

# **The Health Insurance Marketplace:** Expanded Access, Smarter Spending, Better Care and Healthier People

Kevin Counihan  
CEO, Health Insurance Marketplace  
October 2016

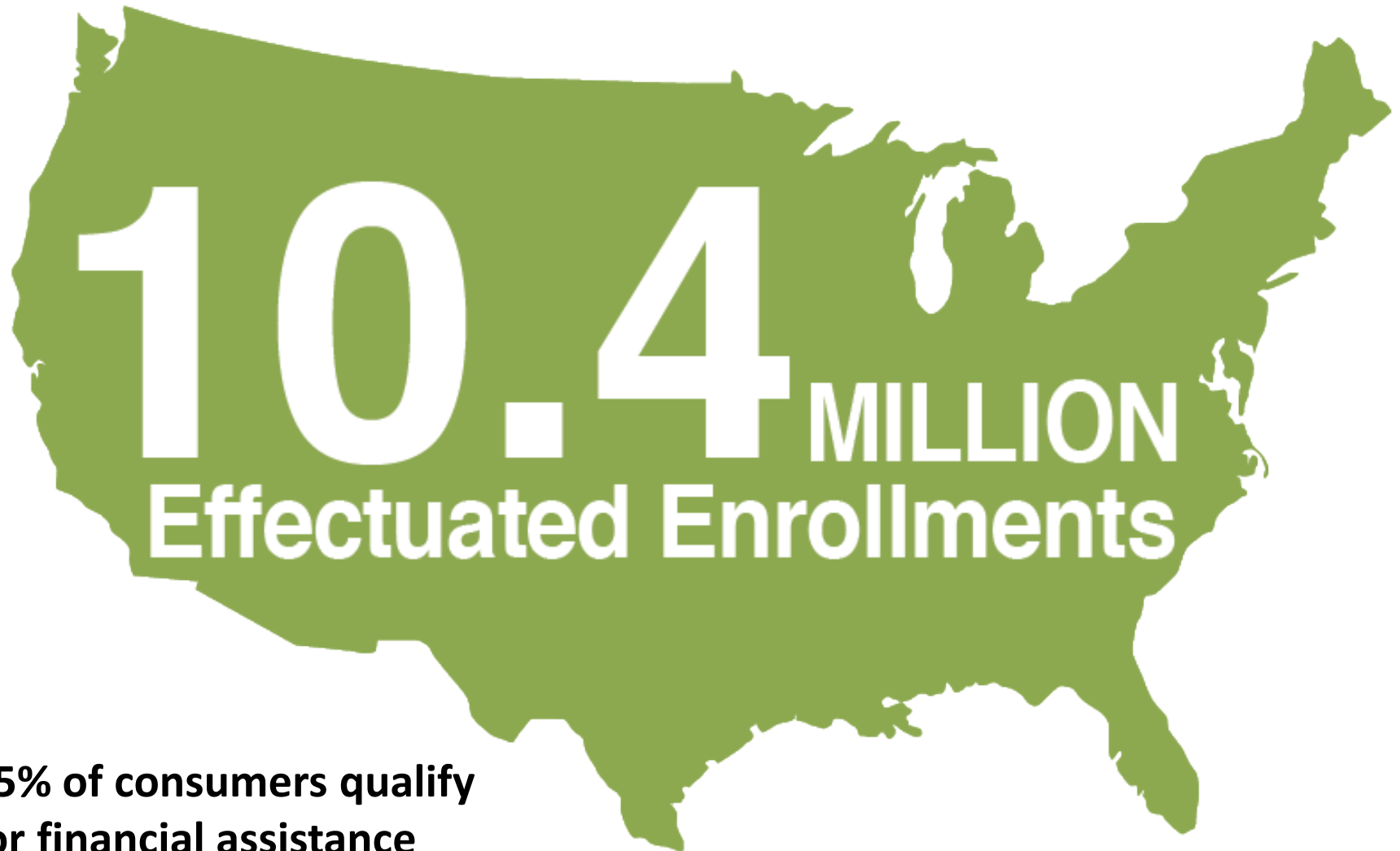
# Roadmap

1. ACA by the Numbers
2. Game Changers
3. Marketplace Stability
4. Innovation
5. Upcoming Open Enrollment and Continuous Improvement
6. Looking Forward

