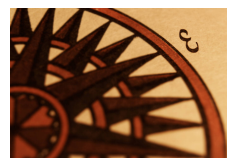


Finding Health Insurance...

Navigating the Marketplace For
Children and Youth With Special
Health Care Needs





Finding Health Insurance... Navigating the Marketplace For Children and Youth With Special Health Care Needs is a booklet to assist with finding insurance. This booklet is a combination of existing community resources created by [Family Voices of Wisconsin](#), [Healthcare.gov](#), and the [Off to College Transition Booklet](#).

For the most up to date information please visit www.healthcare.gov.

Language specific to insurance can be confusing. A list of common terms and definitions are underlined on each page and a full list of common terms and definitions begins on page 12.

There is a list of resources at the end of this booklet.

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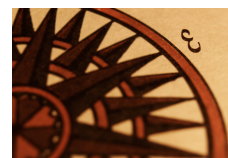
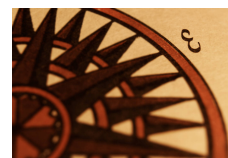


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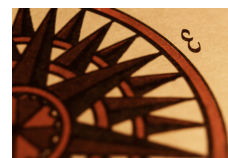
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WHY DO YOU NEED INSURANCE? WHAT YOU NEED TO KNOW

It is important to have health insurance and medication coverage in order to maintain your health. You can always talk with your health care team about current coverage and options within the marketplace. There are many insurance plans and options to choose from. Please, use this manual as a tool to help you find the best option for your child's medical needs.

Keep in mind, all health insurance plans do not include dental and/or eye insurance. These may both be purchased separately depending on the plan chosen.



HOW TO CHOOSE INSURANCE

THE OPTIONS:

1. Open Marketplace?

To search online and begin the enrollment process during **open enrollment** visit <https://www.healthcare.gov/marketplace/b/welcome/>

2. Staying covered under a parent's health insurance plan?

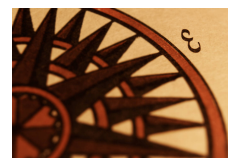
Under the Affordable Care Act, children can stay covered under their parent's insurance until the age of 26, regardless of full time college attendance.

3. Private Insurance?

Find out if your employer or union offers insurance options. Employer plans are usually offered at lower **premiums** than the **marketplace**. If you have a job, check if you qualify for insurance. If you are job searching, consider the importance of benefits in your search.

4. Public (Government) Health Insurance?

Some states offer health insurance plans for single adults, without dependent children, who are considered low income. Common categories for insurance plans are Medicare, Medicaid, Medicaid Waiver Programs, Children's Health Insurance Program (CHIP), Military Health Care, State plans (see number 5), and the Indian



Health Service. These plans offer wide coverage at no cost or very little **premiums**.

5. Do you qualify for a state health insurance plan for low-income individuals?

For Wisconsin residents, find out if you are eligible for Wisconsin's State Public Insurance at, <https://access.wisconsin.gov/>

6. Social Security Disability Insurance (SSDI)?

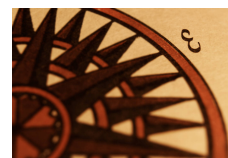
You may be eligible for disability benefits due to your chronic condition. Different benefits exist for children and adults. For more information visit <http://www.ssa.gov/pgm/disability.htm>

7. Supplemental Security Income (SSI)?

You may be eligible if you have limited income to meet basic needs for food, clothing, and shelter. For more information visit <http://www.ssa.gov/ssi>

8. If you are a student, does your college offer student health insurance?

Call the student health clinic to inquire about plans and eligibility. These plans are normally offered at a lower cost than private health insurance but services for a chronic health condition may not be fully covered.



