



Health Insurance Options for Part-Time or Low Income Employees

Presentations by:

Joy Tapper, Executive Director, Milwaukee Health Care Partnership

Caroline B. Gómez-Tom, MSW, Director of Patient and Community Engagement, Sixteenth Street Community Health Centers

John Barlament, Partner, Employee Benefits Group, Quarles & Brady

August 28, 2019

Ascension SE Wisconsin

Wauwatosa, WI

Executive Summary

Representatives from employers, providers, brokers, consultants and other stakeholders gathered on August 28 at Ascension SE Wisconsin in Wauwatosa to attend the fifth symposium of BHC Group's 2019 Delivering Value Series. The Series was created to impart in-depth knowledge about the best in class innovative employer solutions in BHC Group's portfolio.

Access to health care through adequate and affordable health insurance coverage is key to improving the health and well-being of individuals and our community. While most employers offer health insurance to their full-time employees, they struggle to identify health insurance options for part-time or low wage employees. Lack of health insurance can lead to poor health outcomes and financial instability for employees, resulting in productivity and turnover issues for employers. Representatives from the Milwaukee Enrollment Network and Attorney John Barlament shared insights about how to help employees gain health insurance coverage.

Introduction

- **An opportunity to look at options for part-time, low income or transitioning employees that have lower costs for both employers and employees**
 - BHCG will replicate the symposium next year because of its value as a topic

Joy Tapper, Milwaukee Health Care Partnership

- **Milwaukee Health Care Partnership (MHCP)**
 - Thirteen year old public/private consortium made up of the four Milwaukee health systems, the five federally qualified health centers, the Medical College of Wisconsin and the city, county and state health agencies
 - Came together to improve health care access for low-income, vulnerable populations in Milwaukee County in order to improve health outcomes, reduce disparities and lower the total cost of care
 - 33% of Milwaukee County residents are enrolled in the Medicaid program; 49% of all children in the county are enrolled in Medicaid
 - Core functions are to: assess and build awareness of needs; develop and implement a plan of improvement; evaluate and inform public health care policies and practices; secure funding for priority initiatives; measure and report outcomes; and act as a clearing house
- **MHCP priority – adequate and affordable coverage and enrollment with a focus on low income populations**
 - Core objective is to reduce the uninsured rate by enrolling those eligible in Medicaid, preventing “churn” and promote enrollment in the Marketplace and other options
 - Milwaukee County: Pre-ACA, 12.6% were uninsured, post-ACA, 7.2% (higher than the state, but have made great progress in reducing the uninsured rate– 42% decrease) through Medicaid and Marketplace enrollment but expect an uptick in the uninsured
 - Majority of uninsured are 19-64; 70% are unemployed
- **Milwaukee Enrollment Network**
 - 100 organizations; 160 Enrollment Assistants
 - Consumer and mobilizer outreach/education; direct enrollment assistance and renewal; outcomes measurement and network management
 - Work with target populations (employees not eligible for benefits, employers with high cost employer coverage, low income employees’ dependents, transitioning employees like early retirees or those laid off)

