

Regional Update from HHS Regional Director Susan Johnson Region 10 - Alaska, Idaho, Oregon, and Washington



Dear Colleagues:

October 2012

In October, during National Breast Cancer Awareness Month, we take time to remember those who have lost their lives to breast cancer, to celebrate those who have survived it, and to stand with those who are still fighting.

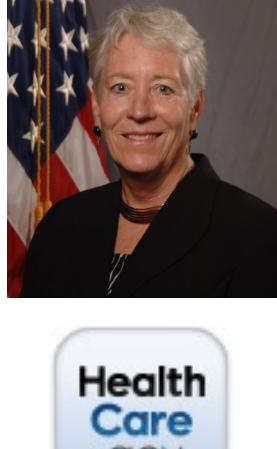
One of the best ways we can honor those who are impacted by breast cancer is to spread the word about the importance of prevention and early detection. So many lives can be saved if we can catch cancer in an early, more treatable stage.

The Affordable Care Act (ACA) includes a major focus on increasing access to preventive screenings and working to make them more affordable. Costs are often a deterrent to women getting screened. Thanks to the ACA, Medicare and most private health plans now provide mammograms and certain other preventive services with no co-pays or out-of-pocket costs.

Preventive screening can catch cancer earlier and avoid greater financial hardship. The improved access to quality, affordable health care that is accomplished through the ACA will go a long way in saving dollars and lives.

Take care and have a great October!

Regards,
Susan



Recent HHS Announcements & Events



At the Suquamish Tribe's Community Health Fair: Fran Miller RD, Nutritionist for the Suquamish Tribe; Susan Johnson; Leslie Wosnig, Health & Policy Administrator for the Suquamish Tribe; Kah-Ty-Ah Moran, Suquamish tribal member and intern; Kathy Kinsey RN, Suquamish tribal member and a Community Health nurse for the Suquamish Tribe; Susan Buell with the YMCA.

Medicare Open Enrollment Has Begun

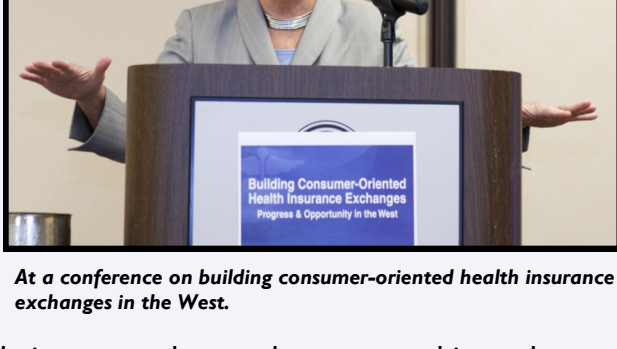
October 15 to December 7 is open enrollment for Medicare beneficiaries, which means that ALL people with Medicare can change their Medicare health plan and prescription drug coverage for 2013. Information on 2013 plans is now available. If a person is satisfied that their current plan will meet their needs for next year, they don't need to do anything.

The Affordable Care Act added new benefits to Medicare, including the phasing out of the Medicare prescription drug coverage gap known as the "donut hole." Starting in 2013, Medicare beneficiaries who reach the "donut hole" will receive a discount of approximately 53 percent off the cost of brand name drugs and 21 percent off the cost of generic drugs. Medicare beneficiaries will also continue to benefit from Medicare-covered preventive services at zero cost-sharing, including a yearly Wellness visit.

Medicare Beneficiaries can call 1-800-MEDICARE or visit www.medicare.gov for plan information.

Oregon and Washington Continue to Make Progress on Establishing their State-Facilitated Exchanges

One of the critical pieces of the Affordable Care Act is the establishment of a health benefits exchange in every state. These exchanges will be a central marketplace where individual consumers and small employers can easily compare and enroll in health insurance plans. Consumers will also be able to find out if they are eligible for financial assistance to help pay for coverage. States have the option to either establish their own exchange, do a partnership exchange with the federal government, or have a federally facilitated exchange.



At a conference on building consumer-oriented health insurance exchanges in the West.

The states in Region 10 are each in different stages of choosing and implementing the type of exchange they're going to have. Oregon and Washington have both elected to establish their own state-facilitated health benefits exchange and they have been hard at work on all of the details. Both states have made a lot of progress on critical pieces of their exchanges including establishing governing boards, discussing what criteria plans will need to meet in order to be sold in their exchange, and choosing a benchmark health plan to ensure every plan that is sold in the exchange meets a certain minimum level of coverage. Both states have even come up with a new name for their exchange—Oregon's is Cover Oregon, and Washington's is the Washington Healthplanfinder.

