

Written by

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Health reform has been headline news for months across the United States, and has generated questions among Minnesota consumers as they look at their health coverage needs during open enrollment. The Minnesota Department of Commerce has put together a list of Frequently Asked Questions to help cut through the confusion and be a reliable source for important insurance information.

Some Minnesotans have received letters from their health insurance company, describing the consumer protections that are required beginning in 2014. Commissioner Rothman has asked the CEOs of Minnesota's health insurance companies to redouble their consumer outreach efforts to these consumers to ensure that Minnesotans understand all of their health insurance options – through MNSure and the private marketplace. Consumers who have questions about continuing their health coverage can receive expert advice through the Commerce Department Consumer Response Team at 651-539-1600, or 1-800-657-3602 (MN only outside metro area).

The Commerce Department reminds consumers that if they enroll in an insurance plan through MNSure prior to December 31, 2013 and the first premium payment is received by MNSure or the insurance company by the end of the day on January 10, 2014, they can get coverage effective January 1. The coverage is effective even if the insurance card has not yet arrived. Clinics and hospitals can contact insurance providers to verify coverage in the event that consumers visit their doctors prior to receiving their insurance cards.

"Consumers will need to know about ID cards, and other coverage questions," said Commerce Commissioner Mike Rothman. "The Department is a trusted resource working to provide key information to Minnesota consumers to help them with questions, clear any confusion, and make the best health insurance coverage decisions – fitting their financial and health needs."

Frequently Asked Questions:

- **I applied and paid the premium for a new insurance plan but I haven't received my ID card yet. Can I go to the doctor? How do I know if I have coverage?**

o If you enrolled in a plan through MNSure prior to December 31, 2013 and the first premium payment is received by MNSure or the insurance company by the end of the day on January 10, 2014, you can get coverage effective January 1. Once your coverage is effective, you can go to the doctor to get care. Your doctor can contact your insurance company to verify your coverage, even if you haven't received your ID card yet. (These deadlines apply to coverage purchased through MNSure. If you have purchased a plan outside of MNSure, contact your insurance company directly for more information.)

- **How long do I have to enroll in coverage?**

o Open enrollment for individual and family plans ends on March 31, 2013. You can enroll in a new plan any time during open enrollment. After open enrollment, you will only be able to change your plan or buy new coverage if you experience a qualifying event, like getting married or divorced, having a child, or losing health insurance that was provided by your job.

- **What are the new benefits that have been added to my health insurance plan?**

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o Consumer protections and preventive services under the Affordable Care Act are giving Minnesotans more for their health care dollars. The ACA benefits individuals and families in the following ways:

o Better protection against medical bankruptcy due to lower deductibles and out-of-pocket limits

Beginning in 2014, individual plans will cap out-of-pocket expenses at \$6,350 for the year. Lowering this out-of-pocket cap means that if you get sick, you won't be at risk of not being able to pay very high medical bills and will be able to better avoid medical bankruptcy.

o No lifetime or annual dollar limits on benefits

In the past, some people with serious or chronic illnesses ran out of insurance coverage because their health care expenses reached a dollar limit imposed by their insurance company. Beginning in 2014, insurers can no longer impose lifetime or yearly dollar limits on essential health benefits.

o No limits or exclusions due to pre-existing conditions, and you can't be denied enrollment in a policy (or charged more) because of a pre-existing condition

Not only can insurers no longer deny you a policy because of a pre-existing health condition, they can't limit your coverage once you're on the plan or make you pay a higher premium for that plan.

o Fully covered preventive care

Since 2010, preventive care has been covered 100% for people of all ages under all new health insurance plans, including federally recommended cancer screenings, diabetes, cholesterol and blood pressure screenings, and vaccinations.

o Other benefits are being added for comprehensive coverage when needed

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- **Mental health care/substance use disorder care.** Not only do individual policies need to include these important services, the benefits must be the same as the equivalent medical services. For instance, you can't have a higher copay for a visit with a psychologist than a visit with a medical doctor.
- **Clinical trial coverage.** Clinical trials for life-threatening conditions like cancer have not always been covered, but starting in 2014, this coverage will be available for people who need to explore new treatment options.
- **Maternity care.** . Now moms can be assured that they will get the coverage they need for their prenatal, labor and delivery, and postnatal care.
- **Can I keep my current health insurance plan?**

o Yes, in Minnesota, insurance companies cannot cancel your individual or family health plan coverage unless the company is no longer selling insurance in that market.

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o If you have an individual or family health insurance plan that you bought before March 23, 2010, you can remain on that policy without any major changes to your benefits.

o If you have an individual or family health insurance plan that you bought after March 23, 2010, you can keep your current benefits but the plan may require some changes. You'll be getting more coverage, better benefits, and consumer protections that were not available before 2014.

o It is important to know that if you automatically renew your plan, you will not qualify for federal subsidies through MNsure and may miss out on an opportunity to find new coverage at a lower cost. It is important for consumers to shop around and compare your plan with the new products to find the best plan that fits your needs before renewing.

• If my policy can't be cancelled, why did I get a letter from my insurance company?

o Insurance companies send a notice if your benefits change or your premiums go up – this happens on an annual basis. This year, because many changes needed to be made to insurance policies for 2014, about 140,000 Minnesota consumers received letters from their insurance companies outlining what these changes were and what their options would be for next year.

o These were not termination notices but were required to let consumers know how their plans were modified to include the consumer protections that are an important part of the Affordable Care Act.

• What if my policy is unaffordable?

o Beginning in 2014, your insurance plan will include better benefits, more coverage, and consumer protections. If you received a renewal letter explaining the change in benefits and monthly premium – you are encouraged to shop around to see what other plans may fit your health care and financial needs.

o MNsured.org is Minnesota's health insurance marketplace where you can easily compare coverage available in your area and make the best choice for you and your family. If your income is below 400% of the federal poverty level, you may also qualify for lower premium payments or for help paying your deductible. You can also work with an agent or broker, or directly with your insurance company, to find other coverage options available to you.

• Where can I go to get help if I have questions?

o If you received a letter from your insurance company and you're not sure what it means, we encourage you to call your insurance company directly.

o If you need further help, you can contact the Consumer Response Team at the Department of Commerce by calling 651-539-1600, or 1-800-657-3602 (MN only outside metro area). You can also email the team at consumer.protection@state.mn.us.

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o MNsured.org is a great place to start if you want to compare new health insurance plan options. Open enrollment goes until March 31, 2014. You can also work with a broker, navigator or in-person assister if you need help enrolling. Information about these assisters is available on the MNsure website.

o MNsure representatives are available to answer questions in the MNsure Contact Center at 1-855-3-MNSURE (1-855-366-7873).

Source: The Minnesota Department of Commerce