



Office of Medicaid Eligibility and Policy Medicaid Eligibility and Customer Supports February 2020



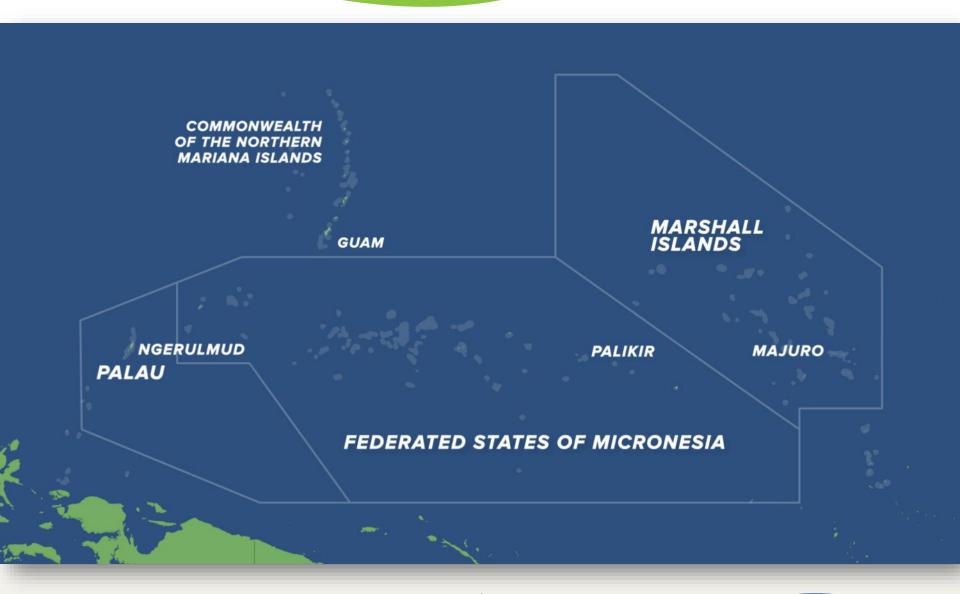
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Overview







Program Basics





Eligibility

COFA islanders who have income less than 133% of the Federal Poverty Level (FPL) and are:

- Washington residents
- Enrolled into a silver level Qualified Health Plan with tax credits
- Ineligible for other federal or state medical assistance programs



Apple Health and COFA islanders

COFA islanders may be approved for:

- Alien Emergency Medical (AEM). COFA islanders can enroll in AEM and COFA Islander Health Care concurrently.
- Medical Care Services (MCS). MCS is a DSHS program for individuals approved for ABD cash/ HEN. COFA islanders cannot have both MCS and COFA Islander Health Care.
- Apple Health Pregnancy Medical. COFA Islander Health Care will end when individual report a due date in Washington Healthplanfinder. They can choose which program they would like to enroll in.

Special Enrollment Periods





Special Enrollment Period (SEP)

In 2019, the Washington Health Benefit Exchange approved an exceptional circumstance for individuals newly identified as eligible for premium assistance sponsorship.

The Health Care Authority is the sponsor for those enrolled in COFA Islander Health Care. This SEP can only be requested by the sponsor.



Newly Eligible SEP

To be considered for this SEP:

- Complete an application at <u>wahealthplanfinder.org</u>
- Contact the Health Care Authority:
 - Email: <u>COFAQuestions@hca.wa.gov</u>
 - Phone: 1-800-547-3109

Program staff will review the application and confirm COFA Islander Health Care eligibility and request a newly eligible SEP.



Application Process

An individual can submit an application for coverage via:

- Online: wahealthplanfinder.org
- Mobile application: <u>WAPlanfinder</u>
- Phone: 1-855-923-4633
- Paper Application

Advanced
Premium Tax
Credits





Advanced Premium Tax Credits

In order to qualify for COFA Islander Health Care individuals must take the maximum Advanced Premium Tax Credit (APTC), which is based on an individuals anticipated income.

