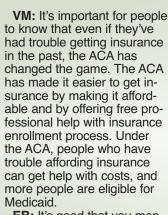
Take charge of your health today. Be informed. Be involved.

Get Covered America!

This month, the "Take Charge of Your Health Today" page focuses on health insurance and the importance of enrollment. Vianca Masucci, health advocate at the Urban League of Greater Pittsburgh, and Esther L. Bush, president and CEO of the Urban League of Greater Pittsburgh, exchanged ideas on this topic.

VM: Good morning, Ms. Bush. It's always a pleasure to see you, especially when we get an opportunity to talk about health insurance. It's a topic that's getting a lot of national attention.

EB: Since the Affordable Care Act (ACA) has been passed, health insurance is all you hear about. And I personally think that's a good thing! Before the ACA, there were only a handful of ways to get affordable health insurance. Now, in states like Pennsylvania that have decided to expand Medicaid, there are great opportunities for people to get covered. Everyone should take advantage of these opportunities.



EB: It's good that you mention that, Vianca. Getting insurance can be confusing. Inperson help makes this process much easier. ACA navigators and Certified Applica-

insurance. There's no charge for their ser-



ESTHER BUSH

vices. The health insurance marketplace opened on November 1. These navigators and counselors have already begun helping people all over the city. You may even start noticing enrollment events in your neighborhood. encourage everyone to take advantage of these services. Ask questions! These professionals will help you.

VM: You're right, Ms. Bush. I've seen flyers about enrollment events! The Get Covered America website is an excellent resource for people to find in-person help in their area. Enroll America has more information in their article elsewhere on the page.

tion Counselors (CACs) can help anyone get There is a "Find Free Help" tab that allows people to find navigators or CACs in or near

their zip code. People can even get insurance in the comfort of their own home by accessing the health insurance marketplace online or by phone.

EB: That's great information, Vianca. No matter how people decide to do it, it's important to get health insurance. Health insurance can help you pay for care so that you don't have to live with illness or discomfort, as some people without insurance do. Health insurance can help you see a doctor regularly so that you can resolve health issues before they become major problems that affect your life. We all know how expensive health care can be. But you never want to be in a situation where you have to put a dollar value on your health because good health is priceless.

VM: Powerful words, Ms. Bush. Thank you for sharing them. I look forward to hearing your opinion on next month's topic—alcohol use. For more information or with questions, e-mail partners@hs.pitt.edu.

> FROM COVERAGE TO CARE

Making the

most of

your new

coverage

Thanks to the Affordable

Care Act, millions more peo-

ple in the U.S.-many for

the first time—now have

quality health insurance

through the marketplace,

benefits, people need to un-

health

A Roadmap to Better Care and a **Healthier You**



Four Things **Pittsburghers** Need to Know about the ACA

It's that time of year again-health insurance enrollment. This year's Affordable Care Act (ACA) open enrollment period runs from November 1 to January 31. Open enrollment is the time of year when anyone who is eligible can enroll in a health plan through the health insurance marketplace.

Enroll America (www.enrollamerica.org) is offering four tips that every Pittsburgher should remember to #GetCovered and #StayCovered in 2016:



1. FINANCIAL HELP IS AVAILABLE: In 2015, more than 80 percent of Pennsylvanians who applied for coverage got financial help to make their plan truly affordable. The average amount of monthly financial assistance for 2015 plans is \$220.

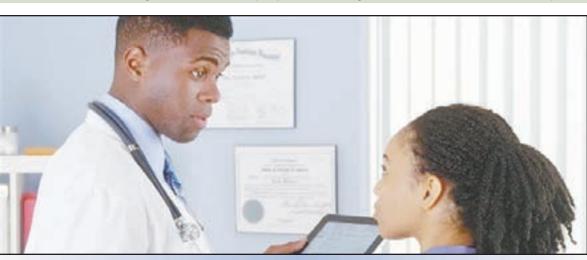
2. THERE IS FREE, IN-PERSON ASSIS-TANCE TO HELP YOU SIGN UP: People are trained to help you find the best coverage for you. They offer unbiased, one-onone advice. To find an appointment near you, visit GCAConnector.org or call 2-1-1.

3. TAKE ACTION TO RENEW YOUR COVERAGE: If you signed up for a plan last year, open enrollment is the time to review and make changes to your coverage. People who already enrolled should update their personal and financial information to ensure that they're still getting the right level of financial help.

4. HEALTH CHOICES PROVIDES FREE OR EXTREMELY LOW-COST COVERAGE TO LOW-INCOME PENNSYLVANIANS:

Health Choices, Pennsylvania's new Medicaid program, is open to any Pennsylvanian who earns less than 138 percent of the federal poverty level (the federal poverty level is \$11,770/year for individuals and about \$24,250/year for a family of four, according to the U.S. Department of Health and Human Services). You can enroll in Health Choices any time in the year.

Enroll America is the nation's leading health care enrollment coalition. An independent, nonprofit, nonpartisan organization, Enroll America works with more than 4,600 partners in all 50 states and the District of Columbia. The organization works to create cutting-edge tools, analyze data, inform policy and share best practices in service of its mission: maximizing the number of Americans who enroll in and retain health coverage under the Affordable Care Act.