I recently spoke at a conference about building consumer-oriented health benefits exchanges. The event was organized by the Oregon State Public Interest Research Group. It was great to see so many people who want to be part of establishing an exchange that works best for their state—no matter which option they choose.

For more information on health benefits exchanges, visit www.healthcare.gov

Making It Easier to Understand Insurance Plans

One of the biggest challenges we all face when buying health insurance is understanding the differences between plans. When comparing plans, the language tends to vary a lot, which means you are making apples-to-oranges comparisons. This makes it very difficult to decide which plan is best for you.

The Affordable Care Act now requires all insurance plans to provide a Summary of Benefits Covered that uses a standard format, which will allow you to make apples-to-apples comparisons when shopping for insurance coverage. This month that format for the Summary of Benefits Covered was released and requires all plans to provide the following information:

- Answers to important questions about your coverage.
- Your costs for common medical services.
- Services not included in your coverage.
- New shopping tools called "coverage examples." These coverage examples illustrate how your coverage would pay for the medical care in two common situations. One situation is a woman having a baby, and the other is an adult managing type 2 diabetes.
- Standard definitions for some common insurance and medical terms, and information on how to obtain the uniform glossary.
- An explanation of your rights to continue coverage.
- An explanation of your rights if you have complaints or are dissatisfied with a denial of coverage.
- Information for contacting your company or plan, including getting a copy of your contract, learning about your network of providers, and finding out about your prescription drug coverage.

For information on the Summary of Benefits Covered, visit www.healthcare.gov

Outreach About Health Care Disparities

We know that low-income Americans, racial and ethnic minorities, and other underserved populations often have higher rates of disease, fewer treatment options, and less access to care. We also know these groups are less likely to have health insurance than the population as a whole. The Affordable Care Act takes some great steps to reverse this trend. Expanding Medicaid, increasing options for private insurance through the health benefits exchanges, and working to contain the escalating cost of health care are just a few examples of the improvements coming in 2014.

It is critical that we not only make sure these changes take effect, but we must also make sure that the people who will benefit most are educated about them. Over the past month I have had the opportunity to speak with members of the Latino, Tribal, Asian American, and Pacific Islander communities. I was pleased to see how much interest there was in learning more about the benefits of the Affordable Care Act and I look forward to future outreach opportunities.

Health Care Needs in Rural Areas

People who live in rural areas tend to face greater challenges in accessing health care services. While it may take 10 minutes to get to the doctor or hospital or cancer treatment center in an urban center like Portland or Seattle, it could take hours or even days for people living in the more rural areas throughout Region 10.



At the PNWU College of Osteopathic Medicine: Mike Maples, CEO of Community Health of Central Washington; Elizabeth Herres Miller, Board Chair at Community Health of Central Washington; Susan Johnson; and Robyn Phillips-Madson, Dean and Chief Academic Officer of PNWU College of Osteopathic Medicine

I recently visited several medical facilities in the Yakima area and spoke with staff in these facilities in order to better understand the challenges they face and the efforts that have been made to make health care more coordinated and accessible to the communities they serve.

Grant Opportunities and Available Resources

For HHS funding resources, please visit the [HHS Grants/Funding site](http://HHS.Grants/Funding) or [FYI: Minority Resources...Money & More](http://FYI.MinorityResources...Money & More), a newsletter published by the Office of Minority Health Resource Center.

Heart Attack Symptoms and Calling 9-1-1 Campaign for Spanish Speaking Women (Tribal eligible) — This grant provides funding for activities and events in support of the Spanish language awareness campaign, "Make The Call. Don't Miss a Beat." The focus of the 2013 campaign is to encourage Spanish speaking Latinas from across the country over age 50 to recognize the signs and symptoms of a heart attack and to call 9-1-1 promptly. [View Full Announcement](#)

Safety and Health for Older Women (Tribal eligible) — This grant provides funding for activities and events that enhance access to information and health care resources that promote the safety and health of older women. [View Full Announcement](#)

Paul B. Beeson Patient-Oriented Research Career Development Award in Aging (Tribal Eligible) — Funds are available to encourage and assist the development of future leaders in the field of aging by supporting clinically trained (primarily physician) faculty members early in their careers to gain additional research training and to establish independent programs in aging research. [View Full Announcement](#)

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Questions or comments? Please contact me at susan.johnson@hhs.gov or 206-615-2010.