IMPORTANT DATES

Each year there are two **open enrollment periods** within the Marketplace to acquire health care coverage. For current enrollment period information visit <https://www.healthcare.gov/what-key-dates-do-i-need-to-know/#part=1>

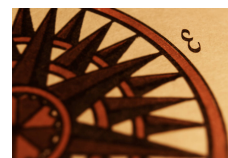
January 1st of each year (the end of **open enrollment**) you are required to complete one of the following:

- Enroll in an insurance plan through the **Marketplace**, or
- Maintain your current employer sponsored plan, or
- Acquire Medicare or Medicaid coverage.

If you do not secure coverage you will have to pay a **penalty** the next year.

If you miss the **open enrollment period** you can still get coverage in special cases including:

- Tried to enroll by deadline but didn't finish
 - Visit <https://www.healthcare.gov/what-if-i-tried-to-enroll-by-march-31-but-didnt-finish-in-time/>
- Marriage, birth, or adoption
- A move outside your service area
- Loss of health coverage
- Applying for Medicaid or CHIP
 - Visit <https://www.healthcare.gov/how-can-i-get-coverage-outside-of-open-enrollment/#part=3>



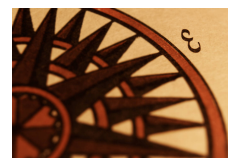
For other special cases see the healthcare.gov full list at <https://www.healthcare.gov/how-can-i-get-coverage-outside-of-open-enrollment/>

If a **qualifying life event** occurs you have 60 days to enroll in a health plan through the **Marketplace** despite **open enrollment period**.

IMPORTANT NOTE: You can apply for and enroll in Medicaid/BadgerCare or CHIP at any time of year.

Please visit <http://www.dhs.wisconsin.gov/health-care> for updates on:

- Changes to BadgerCare+ eligibility
- Current Federal Poverty Levels
- Other Wisconsin Health Care Concerns



WHAT HAPPENS IF I DO NOT HAVE COVERAGE?

Starting in 2014, everyone living in the United States is required to have a health insurance plan under the Affordable Care Act. If you do not have [minimum essential coverage](#) by the deadline you will be responsible for paying a [penalty](#) fee. This fee is due at the time of completing your yearly federal income tax return.

You have three months to remain uninsured while seeking insurance. If you still do not have [minimum essential coverage](#) after the three-month period a monthly penalty will be applied.

PENALTY FEES

Penalty fees are calculated yearly one of two ways:

1% of your yearly household income

OR

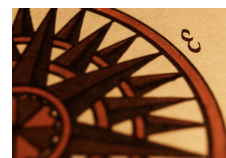
\$95 per adult and \$47.50 for each child under 18

The maximum amount per family is \$285

You will be required to pay the **higher** amount.

The fee will increase every year, adjusting for inflation.

Learn more about penalties and minimum essential coverage through visiting the Internal Revenue Service (IRS) website at <http://www.irs.gov/uac/Questions-and-Answers-on-the-Individual-Shared-Responsibility-Provision>



PULMONARY SPECIFIC

Frequently Asked Questions

The following list of questions may help you to determine what plan is best for your situation. Contacting an [agent/broker](#) or [navigator](#) can assist in determining which insurance is best for you.

What if my plan does not have an in-network pulmonologist?

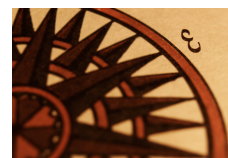
Can I see a specialist (pulmonologist) outside of my [network](#)?
Does this include labs, x-rays, pulmonary function tests?

Will it cost me more if I choose to see a provider outside of my [network](#)?

What medication coverage is provided?
You can ask for a list of covered medications or provide them with a list of your current medications.

What equipment and supply coverage is provided?
For example, vest, nebulizer/compressor, g-tube supplies, feedings...

Consult your healthcare team for assistance on answers you receive.



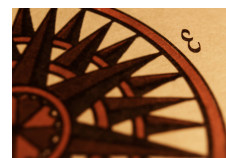
COMMON TERMS AND DEFINITIONS

Learning the “language” of insurance can be confusing. Here is a list of common terms and definitions. For a complete glossary of other terms related to insurance, please visit <http://www.healthcare.gov/glossary>.

