after Dec. 17 will have their coverage start in either February or March.

Covered California estimates that there are currently about 750,000 uninsured Californians eligible for subsidies, and it forecasts that between 295,000 and 450,000 consumers will newly enroll in coverage during open enrollment. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal.

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# NEWS RELEASE

Dec. 15, 2015

## **COVERED CALIFORNIA EXTENDS ENROLLMENT DEADLINE FOR JAN. 1 COVERAGE**

*Current enrollment surpasses last year's demand*

SACRAMENTO, Calif. — Due to very high demand for health insurance through Covered California, the deadline to enroll for coverage starting Jan. 1 will be extended until Dec. 17 to accommodate the surge in interest.

The Service Center will be open from 8 a.m. to 8 p.m. on Dec. 16 and Dec. 17.

“The spike in interest we are seeing in the last few days tells us there is continued demand for quality, affordable coverage,” said Executive Director Peter V. Lee. “We already have enrolled more consumers this year for Jan. 1 coverage than we did last year.”

Covered California has heard from our certified enrollers, including agents, that they still are processing thousands of applications and appreciate the additional time to ensure consumers receive coverage for all of 2016.

“We want to make sure everyone calling for coverage gets the help they need,” Lee said.

Consumers should know there are a multitude of ways to enroll, including online at [www.CoveredCA.com](http://www.CoveredCA.com). Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code. In addition, hundreds of locations with Covered California signage mark places where consumers can enroll confidentially and at no cost in a variety of languages. Consumers can also call Covered California directly at (800) 300-1506 to enroll over the phone.

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# NEWS RELEASE

Dec. 15, 2015

## **COVERED CALIFORNIA RELEASES ‘HOT SPOT’ MAPS FOR THE CENTRAL VALLEY AS CRITICAL DEADLINE FOR COVERAGE APPROACHES**

*Consumers Must Enroll by Midnight on Dec. 15 to Be Covered on Jan. 1*

SACRAMENTO, Calif. — As the Dec. 15 deadline to enroll for health insurance starting in January arrived, Covered California released a list of the top areas in the Central Valley where high numbers of people who qualify for subsidized health insurance are believed to reside.

The “hot spots” released today show the estimated highest concentrations of subsidy-eligible uninsured individuals — people who qualify for help to buy health insurance through Covered California but have not yet taken advantage of it.

“Covered California works across all of California, but the maps help us focus our efforts on areas where we know many who are still uninsured live,” Covered California Executive Director Peter V. Lee said. “Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage, and if they enroll by midnight tonight, their coverage can start on Jan. 1.”

According to Covered California, the “hot spots” shown on the maps at [www.CoveredCA.com/news/pdfs/CoveredCA\\_Heat\\_Map\\_Central\\_Valley.pdf](http://www.CoveredCA.com/news/pdfs/CoveredCA_Heat_Map_Central_Valley.pdf) generally contain more remaining subsidy-eligible individuals per capita than the rest of the region. For example, while Covered California estimates that 2.5 percent of the state’s overall population is subsidy-eligible, the maps show:

- More than 10 percent of the population in both Bakersfield and Visalia’s hot spots is subsidy-eligible, more than four times the state average.
- 5.7 percent of the population in Fresno’s hot spots is subsidy-eligible, more than twice the state average.

(more)

“If you live in one of these areas — in Clovis or Reedley, in Bakersfield or Oildale, or in Visalia or Goshen — and you do not have health insurance, now is the time to get covered,” Lee said. “This is our opportunity to build healthier communities throughout the Central Valley and the rest of the state.”

Covered California has redoubled its enrollment outreach efforts in the region, including:

- Working to expand the number of storefronts in neighborhood hot spots.
- Working on the ground with Certified Insurance Agents and community partners to ensure that enrollment events are located in optimal locations and that residents in hot-spot communities are aware of enrollment locations nearby.
- Conducting more than a dozen interviews with Spanish-language and Asian-language media and highlighting hot spots by name to reach Spanish speakers and Asian-language speakers in their neighborhoods.
- Scheduling phone banks in partnership with English- and Spanish-language news outlets and promoting enrollment in specific neighborhoods.
- Launching an intensive enrollment effort in communities where high numbers of subsidy-eligible African-Americans reside, by going door to door to canvass with street teams; visiting barber shops, hair care salons and other small businesses; and deploying the “Van with a Plan” (a branded Covered California van) to areas where high numbers of subsidy-eligible uninsured Californians live.

As of Sunday, Dec. 13, more than 140,000 Californians had selected plans through Covered California since open enrollment began on Nov. 1.

“Our research indicates that one-third of those eligible to get financial help to buy insurance don’t know it’s available,” Lee said. “We want to leave no stone unturned and make sure our message reaches into neighborhoods throughout the state, especially those where we believe the highest number of the eligible uninsured live.”

Covered California estimates that 750,000 people in the state are eligible for help paying for their health insurance but remain uninsured, with 33,000 of them living in the four counties — Fresno, Kings, Madera and Kern — that comprise Covered California’s pricing regions 11 and 14. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal, with 63,000 of them living in the region.

Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code. In addition, hundreds of locations with Covered California signage mark places where consumers can enroll confidentially and at no cost in a variety of languages.

(more)

Covered California developed the maps by combining estimates of eligibility for coverage under the Affordable Care Act from a model of California insurance markets that was developed by the University of California, Los Angeles, Center for Health Policy Research and the University of California, Berkeley, Center for Labor Research and Education, known as the California Simulation of Insurance Markets (or CalSIM), and from U.S. Census data from the American Community Survey.

The model accounts for individuals who are eligible for other sources of coverage (Medi-Cal, Medicare or job-based coverage), as well as those who are undocumented.

The estimates also incorporate Covered California's currently enrolled consumers (as of July 2015).

To find out more about the health plans and options available, consumers can visit [www.CoveredCA.com](http://www.CoveredCA.com). Consumers can get a quick assessment of how much it would cost to buy health insurance by clicking on "Shop and Compare," and they can apply for coverage online. Open enrollment continues through Jan. 31.

### **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](http://www.CoveredCA.com).

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# NEWS RELEASE

Dec. 15, 2015

## **COVERED CALIFORNIA RELEASES ‘HOT SPOT’ MAPS FOR THE SAN JOAQUIN VALLEY AS CRITICAL DEADLINE FOR COVERAGE APPROACHES**

*Consumers Must Enroll by Midnight on Dec. 15 to Be Covered on Jan. 1*

SACRAMENTO, Calif. — As the Dec. 15 deadline to enroll for health insurance starting in January arrived, Covered California released a list of the top areas in the San Joaquin Valley where high numbers of people who qualify for subsidized health insurance are believed to reside.

The “hot spots” released today show the estimated highest concentrations of subsidy-eligible uninsured individuals — people who qualify for help to buy health insurance through Covered California but have not yet taken advantage of it.

“Covered California works across all of California, but the maps help us focus our efforts on areas where we know many who are still uninsured live,” Covered California Executive Director Peter V. Lee said. “Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage, and if they enroll by midnight tonight, their coverage can start on Jan. 1.”

According to Covered California, the “hot spots” shown on the maps at [www.CoveredCA.com/news/pdfs/CoveredCA\\_Heat\\_Map\\_SJ\\_Valley.pdf](http://www.CoveredCA.com/news/pdfs/CoveredCA_Heat_Map_SJ_Valley.pdf) generally contain more remaining subsidy-eligible individuals per capita than the rest of the region. For example, while Covered California estimates that 2.5 percent of the state’s overall population is subsidy-eligible, the maps show:

- 6.4 percent of the population in Stockton’s hot spots is subsidy-eligible.
- 5.5 percent of the population in Modesto’s hot spots is subsidy-eligible.
- 3.6 percent of the population in Turlock’s hot spots is subsidy-eligible.

(more)



“If you live in one of these areas — in Lodi or Woodbridge, in Morada or Garden Acres, in Riverbank or West Modesto, or in Turlock — and you do not have health insurance, now is the time to get covered,” Lee said. “This is our opportunity to build healthier communities throughout the San Joaquin Valley and the rest of the state.”

Covered California has redoubled its enrollment outreach efforts in the region, including:

- Working to expand the number of storefronts in neighborhood hot spots.
- Working on the ground with Certified Insurance Agents and community partners to ensure that enrollment events are located in optimal locations and that residents in hot-spot communities are aware of enrollment locations nearby.
- Conducting more than a dozen interviews with Spanish-language and Asian-language media and highlighting hot spots by name to reach Spanish speakers and Asian-language speakers in their neighborhoods.
- Scheduling phone banks in partnership with English- and Spanish-language news outlets and promoting enrollment in specific neighborhoods.
- Launching an intensive enrollment effort in communities where high numbers of subsidy-eligible African-Americans reside, by going door to door to canvass with street teams; visiting barber shops, hair care salons and other small businesses; and deploying the “Van with a Plan” (a branded Covered California van) to areas where high numbers of subsidy-eligible uninsured Californians live.

As of Sunday, Dec. 13, more than 140,000 Californians had selected plans through Covered California since open enrollment began on Nov. 1.

“Our research indicates that one-third of those eligible to get financial help to buy insurance don’t know it’s available,” Lee said. “We want to leave no stone unturned and make sure our message reaches into neighborhoods throughout the state, especially those where we believe the highest number of the eligible uninsured live.”

Covered California estimates that 750,000 people in the state are eligible for help paying for their health insurance but remain uninsured, with 38,000 of them living in the five counties — San Joaquin, Stanislaus, Merced, Mariposa and Tulare — that comprise Covered California’s pricing region 10. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal, with 73,000 of them living in the region.

Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code. In addition, hundreds of locations with Covered California signage mark places where consumers can enroll confidentially and at no cost in a variety of languages.

(more)

Covered California developed the maps by combining estimates of eligibility for coverage under the Affordable Care Act from a model of California insurance markets that was developed by the University of California, Los Angeles, Center for Health Policy Research and the University of California, Berkeley, Center for Labor Research and Education, known as the California Simulation of Insurance Markets (or CalSIM), and from U.S. Census data from the American Community Survey.

The model accounts for individuals who are eligible for other sources of coverage (Medi-Cal, Medicare or job-based coverage), as well as those who are undocumented.

The estimates also incorporate Covered California's currently enrolled consumers (as of July 2015).

To find out more about the health plans and options available, consumers can visit [www.CoveredCA.com](http://www.CoveredCA.com). Consumers can get a quick assessment of how much it would cost to buy health insurance by clicking on "Shop and Compare," and they can apply for coverage online. Open enrollment continues through Jan. 31.

### **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](http://www.CoveredCA.com).

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# NEWS RELEASE

Dec. 14, 2015

## **COVERED CALIFORNIA ENROLLMENT EXCEEDS 140,000 AS CRITICAL DEADLINE FOR COVERAGE APPROACHES**

*Consumers Must Enroll by Midnight on Dec. 15 to Be Covered on Jan. 1*

SACRAMENTO, Calif. — With just one day remaining to enroll for health insurance starting in January, Covered California announced that more than 140,000 consumers had enrolled in coverage by the end of Sunday, Dec. 13.

“Once again, Covered California is seeing an incredible surge of interest, and thousands of people are enrolling at storefronts, insurance agent offices and community centers across the state every day,” Covered California Executive Director Peter V. Lee said. “Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage, and if they enroll by Dec. 15, their coverage can start on Jan. 1.”

Although open enrollment runs through Jan. 31, 2016, consumers must enroll by midnight Dec. 15 to have their coverage start by New Year’s Day.

Covered California estimates that there are currently about 750,000 uninsured Californians eligible for subsidies, and it forecasts that between 295,000 and 450,000 consumers will newly enroll in coverage during open enrollment. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal.

“We know that financial assistance is key in helping consumers get the health care coverage they need and deserve,” Lee said. “Our research shows that one-third of those eligible to get financial help to buy insurance don’t know it’s available, and we want to make sure our message reaches into every corner of the state.”

Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code. In addition, hundreds of locations with Covered California signage mark places where consumers can enroll confidentially and at no cost in a variety of languages. Consumers can also call Covered California directly at (800) 300-1506 to enroll over the phone.

(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.

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# NEWS RELEASE

Dec. 11, 2015

## **COVERED CALIFORNIA RELEASES ‘HOT SPOT’ MAP FOR PALM SPRINGS/COACHELLA VALLEY AS CRITICAL DEADLINE FOR COVERAGE APPROACHES**

*Consumers Must Enroll by Dec. 15 to Be Covered on Jan. 1*

SACRAMENTO, Calif. — As the Dec. 15 deadline to enroll for health insurance starting in January approached, Covered California released a list of the top areas near Palm Springs and the Coachella Valley where high numbers of people who qualify for subsidized health insurance are believed to reside.

The “hot spots” released today show the estimated highest concentrations of subsidy-eligible uninsured individuals — people who qualify for help to buy health insurance through Covered California but have not yet taken advantage of it.

“Covered California works across all of California, but the map helps us focus our efforts on areas where we know many who are still uninsured live,” Covered California Executive Director Peter V. Lee said. “Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage, and if they enroll by Dec. 15, their coverage can start on Jan. 1.”

According to Covered California, the “hot spots” shown on the map at [www.CoveredCA.com/news/pdfs/CoveredCA\\_Heat\\_Map\\_Palm\\_Springs.pdf](http://www.CoveredCA.com/news/pdfs/CoveredCA_Heat_Map_Palm_Springs.pdf) generally contain more remaining subsidy-eligible individuals per capita than the rest of the region. For example, an estimated 7.3 percent of the population in the two hot spots is subsidy-eligible, compared with 4.7 percent of Riverside County overall.

“If you live in one of these areas — in Cathedral City or La Quinta — and you do not have health insurance, now is the time to get covered,” Lee said. “This is our opportunity to build healthier communities throughout the Palm Springs area, Southern California and the rest of the state.”

Covered California has redoubled its enrollment outreach efforts in the region, including:

- Working to expand the number of storefronts in neighborhood hot spots.

(more)

- Working on the ground with Certified Insurance Agents and community partners to ensure that enrollment events are located in optimal locations and that residents in hot-spot communities are aware of enrollment locations nearby.
- Conducting more than a dozen interviews with Spanish-language and Asian-language media and highlighting hot spots by name to reach Spanish speakers and Asian-language speakers in their neighborhoods.
- Scheduling phone banks in partnership with English- and Spanish-language news outlets and promoting enrollment in specific neighborhoods.
- Launching an intensive enrollment effort in communities where high numbers of subsidy-eligible African-Americans reside, by going door to door to canvass with street teams; visiting barber shops, hair care salons and other small businesses; and deploying the “Van with a Plan” (a branded Covered California van) to areas where high numbers of subsidy-eligible uninsured Californians live.

As of Monday, Dec. 7, more than 83,000 Californians had selected plans through Covered California since open enrollment began on Nov. 1.

“Our research indicates that one-third of those eligible to get financial help to buy insurance don’t know it’s available,” Lee said. “We want to leave no stone unturned and make sure our message reaches into neighborhoods throughout the state, especially those where we believe the highest number of the eligible uninsured live.”

Covered California estimates that 750,000 people in the state are eligible for help paying for their health insurance but remain uninsured, with 92,000 of them living in the Inland Empire. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal, with 176,000 of them living in the region.

Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code. In addition, hundreds of locations with Covered California signage mark places where consumers can enroll confidentially and at no cost in a variety of languages.

Covered California developed the map by combining estimates of eligibility for coverage under the Affordable Care Act from a model of California insurance markets that was developed by the University of California, Los Angeles, Center for Health Policy Research and the University of California, Berkeley, Center for Labor Research and Education, known as the California Simulation of Insurance Markets (or CalSIM), and from U.S. Census data from the American Community Survey.

The model accounts for individuals who are eligible for other sources of coverage (Medi-Cal, Medicare or job-based coverage), as well as those who are undocumented.

(more)

The estimates also incorporate Covered California's currently enrolled consumers (as of July 2015).

To find out more about the health plans and options available, consumers can visit [www.CoveredCA.com](http://www.CoveredCA.com). Consumers can get a quick assessment of how much it would cost to buy health insurance by clicking on "Shop and Compare," and they can apply for coverage online. Open enrollment continues through Jan. 31.

### **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.

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# NEWS RELEASE

Dec. 11, 2015

## **COVERED CALIFORNIA RELEASES ‘HOT SPOT’ MAP FOR CHICO AS CRITICAL DEADLINE FOR COVERAGE APPROACHES**

*Consumers Must Enroll by Dec. 15 to Be Covered on Jan. 1*

SACRAMENTO, Calif. — As the Dec. 15 deadline to enroll for health insurance starting in January approached, Covered California released a map of the top area in Chico where high numbers of people who qualify for subsidized health insurance are believed to reside.

The “hot spot” map released today shows the estimated highest concentration of subsidy-eligible uninsured individuals — people who qualify for help to buy health insurance through Covered California but have not yet taken advantage of it.

“Covered California works across all of California, but the map helps us focus our efforts on areas where we know many who are still uninsured live,” Covered California Executive Director Peter V. Lee said. “Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage, and if they enroll by Dec. 15, their coverage can start on Jan. 1.”

According to Covered California, the “hot spot” shown on the map at [www.CoveredCA.com/news/pdfs/CoveredCA\\_Heat\\_Map\\_Chico.pdf](http://www.CoveredCA.com/news/pdfs/CoveredCA_Heat_Map_Chico.pdf) generally contains more remaining subsidy-eligible individuals per capita than the rest of the region. For example, an estimated 7.3 percent of the population in the hot spot is subsidy-eligible, compared with 3.0 percent of Butte County overall.

“If you live in one of these areas — in the college district and areas around downtown — and you do not have health insurance, now is the time to get covered,” Lee said. “This is our opportunity to build healthier communities throughout Chico, Northern California and the rest of the state.”

Covered California has redoubled its enrollment outreach efforts in the region, including:

- Working to expand the number of storefronts in neighborhood hot spots.

(more)



- Working on the ground with Certified Insurance Agents and community partners to ensure that enrollment events are located in optimal locations and that residents in hot-spot communities are aware of enrollment locations nearby.
- Conducting more than a dozen interviews with Spanish-language and Asian-language media and highlighting hot spots by name to reach Spanish speakers and Asian-language speakers in their neighborhoods.
- Scheduling phone banks in partnership with English- and Spanish-language news outlets and promoting enrollment in specific neighborhoods.
- Launching an intensive enrollment effort in communities where high numbers of subsidy-eligible African-Americans reside, by going door to door to canvass with street teams; visiting barber shops, hair care salons and other small businesses; and deploying the “Van with a Plan” (a branded Covered California van) to areas where high numbers of subsidy-eligible uninsured Californians live.

As of Monday, Dec. 7, more than 83,000 Californians had selected plans through Covered California since open enrollment began on Nov. 1.

“Our research indicates that one-third of those eligible to get financial help to buy insurance don’t know it’s available,” Lee said. “We want to leave no stone unturned and make sure our message reaches into neighborhoods throughout the state, especially those where we believe the highest number of the eligible uninsured live.”

Covered California estimates that 750,000 people in the state are eligible for help paying for their health insurance but remain uninsured, with 32,000 of them living in the 22 Northern California counties that comprise Covered California’s pricing region 1. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal, with 62,000 of them living in the area.

Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code. In addition, hundreds of locations with Covered California signage mark places where consumers can enroll confidentially and at no cost in a variety of languages.

Covered California developed the map by combining estimates of eligibility for coverage under the Affordable Care Act from a model of California insurance markets that was developed by the University of California, Los Angeles, Center for Health Policy Research and the University of California, Berkeley, Center for Labor Research and Education, known as the California Simulation of Insurance Markets (or CalSIM), and from U.S. Census data from the American Community Survey.

(more)

The model accounts for individuals who are eligible for other sources of coverage (Medi-Cal, Medicare or job-based coverage), as well as those who are undocumented.

The estimates also incorporate Covered California's currently enrolled consumers (as of July 2015).

To find out more about the health plans and options available, consumers can visit [www.CoveredCA.com](http://www.CoveredCA.com). Consumers can get a quick assessment of how much it would cost to buy health insurance by clicking on "Shop and Compare," and they can apply for coverage online. Open enrollment continues through Jan. 31.

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# NEWS RELEASE

Dec. 11, 2015

## **COVERED CALIFORNIA RELEASES ‘HOT SPOT’ MAP FOR SACRAMENTO AS CRITICAL DEADLINE FOR COVERAGE APPROACHES**

*Consumers Must Enroll by Dec. 15 to Be Covered on Jan. 1*

SACRAMENTO, Calif. — As the Dec. 15 deadline to enroll for health insurance starting in January approached, Covered California released a list of the top areas in Sacramento where high numbers of people who qualify for subsidized health insurance are believed to reside.

The “hot spots” released today show the estimated highest concentrations of subsidy-eligible uninsured individuals — people who qualify for help to buy health insurance through Covered California but have not yet taken advantage of it.

“Covered California works across all of California, but the map helps us focus our efforts on areas where we know many who are still uninsured live,” Covered California Executive Director Peter V. Lee said. “Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage, and if they enroll by Dec. 15, their coverage can start on Jan. 1.”

According to Covered California, the “hot spots” shown on the map at [www.CoveredCA.com/news/pdfs/CoveredCA\\_Heat\\_Map\\_Sacramento.pdf](http://www.CoveredCA.com/news/pdfs/CoveredCA_Heat_Map_Sacramento.pdf) generally contain more remaining subsidy-eligible individuals per capita than the rest of the region. For example, an estimated 8 percent of the population in the three hot spots are subsidy-eligible, compared with 3.2 percent on average in Sacramento County overall.

“If you live in one of these areas — in Florin, in Arden-Arcade or in Citrus Heights — and you do not have health insurance, now is the time to get covered,” Lee said. “This is our opportunity to build healthier communities throughout Sacramento, Northern California and the rest of the state.”

Covered California has redoubled its enrollment outreach efforts in the region, including:

- Working to expand the number of storefronts in neighborhood hot spots.

(more)

- Working on the ground with Certified Insurance Agents and community partners to ensure that enrollment events are located in optimal locations and that residents in hot-spot communities are aware of enrollment locations nearby.
- Conducting more than a dozen interviews with Spanish-language and Asian-language media and highlighting hot spots by name to reach Spanish speakers and Asian-language speakers in their neighborhoods.
- Scheduling phone banks in partnership with English- and Spanish-language news outlets and promoting enrollment in specific neighborhoods.
- Launching an intensive enrollment effort in communities where high numbers of subsidy-eligible African-Americans reside, by going door to door to canvass with street teams; visiting barber shops, hair care salons and other small businesses; and deploying the “Van with a Plan” (a branded Covered California van) to areas where high numbers of subsidy-eligible uninsured Californians live.

As of Monday, Dec. 7, more than 83,000 Californians had selected plans through Covered California since open enrollment began on Nov. 1.

“Our research indicates that one-third of those eligible to get financial help to buy insurance don’t know it’s available,” Lee said. “We want to leave no stone unturned and make sure our message reaches into neighborhoods throughout the state, especially those where we believe the highest number of the eligible uninsured live.”

Covered California estimates that 750,000 people in the state are eligible for help paying for their health insurance but remain uninsured, with 45,000 of them living in the four Northern California counties that comprise Covered California’s pricing region 3. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal, with 86,000 of them living in the area.

Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code. In addition, hundreds of locations with Covered California signage mark places where consumers can enroll confidentially and at no cost in a variety of languages.

Covered California developed the map by combining estimates of eligibility for coverage under the Affordable Care Act from a model of California insurance markets that was developed by the University of California, Los Angeles, Center for Health Policy Research and the University of California, Berkeley, Center for Labor Research and Education, known as the California Simulation of Insurance Markets (or CalSIM), and from U.S. Census data from the American Community Survey.

The model accounts for individuals who are eligible for other sources of coverage (Medi-Cal, Medicare or job-based coverage), as well as those who are undocumented.

(more)

The estimates also incorporate Covered California's currently enrolled consumers (as of July 2015).

To find out more about the health plans and options available, consumers can visit [www.CoveredCA.com](http://www.CoveredCA.com). Consumers can get a quick assessment of how much it would cost to buy health insurance by clicking on "Shop and Compare," and they can apply for coverage online. Open enrollment continues through Jan. 31.

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# NEWS RELEASE

Dec. 11, 2015

## **COVERED CALIFORNIA RELEASES ‘HOT SPOT’ MAPS FOR THE BAY AREA AS CRITICAL DEADLINE FOR COVERAGE APPROACHES**

*Consumers Must Enroll by Dec. 15 to Be Covered on Jan. 1*

SACRAMENTO, Calif. — As the Dec. 15 deadline to enroll for health insurance starting in January approached, Covered California released a list of the top areas in the San Francisco Bay Area where high numbers of people who qualify for subsidized health insurance are believed to reside.

The “hot spots” released today show the estimated highest concentrations of subsidy-eligible uninsured individuals — people who qualify for help to buy health insurance through Covered California but have not yet taken advantage of it.

“Covered California works across all of California, but the maps help us focus our efforts on areas where we know many who are still uninsured live,” Covered California Executive Director Peter V. Lee said. “Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage, and if they enroll by Dec. 15, their coverage can start on Jan. 1.”

According to Covered California, the “hot spots” shown on the maps at [www.CoveredCA.com/news/pdfs/CoveredCA\\_Heat\\_Map\\_Bay\\_Area.pdf](http://www.CoveredCA.com/news/pdfs/CoveredCA_Heat_Map_Bay_Area.pdf) generally contain more remaining subsidy-eligible individuals per capita than the rest of the region. For example, while Covered California estimates that 2.5 percent of the state’s overall population is subsidy-eligible, the maps show:

- 3.2 percent of the population in [San Francisco’s five hot spots](#) is subsidy-eligible.
- 4.3 percent of the population in the [Oakland area’s six hot spots](#) is subsidy-eligible.
- 3.8 percent of the population in the [South Bay’s eight hot spots](#) is subsidy-eligible.
- 5.1 percent of the population in [Contra Costa County’s three hot spots](#) is subsidy-eligible.
- 7.4 percent of the population in [Marin County’s hot spot](#) is subsidy-eligible.

(more)

“If you live in one of these areas — in the Panhandle or Mission district, near UC Berkeley or in Fruitvale, in East San Jose or North Shoreview, in Richmond, in Concord or in the Canal District — and you do not have health insurance, now is the time to get covered,” Lee said. “This is our opportunity to build healthier communities throughout the Bay Area, Northern California and the rest of the state.”

Covered California has redoubled its enrollment outreach efforts in the region, including:

- Working to expand the number of storefronts in neighborhood hot spots.
- Working on the ground with Certified Insurance Agents and community partners to ensure that enrollment events are located in optimal locations and that residents in hot-spot communities are aware of enrollment locations nearby.
- Conducting more than a dozen interviews with Spanish-language and Asian-language media and highlighting hot spots by name to reach Spanish speakers and Asian-language speakers in their neighborhoods.
- Scheduling phone banks in partnership with English- and Spanish-language news outlets and promoting enrollment in specific neighborhoods.
- Launching an intensive enrollment effort in communities where high numbers of subsidy-eligible African-Americans reside, by going door to door to canvass with street teams; visiting barber shops, hair care salons and other small businesses; and deploying the “Van with a Plan” (a branded Covered California van) to areas where high numbers of subsidy-eligible uninsured Californians live.

As of Monday, Dec. 7, more than 83,000 Californians had selected plans through Covered California since open enrollment began on Nov. 1.

“Our research indicates that one-third of those eligible to get financial help to buy insurance don’t know it’s available,” Lee said. “We want to leave no stone unturned and make sure our message reaches into neighborhoods throughout the state, especially those where we believe the highest number of the eligible uninsured live.”

Covered California estimates that 750,000 people in the state are eligible for help paying for their health insurance but remain uninsured. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal.

Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code. In addition, hundreds of locations with Covered California signage mark places where consumers can enroll confidentially and at no cost in a variety of languages.

(more)

Covered California developed the maps by combining estimates of eligibility for coverage under the Affordable Care Act from a model of California insurance markets that was developed by the University of California, Los Angeles, Center for Health Policy Research and the University of California, Berkeley, Center for Labor Research and Education, known as the California Simulation of Insurance Markets (or CalSIM), and from U.S. Census data from the American Community Survey.

The model accounts for individuals who are eligible for other sources of coverage (Medi-Cal, Medicare or job-based coverage), as well as those who are undocumented.

The estimates also incorporate Covered California's currently enrolled consumers (as of July 2015).

To find out more about the health plans and options available, consumers can visit [www.CoveredCA.com](http://www.CoveredCA.com). Consumers can get a quick assessment of how much it would cost to buy health insurance by clicking on "Shop and Compare," and they can apply for coverage online. Open enrollment continues through Jan. 31.

### **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.

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# NEWS RELEASE

Dec. 10, 2015

## **COVERED CALIFORNIA RELEASES 'HOT SPOT' MAP FOR SAN DIEGO AS CRITICAL DEADLINE FOR COVERAGE APPROACHES**

*Consumers Must Enroll by Dec. 15 to Be Covered on Jan. 1*

SACRAMENTO, Calif. — As the Dec. 15 deadline to enroll for health insurance starting in January approached, Covered California released a list of the top areas in San Diego where high numbers of people who qualify for subsidized health insurance are believed to reside.

The “hot spots” released today show the estimated highest concentrations of subsidy-eligible uninsured individuals — people who qualify for help to buy health insurance through Covered California but have not yet taken advantage of it.

“Covered California works across all of California, but the map helps us focus our efforts on areas where we know many who are still uninsured live,” Covered California Executive Director Peter V. Lee said. “Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage, and if they enroll by Dec. 15, their coverage can start on Jan. 1.”

According to Covered California, the “hot spots” shown on the map at [www.CoveredCA.com/news/PDFs/CoveredCA\\_Heat\\_Map\\_San\\_Diego.pdf](http://www.CoveredCA.com/news/PDFs/CoveredCA_Heat_Map_San_Diego.pdf) generally contain more remaining subsidy-eligible individuals per capita than the rest of the region. For example, an estimated 4.3 percent of the population in six hot spots is subsidy-eligible, compared with 2.1 percent on average in San Diego County overall.

“If you live in one of these areas — in South Bay, in Uptown, in East County or in Escondido — and you do not have health insurance, now is the time to get covered,” Lee said. “This is our opportunity to build healthier communities throughout San Diego, Southern California and the rest of the state.”

