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# ACA enrollment focuses on the uninsured

# Where to go for help

www.HealthCare.gov www.enrollamerica.org www.CoverNJ.org New Jersey Citizen Action: 973-273-0315 or 888-829-3711 Center for Family Services: 877-922-2377 Virtua: 888-847-8823 Lourdes Health System: 1-856-624-7142

# By JENNY WAGNER

STAFF WRITER

NORTH BRUNSWICK — As a first-year medical school student at Rowan University School of Osteopathic Medicine, Jay Darji worries a lot about his family's health.

Until last month, the 25-yearold Lumberton resident was uninsured for about a year and a half, and his parents still don't have coverage.

"I know the consequences

of not being on top of routine screenings and things going unchecked," Darji said.

His father, Yogesh Darji, 53, has Type 2 diabetes, and while he tries to manage the disease as best he can, any doctor visits or emergencies that may occur mean big bills for him and his wife, Sunita Darji, 47.

"My parents are business owners, but ... recently financially things have been tough, and insurance was one of the things that they had to sacrifice in order to keep things afloat with their business," Darji said.

So when Darji heard a recruitment talk by Aakash Shah, of Be Jersey Strong, a student-led grassroots movement formed to help New Jersey residents get health insurance, the message really hit home.

Soon after, Darji, who turns 26 next week, got coverage through the state's Medicaid program, NJ FamilyCare, and he signed up with Be Jersey Strong to be a co-captain at his campus in Stratford, leading student volunteers who will help people get covered when open enrollment begins Sunday.

In addition to helping the community, Darji wants to help his parents find an affordable plan that they will be willing to pay for as well.

"They want to have insurance; it's just the affordability factor," Darji said.

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# ACA

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Three years after the Affordable Care Act's main provisions took effect, it's people like Darji and his parents, who have been uninsured and have questions and concerns about coverage and affordability, that enrollment assisters and groups, including Be Jersey Strong, are trying to reach.

But that goal will be harder to achieve this open enrollment period, said Maura Collinsgru, health care program director at New Jersey Citizen Action, a consumer organization that works with a coalition of more than 60 partners called NJ for Health Care to provide enrollment help, outreach and education in the state and in Burlington County.

About 9.9 million people got coverage through the state and federal marketplaces as of the end of June, including nearly 200,000 New Jersey residents, according to the most recent data from the U.S. Department of Health and Human Services.

In September, HHS reported that an estimated 17.6 million uninsured people have gained health insurance coverage since Jan. 1, 2014, when combining marketplace enrollment with Medicaid programs and other individual plans.

The uninsured rate has fallen to 12.6 percent across the country as of the third quarter of 2015, down from 20.3 percent in the same quarter two years before.

While there may not be debilitating website traffic on HealthCare.gov or long lines of people at enrollment events this season, it doesn't mean less work for enrollment assisters such as Collinsgru.

The Affordable Care Act in New Jersey has been a "success," Collinsgru said, because nearly 700,000 people got coverage through the health insurance marketplace or Medicaid during the first two open enrollment periods.

"Those who were most anxious and most hungry to get the insurance came in early," she said. But the harder-to-reach populations are still out there.

In a September speech at Howard University College of Medicine in Washington, HHS Secretary Sylvia M. Burwell agreed that this enrollment period will be a challenge. "But while those remaining uninsured may be harder to reach, we're working smarter to reach them. We know Americans are depending on us, and we're doing everything we can to help them find the coverage they need," Burwell said.

A Kaiser Family Foundation report earlier this month showed that 40 percent of uninsured people come from low-income working families, and that people of color are at higher risk of being uninsured.

## 940,000 REMAIN UNINSURED

In New Jersey, more than 940,000 people remain uninsured. Of those, 36 percent, or about 335,000 people, are eligible for Medicaid, and 14 percent, or about 131,000 people, are eligible for tax credits in the marketplace, according to another Kaiser report in October.

"So, there's a lot of people out there, that basically there's money on the table, and that's really the message that we're trying to get out," Collinsgru said.

Another 50 percent of uninsured people in New Jersey are ineligible for financial assistance because of income, citizenship, or because they can get insurance through work, according to Kaiser.

The grass-roots enrollment coalition — which, in addition to Collinsgru's organization, includes the Healthcare Foundation of New Jersey, Be Jersey Strong and Faith in New Jersey, to name a few — has been strategizing for months on how to maximize enrollment capacity throughout the state.

The members work together to cover everyone, everywhere. For instance, if one group needs to provide enrollment assistance in a language spoken by a student volunteer with Be Jersey Strong, Shah can send that volunteer to help.

It takes some creative thinking sometimes to find the people who are not being reached, said Robin Stockton, director of the navigator exchange program for the Center for Family Services, which receives federal funding to provide enrollment assistance in the seven counties in South Jersey, including Burlington.

"It's broader than just health insurance enrollment; it's understanding the communities that we're working in and serving," Stockton said.

Neil Deegan, Pennsylvania director for Enroll America, which helps support the coalition's efforts in New Jersey, said a lack of knowledge





JENNY WAGNER / STAFF

Maura Collinsgru (left), health care program director for New Jersey Citizen Action, listens as William McGee, of Jewish Renaissance Medical Center, answers a question about the Affordable Care Act written on a

beach ball during an icebreaker activity at a "Get Covered Academy" training for enrollment assisters on Friday.

about options and eligibility as well as other barriers such as language prevent many of the people who remain uninsured from getting coverage.

