



## **What Valley Residents Need to Know** *- about -* **Health Care Reform**

**Beginning October 1, 2013, Valley residents will have the opportunity to sign up for quality, affordable health care. Representative Tony Cárdenas is committed to making sure everyone who lives in the Valley has all of the information needed to take advantage of federal programs created to insure all Americans.**

**If you have insurance right now, your plan stays the same. This means if you get your health insurance through work, if you have Medicare or if you are a member of California Healthy Families, you keep that coverage.**

**If you don't have health insurance right now, you might be eligible for the Medi-Cal expansion, subsidies to participate in the Health Insurance Marketplaces being run by Covered California, or services from community health centers located throughout the Valley.**



## HOW HEALTH CARE REFORM BENEFITS THE SAN FERNANDO VALLEY

- ✓ *Most people in the new Health Insurance Marketplaces will pay the same or less than they do for their coverage now. This is because more than 80% of those buying coverage in the Marketplaces will qualify for premium tax credits, which will cut what an individual actually pays in premiums in many cases.*
- ✓ *Your insurer cannot drop you when you get sick.*
- ✓ *Your insurer can no longer impose a lifetime limit on your coverage.*
- ✓ *Your insurer must give you the option of having your young children stay on or join your employer provided plan until they turn 26.*
- ✓ *You have free coverage of key preventative services such as mammograms and colonoscopies.*
- ✓ *Your insurer cannot discriminate against you if you have or develop a pre-existing condition (Jan. 2014)*
- ✓ *You are protected by a cap on your out-of-pocket costs.*
- ✓ *You have free preventative services for all plans in the marketplace.*
- ✓ *Medicaid will expand to include adults up to 138% of the Federal Poverty Level, covering over 21 million new Americans. This means thousands of families in the Valley will be eligible for Medi-Cal.*



## How does health care reform make insurance more affordable for me?

- 1) **Tax Credits:** Tax credits are available to help lower the cost of health coverage for individuals and families who meet certain income requirements and do not have affordable health insurance from an employer or a government program that meets minimum coverage requirements.
- 2) **Cost sharing subsidies:** Cost-sharing subsidies reduce the out-of-pocket amount of health care expenses an individual or family has to pay.
- 3) **Medi-Cal assistance:** Starting in 2014, the State of California is planning to expand the Medicaid program (called Medi-Cal in California) to cover people under age 65, including people with disabilities, with income of less than \$15,856 for a single individual and \$32,499 for a family of four.

Below are some examples of potential costs to California families:

ANNUAL INCOME	MONTHLY PREMIUM AFTER FEDERAL SUBSIDY
\$23,550 - \$35,325	\$39 - \$118
\$35,326 - \$47,100	\$119 - \$247
\$47,101 - \$58,875	\$248 - \$395
\$58,876 - \$94,200	\$396 - \$746

Here is a chart showing how health insurance will be made more affordable for people in the Valley:

IF YOU ARE...	THEN YOU QUALIFY FOR...
 An individual making less than \$15,415*	Medi-Cal, a free government program.
 An individual making \$15,415 to \$27,935*	You qualify for help in paying out-of-pocket costs like deductibles and co-pays. You also qualify for a tax credit that will lower the amount of your monthly premium.**
 An individual making \$27,936 to \$44,680*	You qualify for a tax credit that will lower the amount of your monthly premium.**
 An individual making over \$44,680	You do not qualify for government assistance but you are still eligible to buy health insurance through Covered California.
 A family of four making less than \$31,810*	Medi-Cal, a free government program.
 A family of four making \$31,810 to \$57,635*	You qualify for help in paying out-of-pocket costs like deductibles and co-pays. You also qualify for a tax credit that will lower the amount of your monthly premium.**
 A family of four making \$57,636 to \$92,200*	You qualify for a tax credit that will lower the amount of your monthly premium.**
 A family of four making over \$92,200*	You do not qualify for government assistance but you are still eligible to buy health insurance

\*Income levels are based on the year 2012

\*\*You must enroll through Covered California to be eligible for your tax credit

## How do I enroll?

### Key Dates:

- **October 1, 2013** - Enrollment in the Marketplace begins
- **January 1, 2014** - Health coverage in the Marketplace begins
- **March 31, 2013** - Open enrollment in the Marketplace ends

### Using the Marketplace:

Starting October 1, 2013, you can enroll in health care coverage through the Health Insurance Marketplace (Covered California) at [coveredca.com](http://coveredca.com).

Through the Marketplace, you can compare all your options and find out if you can get lower costs on monthly premiums or get free or low-cost coverage.

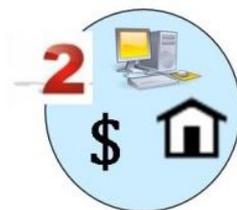
When you're ready to enroll, you'll decide how you pay your premiums or get help signing up for Medi-Cal or CHIP if you're eligible.

### How the Marketplace Works



#### 1. Create an Account

First provide some basic information. Then choose a user name, password, and security questions for added protection.



#### 2. Apply

Starting October 1, 2013 you'll enter information about your family, including your income, household size, and more.

Visit [coveredca.com](http://coveredca.com) to get a checklist to help you gather the information you'll need.



#### 3. Pick a Plan

Next you'll see all the plans and programs you're eligible for and compare them side-by-side.

You'll also find out if you can get lower costs on monthly premiums and out-of-pocket costs.



#### 4. Enroll

Choose a plan that meets your needs and enroll!