Covered California has redoubled its enrollment outreach efforts in the region, including:

Working to expand the number of storefronts in neighborhood hot spots.

(more)

Working on the ground with Certified Insurance Agents and community partners to ensure that enrollment events are located in optimal locations and that residents in hot-spot communities are aware of enrollment locations nearby.

Conducting more than a dozen interviews with Spanish-language and Asian-language media and highlighting hot spots by name to reach Spanish speakers and Asian-language speakers in their neighborhoods.

Scheduling phone banks in partnership with English- and Spanish-language news outlets and promoting enrollment in specific neighborhoods.

Launching an intensive enrollment effort in communities where high numbers of subsidy-eligible African-Americans reside, by going door to door to canvass with street teams; visiting barber shops, hair care salons and other small businesses; and deploying the “Van with a Plan” (a branded Covered California van) to areas where high numbers of subsidy-eligible uninsured Californians live.

As of Monday, Dec. 7, more than 83,000 Californians had selected plans through Covered California since open enrollment began on Nov. 1.

“Our research indicates that one-third of those eligible to get financial help to buy insurance don’t know it’s available,” Lee said. “We want to leave no stone unturned and make sure our message reaches into neighborhoods throughout the state, especially those where we believe the highest number of the eligible uninsured live.”

Covered California estimates that 750,000 people in the state are eligible for help paying for their health insurance but remain uninsured, with 60,000 of them living in San Diego. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal, with 115,000 of them living in the area.

Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code. In addition, hundreds of locations with Covered California signage mark places where consumers can enroll confidentially and at no cost in a variety of languages.

Covered California developed the map by combining estimates of eligibility for coverage under the Affordable Care Act from a model of California insurance markets that was developed by the University of California, Los Angeles, Center for Health Policy Research and the University of California, Berkeley, Center for Labor Research and Education, known as the California Simulation of Insurance Markets (or CalSIM), and from U.S. Census data from the American Community Survey.

The model accounts for individuals who are eligible for other sources of coverage (Medi-Cal, Medicare or job-based coverage), as well as those who are undocumented.

(more)

The estimates also incorporate Covered California's currently enrolled consumers (as of July 2015).

To find out more about the health plans and options available, consumers can visit [www.CoveredCA.com](http://www.CoveredCA.com). Consumers can get a quick assessment of how much it would cost to buy health insurance by clicking on "Shop and Compare," and they can apply for coverage online. Open enrollment continues through Jan. 31.

### **About Covered California**

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# NEWS RELEASE

Dec. 10, 2015

## **COVERED CALIFORNIA RELEASES ‘HOT SPOT’ MAP FOR ORANGE COUNTY AS CRITICAL DEADLINE FOR COVERAGE APPROACHES**

*Consumers Must Enroll by Dec. 15 to Be Covered on Jan. 1*

SACRAMENTO, Calif. — As the Dec. 15 deadline to enroll for health insurance starting in January approached, Covered California released a list of the top areas in Orange County where high numbers of people who qualify for subsidized health insurance are believed to reside.

The “hot spots” released today show the estimated highest concentrations of subsidy-eligible uninsured individuals — people who qualify for help to buy health insurance through Covered California but have not yet taken advantage of it.

“Covered California works across all of California, but the map helps us focus our efforts on areas where we know many who are still uninsured live,” Covered California Executive Director Peter V. Lee said. “Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage, and if they enroll by Dec. 15, their coverage can start on Jan. 1.”

According to Covered California, the “hot spots” shown on the map at [www.CoveredCA.com/news/PDFs/CoveredCA\\_Heat\\_Map\\_Orange.pdf](http://www.CoveredCA.com/news/PDFs/CoveredCA_Heat_Map_Orange.pdf) generally contain more remaining subsidy-eligible individuals per capita than the rest of the region. For example, an estimated 5.6 percent of the population in the nine hot spots is subsidy-eligible, compared with 2.2 percent on average in Orange County overall.

“If you live in one of these areas — in Santa Ana, in Tustin, in Westminster — and you do not have health insurance, now is the time to get covered,” Lee said. “This is our opportunity to build healthier communities throughout Orange County, Southern California and the rest of the state.”

Covered California has redoubled its enrollment outreach efforts in the region, including:

- Working to expand the number of storefronts in neighborhood hot spots.

(more)

- Working on the ground with Certified Insurance Agents and community partners to ensure that enrollment events are located in optimal locations and that residents in hot-spot communities are aware of enrollment locations nearby.
- Conducting more than a dozen interviews with Spanish-language and Asian-language media and highlighting hot spots by name to reach Spanish speakers and Asian-language speakers in their neighborhoods.
- Scheduling phone banks in partnership with English- and Spanish-language news outlets and promoting enrollment in specific neighborhoods.
- Launching an intensive enrollment effort in communities where high numbers of subsidy-eligible African-Americans reside, by going door to door to canvass with street teams; visiting barber shops, hair care salons and other small businesses; and deploying the “Van with a Plan” (a branded Covered California van) to areas where high numbers of subsidy-eligible uninsured Californians live.

As of Monday, Dec. 7, more than 83,000 Californians had selected plans through Covered California since open enrollment began on Nov. 1.

“Our research indicates that one-third of those eligible to get financial help to buy insurance don’t know it’s available,” Lee said. “We want to leave no stone unturned and make sure our message reaches into neighborhoods throughout the state, especially those where we believe the highest number of the eligible uninsured live.”

Covered California estimates that 750,000 people in the state are eligible for help paying for their health insurance but remain uninsured, with 54,000 of them living in Orange County. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal, with 102,000 of them living in the area.

Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code. In addition, hundreds of locations with Covered California signage mark places where consumers can enroll confidentially and at no cost in a variety of languages.

Covered California developed the map by combining estimates of eligibility for coverage under the Affordable Care Act from a model of California insurance markets that was developed by the University of California, Los Angeles, Center for Health Policy Research and the University of California, Berkeley, Center for Labor Research and Education, known as the California Simulation of Insurance Markets (or CalSIM), and from U.S. Census data from the American Community Survey.

The model accounts for individuals who are eligible for other sources of coverage (Medi-Cal, Medicare or job-based coverage), as well as those who are undocumented.

(more)

The estimates also incorporate Covered California's currently enrolled consumers (as of July 2015).

To find out more about the health plans and options available, consumers can visit [www.CoveredCA.com](http://www.CoveredCA.com). Consumers can get a quick assessment of how much it would cost to buy health insurance by clicking on "Shop and Compare," and they can apply for coverage online. Open enrollment continues through Jan. 31.

### **About Covered California**

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# NEWS RELEASE

Dec. 10, 2015

## **COVERED CALIFORNIA RELEASES 'HOT SPOT' MAP FOR RIVERSIDE AND SAN BERNARDINO AS CRITICAL DEADLINE FOR COVERAGE APPROACHES**

*Consumers Must Enroll by Dec. 15 to Be Covered on Jan. 1*

SACRAMENTO, Calif. — As the Dec. 15 deadline to enroll for health insurance starting in January approached, Covered California released a list of the top areas in Riverside and San Bernardino where high numbers of people who qualify for subsidized health insurance are believed to reside.

The “hot spots” released today show the estimated highest concentrations of subsidy-eligible uninsured individuals — people who qualify for help to buy health insurance through Covered California but have not yet taken advantage of it.

“Covered California works across all of California, but the map helps us focus our efforts on areas where we know many who are still uninsured live,” Covered California Executive Director Peter V. Lee said. “Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage, and if they enroll by Dec. 15, their coverage can start on Jan. 1.”

According to Covered California, the “hot spots” shown on the map at [www.CoveredCA.com/news/PDFs/CoveredCA\\_Heat\\_Map\\_Inland\\_Empire.pdf](http://www.CoveredCA.com/news/PDFs/CoveredCA_Heat_Map_Inland_Empire.pdf) generally contain more remaining subsidy-eligible individuals per capita than the rest of the Riverside and San Bernardino areas. For example, an estimated 7.3 percent of the population in the 11 hot spots are subsidy-eligible, compared with 4.3 percent on average in the Inland Empire overall.

“If you live in one of these areas — in Ontario, in La Sierra, in Colton or in Perris — and you do not have health insurance, now is the time to get covered,” Lee said. “This is our opportunity to build healthier communities throughout the Inland Empire, Southern California and the rest of the state.”

Covered California has redoubled its enrollment outreach efforts in the region, including:

- Working to expand the number of storefronts in neighborhood hot spots.

(more)

- Working on the ground with Certified Insurance Agents and community partners to ensure that enrollment events are located in optimal locations and that residents in hot-spot communities are aware of enrollment locations nearby.
- Conducting more than a dozen interviews with Spanish-language and Asian-language media and highlighting hot spots by name to reach Spanish speakers and Asian-language speakers in their neighborhoods.
- Scheduling phone banks in partnership with English- and Spanish-language news outlets and promoting enrollment in specific neighborhoods.
- Launching an intensive enrollment effort in communities where high numbers of subsidy-eligible African-Americans reside, by going door to door to canvass with street teams; visiting barber shops, hair care salons and other small businesses; and deploying the “Van with a Plan” (a branded Covered California van) to areas where high numbers of subsidy-eligible uninsured Californians live.

As of Monday, Dec. 7, more than 83,000 Californians had selected plans through Covered California since open enrollment began on Nov. 1.

“Our research indicates that one-third of those eligible to get financial help to buy insurance don’t know it’s available,” Lee said. “We want to leave no stone unturned and make sure our message reaches into neighborhoods throughout the state, especially those where we believe the highest number of the eligible uninsured live.”

Covered California estimates that 750,000 people in the state are eligible for help paying for their health insurance but remain uninsured, with 92,000 of them living in the Inland Empire. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal, with 176,000 of them living in the Inland Empire.

Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code. In addition, hundreds of locations with Covered California signage mark places where consumers can enroll confidentially and at no cost in a variety of languages.

Covered California developed the map by combining estimates of eligibility for coverage under the Affordable Care Act from a model of California insurance markets that was developed by the University of California, Los Angeles, Center for Health Policy Research and the University of California, Berkeley, Center for Labor Research and Education, known as the California Simulation of Insurance Markets (or CalSIM), and from U.S. Census data from the American Community Survey.

The model accounts for individuals who are eligible for other sources of coverage (Medi-Cal, Medicare or job-based coverage), as well as those who are undocumented.

(more)



The estimates also incorporate Covered California's currently enrolled consumers (as of July 2015).

To find out more about the health plans and options available, consumers can visit [www.CoveredCA.com](http://www.CoveredCA.com). Consumers can get a quick assessment of how much it would cost to buy health insurance by clicking on "Shop and Compare," and they can apply for coverage online. Open enrollment continues through Jan. 31.

### **About Covered California**

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# NEWS RELEASE

Dec. 10, 2015

## **COVERED CALIFORNIA RELEASES ‘HOT SPOT’ MAP FOR HUMBOLDT COUNTY AS CRITICAL DEADLINE FOR COVERAGE APPROACHES**

*Consumers Must Enroll by Dec. 15 to Be Covered on Jan. 1*

SACRAMENTO, Calif. — As the Dec. 15 deadline to enroll for health insurance starting in January approached, Covered California released a list of the top areas in Eureka where high numbers of people who qualify for subsidized health insurance are believed to reside.

The “hot spots” released today show the estimated highest concentrations of subsidy-eligible uninsured individuals — people who qualify for help to buy health insurance through Covered California but have not yet taken advantage of it.

“Covered California works across all of California, but the map helps us focus our efforts on areas where we know many who are still uninsured live,” Covered California Executive Director Peter V. Lee said. “Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage, and if they enroll by Dec. 15, their coverage can start on Jan. 1.”

According to Covered California, the “hot spots” shown on the map at [www.CoveredCA.com/news/PDFs/CoveredCA\\_Heat\\_Map\\_Eureka.pdf](http://www.CoveredCA.com/news/PDFs/CoveredCA_Heat_Map_Eureka.pdf) generally contain more remaining subsidy-eligible individuals per capita than the rest of the region. For example, an estimated 4.4 percent of the population in Humboldt County is subsidy-eligible, compared with 2.5 percent of the overall population in California.

“If you live in one of these areas — in Eureka, in Arcata, in McKinleyville — and you do not have health insurance, now is the time to get covered,” Lee said. “This is our opportunity to build healthier communities throughout Humboldt County and the rest of the state.”

Covered California has redoubled its enrollment outreach efforts in the region, including:

- Working to expand the number of storefronts in neighborhood hot spots.

(more)

- Working on the ground with Certified Insurance Agents and community partners to ensure that enrollment events are located in optimal locations and that residents in hot-spot communities are aware of enrollment locations nearby.
- Conducting more than a dozen interviews with Spanish-language and Asian-language media and highlighting hot spots by name to reach Spanish speakers and Asian-language speakers in their neighborhoods.
- Scheduling phone banks in partnership with English- and Spanish-language news outlets and promoting enrollment in specific neighborhoods.
- Launching an intensive enrollment effort in communities where high numbers of subsidy-eligible African-Americans reside, by going door to door to canvass with street teams; visiting barber shops, hair care salons and other small businesses; and deploying the “Van with a Plan” (a branded Covered California van) to areas where high numbers of subsidy-eligible uninsured Californians live.

As of Monday, Dec. 7, more than 83,000 Californians had selected plans through Covered California since open enrollment began on Nov. 1.

“Our research indicates that one-third of those eligible to get financial help to buy insurance don’t know it’s available,” Lee said. “We want to leave no stone unturned and make sure our message reaches into neighborhoods throughout the state, especially those where we believe the highest number of the eligible uninsured live.”

Covered California estimates that 750,000 people in the state are eligible for help paying for their health insurance but remain uninsured, with 32,000 of them living in the 22 Northern California counties that comprise Covered California’s pricing region 1. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal, with 62,000 of them living in the region.

Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help by ZIP code. In addition, hundreds of locations with Covered California signage mark places where consumers can enroll confidentially and at no cost in a variety of languages.

Covered California developed the map by combining estimates of eligibility for coverage under the Affordable Care Act from a model of California insurance markets that was developed by the University of California, Los Angeles, Center for Health Policy Research and the University of California, Berkeley, Center for Labor Research and Education, known as the California Simulation of Insurance Markets (or CalSIM), and from U.S. Census data from the American Community Survey.

The model accounts for individuals who are eligible for other sources of coverage (Medi-Cal, Medicare or job-based coverage), as well as those who are undocumented.

(more)

The estimates also incorporate Covered California's currently enrolled consumers (as of July 2015).

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# NEWS RELEASE

Dec. 8, 2015

## **COVERED CALIFORNIA JOINS WITH LOS ANGELES MAYOR ERIC GARCETTI TO PROMOTE OPEN ENROLLMENT BEFORE DEC. 15 DEADLINE**

*Regional Map Identifies “Hot Spots” to Guide Enrollment Efforts*

SACRAMENTO, Calif. — As the Dec. 15 deadline to enroll for health insurance starting in January approached, Covered California released a list of the top areas in Los Angeles where high numbers of people who qualify for subsidized health insurance are believed to reside.

The “hot spots” released today show the estimated highest concentrations of subsidy-eligible uninsured individuals — people who qualify for help to buy health insurance through Covered California but have not yet taken advantage of it.