"For many folks, it's because for so long they've been told that they can't afford it ... or they have a pre-existing condition and they are uninsurable. And those things are no longer true," Deegan said.

Certified application counselors and navigators, who are trained to provide free, unbiased help with health insurance coverage, as well as organizations such as Enroll America, say they also will be encouraging others who already have a plan to check out their options before they automatically are re-enrolled.

According to the most recent county-level data from Health and Human Services, more than 11,752 marketplace plans were selected in Burlington County during the last open enrollment from Nov. 15, 2014, through Feb. 15, and the first few days of special enrollments through Feb. 22. Of those, more than 2,800 were automatic re-enrollments.

"Even if people are happy with their plan, we really encourage them to come back into the marketplace and review what's out there," Deegan said.

This week, HHS announced that there will be a 5 percent increase for "second-lowest-cost silver plans" offered in New Jersey in 2016, which are the plans used by the government to determine tax subsidies.

About 83 percent of people who have enrolled through the marketplace in New Jersey receive such subsidies, which average about \$306 per month, according to HHS. And about 38 percent of New Jersey marketplace enrollees got coverage for \$100 or less in 2015.

The different metal levels categorize plans in the marketplace based on costs. For example, at the bronze level, generally premiums are lower but copays are higher, and at the platinum level, generally premiums are higher and copays are lower. In 2016, a 40-year-old

In 2016, a 40-year-old making \$30,000 per year in Burlington City could see premiums between \$171 and \$207, according to figures through Enroll America's online Get Covered Calculator tool.

When open enrollment begins, Enroll America plans to roll out a new tool on its website to help people more easily compare different plans and what they include, such as access to a specific doctor or drug, Deegan said. It also provides a locator tool to find local enrollment assistance, as does CoverNJ. org, which is operated by the enrollment coalition and New Jersey Citizen Action.

### 'HEALTH INSURANCE IS AFFORDABLE'

"What we do feel confident in is health insurance is affordable," Deegan said. "There have been increases in some plans, but there is a huge variety of plans that are available on the marketplace to meet every need and every person."

Cost is almost always the first thing people look for when selecting a plan, Stockton said. And in Burlington County, her navigators also get a lot of questions about utilization of plans, as well as hospital access and tiering.

The latter two issues are at the center of a statewide controversy surrounding Horizon Blue Cross Blue Shield of New Jersey's new lower-cost OMNIA Health Alliance plans, which reward consumers who use select doctors and hospitals.

Horizon, which is the state's largest insurer, announced the new plans last month. They feature lower

premiums and out-of-pocket costs for consumers who use hospitals and doctors that are partnering in its alliance, as well as 12 other hospitals identified as Tier 1 providers.

The alliance and Tier 1 list excludes some New Jersey hospitals, notably all three of Burlington County's acute-care hospitals: Virtua Memorial in Mount Holly, Virtua Marlton in Evesham, and Lourdes Medical Center of Burlington County in Willingboro.

Horizon's selections sparked an outcry from some hospitals and state lawmakers, who fear that those hospitals will be at a competitive disadvantage and that the insurer's choices will impact access to care.

Horizon officials have said the new plans are intended to begin reducing the cost curve in health care. The company continues to offer its broad network plans, which include the three county hospitals, and consumers who purchase the new OMNIA plans will not be penalized for using those network hospitals, although the enhanced savings will be reserved for trips to the alliance and Tier 1 hospitals.

Helping consumers sort through these types of issues is one of the tasks the Center for Family Services performs.

They help explain terms such as "in-network" and "preferred hospital" and the differences between an HMO, PPO and EPO. And the navigator group also provides support for people after they've enrolled in a plan, or with troubleshooting and advocacy when they experience snags.

"We really will stick with somebody start to finish," Stockton said. "And part of that is because we have really been charged with focusing on the quality of the work more so than the quantity of the work.

"Of course, we want to enroll as many people as possible, but we really have been charged with, 'Do the right job by each consumer you work with.' And that's a lovely way to work, truthfully," she said.

Working with a navigator or another enrollment assister increases the chances that a person will get covered, said Carol Lynn Daly, marketing director for Lourdes Health System. While it doesn't provide enrollment assistance to the general public, Lourdes works with the coalition and has conducted focus groups on the barriers.

"It's the intimidation of dealing with this stuff and the lack of understanding," Daly said.

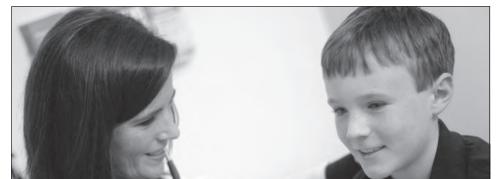
In addition, a survey by the Commonwealth Fund earlier this year found that eight out of 10 people who got coverage through the marketplace or Medicaid received help in the enrollment process.

People who want to get help should make an appointment sooner rather than later this year, as the open enrollment period begins Sunday and lasts through Jan. 31 — shorter than in previous years.

Dec. 15 is the last day to register for coverage that begins Jan. 1. In addition, people who don't sign up by the end of January and who don't qualify for a special enrollment period because of a life event such as a wedding or a move could face a steep penalty at tax time the following year for not having coverage.

The fine applying to 2016 will go up to \$695 per uninsured adult or 2.5 percent of the household income.

Jenny Wagner: 215-949-5718; email: jwagner@calkins.com; Twitter: @ATJWagner.



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