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

Dear Colleagues,

We are down to the final days, hours, and minutes before one of the biggest pieces of the Affordable Care Act is implemented: open enrollment in the new health insurance Marketplaces in every state across the country!

People who have gone years without insurance will finally have the opportunity to shop for health coverage that fits their budget and meets their needs.

Starting October 1st and going through March 31, 2014, you can go to the Marketplace portal for your state, enter information needed to determine your eligibility, and enroll in a plan. The Marketplace portals in Region 10 are:

- Alaska: <u>HealthCare.gov</u>
- Idaho: <u>Your Health Idaho</u>
- Oregon: <u>Cover Oregon</u>
 Washington: <u>Washington Healthplanfinder</u>

The Marketplaces are a new, simpler way to purchase health insurance –all in one place. You can find and compare options, see if you qualify for lower costs, and select coverage that works best for you and your family.

Prior to enrolling in a plan through the Marketplace, it will be good to check to see if you are eligible for assistance to lower the cost of your monthly premiums. These new tax credits will be available to people who have incomes between 100% and 400% of poverty level. If you qualify, you can assess that tax credit amount and with that compare costs of plans before you make a plan selection.

People who have questions will be able to find information on the website for the Marketplace in their state. There is also a nationwide call center, 1-800-318-2596, and there will be people on the ground in every state to provide in-person assistance. These people can be found at community health centers, hospitals, libraries, community organizations, and likely at more such locations in your state.

The opening of the new health insurance Marketplaces is a great moment. I hope you will join me in making sure that all of your friends, families, clients, neighbors, and constituents know about the opportunity to enroll starting October Ist. <u>Share your stories with us</u> as this is a life changing moment in time for millions of people across our country!

Regards, Susan

Recent HHS Events & Announcements



Speaking with representatives of Idaho refugee groups about the impact of the Affordable Care Act on refugees

AARP Creates New eCards for Parents to Nudge Kids

There are a lot of creative ideas coming up as community partners do outreach to educate their constituents about the Affordable Care Act and encourage them to enroll in coverage. AARP has done a great job of not only making sure their members know about the coverage options that will be available for them, but also encouraging their members to talk to their kids















about the importance of having health insurance.

Young adults often think that they are immune from illness or injury, but accidents happen and people fall off bikes or get sick. It's important that everyone, including young adults, have health insurance so that they have coverage when they need it. These young adults often listen to the influencers in their lives their parents, grandparents, and elders.

It is with this in mind that AARP released new eCards for parents to send to their kids to 'nudge' them about getting health insurance. The messages are funny and edgy but still very effective in getting across the point that it is time to get covered.

<u>Click here</u> to check out the new eCards developed by AARP and send one to your child, grandchild, neighbor, or friend.



Hispanic Heritage Month

September 15th marked the beginning of Hispanic Heritage Month, a time when we celebrate the richness and diversity of one of America's fastest-growing communities and its many contributions to our Nation's progress.

This year, the theme, "Hispanics: Serving and Leading Our Nation with Pride and Honor," highlights how Latinos have helped shape and strengthen all aspects of our society—from industry and research, to faith, education, and arts and entertainment. Here at HHS, we are proud of the many contributions made by Latinos in the HHS family who are dedicated to our mission and public service.

We also recognize that Hispanic Americans, like other ethnic and racial minorities, continue to face obstacles in getting quality, affordable health care that all Americans deserve.

A higher percentage of Hispanic Americans do not have health insurance than any other ethnic group in the Nation. But thanks to the Affordable Care Act, more than 12 million Latinos with private insurance or Medicare coverage now have access to many types of preventive care services, such as cancer, cholesterol and diabetes screenings, with no out-of-pocket costs. Nearly one million young Latino adults have been able to stay on their parents' health plans through the age of 26. In addition, Latino-owned small businesses across the country are benefitting from tax credits to help provide coverage for their employees and their families.

These are the types of real benefits already helping millions of Latinos today, but there is more to come. Starting October I, a Health Insurance Marketplace will open in every state—placing better options and better coverage within reach for millions of currently uninsured Americans, including over 10 million eligible Latinos. I encourage you to get the word out to your families and friends that enrollment in the Marketplace begins on October I, with coverage starting as early as January I.

During National Hispanic Heritage Month, as we celebrate our vibrant Hispanic community, let us also reaffirm our commitment to eliminating health disparities for all racial and ethnic minorities. Through the great diversity of our HHS family and the opportunity made possible for quality, affordable health care by the Affordable Care Act, we can help Latinos and all Americans reach their full potential.