“Covered California works across all of Los Angeles, but the map helps us focus our efforts on areas where we know many who are still uninsured live,” Covered California Executive Director Peter V. Lee said. “Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage, and if they enroll by Dec. 15, their coverage can start on Jan. 1.”

Lee appeared with Los Angeles Mayor Eric Garcetti at Eisner Pediatric and Family Medical Center in Los Angeles.

“If you live in one of these areas — in Boyle Heights, in Huntington Park, in East Hollywood — and you do not have health insurance, now is the time to get covered,” Garcetti said. “This is our opportunity to build healthier communities throughout Los Angeles, Southern California and the rest of the state.”

In addition to his appearance today, Garcetti recently recorded public service announcements in English (<https://youtu.be/jXnifqGwZiw>) and Spanish (<https://youtu.be/amRxNmjPfhU>) to encourage Angelenos to explore their options and find the best health care plan that fits their needs.

(more)

According to Covered California, the “hot spots” shown on the map at [www.CoveredCA.com/news/PDFs/CoveredCA\\_Heat\\_Map\\_LA.pdf](http://www.CoveredCA.com/news/PDFs/CoveredCA_Heat_Map_LA.pdf) contain a high number of subsidy-eligible residents in the Los Angeles region.

The hot spots generally contain more remaining subsidy-eligible individuals per capita than the rest of the Los Angeles region. For example, an estimated 5.1 percent of the population in the East Los Angeles hot spots are subsidy-eligible, compared with 1.8 percent on average in the greater Los Angeles region.

Covered California has redoubled its enrollment outreach efforts, including:

- Working to expand the number of storefronts in neighborhood hot spots.
- Working on the ground with Certified Insurance Agents and community partners to ensure that enrollment events are located in optimal locations and that residents in hot spot communities are aware of enrollment locations nearby.
- Conducting more than a dozen interviews with Spanish-language and Asian-language media and highlighting hot spots by name to reach Spanish speakers and Asian-language speakers in their neighborhoods.
- Scheduling phone banks in partnership with English- and Spanish-language news outlets and promoting enrollment in specific neighborhoods.
- Launching an intensive enrollment effort in communities where high numbers of subsidy-eligible African-Americans reside, by going door to door to canvas with street teams; visiting barber shops, hair care salons and other small businesses; and deploying the “Van with a Plan” (a branded Covered California van) to areas where high numbers of subsidy-eligible, uninsured Californians live.

Enrollment locations can be found by visiting [www.CoveredCA.com/get-help/local](http://www.CoveredCA.com/get-help/local) and searching for enrollment help statewide by ZIP code. In addition, hundreds of locations with Covered California signage mark places where consumers can enroll confidentially and at no cost.

“Our research indicates that one-third of those eligible to get financial help to buy insurance don’t know it’s available,” Lee said. “We want to leave no stone unturned and make sure our message reaches into neighborhoods throughout the state, especially those where we believe the highest number of the eligible uninsured live.”

The release of the map came as Covered California continued open enrollment, which is when all of those eligible for coverage under the Affordable Care Act can enroll.

As of Monday, Dec. 7, more than 83,000 Californians had selected plans through Covered California since open enrollment began on Nov. 1.

(more)

“Thousands of people are signing up every day for Covered California, and we’re off to a good start to meet our forecasted enrollment of 295,000 to 450,000 new enrollees during this third open-enrollment period,” Lee said.

Covered California estimates that 750,000 people in the state are eligible for help paying for their health insurance but remain uninsured, with 204,000 of them living in Los Angeles County. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal, with 389,000 of them living in Los Angeles County.

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The model accounts for individuals who are eligible for other sources of coverage (Medi-Cal, Medicare or job-based coverage), as well as those who are undocumented.

The estimates also incorporate Covered California’s currently enrolled consumers (as of July 2015).

To find out more about the health plans and options available, consumers can visit [www.CoveredCA.com](http://www.CoveredCA.com). Consumers can get a quick assessment of how much it would cost to buy health insurance by clicking on “Shop and Compare,” and they can apply for coverage online. Those who need assistance can click on the “Find Local Help to Enroll” button to find a certified enroller or insurance agent who can provide free, confidential assistance in a variety of languages.

Open enrollment continues through Jan. 31.

### **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.

(more)

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](http://www.CoveredCA.com).

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# NEWS RELEASE

Nov. 24, 2015

## **CONSUMER REPORTS PLACES COVERED CALIFORNIA ON ITS “NICE” LIST FOR MAKING IT EASY FOR CONSUMERS TO UNDERSTAND HEALTH INSURANCE OPTIONS**

*Covered California Among 11 Entities Named Nationwide*

SACRAMENTO, Calif. — Consumer Reports today lauded Covered California for making it easier for consumers to shop for health insurance, listing the exchange with 10 other entities nationwide recognized for consumer-friendly policies and practices.

Consumer Reports said Covered California earned its way on the “nice” column of its annual [“Naughty & Nice” list](#) because its standardized benefits had “eliminated much of the confusion” for consumers buying health insurance.

Unlike most other states which offer an unlimited number of designs, Covered California requires insurance companies to compete for consumers based on the same basic benefits and co-pays, which makes it easier for consumers to compare their options from plan to plan.

“For too long, benefit designs have been nightmares of confusion and all too often barriers to consumers getting needed care,” said Covered California Executive Director Peter V. Lee. “These standard designs promote true apples-to-apples comparisons when consumers are shopping, and promote access to care by including many benefits that are not subject to a deductible.”

Others listed alongside Covered California on the Consumer Reports “Nice” list were Home Depot, Chipotle, Panera Bread, CVS, Dish Network, Dr. Martens For Life, JetBlue, Nomorobo, Procter & Gamble, PricewaterhouseCoopers, Southwest Airlines, and Target. Among those on the “Naughty” list were airlines, banks and telecommunications companies.

Covered California’s third historic open enrollment period is underway and continues through Jan. 31.

(more)

Consumers who want to explore their options can use the “Shop and Compare” tool at CoveredCA.com. Users who enter just a few pieces of information about themselves – income, ZIP code, age and family size – can learn whether they qualify for help to buy health insurance. Customers who need more assistance can click on “Find Local Help to Enroll” to find locations in their communities where they can get free, confidential assistance.

More than 34,000 new people selected health insurance plans through Covered California between Nov. 1 and Nov. 17. In addition, 33,000 people – including new and renewing members – have signed up for the new optional dental insurance offered for adults.

### **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.

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# The Dallas Morning News

## Schnurman: Texas loses on Obamacare while California embraces it

By: Mitchell Schnurman  
Dec. 25, 2015

Texas politicians love to brag about besting California on jobs and corporate relocations. But guess who's the big loser on Obamacare.

In Texas, insurers lost a combined \$377 million in the first year of HealthCare.gov, according to claims in a federal risk-sharing program. In California, insurers contributed over \$180 million in profit to the same program.

It's still early days for the Affordable Care Act, and about two-thirds of insurers lost money in 2014.

California is an outlier, generating half the total profits nationwide. But Texas is an outlier, too, just in the other direction. And the divergence is no accident, because the nation's two biggest states took much different approaches.

While Texas leaders fought Obamacare and railed against it at every turn, the Golden State embraced the law and created its own exchange, Covered California.

It opted to become an "active purchaser," negotiating with carriers, standardizing benefits and picking plans for the exchange. California also required policyholders to move into the new marketplace even though many resisted.

When HealthCare.gov had its disastrous kickoff two years ago, President Barack Obama said people could keep their existing plans rather than buy new ones on the exchange. That affected insurers, because it didn't force everyone — healthy and sick — into the same pool.

Consumers facing expensive claims could sign up for plans with better benefits and bigger networks. If they were healthy, they could stay with their skinny plan and pay less. In 35 states, including Texas, many re-upped before the end of 2013 to take advantage.

California rejected Obama's proposal and took some heat. But that "short-term political sacrifice" produced long-term market stability, researchers for Covered California wrote in the Health Affairs blog.

That decision helped create a more diverse mix of customers. And "California had the healthiest risk pool of all 50 states," an actuary for Blue Shield of California told the Los Angeles Times this month.

### **Loss claims top profits**

The California Blue contributed \$107 million into the temporary risk corridors program. That program collects insurer profits above a certain threshold and pays out to carriers with excessive losses.

For 2014, loss claims topped profits by \$2.5 billion, and Texas insurers accounted for 15 percent of them. Consumers may not shed any tears for money-losing insurance companies, but it's one sign the market is shaky.

And you know what comes next. For 2016, Blue Cross Blue Shield of Texas, the state's largest insurer, dropped its individual PPO and offered only a more limited HMO — with premiums rising an average of 19 percent.

Scott & White increased exchange premiums by over 32 percent. Humana's up 21 percent, and Cigna and UnitedHealth, over 16 percent.

Higher rates affect about 1 million Texans who buy coverage on HealthCare.gov and also increase federal subsidies that offset the costs.

In California, exchange premiums are increasing by a weighted average of 4 percent next year. California has also been a leader in reducing the uninsured, extending coverage to many more people than Texas.

Several key trends improved in California in 2015, researchers wrote, indicating the exchange "has enrolled enough people, and enough healthy people, to stabilize premiums."

### **Understanding Texas**

In Texas, many factors led to insurance losses. Start with pent-up demand after millions of residents went without insurance for years — or with plans so skimpy they didn't dare go to the doctor.

Once they got affordable coverage in 2014, many flocked to providers for everything from routine physicals to costly knee replacements, dialysis and transplants.

Texas politicians didn't help the situation. They put up hurdles for federal navigators who helped customers select plans, and they've never encouraged enrollment. Not surprisingly, fewer Texans get coverage on the exchange: just 31 percent of those eligible compared with 47 percent in California, according to the Kaiser Family Foundation.

If Texas matched the participation rate in California, over half a million more residents would buy insurance. That wouldn't fix everything, but it would be a start.

"The problem has been getting healthy people in," said Sabrina Corlette, project director for the Center on Health Insurance Reforms at Georgetown University.

In Texas, insurers are raising premiums, restricting prescriptions, narrowing provider networks and eliminating most out-of-network benefits. Will that lead to a sustainable market?

The parent company of Blue Cross Blue Shield of Texas is projected to be profitable again in 2016, according to Standard & Poor's Ratings Services. Yet the ratings agency still has a negative outlook on the company.

Two risk-protection programs, including risk corridors, expire after 2016. That implies the industry will have reached a steady state with Obamacare, but the results tell another story.

"We believe it is increasingly likely that it will take more than three years for the market to stabilize," S&P wrote.

Unlike California, Texas won't be ahead of the curve.



## Covered California enrolls thousands to Obamacare plans

By: Barrett Newkirk  
Dec. 22, 2015

More than 197,000 people have signed up for health insurance next year through Covered California, the state insurance exchange announced.

The number represents enrollment as for Dec. 15 and includes a two-day surge of more than 55,000 on Dec. 14 and 15 — just before the initial sign-up deadline for insurance coverage starting Jan. 1.

Open enrollment continues through the end of January, but anyone signing up between now and then won't have coverage until February or March.

The rush to meet the early deadline was so great, Covered California extended it two days. The federal government did the same for its exchange at Healthcare.gov.

More than 4.1 million people have signed up for insurance through the federal exchange since enrollment began Nov. 1, according to the federal Center for Medicare and Medicaid Services. That figure does not include people who signed up for state-run exchanges.

The mid-December deadline was evident at an enrollment storefront in Indio, where agent Cesar Perez said he enrolled 42 people over 48 hours.

"For two days, that's a lot," Perez said. He was anticipating more busy days on Jan. 14 and 15, before the next coverage deadline, and the last three days of the months, just before the enrollment window for 2016 closes for good.

The shop next to the Best Western hotel on Indio Boulevard is one of 500 spots around the state where people can go ask questions and sign up for the private insurance plans offered through Covered California.

The third annual enrollment push has involved less fanfare than past years, but Covered California is still planning to spend \$29 million on marketing efforts.

Some of the money is going toward reaching uninsured people who qualify for income-based discounts.

This month Covered California released a series of regional maps showing what it called "hot spots," areas where a large number of people who qualify for subsidized health insurance likely live. In the Coachella Valley, the major hot spots were the eastern valley, south La Quinta and Cathedral City.

"Our research indicates that one-third of those eligible to get financial help to buy insurance don't know it's available," Covered California Executive Director Peter Lee said in a statement.

An estimated 750,000 uninsured people in California qualify for the discounts. Around 92,000 of them live in the Inland Empire, according to Covered California.



## California Exchange Targets ‘Hot Spots’ With High Rates Of Uninsured

By: Barbara Feder Ostrov  
Dec. 11, 2015



As the deadline for January health care coverage nears, California’s insurance exchange is intensifying efforts to sign people up in pockets of the state with exceptionally high numbers of uninsured residents.

Covered California is targeting such “hot spots” as San Francisco’s Mission district, Oakland’s Fruitvale neighborhood and the East San Jose and Berryessa communities of Silicon Valley, officials said.

Exchange officials this week released maps and information about communities with high numbers of uninsured people who likely qualify for subsidized health insurance based on their income.



The enrollment period ends Jan. 31, but people who sign up by Dec. 15 will get benefits starting Jan. 1.

Other “hot spots” around the state can be found in Santa Ana and Ontario, San Diego’s East County district, and Eureka and Arcata in Northern California. Many of their residents are Latino, a population that has been challenging for Covered California to reach.

“These are areas where people have really adapted to a culture of coping for years – they have made the best of a bad situation of living without insurance,” said Peter Lee, Covered California’s executive director.

Focusing on the “hot spots,” he said, “helps us get the word out at a community level where it can make the most difference.”

Covered California estimates that 750,000 Californians are eligible for the health insurance subsidies but remain uninsured, including 16,000 in San Francisco County, 20,000 in Contra Costa County, 33,000 in Alameda County and 34,000 in Santa Clara County.

An additional 1.4 million residents are believed to qualify for Medi-Cal, including 31,000 in San Francisco County, 39,000 in Contra Costa County, 62,000 in Alameda County and 64,000 in Santa Clara County.

As of last Monday more than 83,000 Californians had selected plans through the health insurance exchange since Nov. 1, when open enrollment began.

About 2.5 percent of Californians are eligible for insurance subsidies and are believed to be uninsured, but the “hot spot” maps reveal higher percentages of eligible residents in certain places — 3.2 percent in San Francisco’s five hot spots; 4.3 percent of the population in Oakland’s six hot spots; 3.8 percent in the South Bay’s eight hot spots, and 5.1 percent in Contra Costa County’s three hot spots.

Covered California is working with community organizations around the state to schedule more enrollment events in the hot spots, as well as increasing door-to-door canvassing, and adding storefront offices where people can enroll. It also has a robust broadcast and print advertising campaign in those areas.

One of those organizations is the San Jose-based Community Health Partnership, which puts on health fairs and other outreach events. It also provides space for health navigators to enroll people directly for Covered California insurance or Medi-Cal.

Recently the group worked with San Jose City Councilwoman Magdalena Carrasco to put on a health fair at James Lick High School in East San Jose, a hot spot district, offering free Christmas trees to draw people. At the fair, attendees could get medical

screenings as well as sign up for coverage, said Grace-Sonia Melanio, the partnership's director of communications and health policy.