Caroline B. Gómez-Tom, Sixteenth Street Community Health Centers

- **ACA is still the law of the land**
 - Only the individual penalty is gone

- Confusion about it – 17% decline in enrollment in Milwaukee County(a lot due to misinformation)
- Options available to almost everyone
- Only 5.4% of people were uninsured in WI in 2017 – down from 9.4% before the ACA
- ACA eliminated barriers for pre-existing conditions, expanded Medicaid in many states – WI has partial expansion
 - Allowed children to stay on parents’ coverage until 26, provided financial assistance, mandated essential health benefits and required everyone to have insurance
- **Employers and non-employer based insurance**
 - Employers should care about non-employer-based insurance options to promote a healthy workforce, enhance productivity, provide access to expanded benefits like prevention and early intervention services, avoid additional costs and be a good corporate citizen
 - Types of employees who may not qualify or afford employer coverage
 - Low wage earners with “unaffordable”(monthly cost for employer plan is over the 9.89% of household income), may be eligible for Marketplace coverage and financial assistance
 - Part-Time or limited-term employees who may not qualify for employer plan, may be eligible for Medicaid or Marketplace coverage
 - Early retirees or those affected by lay-offs (one of the most common reasons), may qualify for a more affordable option than COBRA
 - Family members who don’t qualify for employer plan, may be eligible for Medicaid or Marketplace coverage or more affordable options
 - Affordability worksheet and other health insurance literacy resources are available at coveringwi.org/learn; employer coverage tool is at healthcare.gov
- **Health Insurance Options**
 - Employer-sponsored health insurance
 - Medicare – must be 65 or over, receiving Social Security Disability or have end-stage kidney disease
 - BadgerCare Plus (Medicaid) – low-income eligibility (adults, parents and children); can sign up at any time at access.wi.gov
 - Many children are eligible even if a parent has employer coverage
 - Medicaid purchase plan – disabled but still working, above federal poverty level but can pay a premium
 - Medicaid benefits are comprehensive; need to renew every 12 months by providing updated income info
 - ACA Marketplace – most everyone is eligible but financial help is based on income
 - Anyone who is not eligible for the other options can enroll
 - Open enrollment is Nov. 1- Dec. 15 (special enrollment periods are available for qualifying events)
 - Financial assistance: premium tax credit; cost sharing assistance

- Four organizations are offering plans on the Marketplace in the Milwaukee market
 - Insurance options for children aging out of parents' coverage
 - Their own employer coverage
 - COBRA
 - Marketplace
 - Medicaid
 - Insurance options for immigrants
 - Lawfully present individuals may have some options (should seek assistance in understanding options)
 - Children born in the US may be eligible even if parents are not
 - Undocumented immigrants have coverage under BadgerCare Plus Prenatal and Emergency Services
 - A [health insurance options worksheet](#) is available online
- **Enrollment assistance**
 - Dial 2-1-1 or text 898-211 to be connected to in-person enrollment assistance
 - ACA Navigators (federally funded) – there to help understand options but not to select for someone
 - Agents/brokers – help with Marketplace and Medicare (have referral list); help with complicated medical needs (paid by commission)
 - Certified application counselors (CAC) – work at health systems or health centers
 - Income Maintenance Workers – help with access to BadgerCare, Foodshare and other public benefits
 - Wisconsin Navigator Collaborative – has a grant to serve statewide in person and by phone
 - Health Insurance Connector Tool – help to book an appointment with a navigator – coveringwi.org/enroll
 - Covering Wisconsin Health Insurance Navigators – 414-270-4677

[Slides](#) from Joy Tapper's and Caroline B. Gómez-Tom's presentations are available for review.

John Barlament, Quarles & Brady

- **Enrollment of low income and part-time employees**
 - ACA requires that large employers offer “good” health plan coverage to 95%+ of full-time employees
 - Nothing prevents an employer from going beyond requirements (ACA) and offering coverage to part-time employees
 - There are business reasons to offer coverage (e.g., ACA lookback rules, help to pass nondiscrimination testing, improve employee health, reduce turnover, etc.)
 - Legal requirements (anti-dumping) prevent employers from providing incentives for employees to seek coverage elsewhere (Marketplace, BadgerCare, etc.) but they can provide information about Medicaid and other options

- Can make coverage cheaper for lower income employees (salary bands)
 - Lowering deductibles can be complicated; cannot favor the high deductible plan
- **Individual Coverage Health Reimbursement Arrangements (ICHRA)**
 - Are permissible in 2020 with specific legal rules
 - Can create a separate class of employees to receive ICHRA
 - Minimum participation rules
 - Employer's cost is fixed and known (a chosen amount into ICHRA to reimburse for individual policy)
- **There are resources to direct employees to non-insurance plans**
 - Association health plans, health care sharing ministries (subject to some regulatory crackdowns)
 - Even if employers offer part-time employees coverage, it doesn't prevent them from accessing the ACA (may not be eligible for financial assistance)
 - Employees with questions should be directed to enrollment assisters; BHCG would support a pilot program to bring enrollment assisters onsite

[Slides](#) from John Barlament's presentation are available for review.