<u>Click here</u> for more information on Hispanic Heritage Month.

Rural Areas Gain Assistance for Enrollment in Health Insurance Marketplaces

Health and Human Services (HHS) Secretary Kathleen Sebelius recently announced more than \$2.5 million to educate and enroll uninsured individuals and families living in rural America in new health coverage options through the Affordable Care Act.

Rural health organizations across the country will receive \$25,000 each from HHS' Health Resources and Services Administration (HRSA) to help people in their communities understand the benefits available to them, eligibility requirements and options in their State Health Insurance Marketplaces. These organizations include universities, local and critical hospitals, and other rural non-profit or public organizations.

In our Region 10 states, PeaceHealth DBA Ketchikan General Hospital in

Ketchikan, Alaska, and St. Mary's Hospital, Inc. in Cottonwood, Idaho both received funding.

"Soon millions of Americans in rural communities will have new opportunities for quality, affordable health coverage through the Health Insurance Marketplace," said Secretary Sebelius. "Through these awards, trusted community providers will help people understand their coverage options, including whether they can get a discount on costs."

Nearly one in five uninsured adults in the United States live in a rural area. Due to lower income levels, a large segment of the rural population will be eligible for subsidized insurance coverage through the Health Insurance Marketplace. There is a great need to educate rural consumers about their insurance options under the Affordable Care Act.

The awards complement other federal efforts underway that help consumers make the best health care choices for themselves and their families. Along with the new, consumer-focused <u>HealthCare.gov</u> website and the 24-hour-a-day consumer call center, 1-800-318-2596, these new tools will help Americans understand their coverage options and select the plan that best suits their needs and their budget when open enrollment in the new Health Insurance Marketplace begins October 1, 2013.

Click here for a full list of HRSA awardees.

Health Care Law Saves Consumers \$1.2 billion Nationwide

A new report released recently by the Department of Health and Human Services (HHS) shows that 6.8 million consumers saved an estimated \$1.2 billion on health insurance premiums in 2012, due to the "rate review" provision of the Affordable Care Act, which brought unprecedented accountability to slow the growth of health insurance premiums. The Affordable Care Act, along with state efforts, continues to bring scrutiny to proposed health insurance rate increases and is saving consumers real money as a result.

"Thanks to the health care law, we are seeing that holding insurance companies accountable is leading to increased competition and saving billions of dollars for consumers across the country," said Kathleen Sebelius, Secretary of HHS. "This type of competition and transparency will continue in the Health Insurance Marketplace, or Exchanges, where Americans will be able to shop for and compare plans side-by-side to find the one that fits their needs and budget."

Beginning on Sept. 1, 2011, the federal rate review rules under the health care law were implemented. These rules ensure that, in every state, insurance companies are required to submit for review and justify any proposed health insurance premium increase of 10 percent or more.

To assist states in this effort, the Affordable Care Act provides states with Health Insurance Rate Review Grants to enhance their rate review programs and bring greater transparency to the process. Forty-six states, the District of Columbia, and five territories have been awarded rate review grant funds to make the rate review process stronger and more transparent.

These provisions have put an end to the days when insurance companies could raise health insurance premiums by double digit percentages with little oversight. Because of rate review, the report released today shows that consumers have saved approximately \$1.2 billion over the past year in the individual and small group markets.

This initiative is one of many in the health care law aimed at saving money for consumers and specifically works in conjunction with the 80/20 rule, which requires insurance companies to spend at least 80 percent of premiums on health care or provide rebates to their customers, instead of overhead, administrative expenses. Thanks to the 80/20 rule, last year 77.8 million consumers saved an estimated \$3.4 billion up front on their premiums as insurance companies operated more efficiently. Insurance companies that did not meet the 80/20 rule provided nearly 8.5 million Americans with \$500 million in rebates. Americans receiving the rebate benefitted from an average rebate of \$100 per household.

Click here to see the most recent report on the 80/20 rule.

Click here to see the recently released rate review report.

<u>Click here</u> for information on how states are using their rate review grant funds.

<u>Click here</u> for general information about rate review.