The nonprofit has seen an uptick in the number of people asking for help because residents are becoming more aware of the financial penalty for not signing up for insurance, she said.

"When folks do come to us, they're pretty hopeful the insurance will be affordable," Melanio said.

But, she added, "we find that we just can't sit back in the office and wait for them to make an appointment. We have to go out to the community."

## No health insurance? Californians face tax bite of up to \$10,000 per family

By: Claudia Buck  
Jan. 14, 2016



Sign up for health care coverage or pay the price. That's the message from Covered California officials, who urged consumers Wednesday to sign up for Obamacare coverage by the Jan. 31 deadline or face stiff tax penalties.

This year, the penalties are hitting harder, ranging from a minimum of \$700 for an individual to as much as \$10,000 for a family of four, depending on income. The average penalty in 2016 will be \$969. That's a 47 percent increase from last year, according to a recent analysis by the nonprofit Kaiser Family Foundation.

But taxes are only part of the equation for those who don't get health coverage, said Peter Lee, executive director of Covered California, the state's health care exchange for Obamacare policies.

"The bigger penalty," said Lee, "is showing up at an emergency room and walking out with a bill in tens of thousands of dollars." Or, he added, not getting regular checkups because of no insurance and then developing a late-stage cancer that went undetected. "Californians have a choice in signing up or rolling the dice and taking a big gamble."

With less than three weeks left in this year's open enrollment season, Covered California is reminding consumers who don't have employer-provided insurance to purchase coverage.

Under the 2010 Affordable Care Act, tax penalties are considered a "shared responsibility" payment by those who can afford to buy health care coverage but choose not to do so. The penalties are either 2.5 percent of household income (up to a cap) or \$695 a person and \$347.50 per child, whichever is higher.

The Taxpayer Advocate Service, part of the IRS, has an online calculator at [taxpayeradvocate.irs.gov](http://taxpayeradvocate.irs.gov) where individuals can check what they might owe. Penalties would be due in April 2017 when individuals pay this year's taxes.

Not everyone faces a tax penalty. Those for whom health care premiums are deemed unaffordable – 8 percent or more of household income – are exempt, as are those with certain economic hardships or religious objections.

As of last week, Lee said more than 230,000 Californians have signed up for Covered California policies during the three-month enrollment season, which started last November.

# THE ORANGE COUNTY REGISTER

## 238,000 join Covered California ahead of Jan. 31 deadline

By: Angela Ratzlaff  
Jan. 7, 2016



More than 238,000 Californians have joined Covered California's health insurance exchange as of Jan. 2.

The state's health insurance exchange on Thursday also announced more than 124,000 new and renewing consumers had enrolled in the new optional family dental coverage.

“The deadline is coming up, so anyone who does not have health insurance should visit CoveredCA.com and find out where they can get help enrolling before the deadline,” said Peter V. Lee, executive director of Covered California.

During the final weeks of the enrollment period, which ends Jan. 31, more than 500 enrollment events are scheduled throughout the state at libraries, health centers, malls and churches.

In Orange County, enrollment events will take place at the Santa Ana and Tustin city libraries. Health clinics, medical centers and hospitals, including Los Alamitos Medical Center and Placentia-Linda Hospital, also will host events.

There are an estimated 750,000 uninsured Californians who are eligible for coverage, according to Covered California. An additional 1.4 million are believed to qualify for low-cost or no-cost Medi-Cal.

To find out where to enroll, visit [CoveredCA.com](http://CoveredCA.com).

# THE ORANGE COUNTY REGISTER

## Oscar aims to simplify health insurance

By: Courtney Perkes  
Jan. 5, 2016



An upstart New York-based health plan is seeking a share of Orange County's Obamacare market by using sophisticated technology designed to simplify how consumers decipher costs and seek care.

Last fall, health insurance company Oscar began selling individual policies here and in parts of Los Angeles County through Covered California, the state's exchange. The open enrollment deadline for 2016 is Jan. 31.

Oscar's plans are exclusive provider organizations, which don't require referrals from a primary care doctor but cover only in-network care. In Orange County, Oscar's contracted providers include St. Joseph Hoag Health.

Industry observers say Oscar's strengths include ease of use, appeal to young adults and a solid network with large hospitals. For instance, around-the-clock phone

consultations with a doctor are free and can be requested with the push of a button on the mobile app.

But they also note that the fledgling company, funded by venture capital, must overcome lack of name recognition and track record as well as higher premiums than some competitors in Southern California's crowded market.

For an unsubsidized plan for a 35-year-old in Orange County, the least expensive bronze plans in the market range from \$200 to \$252 per month, with Oscar at \$244. For the most expensive platinum plans, premiums range from \$357 to \$471, with Oscar costing \$401.

"Their price is an issue because a lot of Covered California people are price-conscious," said George Balteria, chief executive of Quote Selection Insurance Services based in Santa Ana. "Their big push is technology. For the Uber-riding, DoorDash crowd, they do have some appeal and bring something new to the marketplace."

When Oscar consumers search online for a doctor, the results include their projected out-of-pocket cost, which can differ depending on the provider, as well as how much experience the physician has treating patients in their age range.

"We know that many younger people don't really understand insurance," said Peter Lee, executive director of Covered California. "Oscar's got some tools that really address that head-on."

Oscar CEO Mario Schlosser, 37, started the company in 2012 with two other Harvard Business School graduates, all with tech industry backgrounds. Oscar is named for another founder's great-grandfather.

The company was born out of personal confusion and frustration with the existing insurance system, Schlosser said. In his case, it was sorting out costs when his wife was pregnant with their first child.

Oscar's explanation of benefits has been bundled with a table of contents for each episode of care – the care provided for a particular medical problem – instead of piecemeal by provider, in order to eliminate confusion.

"Our EOB uses a lot of plain language, it doesn't just give you the strange code words. It has a much better layout and design," Schlosser said. "It's almost like looking at your Facebook timeline. It has everything in my health history."

Oscar offers members free activity trackers they can use to earn Amazon.com gift cards for increasing how much they walk. Oscar says that program is most popular among customers ages 18 to 34.



“They are innovative in that they do things like provide incentives for meeting certain wellness goals,” said Dylan Roby, a University of Maryland School of Public Health professor and UCLA Center for Health Policy Research researcher. “Those are fairly new to the insurance world.”

Oscar’s marketing campaign includes lighthearted advertising in print, television and social media. One ad reads, “We would’ve been here sooner but we took the 405.” Another boasts, “New Yorkers love us and they hate everything.”

But those ads may not reach parts of the untapped market for health insurance in California, experts said.

“It could be difficult to break into that market,” Roby said. “If you’re thinking about the Covered California population, you have lots of people that have limited English proficiency, largely Latinos and Asians that may be more recent immigrants.

Despite the emphasis on technology, Schlosser said help from a real person is also essential. Even he fields calls from customers.

“Health care is fundamentally a very human industry,” he said. “I personally explain to callers on the phone how to use the website, how to use the features. Pretty much everyone here answers phone calls.”

# Los Angeles Times

## Obamacare helping improve access to medical care for the poor, new studies show

By: Noam N. Levey  
Jan. 5, 2016



States' Medicaid expansions through the Affordable Care Act are helping low-income patients access medical care and improving hospitals' bottom lines, according to two new studies that add to growing evidence about the benefits of the health law.

Fewer low-income residents of Kentucky and Arkansas, two poor states that expanded Medicaid in 2014, reported problems paying medical bills after the coverage expansions, especially compared with residents of Texas, which has rejected the health law.

And hospitals in Medicaid expansion states saw a marked decline in the share of patients without insurance compared with hospitals in states that have not broadened access to Medicaid, a second study found.

“Our findings underscore the significant benefits of Medicaid expansion not only for low-income adults, but also for the hospitals that serve this population,” the authors of that study conclude.

The two studies, both published Tuesday in the journal *Health Affairs*, come as new states consider Medicaid expansion, a key pillar of the healthcare law that President Obama signed in 2010.

To date, 30 states and the District of Columbia have elected to take federal aid to broaden eligibility for Medicaid to low-income, working-age adults. (The program traditionally limited coverage to vulnerable populations such as poor children, seniors and the disabled.)

Several more traditionally conservative states, including Louisiana, South Dakota and Wyoming, are looking into expanding.

But many Republican governors and state legislators continue to reject Medicaid expansion, arguing that the program is ineffective and unaffordable.

Meanwhile, in Washington, congressional Republicans for the first time have passed a bill to repeal most of Obamacare, which the president vetoed Friday.

GOP resistance to Obamacare is already affecting low-income residents, the new studies suggest.

In Texas, for example, the percentage of residents reporting trouble paying medical bills, skipping prescriptions or delaying care because of cost barely moved between 2013 and 2014.

By comparison, Kentucky and Arkansas saw major declines in all three measures of access to medical care after the Medicaid expansion began in 2014.

The share of residents in the two states who reported skipping a medication because of cost fell more than 10 percentage points. And the percentage of Kentucky residents who said they had trouble paying medical bills dropped by more than 14 percentage points, from 42.7% to 28.4%.

Researchers also found major gains in the share of residents who said they had a checkup in the prior year, which increased more than 8 percentage points in both Kentucky and Arkansas.

And they found sizable increases in the percentage of patients with chronic medical conditions who got regular care, which increased more than 6 percentage points in the two states.

Texas, by contrast, saw a decline in the percentage of chronically ill residents who got regular care between 2013 and 2014, according to the study, which was based on a telephone survey of 5,665 low-income, working-age adults in the three states.

Researchers at Harvard chose the states in part because the three have historically had high uninsured rates and because Kentucky and Arkansas chose different models of Medicaid expansion.

Kentucky took a more traditional approach, enrolling poor adults in a standard government Medicaid plan. Arkansas set up a new system that allows Medicaid enrollees to select a subsidized commercial health plan.

The Arkansas system, which was approved by Republican lawmakers in the state, has been held up as a potential conservative alternative to traditional Medicaid.

The researchers found little difference in the impact of the two expansions.

“Deciding whether or not to expand matters much more than deciding how to expand,” the study concluded. “Both Arkansas’ private option and Kentucky’s traditional Medicaid expansion appear to be promising approaches that have thus far generated similar improvements in access care.”

The researchers found less evidence that the improved access was delivering better health, as residents’ self-reported health changed little in all three states.

Dr. Benjamin Sommers, one of the study’s authors, said he hoped researchers would be able to dig into the health effects of the coverage expansions further as more data become available.

# The San Diego Union-Tribune.

## Obamacare penalty landscape changes in 2016

By: Paul Sisson  
Jan. 4, 2016

equivalent to 50 full-time employees; Full-time work week is 30 hours per week.

○ Size of firm determined **annually**; Fee (if any) determined **monthly**

**Potential Penalty:**

<u>Failure to offer coverage</u>	<u>Failure to offer "affordable" coverage that provides minimum value*</u>
\$2,000* per year for each full time employee per year, excluding first 30 full time employees	\$3,000 per year for each full time employee receiving premium assistance in Marketplace
<ul style="list-style-type: none"> <li>* Firm pays penalty if at least one employee qualifies for premium assistance in Marketplace.</li> </ul>	<ul style="list-style-type: none"> <li>*Affordable: Employee's share of premium does not exceed 9.5% of employee annual income (not health insurance)</li> <li>*Minimum value: Health plan covers at least 60% (average)</li> </ul>

A few years back, many predicted that requiring businesses to offer their employees health coverage or pay a penalty would be ruinous for companies across the nation.

The provision, often called the Employer Mandate, reached full implementation on New Year's Day with little fanfare or protest, along with a raft of changes to plans offered by Covered California, the state's health insurance exchange.

As of Friday, companies with the equivalent of 50 to 99 full-time employees must offer their workers health insurance that meets the Affordable Care Act's affordability and adequacy requirements. If they don't, those businesses risk thousands of dollars in fines if their workers end up receiving subsidized coverage through government-run exchanges.

While this mandate has been widely derided, Xiomara Peña, Southern California outreach manager for the California chapter of the Small Business Majority, said there was not a large number of businesses crying out in protest as 2016 arrived.

"Most businesses — 96 percent — have less than 50 full-time equivalent employees, so they are not impacted," Peña said.

The provision has been on the books since Obamacare passed in 2010 and was supposed to take effect in 2014, but Congress delayed the requirement until this year. The law defines full-time employees as those who work at least 30 hours per week.

For several years, employers have worked to bring down their full-time-equivalent totals to below 50 or limit the number of full-time workers they would have to cover if their staffing surpassed the government threshold. In other words, the delayed financial pain produced by Obamacare might have been built into the affected companies' long-range planning.

That could be the case, or it could simply be that the requirement was never as onerous as business owners thought, said Larry Levitt in Menlo Park, senior vice president for special initiatives at the Henry J. Kaiser Family Foundation.

"I think it just hasn't been that difficult for the vast majority of employers to comply with the mandate," Levitt said.

That is especially true, he added, for businesses with the equivalent of 100 or more full-time employees. They had to comply with the mandate beginning in 2015, and this year must offer coverage to 95 percent of their employees, up from 70 percent last year.

"The vast majority of employers in that category already offered health insurance to their workers. They may have had to increase offerings in some areas, but most did not have to start from scratch," Levitt said.

Penalties have also increased for individuals in the new year.

In 2016, the fine for not being insured increases to at least \$695 per adult and \$347 per child or 2.5 percent of household income, whichever is greater. However, there are also new benefits available for those who buy exchange plans. A new cap on specialty drug costs for patients with chronic conditions, and available dental coverage for adults, top the new-in-2016 list.

While plans for businesses and individuals started at the first of the year for millions, there is still time to sign up.

The open enrollment period for Covered California is Jan. 31, and anyone who signs up by Jan. 15 will have their policy start on Feb. 1.

Open enrollment for businesses is continuous. Companies that decide to offer coverage can buy on a small business exchange operated by Covered California or from other marketplaces, including California Choice, a popular private exchange that caters to businesses and offers plans from some carriers who do not sell through the state's marketplace.

Determining which plan to get and calculating whether a business is truly at risk of a penalty can be complicated. For example, companies end up getting penalized only if one of their employees applies for and receives subsidized coverage through the exchange.

Peña, the Small Business Majority representative, said employers are well advised to seek the help of a local health insurance broker rather than going it alone.

"Brokers are great because they've been studying every wrinkle of this for years. We love brokers because they can save a lot of time and frustration," Peña said.



## 40% drop in proportion of Calif. kids with no health coverage

Dec. 25, 2015

PALO ALTO, California — More California children than ever have health coverage. Between 2010 and 2014, the estimated percentage of children who were uninsured in California fell to 5 percent, a 40 percent drop, according to the most recent data available on Kidsdata and collected by the American Community Survey.

The shift, which represents an estimated 350,000 more children who now have insurance coverage, is largely due to the implementation of the Affordable Care Act (ACA).

California's downward trend mirrors national trends. Across the country, the rate of uninsurance fell to 6 percent, a 25 percent drop, during the same time period.

Still, with nearly 500,000 children in the state lacking coverage, many gaps remain. An estimated 11 percent of American Indian/Alaska Native children, for example, were uninsured in 2014—double the percentage for all children and higher than all other racial/ethnic groups.

Immigrant children, especially those with undocumented parents or those who are themselves undocumented, are at particular risk of being uninsured and without regular health care.