# ACA By the Numbers

- **129 million adults** can no longer be denied coverage for a pre-existing condition
- **105 million Americans** no longer have a lifetime limit on their health coverage
- **137 million Americans** are benefiting from preventive care coverage
- **2.3 million young adults** gained health insurance coverage due to the ACA provision allowing young adults to remain on a parent's plan until age 26

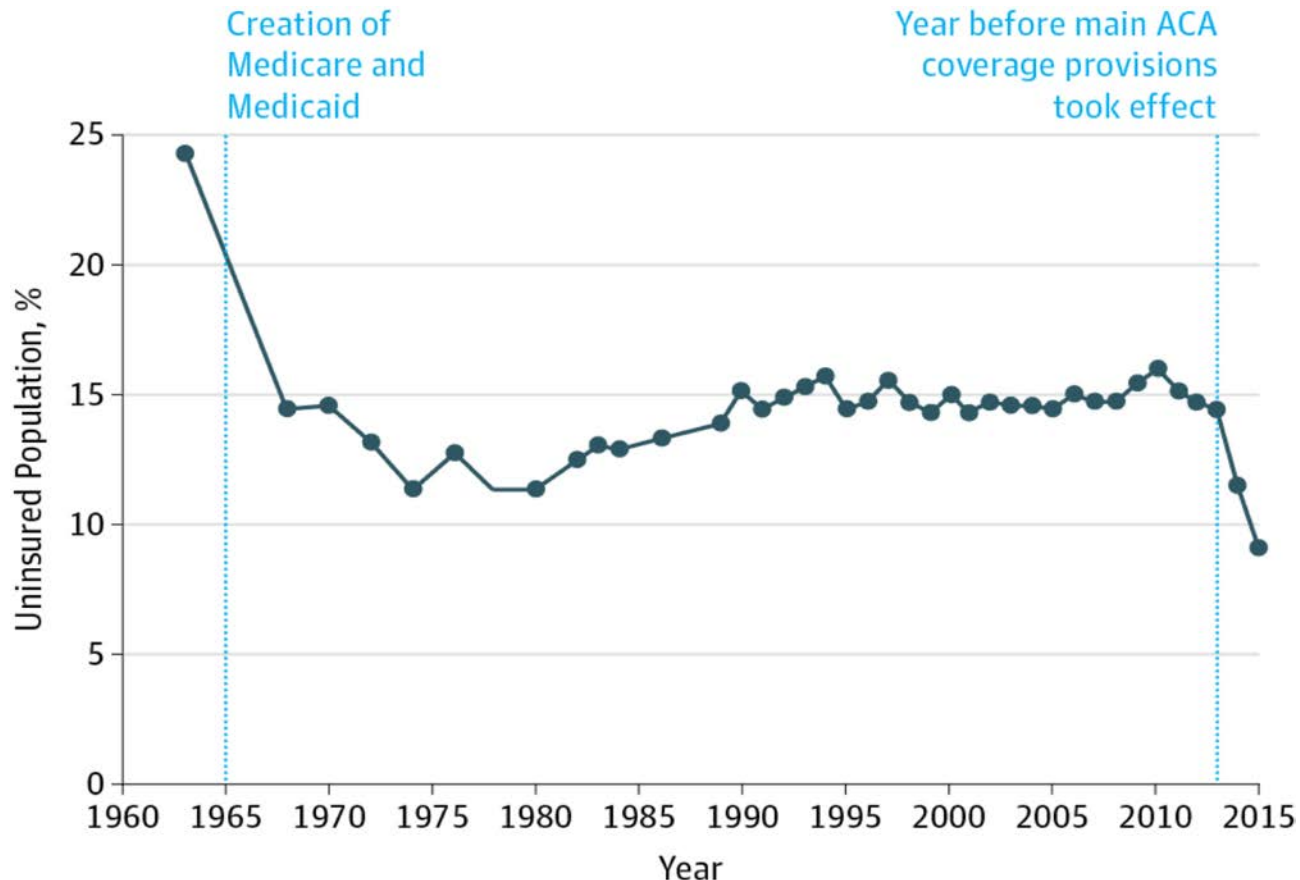
# Health Insurance Marketplace



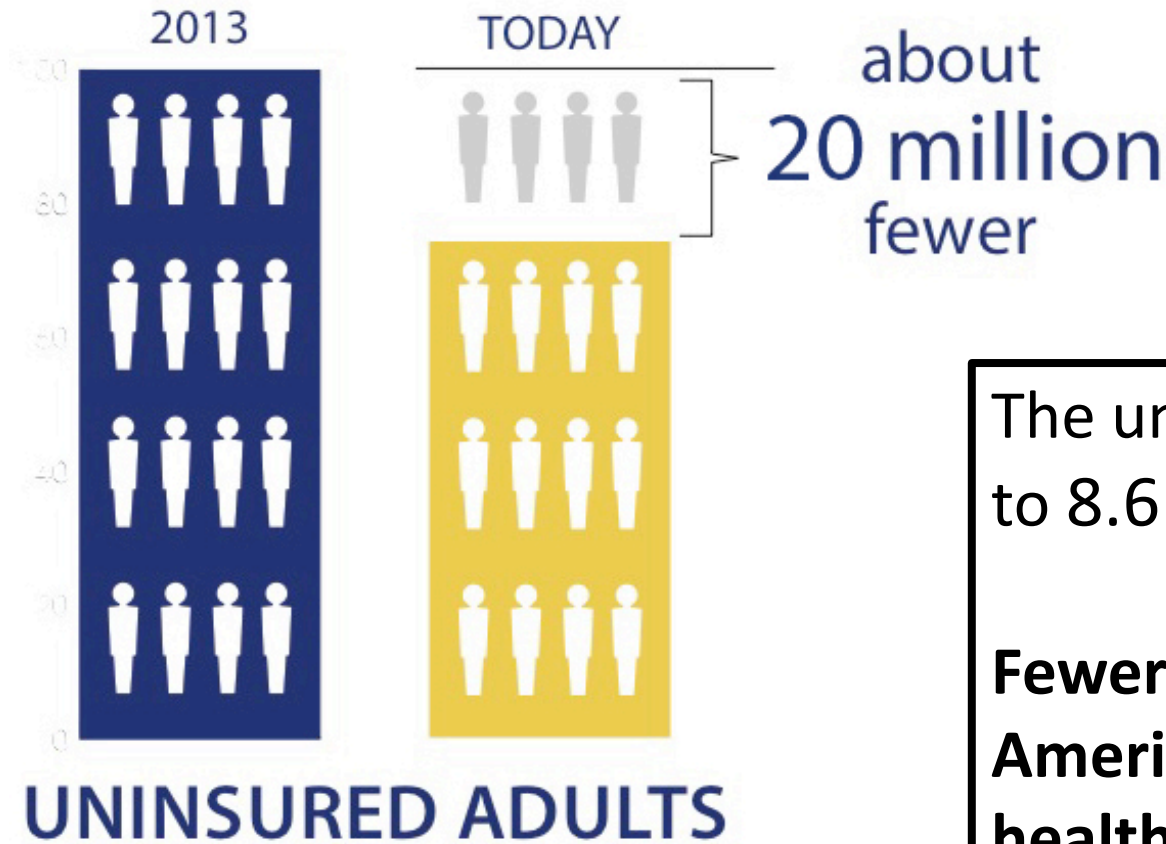
**85% of consumers qualify  
for financial assistance**