September is National Preparedness Month—Plan to Protect Yourself and Your Family

This September marked the tenth anniversary of National Preparedness Month. Over the past decade, we have learned a tremendous amount about the impact of disasters on physical and mental health. We can be proud of the strides our nation has made to become better prepared to protect health during emergencies, whether from terrorism like 9/11 or the Boston bombing, from natural disasters like tornados or hurricanes, or from emerging infectious diseases like the HINI pandemic influenza.

Today, we have a system in place to augment state and local health agencies with personnel, equipment and supplies when federal help is needed to provide care and protect public health. We have frameworks and strategies that guide planning, response and recovery. Our Public Health Emergency Preparedness and Hospital Preparedness Programs have helped communities become better prepared for natural disasters and disease pandemics. We have at the ready a Strategic National Stockpile of medical countermeasures – drugs, vaccines, diagnostics, and medical supplies for health emergencies. And thanks to the Project BioShield Act, we have become a global leader with a robust pipeline of new innovative drugs and products in development for use in health emergencies.

While our federal family is becoming better prepared to support the nation, we know that being truly resilient requires the whole community coming together. Simply put: bystanders can't stand by. We've seen countless times that bystanders are truly the first responders. They save lives. Each of us must be ready to help others when every minute counts.

While taking a first aid class or a CPR class is always helpful, we may not need formal training to save someone's life or provide them with basic care they desperately need at that moment. Sometimes, we just need to be willing to help carry someone who is hurt to safety, provide comfort to someone who is frightened, or help someone find the medical care they need.

Being ready means being aware of potential risks, understanding where we can turn for help, and being prepared and willing to help our neighbors and community members. So I encourage everyone to talk with family, friends and neighbors and together think through what to do in an emergency. Find out who has special needs and requires a little extra help. As bystanders and neighbors, we can make a tremendous difference in the health of our families, our communities, and our nation.

Learn more about what you can do to be ready at <u>www.phe.gov</u> and <u>www.ready.gov</u>.

Region 10 Groups Receive Funding for Youth Suicide Prevention and Early Intervention

Suicide is an issue that touches far too many lives. To continue to improve the delivery and financing of prevention, treatment, and recovery support services, SAMHSA has identified eight Strategic Initiatives to focus the Agency's work on improving lives and capitalizing on emerging opportunities. The State and Tribal Youth Suicide Prevention grants closely align with SAMHSA's Prevention of Substance Abuse and Mental Illness Strategic Initiative. More information is available at the SAMHSA website: <u>www.samhsa.gov/About/</u> <u>strategy.aspx</u>.

The purpose of State/Tribal Youth Suicide Prevention program is to support states and Tribes in developing and implementing statewide or tribal youth suicide prevention and early intervention strategies, grounded in public/ private collaboration.

As a result of the State/Tribal Youth Suicide Prevention grants, states, tribes and communities will:

- Increase the number of persons in youth serving organizations such as schools, foster care systems, juvenile justice programs, trained to identify and refer youth at risk for suicide;
- Increase the number of health, mental health, and substance abuse providers trained to assess, manage and treat youth at risk for suicide;
- Increase the number of youth identified at risk for suicide;
- Increase the number of youth at risk for suicide referred for behavioral health care services;
- Increase the number of youth at risk for suicide who receive behavioral health care services; and
- Increase the promotion of the National Suicide Prevention Lifeline.

In our Region 10 states, the Idaho Department of Education and Northwest Indian College in Bellingham, Washington were both granted funds under this program.

Grant Opportunities and Available Resources

For HHS funding resources, please visit the <u>HHS Grants/Funding site</u> or <u>FYI:</u> <u>Minority Resources...Money & More</u>, a newsletter published by the Office of Minority Health Resource Center.

R40 Maternal and Child Health Research Program (MCHR) (Tribal Eligible)—The R40 MCH Research Program supports applied and translational research relating to maternal and child health services including services for children with special health care needs, which show promise of substantial contribution to advancement of the current knowledge pool, and when used in States and communities should result in health and health services improvements. The deadline for submission is November 8, 2013. <u>View Full Announcement</u>

Ryan White Part A HIV Emergency Relief Grant Program—This announcement solicits applications for the Ryan White Part A HIV Emergency Relief Grant Program. Part A funds provide direct financial assistance to an Eligible Metropolitan Area (EMA) or a Transitional Grant Area (TGA) that has been severely affected by the HIV epidemic. Formula and Supplemental grants assist eligible program areas in developing or enhancing access to a comprehensive continuum of high quality, community-based care for lowincome individuals and families with HIV. <u>View Full Announcement.</u>

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