Children with health insurance are more likely to receive needed medical care and have improved school performance, and they are less likely to have costly hospitalizations. Providing high-quality, accessible, and affordable health care to children requires comprehensive insurance coverage for all children; an appropriately trained and compensated provider base, including a sufficient number of subspecialists; parental



understanding about what care is needed and how to obtain it; and effective systems of care, including “medical homes.”

Continued, effective implementation of the ACA, including efforts to streamline enrollment and renewal processes, will influence progress in future years.



## **Affordable Care Act is Working: Families Report Quality Care at Affordable Prices**

Dec. 24, 2015

Paying nearly \$600 every month for health insurance was a heavy burden for Alfredo and Tayhesha Madrid of Riverside.

The couple had insurance coverage through Tayhesha's employer, a window frame manufacturer. Although they looked for more affordable insurance, there were few plans that would take them because of Alfredo's pre-existing condition as a diabetic.

Things changed in March 2014 when the couple discovered Covered California and the insurance companies that sell coverage through the exchange under the Patient Protection and Affordable Care Act.

The Madrids chose an Anthem Blue Cross of California Silver plan and saw their premium fall to \$230 per month, aided by a federal subsidy. The decrease in premium cost was a life-altering surprise for the 45-year-old notary public and his wife.

"I was floored," said Alfredo. "My insulin now costs \$30 as opposed to \$180 under our old plan. We are free to see whatever doctor we want to see. It was a huge weight lifted from our shoulders."

According to Covered California, of the consumers receiving subsidies to help them pay for insurance, the majority pay less than \$150 per month, and more than 120,000 enrollees are paying less than \$10 per month for coverage.

Covered California estimates that in 2014 it provided more than \$5,200 in subsidies per household per year, or about \$436 per month. Savings for 2015 are still being calculated.

Covered California is approaching the third year of helping millions of Californians gain health insurance through the Affordable Care Act. Open enrollment is Nov. 1, 2015, through Jan. 31, 2016. More than 2 million consumers have been enrolled at one time

or another since coverage began in January 2014. Currently more than 1.3 million members have active health insurance. Millions more have received care through low-cost or no-cost Medi-Cal.

Despite this monumental progress, California still has millions of people who are eligible for health insurance through either Covered California or Medi-Cal but remain uninsured, Covered California Executive Director Peter V. Lee said.

The Affordable Care Act is working in California, Lee said, offering affordable plans and quality medical care. Those are the messages his agency relentlessly delivers to consumers.

“You can get health insurance for a lower cost through Covered California,” Lee said. “Four out of five people who enrolled through our agency got help paying for their coverage.”

The total amount of subsidies, or Advanced Premium Tax Credits, was \$3.2 billion paid to health insurance companies in 2014 on behalf of Covered California enrollees. Consumers themselves paid \$1.1 billion toward those policies in 2014, meaning that for every dollar a subsidized Covered California consumer spent on premiums, the federal government paid another \$3.

For 2016 coverage, Covered California is launching another robust community outreach and enrollment campaign, with an emphasis on African-Americans, Latinos and young adults.

Key to that effort will be insurance agents and enrollment counselors trained to help consumers shop around and look at their options among 12 insurance carriers. Those professionals, along with a trained customer service staff, will help consumers decide whether to stay with their current plan or find another option that better suits their financial needs.

It was an enrollment counselor with the Riverside County Black Chamber of Commerce who helped the Madrids — Alfredo, who is Latino and Tayhesha, who is African-American.

“We didn’t know that we qualified to enroll,” Alfredo said. “Through a counselor we learned we were able to switch, because we were paying 9.5 percent of our income through our employer coverage. If your employer-sponsored plan costs that much, the law allows you to switch to a Covered California plan.”

That bit of good news — plus lower cost and better care — is something the Madrids are sharing with friends.

“I found it to be awesome, and now I can help people,” Alfredo said.



# NEW AMERICA MEDIA

## Oakland Accepts Obama's Challenge

By: Viji Sundaram  
Dec. 21, 2015



OAKLAND, Calif. – Oakland has accepted the challenge thrown last week by President Obama to 20 cities nationwide to get the most sign-ups in the state's health care exchange during this open enrollment period and win a visit from him.

"Oakland likes to win," declared Mayor Libby Schaaf, who announced the challenge at a press conference outside Oakland City Hall Dec. 18 with Assemblymember Rob Bonta, D-Oakland, Melissa Stafford Jones, regional director of the Department of Health and Human Services, and Dana Howard, spokesperson for Covered California, the state's health care exchange.

"The prize is President Obama himself will visit our city," Schaaf said. "But the real prize is a healthier community."

Called the "Healthy Communities Challenge," the campaign, announced by Obama in

his weekly radio address last week, has targeted 20 cities with the most uninsured people eligible for the marketplace coverage but who haven't signed up. Nationwide, the Department of Health and Human Services estimates there are 10.5 million such people.

Since Covered California launched in 2013 under Obama's landmark Affordable Care Act (ACA), the number of uninsured California residents has dropped from 21 percent to 11 percent, noted Jones. Some of the benefits of ACA health care plans, she said, include no annual caps on coverage, equal premiums charged to men and women, and government subsidies that make the plans affordable.

Yet, there are about 134,000 people who are subsidy-eligible in the Bay Area but uninsured, Bonta said, promising to do a better outreach among them to drop that number.

"As Oakland and the Bay Area go, so goes the rest of California," he said.

To make it convenient to enroll, City Hall has become one of several enrollment centers in the city. It will be open Monday through Friday from 10 a.m. to 7 p.m. and Saturday from 10 a.m. to 4 p.m. For more information, visit [www.coveredca.com](http://www.coveredca.com).

Recent aggressive campaigning by Covered California has helped to net an additional 197,000 people across the state in just one week this month, said Howard. More than half of those enrolled on the exchange are paying less than \$50 a month in premiums, he added.

Meanwhile, a civil rights coalition last week filed a complaint with the U.S. Department of Health and Human Services Office of Civil Rights, charging California with engaging in unlawful discrimination by paying doctors some of the lowest reimbursement rates in the nation through Medi-Cal, the state's Medicaid program for low-income residents.

The complaint, which is unrelated to Covered California, says that the low rates have severely shrunk the pool of doctors willing to accept Medi-Cal patients, preventing doctors and hospitals from treating Latinos, who make up the majority of Medi-Cal enrollees.

About 2.5 million residents have enrolled in the expanded Medi-Cal program under the ACA. Among other things, expansion has allowed childless adults to enroll. That has brought the state's total Medi-Cal enrollment to a little over 12 million.

In an interview with New America Media after the conference, Bonta, who chairs the Assembly health committee, declined to discuss specifics of the complaint, but acknowledged there was truth in it.

For an average patient visit, Medi-Cal now reimburses doctors \$41.48, while Medicare – the health insurance program for elders and people with disabilities -- pays \$102.45.

Bonta said his attempts to bring Medi-Cal reimbursement rates back on par with Medicare's through a bill he sponsored earlier this year, AB 366, didn't succeed.

The state would need an additional \$10 billion in its Medi-Cal budget to bring the program's rates on an equal footing with Medicare's. Bonta said that meeting the \$10 billion shortfall could take "multiple years."

As chair of a special legislative session set up by Governor Brown last June, Bonta said he and others in the health care coalition are trying to restore the cuts made in 2011 to Medi-Cal provider reimbursement rates. They are trying to identify additional revenue streams, he said.

"If we don't do anything to increase the provider rates, the problem will get worse," he said.



## **Guest commentary: Quality health-care coverage is available, but you must sign up**

By: Rob Bonta  
Dec. 21, 2015

As chair of the California State Assembly Health Committee, I believe that affordable, accessible and high-quality health care coverage is a right for everyone, not a privilege. Having true access to a doctor when you need one can improve, extend and even save one's life.

California's implementation of the Affordable Care Act has brought us closer than ever to providing health care coverage to all over the past three years, but many of us still need to take the critical step and sign up for coverage through Covered California.

Open enrollment for health coverage for 2016 began Nov. 1, and I am happy to let you know that there's not only time to enroll before the Jan. 31 deadline, but also, plenty of resources to help our community find the plan that best suits their needs and budget.

In Alameda County, more than 61,000 people enrolled in health coverage through Covered California last year. This year, we want to collectively see that number grow. Many may see cost as a barrier, but we know that this year, 4.3 percent of Oakland's uninsured population is eligible to receive financial aid -- or subsidies -- to help pay for their health coverage, according to Covered California.

I encourage everyone who still doesn't have health insurance to visit [coveredca.com](http://coveredca.com) before the deadline to review the costs and benefits of each plan and find health care coverage.

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.

For our local diverse populations, Covered California has made it even easier for them to apply this year. The Covered California website is now available in Spanish, Chinese, Korean, Vietnamese and Tagalog.

There are also thousands of Covered California representatives available to provide free, confidential, in-person assistance in a variety of languages, as well as drop-in storefront retail locations offering convenient service across the state, including many in Alameda County.

Furthermore, Covered California partners with immigration advocacy groups to ensure consumers that their information will never be used to enforce federal immigration laws.

So I want all Californians to rest assured that the personal information you submit, including your immigration status, is strictly confidential and will never be used against you.

Please take advantage of this important opportunity to care for yourself and your families. Regardless of the plan you choose, you will have benefits that will take care of most of your health care needs. In addition, your plan will include free preventive services to stay ahead of big health risks, such as blood pressure and cholesterol screenings for adults, mammograms and cervical cancer screening for women, and common vaccinations for children.

Remember that open enrollment for 2016 will end Jan. 31. Contact my office at 510-286-1670 or visit [coveredca.com](http://coveredca.com) if you need assistance or have any questions or concerns. Or call 800-300-1506.

Assemblymember Rob Bonta represents the 18th Assembly District.



## As deadline nears, uninsured flock to Covered California

Dec. 15, 2015

SACRAMENTO — More than 140,000 consumers have enrolled with Covered California, the state's health insurance marketplace created under the Patient Protection and Affordable Care Act. Covered California estimates that it will gain between 295,000 and 450,000 new customers during the open enrollment period.

Statewide, it is estimated that approximately 750,000 uninsured Californians are eligible for subsidies. An additional 1.4 million people statewide are believed to qualify for low-cost or no-cost Medi-Cal.

Enrollees must have enrolled by midnight Dec. 15 for their insurance to become effective Jan. 1. Open enrollment runs through Jan 31, 2016.

“Once again, Covered California is seeing an incredible surge of interest, and thousands of people are enrolling at storefronts, insurance agent offices and community centers across the state every day,” Covered California Executive Director Peter V. Lee said in a release. “Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage, and if they enroll by Dec. 15, their coverage can start on Jan. 1.”

Those needing insurance can find enrollment locations by visiting Covered California and typing in their ZIP code. There are also hundreds of locations with Covered California signs that signify places consumers can enroll. Consumers can also call Covered California directly at (800) 300-1506 to enroll over the phone.

“We know that financial assistance is key in helping consumers get the health care coverage they need and deserve,” Lee said. “Our research shows that one-third of those eligible to get financial help to buy insurance don't know it's available, and we want to make sure our message reaches into every corner of the state.”

# Los Angeles Times

## Specialty drug costs soar 32% to \$438 million at CalPERS amid uproar over prices

By: Chad Terhune  
Dec. 15, 2015



One of the nation's biggest healthcare buyers, the California Public Employees' Retirement System, said its specialty drug costs soared 32% last year to \$438 million.

Despite being less than 1% of all prescriptions, specialty drugs accounted for nearly a quarter of the pension fund's \$1.8 billion in total drug costs, according to a new report by the agency.

Hepatitis C drugs such as Sovaldi, which have sparked a growing uproar over drug prices nationwide, drove much of the increase, as did medications for rheumatoid arthritis, cancer and multiple sclerosis.

The state agency spent \$43.9 million on Sovaldi last year, and an additional \$16.5 million on two other hepatitis C drugs, Harvoni and Olysio.

CalPERS spends about \$8 billion annually on medical care for 1.4 million active and retired government employees and their family members. Earlier this year, agency officials cited rising pharmacy costs as one of the primary reasons why insurance rates were increasing so much for 2016.

California's 3 largest health insurers among few to show Obamacare profit in 2014 HMO premiums increased 7.2% for 2016, while rates for PPO, or preferred provider organization, plans went up even more at 10.8%, on average.

Apart from specialty drugs, the top-selling medications at CalPERS were acid-reflux pill Nexium, bipolar drug Abilify and asthma inhaler Advair. Painkiller Oxycontin rounded out the Top 10 with \$16.4 million, according to claims data.

CalPERS staff presented the latest data to the agency's Pension and Health Benefits committee Tuesday.

Kathy Donneson, chief of the agency's health plan administration division, said CalPERS is exploring different options for controlling prescription drug spending in order to minimize the impact on premiums.

"We are under pressure," Donneson told the committee Tuesday. CalPERS wants to "keep pharmacy trend from blowing through the roof as we look at" future premiums.

Committee members noted, however, that some increases in prescription drug spending can save money in the long run by avoiding hospitalizations and other costly care later on. They asked staff to report back on any studies shedding light on that trade-off in spending.

Gilead Sciences Inc. has defended the value of its hepatitis C drugs like Sovaldi because they offer high cure rates and avoid the long-term medical expenses related to liver failure, cancer and transplants.

The agency's healthcare trends are closely watched across the country as a harbinger of what big employers and their workers might be facing.

The high prices of specialty medications have drawn the ire of lawmakers, health insurers and patients for months.

Tuesday, officials in the health insurance industry seized on the California data to press for more transparency from drugmakers on how they set their prices.

"We have seen national reports of spikes in drug pricing, and now we see the impact right here in California," said Charles Bacchi, chief executive of the California Assn. of Health Plans, an industry trade group. These increases are "not sustainable for public employees – or really any healthcare consumer."

At CalPERS, rheumatoid arthritis drugs Enbrel and Humira topped the list of costliest specialty drugs for 2014. Together, CalPERS spent \$91 million on the two medications, or nearly 5% of total drug spending.

Prescription drug costs increased nearly 8% overall at CalPERS for 2014.

# THE SACRAMENTO BEE



## Covered California extends enrollment deadline for coverage that begins Jan. 1

By: Cathy Locke  
Dec. 15, 2015



Covered California officials announced that due to a surge in demand for health insurance through the state marketplace, it has extended the enrollment deadline by two days for coverage that begins Jan. 1.

Officials said the Covered California Service Center will be open from 8 a.m. to 8 p.m. Wednesday and Thursday.

“The spike in interest we are seeing in the last few days tells us there is continued demand for quality, affordable coverage,” Executive Director Peter V. Lee said in a written statement. “We already have enrolled more consumers this year for Jan. 1 coverage than we did last year.”

Certified enrollers, including agents, have reported that they still are processing thousands of applications and appreciate the additional time to ensure consumers receive coverage for all of 2016, according to a Covered California news release.

Open enrollment runs through Jan. 31, but coverage for consumers who enroll after Dec. 17 will start in either February or March.

Consumers can enroll several ways, including online via the Covered California website. Enrollment locations also can be found by visiting the Covered California website and searching for enrollment by ZIP code. In addition, hundreds of locations, identified with Covered California signs, are available to enroll consumers confidentially and at no cost in a variety of languages. Consumers also can call Covered California directly at 800-300-1506 to enroll over the phone.