Navigating the health insurance landscape

The price of health care in the U.S. is very high. Health insurance helps people afford those costs. Very few people can pay for doctor's visits, procedures or hospital care without having health insurance to help cover some or all of the bills. Many people receive health insurance through their jobs, but not every job has insurance benefits, and not everyone is able to work. Having health insurance isn't guaranteed, which can be dangerous to people's overall health.

It's important to note how important health insurance is. Research shows that people are healthier when they have health insurance.

"People are more likely to delay necessary or preventive care because they cannot afford regular doctor's visits," says Julie M. Donohue, PhD, associate professor and vice chair for research in the Department of Health Policy and Management at the University of Pittsburgh Graduate School of Public Health. "We also have research that shows people who lack health insurance do not live as long as people who have it. People wait to fill a prescription or

skip doses because they cannot afford medication."

Before the Affordable Care Act (ACA) went into effect in 2014, millions of people lived without health insurance. Most of the uninsured were people below age 65 and above age 18 (nearly all people above age 65 are covered by Medicare, and many states offer health insurance to qualifying children). "Before ACA began, about 50 million people in the U.S. were uninsured—almost one in five nonelderly adults," said Dr. Donohue. "ACA isn't intended to be universal care. We knew that, even with requiring everyone to have health insurance, not everyone would participate. ACA is meant to fill the serious gaps in coverage."

According to Dr. Donohue, the largest risk factor for being without health insurance is having a low income—at or near the federal poverty level. "Many people who are working full-time in a low-wage job are right around that poverty line. And, even if you were poor, you wouldn't necessarily qualify for programs like Medicaid prior to ACA." People in racial and ethnic minority groups also tend to be at higher risk for lacking health insurance coverage.

The health insurance landscape, however, has changed a lot in the past few years. Politicians have argued about the perceived costs of ACA, whether health insurance should be required and many other concerns. But, said Dr. Donohue, "There has been so much negative attention paid to ACA. It's easy to lose sight of the fact that this legislation has created new opportunities for people to gain coverage, improve financial security and improve their health.



JULIE M. DONOHUE, PHD

coverage available."

Dr. Donohue recommends that people who are interested in health insurance coverage start by going to https://www.healthcare.gov. ACA set up two new sources of coverage (one new and one an expansion of an existing source of coverage). Healthcare.gov is what's known as the insurance exchange or marketplace. This is a website where people can set up an account. After they enter some basic information, like where they live and their income, they can find out what plans are available to them and at what cost. There are private health insurance plans like UPMC and Highmark and big national companies like Aetna and United that offer products with different monthly costs and benefit packages.

Dr. Donohue also points out that the majority of people getting coverage through these marketplace plans aren't paying 100 percent of the cost themselves. They are getting help from the federal government. Cost is on a sliding-scale basis. The subsidies begin at incomes at 100 percent of the federal poverty level (which is \$11,770/year for individuals and about \$24,250/year for a family of four, according to the U.S. Department of Health and Human Services) and go all the way up to people at 400 percent of the poverty level (those with incomes in the \$90,000 range) getting at least part of their monthly premium offset through a tax subsidy. If people's income is below 138 percent of the federal poverty level, they could be eligible for Medicaid if they are in a state like Pennsylvania that has decided to expand its Medicaid coverage (which just

started in 2015). The annual open enrollment period starts November 1. But if people's circumstances change outside of the enrollment period—they lose their jobs or coverage-they do not have to wait until next November to enroll. They can enroll immediately. For more information about enrollment, go to www.enrollamerica.org.



really well for the 165 million people who have it. But lots of people lose their jobs, have jobs that don't come with health insurance or want the flexibility to leave their jobs without losing their coverage. I would encourage

Employment-based

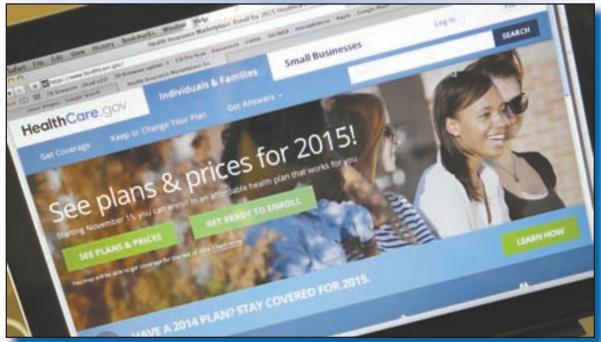
people to look past the politics and look at the



services they need to be and stay healthy. That's why the Centers for Medicare and Medicaid Services (CMS) launched an initiative called "From Coverage to Care" (C2C). C2C is designed to help consumers understand and use their new coverage. It also provides information and resources to health care providers and staff to help them better connect and form effective partnerships with newly insured patients.

On the C2C website (marketplace.cms.gov/c2c), consumers and health care providers can find a variety of resources, including a discussion guide; a series of videos to help educate the newly insured about their coverage and accessing care; and a document "Roadmap to Better Care and a Healthier You." The "Roadmap" is a step-by-step guide that explains health insurance terminology; the difference between primary and emergency care; how to make an appointment with a primary care provider; what to expect when visiting a provider's office; and the importance of recommended preventive services, among other things. The "Roadmap" also provides a list of helpful resources, a personal health screening log and is available in several languages.

Please visit marketplace.cms.gov/c2c for more information. For information about the health insurance marketplace, go to www.healthcare.gov.



(AP Photo/Don Ryan)



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Urban League of Greater Pittsburgh

Celebrating 95 Years of Service

Changing Lives.