# The Affordable Care Act Has Driven the Uninsured Rate Below 10 Percent For the First Time Ever

- ACA has generated the most rapid coverage gains since Medicare and Medicaid
- The uninsured rate is now at 8.6%, below 10% for the first time ever



# ACA by the Numbers



The uninsured rate fell to **8.6 percent** in 2016

**Fewer than 1 in 10 Americans lacked health insurance.**

# Marketplace Satisfaction

## How Well Is ACA Coverage Working for Enrollees?

A new Commonwealth Fund survey shows that those who used their marketplace or Medicaid plans to find or see a doctor, go to the hospital, or buy prescription drugs had positive experiences.



**91%**

of U.S. adults who used their insurance to get health care are satisfied with their choice of doctors.

**77%**

of adults who tried to find a new primary care physician found it was

**EASY TO DO SO.**



**60%**

of those who found a new primary care doctor were able to get an appointment within two weeks.

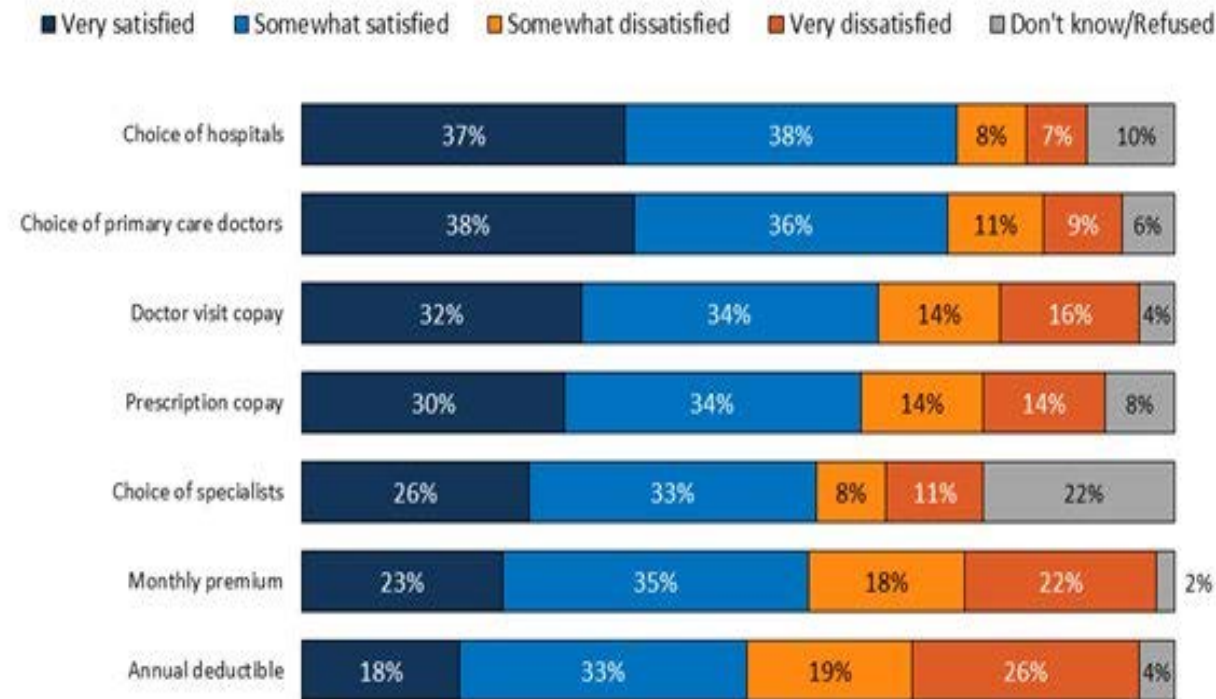
Source: Commonwealth Fund Affordable Care Act Tracking Survey, March-May 2015.