Covered California is the state’s marketplace for the federal Patient Protection and Affordable Care Act. 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.




# High Deductibles: Why It’s Important to Read the Fine Print

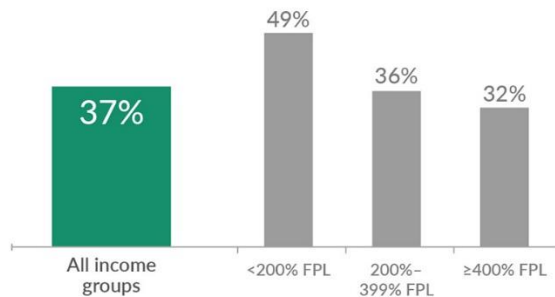
By: Munira Gunja, Sara R. Collins and Sophie Beutel

The Affordable Care Act (ACA) requires all health plans to fully cover preventive services, such as cholesterol screenings and mammograms, and prohibits insurance companies from charging copays for them. But findings from the most recent Commonwealth Fund Health Care Affordability Tracking Survey reveal that two of five adults with private coverage are unaware that their health plan fully covered preventive care services—and fully half of privately insured low-income adults are not aware of this benefit.<sup>1</sup>

Two of five privately insured adults are unaware their health plans fully cover preventive care services

 Does your health plan fully cover preventive care services at no cost to you, regardless of whether or not you have met your deductible?

*Privately insured adults ages 19–64 who were insured all year, have a deductible and said “no” or “don’t know”*




Note: FPL refers to federal poverty level. 200% FPL is \$23,340 for an individual or \$47,700 for a family of four; 400% FPL is \$46,680 for an individual and \$95,400 for a family of four. “All income groups” includes adults who do not report their income and may therefore not be the average of the income categories.

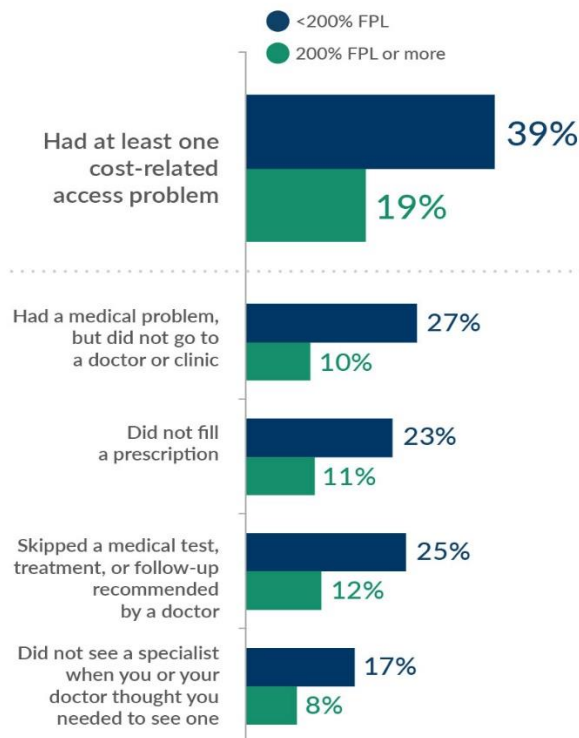
Source: The Commonwealth Fund Health Care Affordability Tracking Survey, July–August 2015.

Preventive services are free in all health plans, including plans acquired through the ACA marketplace, employers, or the individual market.<sup>2</sup> These services do not count

toward the deductible that people need to pay before their insurance kicks in. Yet, confusion about what services are covered by health plans is affecting consumers' health care decisions. According to our survey, 18 percent of privately insured adults who had deductibles that were high relative to their incomes reported they did not get a preventive screening because of the cost.

Two of five adults with low incomes reported they had delayed or avoided getting care because of their copayments or coinsurance

 Thinking about what you have to pay when you visit the doctor or fill a prescription, in the past 12 months, was there any time when you did any of the following because of your copayments or coinsurance?



Percent of privately insured adults ages 19–64 who were insured all year, pay a copayment or coinsurance and reponded “yes”

Note: FPL refers to federal poverty level. 200% FPL is \$23,340 for an individual or \$47,700 for a family of four; 400% FPL is \$46,680 for an individual and \$95,400 for a family of four.

Source: The Commonwealth Fund Health Care Affordability Tracking Survey, July–August 2015.

Consumers with marketplace plans may also be unaware that other services are often excluded from their deductibles. A recent analysis by the Centers for Medicare and



Medicaid Services found that more than 80 percent of consumers who selected marketplace plans in 2015 had services in addition to the required preventive services excluded from their deductible.<sup>3</sup> For example, 80 percent of consumers who selected silver plans in last year's enrollment period had primary care visits excluded from their deductible and 82 percent selected a plan in which generic drugs were excluded.<sup>4</sup>

California's marketplace, Covered California, requires health plans to exclude physician visits and outpatient services from the deductible for all silver-level and higher plans.<sup>5</sup> This means that if patients need treatment after receiving their free preventive care test, they will only be charged their copay for any outpatient treatment.<sup>6</sup> The federal marketplace, Healthcare.gov, is also leaning in this direction. The new federal proposed rule for health plans offered in 2017 encourages insurers participating in the federally facilitated marketplace to include certain deductible-free services, such as primary and specialty care visits and generic drugs.<sup>7</sup>

In this third open-enrollment season for marketplace plans, it is important for families who are renewing their coverage, and those planning on enrolling for the first time, to understand their benefit packages. Knowing what is excluded from deductibles will enable people who enroll in high-deductible health plans to take advantage of free-of-charge visits to their doctor to get preventive services and any other follow-up treatment that is included in their benefit package. If consumers are fully aware of what services are covered for free in their health plans, their high deductibles may be less of a barrier to getting timely care.

Under the Affordable Care Act, covered preventive services include: those that the United States Preventive Services Task Force rate as either "A" (high certainty that the net benefit is substantial) or "B" (high certainty that the net benefit is moderate); immunizations recommended by the Advisory Committee on Immunization Practices; and an evidence-informed preventive care and screening for infants, children, adolescents, and women, supported by the Health Resources and Services Administration.<sup>8</sup> You can learn about which preventive services are fully covered under the Affordable Care Act by visiting [HealthCare.gov](http://HealthCare.gov).<sup>9</sup>

## Notes

1. S. R. Collins, M. Gunja, M. M. Doty, and S. Beutel, How High Is America's Health Care Cost Burden? Findings from the Commonwealth Fund Health Care Affordability Tracking Survey, July-August 2015, The Commonwealth Fund, November 2015.
2. Grandfathered plans are excluded from this provision.
3. For plans without cost-sharing subsidies.
4. K. Coughlin, Five Facts About Deductibles, The CMS Blog, Centers for Medicare and Medicaid Services, Nov. 17, 2015.

5. Outpatient services are tests, treatments, and/or procedures that can be performed without requiring the patient to stay overnight in a medical center

6. J. C. Robinson, P. Lee, and Z. Goldman, Whither Health Insurance Exchanges Under the Affordable Care Act? Active Purchasing Versus Passive Marketplaces, Health Affairs Blog, Oct. 2, 2015.

7. T. Jost, Proposed Benefits and Payments Rules Includes Standardized Plans, New Network Adequacy Standards, Health Affairs Blog, Nov. 20, 2015.

8. Centers for Medicare and Medicaid Services, Affordable Care Act Implementation FAQs-Set 12 (Washington, D.C.: CMS).

9. 10 Health Care Benefits Covered in the Health Insurance Marketplace, Healthcare.gov Blog, Aug. 22, 2013.



## **Peter V. Lee: Sign up now for health insurance**

By: Peter V. Lee  
Dec. 12, 2015

An important deadline approaches for Ventura County residents and all Californians who want to start the new year with the protection of health insurance under the Affordable Care Act.

Open enrollment is underway, and if you want to benefit from a full year of coverage, starting Jan. 1, you need to enroll by Tuesday, Dec. 15.

While it's the third year of this historic initiative, many Californians do not know about all the benefits of the Affordable Care Act — including the financial assistance to help consumers pay for coverage and care. New research shows that 36 percent of the uninsured say they do not know about the financial assistance available to them that can help get them health coverage.

This is significant because the same research shows that the financial help, also known as a subsidy or tax credit, is the most important factor that drives people to sign up for health care coverage.

Since 2014, more than 2 million have signed up for health insurance coverage through Covered California. More than 32,000 people in Ventura County have been enrolled, and many more have enrolled in Medi-Cal.

Although we have all worked together to dramatically raise awareness about the new law, we have more work to do.

We estimate there are still more than 2 million uninsured people in the state who either are eligible for Covered California or qualify for no-cost or low-cost Medi-Cal. Approximately 87,000 of them live in the Central Coast Region, encompassing Ventura, Santa Barbara and San Luis Obispo counties.

Many of the uninsured have adopted what we call a "culture of coping." They are surviving, day to day. They skip care, they split medications, and they rely on emergency services when their situation becomes too tough. They believe that health insurance is beyond their reach.

Through Covered California, many consumers can get financial help, or a tax subsidy, that can be worth hundreds of dollars per month and make health care a reality.

We are spotlighting the fact that more than half of those who are currently enrolled in Covered California pay less than \$100 a month, with the balance being covered by the federal tax credit. That is real affordability.

You can find out if you qualify for financial help, and examine your plan options, by using the "Shop and Compare Tool" at [CoveredCA.com](http://CoveredCA.com).

Consumers in Ventura County can have that protection by enrolling in Covered California and choosing among name-brand health insurance companies their area: Anthem Blue Cross of California, Blue Shield of California, Kaiser Permanente (which operates in parts of the region), and, new for 2016, United Healthcare.

Going forward, we will be spotlighting enrollment events at storefronts, offices of insurance agents, community events and other locations. Localized help information is available at [CoveredCA.com](http://CoveredCA.com).

This year's open-enrollment period runs until Jan. 31. However, if you qualify for Medi-Cal, you can enroll at any point during the year.

If you or someone you know doesn't have health care coverage, this is the opportunity to get coverage. Now is the time to talk to your friends and family about getting covered and getting some peace of mind.

Make sure you know about the significant improvements to our plans, including family dental plans, and more benefits being accessible without being subject to a deductible.

Make sure you know that the penalty for going without insurance if you can afford it is going up in 2016 — and going up big time.

So, please, tell your family and friends. Spread the word. Help us make Ventura County a better, healthier place for all of us.

## **Guest view: Covered California deadline looming**

By: Peter V. Lee  
Dec. 10, 2015

An important deadline approaches for San Joaquin County and Central Valley residents, and for all Californians who want to start the New Year with the protection of health insurance under the Affordable Care Act.

Open enrollment is underway, and if you want to benefit from a full year of coverage, starting Jan. 1, you need to enroll by Tuesday.

While it's the third year of this historic initiative, many Californians do not know about all the benefits of the Affordable Care Act — including the financial assistance to help consumers pay for coverage and care. New research shows that 36 percent of the uninsured say they do not know about the financial assistance available to them that can help get them health coverage.

This is significant because the same research shows that the financial help, also known as a subsidy or tax credit, is the most important factor that drives people to sign up for health care coverage.

Since 2014, more than 2 million have signed up for health insurance coverage through Covered California. More than 23,000 people in San Joaquin County have been enrolled. A total 60,600 consumers enrolled in the Central Valley region that encompasses San Joaquin, Stanislaus, Merced and Mariposa counties. Many more have enrolled in Medi-Cal.

Although we have all worked together to dramatically raise awareness about the new law, we have more work to do.

We estimate there are still more than 2 million uninsured people in the state who either are eligible for Covered California or qualify for no-cost or low-cost Medi-Cal.

Approximately 111,000 of them live in the Central Valley region.

Many of the uninsured have adopted what we call a “culture of coping.” They are surviving, day to day. They skip care, they split medications, and they rely on

emergency services when their situation becomes too tough. They believe that health insurance is beyond their reach.

Through Covered California, many consumers can get financial help, or a tax subsidy, that can be worth hundreds of dollars per month and make health care a reality. We are spotlighting the fact that more than half of those who are currently enrolled in Covered California pay less than \$100 a month, with the balance being covered by the federal tax credit. That is real affordability.

You can find out if you qualify for financial help, and examine your plan options, by using the “Shop and Compare Tool” at [CoveredCA.com](http://CoveredCA.com).

Consumers in San Joaquin County and the Central Valley can have that protection by enrolling in Covered California and choosing among top-brand health insurance companies offering plans in their area: Anthem Blue Cross of California, Blue Shield of California, Health Net, and Kaiser Permanente, with the latter two operating in parts of the region.

Going forward, we will be spotlighting enrollment events at storefronts, offices of insurance agents, community events and other locations. Localized help information is available at [CoveredCA.com](http://CoveredCA.com).

This year’s open-enrollment period runs until Jan. 31. However, if you qualify for Medi-Cal, you can enroll at any point during the year.

If you or someone you know doesn’t have health care coverage, this is the opportunity to get coverage. Now is the time to talk to your friends and family about getting covered and getting some peace of mind.

No matter what happens in your life, whether you are following your dream as a small-business owner or whether you are in between jobs — Covered California will be there for you.

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. Shop around for the plan that best fits your budget and health care needs.

Make sure you know about the significant improvements to our plans, including family dental plans, and more benefits being accessible without being subject to a deductible.

Make sure you know that the penalty for going without insurance if you can afford it is going up in 2016 — and going up big time. If you don't get coverage, you could be subject to a penalty of up to almost \$200 per month. But the bigger "penalty" is what you would have to pay if you went to the emergency room without coverage and walked out with a \$30,000 bill.

Spread the word. Help us make San Joaquin County, the Central Valley and California, a better, healthier place for all of us.



## **Covered California deadline approaches**

Dec. 9, 2015

People seeking insurance coverage that starts on Jan. 1 through the Covered California marketplace face a Tuesday deadline.

Covered California is the exchange created through the Affordable Care Act and is intended to provide coverage to people without insurance. Subsidies are available for those who meet income standards.

Open enrollment for 2016 coverage began in November and continues through Jan. 31. But coverage will start later for people who enroll after Dec. 15.

"Everyone who needs health insurance, or knows someone who does, should know they can get financial help to pay for top-brand health insurance coverage and if they enroll by Dec. 15, their coverage can start on Jan. 1," said Covered California Executive Director Peter Lee in a Los Angeles event on Tuesday.

For more information, go to <http://www.coveredca.com>. Click on the "Get Help" icon to find local people who can offer assistance.



# Los Angeles Times

## California's 3 largest health insurers among few to show Obamacare profit in 2014

By: Chad Terhune  
Dec. 9, 2015



California's biggest health insurers are among a select few to show a profit selling Obamacare policies.

In the first year of the massive coverage expansion, California's three largest health insurers bucked the national trend of heavy losses and accounted for half of the gains reported under the Affordable Care Act in 2014.