Coverage starts as soon as January 1, 2014.

### Preparing to Apply:

Before open enrollment begins, you can explore your options, prepare to apply, and sign up for Covered California updates.

Covered California offers different types of health plans to meet a variety of needs and budgets. You'll need to figure out how much you want to spend on health coverage each month.

To find out how much you're eligible for when you apply, it will help to have these things close by:

- Social Security numbers (or document numbers for legal immigrants)
- Birth Dates
- Pay stubs, W-2 forms, or "Wage and Tax Statements"
- Policy numbers for any current health insurance
- Information about any health insurance you or your family could get from your jobs.

### Which plan is right for me?



Starting in 2014, all new health insurance sold to individuals and small businesses must be classified as one of **four levels of coverage** – *bronze*, *silver*, *gold* or *platinum*.

You can choose to pay a higher monthly premium for a *platinum* or *gold* plan so that when you need medical coverage, you pay less. Or you can choose to pay a lower monthly premium for a *silver* or *bronze* plan, but when you need medical coverage, you pay more. In addition, a *catastrophic* plan will be available to those who are under 30 years old or can provide a certification that they are without affordable coverage or are experiencing hardship. A sample list of standard benefits for the four levels of coverage is below:



**2014**

### Standard Benefits for Individuals

KEY BENEFITS	Bronze	Silver (Lower Cost Sharing Available on Sliding Scale)	Gold	Platinum
	Benefits in Blue are subject to Deductibles		Copays in the Yellow Sections are NOT subject to any Deductible and Count Toward the Annual Out-of-Pocket Maximum	
Deductible (if any)	\$5,000 Deductible for Medical and Drugs	\$2,000 Medical Deductible	No Deductible	No Deductible
Preventative Care Copay	No Cost- at least 1 yearly visit	No Cost- at least 1 yearly visit	No Cost- at least 1 yearly visit	No Cost- at least 1 yearly visit
Primary Care Visit Copay	\$60- 3 visits per year	\$45	\$30	\$20
Specialty Care Visit Copay	\$70	\$65	\$50	\$40
Urgent Care Visit Copay	\$120	\$90	\$60	\$40
Generic Medication Copay	\$19	\$19	\$19	\$5
Lab Testing Copay	30%	\$45	\$30	\$20
X-Ray Copay	30%	\$65	\$50	\$40
Emergency Room Copay	\$300	\$250	\$250	\$150
High cost and Infrequent services like Hospital Care and Outpatient Surgery	30% of your plan's negotiated rate	20% of your plan's negotiated rate	HMO Outpatient Surgery- \$600 Hospital- \$600/day up to 5 days PPO- 20%	HMO Outpatient Surgery- \$600 Hospital- \$600/day up to 5 days PPO- 10%
Imaging (MRI, CT, PET Scans)	30%	\$250	\$250	\$150
Brand medications may be subject to Annual Drug Deductible before you pay the copay	\$50-\$75 after meeting deductible	Meet \$250 deductible then pay the copay amount	No Deductible	No Deductible
Preferred brand copay after Drug Deductible (if any)	\$50	\$50	\$50	\$15
MAXIMUM OUT-OF-POCKET FOR ONE	\$6,350	\$6,350	\$6,350	\$4,000
MAXIMUM OUT-OF-POCKET FOR FAMILY	\$12,700	\$12,700	\$12,700	\$8,000

## Choosing From Several Quality Private Health Insurance Plans:

- Every health insurance plan in the Marketplace will offer comprehensive coverage, from doctors to medications to hospital visits.
- The Marketplace will enable you to easily compare your insurance options based on price, coverage quality and other features important to you.
- All information on the health plans must be in easy-to-understand language and there can be no fine print.
- Every health insurance plan in the Marketplace is required to meet basic standards, including quality standards and access to a range of doctors and clinicians.
- Clear information on plan premiums, deductibles, and out-of-pocket costs must be provided, before you decide to enroll, so you know what you are buying.
- Every health insurance plan in the Marketplace will provide free coverage for preventive services.

### What happens if I don't sign up?

If you do not have health coverage, by January 1, 2014, you will be required to purchase coverage (unless you fall into certain limited exceptions). If you do not have coverage, you will pay a tax penalty. The penalty will be the higher of the following:

YEAR	PER ADULT	PER CHILD	FAMILY MAX		% OF TAXABLE INCOME
2014	\$95	\$47.50	\$285	or	1.0%
2015	\$325	\$162.50	\$975	or	2.0%
2016	\$695	\$347.50	\$2,085	or	2.5%

### If I am ineligible for federal assistance, are there other options?

For those who do not have health insurance and are ineligible for federal assistance, the Valley has a number of community health centers that can help with your medical needs and provide preventative care:

COMMUNITY HEALTH CENTER	ADDRESS	PHONE #
El Proyecto Del Barrio	8902 Woodman Avenue, Arleta CA 91331	(818)830-7033
Valley Community Clinic	6801 Coldwater Canyon Ave, North Hollywood CA 91605	(818)763-8836
Mission City Community Network	9919 Laurel Canyon Blvd, Pacoima CA 91331	(818)895-3100
Northeast Valley Health Corporation	1172 N. Maclay Avenue, San Fernando, CA 91340	(818)365-8086

For more information, call (800) 300-1506 or visit [www.coveredca.com](http://www.coveredca.com). Congressman Cárdenas also has a number of tools available on his website at <http://cardenas.house.gov/media-center/articles/enroll-the-valley>.