Agent/Broker – a person or business licensed by the state that helps people to apply for or help pay for insurance coverage. They can also help enroll in a [Qualified Health Plan](#) through the [Marketplace](#). Some [agents/brokers](#) are hired by insurance companies to sell their insurance plans.

Copayment – The amount of money you have to pay out of pocket when you go to a clinic visit or buy medications. The dollar amount of a [copayment](#) will vary depending on each insurance plan. *For example, your medication costs \$200.⁰⁰ but with insurance you only pay \$20.⁰⁰ as a [copayment](#) and the rest is paid by insurance.*

Deductible – The amount of money you have to pay out of pocket before your insurance will pay a medical expense. *For example, if your office visit bill totals \$3,000.⁰⁰ but your [deductible](#) is \$300.⁰⁰ you have to pay the \$300.⁰⁰ and insurance will pay for the remaining \$2,700.⁰⁰. [Deductibles](#) may not apply to all services. [Copayments](#) and [deductibles](#) are typically not both used within the same service; it is one or the other.*

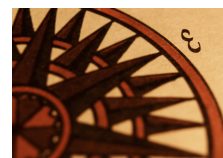


Enrollment Period (Open/Closed) – When open, the period of time in the [Marketplace](#) where people who are eligible to enroll in a [Qualified Health Plan](#) have the opportunity to do so. If enrollment is closed a person must wait until enrollment reopens or meet the requirements of a [qualifying life event](#).

Essential Health Benefits – Qualified insurance plans offered in the Marketplace have to include the following services: clinic visits; emergency room visits; hospitalization; maternity and newborn care; mental health and substance use services; behavioral health treatment; medicine; rehabilitation services and equipment; laboratory services; preventive and wellness services; chronic disease management; and pediatric services, including oral and vision care.

Health Maintenance Organization (HMO) – This is one type of health insurance plan that limits the hospitals and doctors you can visit and continue to have insurance help with payment. An HMO may require you to live or work “In-[Network](#)” to be eligible for coverage. HMO’s often provide integrated care and focus on prevention and wellness.

Marketplace (Health Insurance Marketplace) – The online system for determining health care coverage options within the ACA. This allows you to compare insurance plans, choose a plan, and enroll in coverage. The [Marketplace](#) will show costs, benefits, and other features for each insurance plan available. The Marketplace has information about financial assistance programs (Medicaid, Medicare, SSDI, Children’s Health Insurance Program) for low to moderate-income levels.



Minimum Essential Coverage – The requirement for insurance every person must meet in order to not face [penalties](#). Coverage can include market policies, job-based coverage, Medicare, Medicaid, Children’s Health Insurance Program, TRICARE, and other certain coverage.

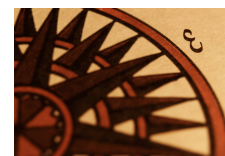
Navigator – An [unbiased](#) person or organization that is trained to help people seeking insurance in the [Marketplace](#). They are a free service and can also assist with completing eligibility and enrollment forms.

Network – The facilities, providers and suppliers your health insurer or plan has contracted with to provide health care services. In-[Network](#) refers to the hospitals and doctors the HMO will provide coverage for. Out-of-[Network](#) will require [out of pocket](#) expenses unless an emergency is present.

Out-of-pocket Maximum – The most you pay before health insurance begins paying for all [essential health benefit](#) covered services. This maximum is reached through [deductibles](#), coinsurance, [copayments](#), or other qualified medical expenses.

Penalties – The consequences you can face if you do not have insurance. See page 10 for specific details.

