

AFFORDABLE CARE ACT

We Can Do This

BY JEFF TIEMAN

The opportunity is profound. For the first time since Medicare was enacted, our nation has the opportunity to enroll millions of uninsured — representing many age groups and demographics — in new health coverage. For some families, this will be the first time they have been able to afford meaningful, reliable insurance to cover their acute, routine and preventive medical needs. Many others will gain access to coverage after being treated for a serious condition that insurers used as an excuse to reject their application. Hard-working Americans who earn a paycheck but still cannot afford health care will become eligible for assistance paying premium costs, or for the Medicaid program that has been expanded to include more low-income individuals.

The Affordable Care Act (ACA) made all of this possible. The law, more commonly referred to as “Obamacare,” has been maligned, mistreated, ignored and misrepresented. Most of the people who stand to benefit from its provisions are unaware of their eligibility. A sizeable portion of the American public is not sure the law is even still on the books, and many others think the ACA moves us to a system of socialized medicine (it does no such thing, since most people who get new coverage will be enrolled through a private insurance company).

The good news? Well, whether one is inclined to support or oppose the ACA, it is the law. It is on the books, passed by Congress, signed by the president, affirmed by the U.S. Supreme Court. This is no longer a piece of legislation, or a proposal, or an optional path forward. It is statute. It is already in effect:

Young adults are staying on their parents’ plans until the age of 26 — because of Obamacare.

Children cannot be denied health coverage for having a pre-existing condition — because of Obamacare.

Seniors can afford more of their prescription drugs and receive a free “Welcome to Medicare” physical — because of Obamacare.

Millions received insurance rebates last year — because of Obamacare.

Lifetime limits on coverage are now a thing of the past — because of Obamacare.

Obamacare is already working, and it can do so much more if allowed to succeed.

Small businesses across the country have received help paying insurance costs for their employees — because of Obamacare.

In January 2014, the list will expand to include millions of newly enrolled people who obtained affordable, private coverage through the state marketplaces. For individuals and families, this means peace of mind, health security and fewer bankruptcies due to medical debt. For hospitals and health systems, this means more insured patients and less uncompensated care. And for the health system overall, it means more widely spread risk that can reduce costs and preventive care that keeps people from getting sick in the first place.

The ACA is not a perfect law, and the online marketplaces have unfortunately experienced some technical glitches. The Catholic Health Association is working with Congress and the administration to make sure such challenges are quickly addressed and that the law is implemented effectively. Meanwhile, President Barack Obama has urged patience while the technology infrastructure is upgraded.

The bottom line, however, is that Obamacare is already working, and it can do so much more if allowed to succeed. The most immediate priority is to sign up eligible people (open enrollment takes place between Oct. 1, 2013 and March 31, 2014).



Plain and simple: we need to get them covered. And Catholic health care, along with partner organizations and coalitions, is playing a major role in doing so.

ENTER ENROLL AMERICA

CHA is a founding partner in Enroll America, a broad-based coalition working to educate Americans about new coverage options and sign up those who are newly eligible. Enroll America's grassroots campaign, GetCoveredAmerica, employs every imaginable tactic to reach eligible people — targeted advertising, social media outreach, door-to-door canvassing, community partnerships and even sophisticated data mining to find people who qualify and get word to them.

Enroll America has staff on the ground in 10 states with the greatest numbers of uninsured. In other states, regional coordinators are available to connect hospitals and health systems with other community organizations. As partners, those groups are working together to raise awareness, answer questions and help consumers navigate the new state marketplaces that are now online.

Working closely with the Enroll America staff and other health care organizations, CHA helped develop a tool kit on presumptive eligibility, the process that enables hospitals to enroll patients in Medicaid on the spot so that their care is paid for until an official coverage determination can be made.

Enroll America also has widely promoted CHA's video, "Ready, Get Set, Enroll," an animated

information piece describing the state marketplaces, presumptive eligibility and new benefits available as a result of the ACA.

WE KNOW HOW TO DO THIS

When the State Children's Health Insurance Program (SCHIP) was instituted in 1997, the Catholic community played a major role in educating the public and getting kids signed up. By 2003, nearly 600,000 families had been assisted in completing applications for Medicaid and SCHIP, resulting in nearly 350,000 children enrolled.

The effort included some 8,500 community education campaigns at parishes, schools and other local venues, and 43,000 people trained to assist in completing applications. "The positive impact of health insurance for these children cannot be overstated," concluded a report by Children's Health Matters, a coalition of Catholic health and human service organizations that worked to help families obtain coverage for their children.

According to a Kaiser Family Foundation study cited in the report, after one year of enrollment, 99 percent of children had a regular source of medical care. Unmet need or delayed care decreased to 16 percent of children compared with 57 percent when the study began. Such statistics demonstrate that enrollment matters. Health coverage made a difference for those children, and now it can make a difference for millions of others who are gaining access to insurance, often for the first time in their lives.

WHAT HOSPITALS ARE DOING — AND CAN STILL DO

1. Send letters and enrollment information to eligible patients. Many CHA members are identifying uninsured persons in their databases and sending letters with information on the new state marketplaces and enrollment.

2. Convene health fairs and enrollment events. When "Cover the Uninsured Week" was a popular annual event, Catholic-sponsored health care providers always led the pack with health fairs and enrollment events where members of the community could check their blood pressure and find out about new insurance options for themselves and their families.

3. Publicize the marketplaces, and direct consumers and patients to www.healthcare.gov, the hub for researching and obtaining coverage. Hospital newsletters, web sites and social media channels are excellent places to share resources, spread the word and answer questions. There is still a lot of confusion about the ACA and enrollment. We can be a reliable source of information for those who are lost in the clutter.

4. Partner with other local groups to distribute information; conduct education and awareness campaigns; convene health and enrollment events; share important facts and perspectives with local news media; and contribute to local public service advertising.

5. Keep information readily available. CHA, Enroll America and other groups have information cards, posters and other resources ready to give patients and others who have questions. Physicians, nurses, administrators, hospital front-desk greeters and others do not need to know everything about the ACA, but they should have information ready to share when questions arise.

Despite the ongoing misinformation and efforts to sabotage the ACA, the law is working for millions already. A report released in September 2012, for instance, concluded that 6.8 million consumers saved an estimated \$1.2 billion on health insurance premiums in 2012, due to the “rate

review” provision of the law, which holds insurance companies accountable for rate increases.

Although public opinion research shows opposition and confusion about the ACA, it continues to be true that the more people know, the more they approve of the law. This has been the case since before the law even passed. An NBC poll conducted in September 2013, for instance, found that support for the law is highest among those who say they know the most about it.

CHA and its members worked for decades to achieve health coverage for all — leaving no one behind because of income or pre-existing conditions or lack of a job, respecting the dignity of every person by making sure they have access to quality, affordable health care.

The ACA we supported is not perfect — and it will continually evolve and improve as we learn how its various provisions work in reality. So far, the prognosis is good — even better if we sign up the millions of people who are eligible for new coverage right now. So, get out there, answer a question, hand out a pamphlet and sign someone up.

We can do this.

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