Blue Shield of California led the country with \$107 million in profit on Obamacare policies sold to individuals. Kaiser Permanente was second with \$66 million, and

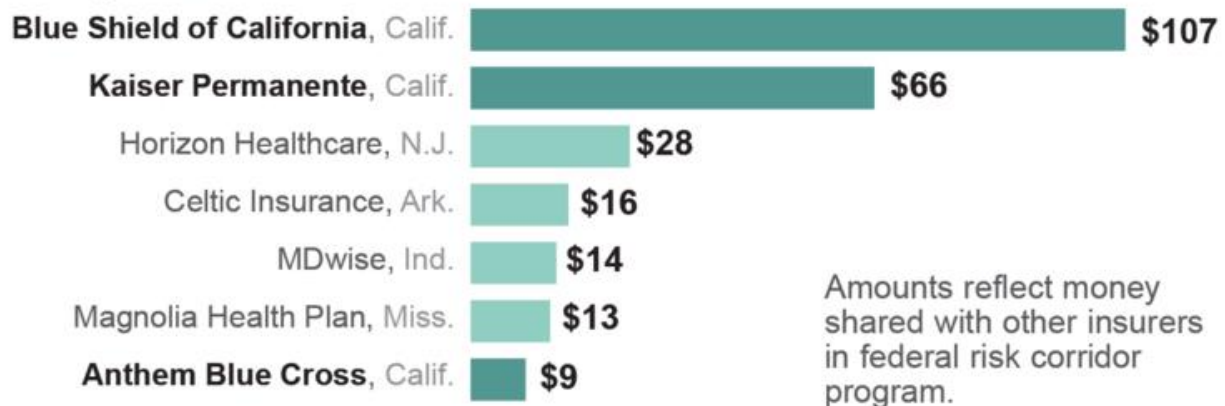
Anthem Blue Cross ranked seventh nationally with a \$9-million surplus in the Covered California exchange.

Nationwide, insurers reported just \$362 million in total profit under a federal rate-stabilization program, while most insurers recorded big losses — a total of \$2.87 billion.

## Obamacare's bestsellers

California insurers accounted for half of the \$362 million in profits for exchange coverage in 2014. The top performers were:

### Profit, in millions



Source: U.S. Department of Health and Human Services

@latimesgraphics

Critics have seized on the industry losses as a sign that the health law is failing. Those concerns were amplified when the nation's largest insurer, UnitedHealth, warned that it may quit selling Obamacare policies because the business was so unprofitable.

Now some experts point to California's experience as a sign that this can be an attractive business for insurers — so much so that it has raised questions about whether state officials should have pushed harder for lower rates.

"The data show insurers did not do well nationally," said Larry Levitt, a senior vice president at the nonprofit Kaiser Family Foundation. "But in parts of the country where things were working smoothly, like California, insurers were making money."

This new federal data offer the most extensive look yet at how insurance companies fared under the new rules of the Affordable Care Act. The figures are part of a "risk corridors" program designed as a temporary cushion against high medical claims during the first three years of the national healthcare overhaul.

Under the program, insurers that made money were required to send those funds to the federal government to offset the losses of other companies participating in Obamacare. The arrangement means that California insurers won't keep these 2014 profits.

Neither will the companies that lost money be made whole right away. The losses were so widespread, and the gains so paltry, that the federal government could only cover 13 cents for every dollar the companies lost. Officials have vowed to use money from this year and 2016 to pay what's already owed.

Several factors helped California health plans outperform the nation, including strong early enrollment and a politically unpopular decision on policy cancellations.

Amid a national uproar, Covered California defied the Obama administration and required participating insurers to cancel existing individual policies at the end of 2013.

That move created a healthier, more diverse mix of old and new policyholders at the start of the exchange. About 35 other states allowed consumers to stay longer on health plans that didn't comply fully with the new law.

That decision left many states with a smaller and sicker population signing up for Obamacare. Many new enrollees had been denied coverage previously because of pre-existing conditions.

"Federal data show California had the healthiest risk pool of all 50 states," said Mike Beuoy, a vice president and actuary at Blue Shield.

But he and other industry officials say it was hard to predict what would happen heading into the first year of Obamacare coverage.

"We were setting rates for 2014 in the absence of any hard information on what the risk pool would look like," Beuoy said.

Insurers noted that these excess profits represent a small percentage of the \$4.6 billion in premiums paid in the Covered California exchange during 2014. Taxpayers paid about 70% of those premiums through federal subsidies that consumers received based on their income, state data show.

"In hindsight, the rates we charged in the individual market were higher than they needed to be," said Mick Diede, chief actuary at Kaiser Permanente, the state's largest insurer.

For 2015, Kaiser cut its rates 1.4%, on average.

"I think the California experience was a bit of an anomaly," Diede said. "We expect it to even out."

Other California insurers may have been helped by the fact that many consumers had difficulty finding a doctor or getting care during 2014. That could have reduced medical claims, boosting the bottom line for companies.

Blue Shield and Anthem Inc., in particular, struggled to deal with the surge of applicants early on and then compounded those enrollment glitches with inaccurate provider directories, regulators found. Officials at Covered California and the insurers say they are examining to what extent those barriers reduced claims.

Michael Johnson, a former Blue Shield official and now a company critic, said the San Francisco insurer should issue more refunds to customers. "Blue Shield made this huge profit because they hindered access to care," he said.

The company already paid rebates worth \$62 million to its individual policyholders for 2014 because it didn't spend a minimum of 80% of premiums on medical care.

A spokesman for Blue Shield said its customer service and provider information have both improved since last year.

A recent report underscores how well California health insurers have held the line on spending premium dollars on medical care despite enormous changes in the market.

California was one of only three states nationwide in 2014 where insurers paid out less than 80 cents of every dollar in premiums on medical care, according to Urban Institute researchers. The state went from 81.5% in 2010 to 79.8% last year for the individual market.

Last year's surplus in California might prompt regulators to take a closer look at the rates that individuals and families are paying for Obamacare.

"Did Covered California push as hard as it could on rates? It's a legitimate question to ask," said Katherine Hempstead, who studies health insurance issues at the Robert Wood Johnson Foundation.

Unlike most other states, California negotiates premiums with health plans and doesn't allow every insurer into its exchange.

Peter Lee, Covered California's executive director, said the state has been effective at achieving stable rates that spare most consumers from double-digit increases annually. The average rate increase in Covered California was 4% for both 2015 and 2016.

"A few plans in California made a little bit more than they thought they would in 2014," Lee said. "This is evidence the California exchange market can work for patients as well as health plans."



## Daniel Weintraub: California has most to lose with Obamacare repeal

By: Daniel Weintraub  
Dec. 7, 2015



Republicans in Congress will soon make good on their long-held promise to pass legislation repealing much if not all of the Affordable Care Act, the federal health reform widely known as Obamacare.

President Barack Obama, of course, will promptly veto the bill, but Republicans see their action as a message to voters demonstrating what they will do if a Republican wins the White House in 2016.

Many observers still doubt that Republicans would follow through with their threat if they actually had the chance. It's one thing to vote for a bill that you know will never become law. Voting to actually take people's health insurance away would be a much tougher sell.

Consider the impact in California, which was one of the first states to fully embrace the new law and has implemented it aggressively. Since the law started taking effect in 2010, the number of people without health insurance in the state has dropped by half.

About 1.4 million Californians are now getting their insurance through Covered California, the health insurance marketplace the state created to implement the law. Another 2 million-plus Californians have been added to the rolls of Medi-Cal, the state and federal health program for the poor. About one-third of all Californians, and half the state's children, now get their health care through Medi-Cal.

The law is not without its problems. Many of those who are insured through Covered California complain about the narrow networks of doctors and hospitals the insurance plans put together to keep costs down. In some parts of the state, it can be almost impossible to find a doctor who takes new patients using the insurance.

And while the subsidized monthly premiums charged by the plans are reasonably affordable, most plans come with high deductibles that require customers to pay thousands of dollars out of pocket before they begin to see real benefits from their coverage.

The new enrollees in Medi-Cal, meanwhile, also face a shortage of doctors taking new patients. That's always been a problem with the program because low reimbursements and other issues have led many doctors to steer clear of Medi-Cal. Adding 2 million more people to the system has only made it worse.

Despite these problems, it seems unlikely that very many people who have gained coverage under Obamacare would give it up willingly. Covered California reports that 9 out of 10 of its customers re-enrolled after the first year. Some of those might have been motivated by the prospect of tax penalties looming for people who go without coverage. But most Californians actually welcome the opportunity to have insurance.

What would happen here if the Republicans did repeal the ACA in 2017?

Democrats in the Legislature would surely try to maintain the program without federal assistance, but it would be difficult.

The federal subsidies for people who are buying their insurance through Covered California are projected to total more than \$4 billion this year. And even after the federal government stops paying the entire cost of the expansion of Medi-Cal, the feds would still be paying about \$9 billion of the total \$10 billion cost in 2020. That means it would

cost California somewhere around \$13 billion a year to maintain the status quo, and probably more, since health care costs will continue to climb.

California, in other words, has been the biggest beneficiary of the ACA. And Californians have the most to lose if Republicans repeal it.

## Covered California adds dental coverage for adults

By Theresa Pablos and Donna Domino  
Nov. 20, 2015

Covered California, the state's health insurance marketplace, has added dental coverage for adults, and more than 33,000 people have already signed up. The new coverage goes into effect in 2016 and is an optional add-on benefit.

Children younger than 19 years of age are already covered for dental insurance if they have health insurance through Covered California, but this is the first time enrollees can choose to purchase comprehensive family plans that cover both children and adults. So far, 15% of those renewing their insurance and first-time enrollees have signed up for the optional adult dental coverage, substantially higher than Covered California officials expected.

"Often seeing a dentist is a gateway to getting other types of health services," said Peter Lee, executive director of Covered California, at a press conference. "We know that adding dental matters."

What does more coverage mean for dentists?

Enrollees can choose between Access Dental Plan, Anthem Blue Cross, Delta Dental of California, Dental Health Services, and Premiere Access for their dental plan. The plans range from \$11 to \$65 per month.

A priority for Covered California is that it has a broad provider network, ensuring all Californians had a dentist in their area, whether they lived in Los Angeles or a remote part of the state, Lee said.

"We do think it's important that when you look across the state, there's options in every part of California. ... We are giving choice to Californians," he said. "I want to thank the dental plans that rose to the challenge."

"We believe we will have tens of thousands of individuals sign up, which means general dental practices will have more people with coverage." — Peter Lee, executive director, Covered California.

The "vast majority" of California dentists are enrolled in at least one of the dental plans offered through the health insurance marketplace, according to Lee, although he could



not provide a specific number or percent at the time of the press conference. Therefore, general dentists can expect to see more people with insurance.

"We believe we will have tens of thousands of individuals sign up, which means general dental practices will have more people with coverage," Lee said. When general dentists see a patient without insurance, they can talk to them about Covered California's new benefits, he noted.

The addition of adult dental coverage is good news for Ariane Terlet, DDS, chief dental officer at La Clínica de la Raza and a private practice dentist in Berkeley, who also spoke at the press conference. When people come into her practice with dental conditions that could have been prevented, they often cite a lack of dental coverage, she said.

"Access to dental care improves when Californians have dental coverage," Dr. Terlet said. "It's great that patients will be able to improve overall and oral health."

#### Making enrollment easy for Californians

The Covered California website makes it easy to see what plans are available in enrollees' neighborhoods. While health insurance providers are categorized according to region, dental insurance is grouped according to ZIP code, Lee explained.

"If you put in your ZIP code, it tells you exactly what plans are available to you," he said.

Each plan also offers the same type of coverage, which is part of an effort to make the benefits standardized, according to Lee. Standardized coverage can help enrollees compare plans "apples to apples," he said.

However, adult dental coverage can only be added if the enrollees purchase a health plan, which does not help adults who already get medical benefits through an employer or other means. Covered California's open enrollment and renewal period began on October 12, 2015, and continues through January 31, 2016.



# Still no health insurance? Tax penalties for 2016 going up

By: Stephanie O'Neill  
Jan. 18, 2016

The third open enrollment period under the Affordable Care Act will draw to a close at the end of this month and California officials are warning those who go without health insurance in 2016 that they may face some hefty fines come tax time.

Under the Affordable Care Act, most Americans must either have health insurance or pay a penalty. This year, that penalty climbs to \$695 for an insured adult and \$347.50 for an uninsured child under age 18 or 2.5 percent of household income, whichever is greater.

An uninsured family of four that doesn't qualify for an exemption from the coverage requirement under the federal health law faces a 2016 tax penalty of between \$2,085 and \$9,936, according to Covered California, the state's insurance marketplace.

State officials say there are more than 750,000 Californians who make enough income that they must get insurance. Most of them are eligible for subsidies to offset the cost of their plans.

Many of the uninsured don't qualify for coverage because they're in the U.S. illegally.

Open enrollment ends on January 31st. After that, the only way to buy insurance before the next open enrollment period in the fall is by qualifying for special enrollment, which is open to those who experience certain life events, including marriage, divorce or job loss.

The deadline to sign up for health coverage that starts on Feb. 1 was Jan. 15. For those who sign up between Jan. 16 and Jan. 31, coverage starts on March 1.

The penalty for those who have insurance for part of the year will be prorated.



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## Prescription Drug Cost Caps Take Effect

By: Ben Bradford  
Jan. 4, 2016



Three years ago, Charis Hill was 26, and she was diagnosed with a rare type of arthritis called Ankylosing Spondylitis. Basically, bone spurs are fusing her spine together. There's one drug to treat it.

"That keeps me alive basically," Hill says. "That slows the disease—there's no cure. But it's also a really expensive drug."

Hill says when she first enrolled in an insurance plan through Covered California—that's the state's health insurance marketplace—a refill would have cost her \$2,000. She couldn't afford it, until she found a subsidy from the drug's manufacturer.

Starting January 1st, Covered California limits how much insurance companies can require patients with hepatitis, HIV and other diseases requiring specialty drugs to pay for prescriptions. Most plans cap the cost of these specialty drugs at \$250 per month.

Hill says the new policy provides security that she'll be able to afford treatment.

"There's certain level of fear that comes with living with a disease that doesn't ever go away," Hill says. "And, going into a new medication knowing that I will not have to pay over \$250 a month for it is good."

Insurance companies say that passes more of the drug cost to them, and they will be forced to raise premiums as a result.

In 2017, the caps will extend to all California health insurance plans.



## **Covered California Identifies Uninsured Populations In San Diego County**

By: Kenny Goldberg  
Dec. 14, 2015

Covered California has identified hot spots where relatively large numbers of uninsured residents live.

The exchange has designated six such hot spots in San Diego County, where it plans to concentrate its enrollment efforts. The six areas are: parts of the the South Bay, parts of East County, the city of San Diego south of Interstate 8, and the North County cities of Escondido, Vista and San Marcos.

The Vista Community Clinic does outreach seven days a week to try to enroll people in Covered California or the Medi-Cal program. The clinic's chief operating officer, Michelle Monroe, said people are surprised at what's available.

"There's a lot of word out there that there's these really high deductibles and a lot of out-of-pocket costs, and when they actually look at the numbers and the plans that they're eligible for, they find it can be very reasonable," Monroe said.

The Vista Community Clinic has 59,000 patients. Monroe says about one in five is uninsured.

Statewide, Covered California estimates 750,000 people are eligible for a subsidized health plan, but remain uninsured.

Exchange officials said as of Dec. 13, more than 140,000 Californians had enrolled in coverage. This year's open enrollment period ends Jan. 31.