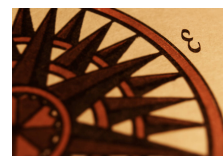
Premium – The amount you pay for your health insurance or plan. This payment occurs monthly, quarterly, or yearly depending on the plan. Either you or your employer pays this cost. When employed, you and your employer may have an agreement as to how much you pay. *For example, the [premium](#) is \$50.00 per month but your employer may offer to pay 80% of your insurance [premium](#).*



Qualified Health Plan – An insurance plan that is certified by the **Marketplace**. This plan provides **essential health benefits**, follows established limits on **deductibles**, **copayments**, and **out of pocket maximum** amounts.

Qualifying life event – Unexpected events can occur during closed health insurance coverage **enrollment periods**. This **qualifying life event** could make you eligible for a **Special Enrollment Period**. *Examples of **qualifying life events** are moving to a new state, certain changes in your income, and changes in your family size (for example, if you marry, divorce, or have a baby).*

Special enrollment period – A time outside of the **open enrollment period** during which you and your family have the right to sign up for health coverage. You generally qualify for this 60-day-period if a **qualifying life event** has occurred. Job-based plans generally allow special enrollment periods of 30 days.



RESOURCES

National:

U. S. Government Health Care Reform – Where to go to sign up for the marketplace during an open enrollment period and learn more about and ACA:

<https://www.healthcare.gov/>

U.S. Department of Commerce – Understanding the definitions behind health insurance regarding private, public, Medicaid etc.:

<https://www.census.gov/hhes/www/hlthins/methodology/definitions/cps.html>

Catalyst Center - National Center dedicated to improving healthcare coverage and financing for Children and Youth with Special Health Care Needs:

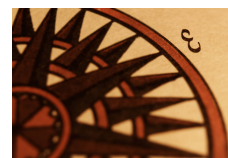
<http://hdwg.org/catalyst/>

Center for Consumer Information and Insurance Oversight – Oversees the implementation of the provisions related to private insurance and helps states establish new Marketplaces: <http://www.cms.gov/ccio/index.html>

Cystic Fibrosis Legal Hotline – A free hotline providing information about laws that protect the rights of individuals with Cystic Fibrosis.

Contact CFLegal@sufianpassamano.com or call (800)622-0385.

Families USA – Current updates and education about the ACA: <http://familiesusa.org/issues/affordable-care-act>

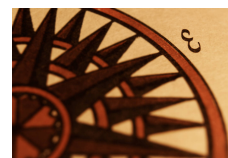


Kaiser Family Foundation - A leader in health policy analysis, health journalism and communication, the Kaiser Family Foundation is dedicated to filling the need for trusted, independent information on the major health issues facing our nation and its people:

<http://kff.org/about-us/>

Internal Revenue Service (IRS) – Learn more about penalties through visiting: <http://www.irs.gov/uac/Questions-and-Answers-on-the-Individual-Shared-Responsibility-Provision>

Social Security Disability Application – Learn more about how to apply for disability benefits for yourself or a child at: <http://www.ssa.gov/pgm/disability.htm>



RESOURCES

Wisconsin:

Enrollment for Health Wisconsin – A Wisconsin based website designed to directly assist and enroll WI residents in the Marketplace. This site also has up to date information on ACA reform.

<http://e4healthwi.org/>

Family Voices of Wisconsin – Work is focused on health care access, coverage and community supports and services for children and youth with disabilities and special health care needs. <http://fvofwi.org/publications/factsheets/>

Regional Center for Children and Youth with Special Health Care Needs – More questions and assistance with accessing resources or services should call 1.800.642.7837 to find the nearest Regional Center or visit:

<http://www.dhs.wisconsin.gov/health/children/RegionalCenters/index.htm>

State Health Insurance Application - Find out if you are eligible to receive BadgerCare Plus, Medicaid and FoodShare at: <https://access.wisconsin.gov/>

Wisconsin Council on Children and Families – Advocates for the well-being of all children, further resources on their publications tab with updates on the ACA.

<http://www.wccf.org/category/health-care/>