# Marketplace Satisfaction

## Most Marketplace Enrollees Satisfied With Plans

AMONG NON-GROUP ENROLLEES WITH MARKETPLACE PLANS: Thinking about your current health insurance plan, how satisfied are you with each of the following?



KFF.org

SOURCE: Kaiser Family Foundation Survey of Non-Group Health Insurance Enrollees, Wave 3 (conducted Feb. 9-Mar. 26, 2016)

- 75% were satisfied with their choice of hospitals
- 74% were satisfied with their choice of primary care doctors





# Affordability

Coverage available for  
\$100 or less  
(with tax credits)



# Game Changers

- **Financial Assistance**
  - 85% of consumers are taking advantage of tax subsidies
- **Quality Health Insurance: Essential Health Benefits**
  - Ending of “transitional” policies; limiting short duration policies
- **Guaranteed Issue**
  - Coverage for chronic illness
- **Transparent shopping platform: HealthCare.gov**
  - Side by side price comparison, new look-up tool for doctors, hospitals and drugs, quality star ratings

# Early Lessons Learned

- **Affordability reigns supreme**
  - 70% of returning consumers came back and shopped
  - Consumers are shopping for health care, not just health coverage
  - Doctor, hospital, drug and quality all important
- **No change in employer based coverage**
  - CBO projections were incorrect
- **Maturation of the Marketplace**
  - Risk Adjustment, Special Enrollment Periods, Data Matching
- **Innovation, Innovation, Innovation!**
  - Innovative approaches to network strategy, care management models, new product approaches, benefit designs, customer retention
  - "One size fits all" approach to Marketplace enrollees less successful

# Marketplace Stability

- The Marketplace provides health care by centering on quality, cost-effectiveness, and consumer engagement
- We are taking steps to strengthen the risk pool
  - Risk Adjustment
  - Special Enrollment Periods
  - Data Matching
  - Transition to Medicare
- Increasing Marketplace outreach and partnerships

# Marketplace Innovation

- The Marketplace serves as a laboratory for provider, payment, and care innovation
  - Locally focused based on population health and other factors
  - Data-driven strategies
  - Paying for quality of care, not quantity of services
  - Better care coordination
    - “Place of Delivery (POD)” models to locally connect providers and care coordination teams where members live

# Risk Pool Improvements

- Improvements to risk adjustment
  - Partial year enrollees
  - Pharmacy data
  - Risk sharing for enrollees over \$2m
  - Healthier enrollees

# A Preview of our Upcoming Open Enrollment

- **Easy to Enroll** – New improvements make enrolling on [healthcare.gov](https://www.healthcare.gov) easier, more convenient, and more streamlined than ever.
- **Here When You Need It** - With no more pre-existing condition carve outs, lifetime limits, or annual caps, health insurance finally IS there when they need it.



# Continuous Improvement

- **Doctor, Hospital and Drug Look-up Tool**
  - 3.6 million consumers have used this tool to more easily search for the plan that matches their needs
- **Star Ratings Pilot**
  - Will show Quality Star Ratings (QSR) to consumers in certain states using HealthCare.gov during the 2017 open enrollment period
  - Pilot allows us to see how consumers access and use QHP quality rating information to inform future display of QSR
- **Simple Choice Plans**
  - Plans that have a uniform set of features like fixed deductibles and out-of-pocket limits
  - Consumers can compare plans on fewer plan factors like monthly premium
  - Will display as part of the shopping experience on HealthCare.gov

# Looking Forward

- The Marketplace is large and growing
  - Subsidies help make coverage affordable
  - Quality coverage in demand
  - Innovative approaches from issuers
- Consumers are engaged: Shopping, Look-up Tool, Star Ratings
- New learning and experimenting in the Marketplace
- Unanswered questions remain

# Thank You

## Questions?