When individuals receive APTC they must:

- File taxes for the year they received tax credits
- File taxes with their spouse, if applicable
- Use their 1095-A to complete Internal Revenue Service (IRS) form 8962



1095-A form

Form 1095-A Health	Insurar	ice Mark	cetplac	ce Statement	VOID		OMB No. 1545-2232	
				for your records. nd the latest informati		RECTED	2019	
Part I Recipient Information		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			-			
1 Marketplace identifier	2 Marketp	lace-assigned po	olicy number	7 3 Policy issuer's name				
4 Recipient's name			5 Recipient's SSN	5 Recipient's SSN		6 Recipient's date of birth		
7 Recipient's spouse's name			8 Recipient's spous	8 Recipient's spouse's SSN		9 Recipient's spouse's date of birt		
10 Policy start date	rmination date		12 Street address (inc	12 Street address (including apartment no.)				
13 City or town	province		15 Country and ZIP of	15 Country and ZIP or foreign postal code				
Part II Covered Individuals								
A. Covered individual name	B. Covered individual SSN		C. Covered individual date of birth	C. Covered individual date of birth		E. Coverage termination da		
16								
17								
18								
19								
20								
Part III Coverage Information	1							
Month A. Monthly enrollme		ent premiums B. Monthly s plan (nly second lowest cost s lan (SLCSP) premium	second lowest cost silver (SLCSP) premium		. Monthly advance payment of premium tax credit	
21 January								
22 February								
23 March								
24 April								
25 May								
26 June								
27 July								
28 August								
29 September								
30 October								
31 November								
32 December								
33 Annual Totals								
or Privacy Act and Paperwork Reduc	tion Act Noti	ce, see separ	ate instru	ctions. Ca	at. No. 60703Q		Form 1095-A (201	

Individuals enrolled in a qualified health plan in 2019 will receive a 1095-A Health Insurance Marketplace Statement.



Reconciliation & Tax Filing Process

epartr	nent of the Trea Revenue Service shown on your re	e ► Go		um Tax Cred o Form 1040, 1040-Si m8962 for instruction	rmation. al security number	2019 Attachment Sequence No. 73					
fou c	annot take the F	PTC if your filing status i	is married filing separately	unless you qualify for ar	n exception (see instruction	ons). If you qualify, che	eck the box ►				
Par	Annu	al and Monthly	Contribution Am	nount							
1			mily size (see instructi				1				
2a			nter your modified AGI (see instructions)								
b			your dependents' modified AGI (see instructions)								
3				and the second s		X 4 10 10 A	3				
4	Federal pov	erty line. Enter the fe	tions). Check the	4							
5			for the federal poverty table used. a Alaska b Hawaii c Other 48 states and DC ne as a percentage of federal poverty line (see instructions)								
6			me as a percentage of receral poverty line (see instructions)								
2.53		ntinue to line 7.			200.8						
			take the PTC. If adva		TC was made, see the	e instructions for					
7	Applicable F	igure. Using your line	5 percentage, locate y	our "applicable figure"	on the table in the inst	tructions	7				
8a		ution amount. Multiply lin			thly contribution amou						
		o nearest whole dollar ar		by 12	2. Round to nearest who	ole dollar amount	8b				
art					ance Payment of		Credit arriage (see instructions)?				
	Yes. Continue to line 11. Compute your annual if and continue to line 24. Annual (a) Annual errollment premiums (Form(s)) (505P premium (Form(s)) (1905-A, line 33A)		(c) Annual contribution amount (line 8a)	(d) Annual maximum premium assistance (subtract (c) from (b), if		payment of PTC (Form(s					
11	Annual Totals	Tues-A, line 33A)	line 33B)	(inter da)	zero or less, enter -0-)	(smaller or (a) or (o	1000-74, III 10 0007				
Monthly Calculation		(a) Monthly enrollment premiums (Form(s) 1095-A, lines 21–32, column A)	(b) Monthly applicable SLCSP premium (Form(s) 1095-A, lines 21–32, column B)	(c) Monthly contribution amount (amount from line 8b or alternative marriage monthly calculation)	(d) Monthly maximum premium assistance (subtract (c) from (b), if zero or less, enter -0-)	(e) Monthly premium credit allowed (smaller of (a) or (d	1005-A lines 21-32				
12	January										
13	February										
14	March										
15	April										
16	June										
18	July										
19	August										
20	September										
21	October										
22	November										
23	December										
24					through 23(e) and ente		24				
25	Net premiur on Schedule here. If line 2	n tax credit. If line 24 a 3 (Form 1040 or 10 25 is greater than line	is greater than line 25 040-SR), line 9, or For	5, subtract line 25 from m 1040-NR, line 65. It ink and continue to lin	through 23(f) and entern line 24. Enter the diffine 24 equals line 25 e 27	ference here and i, enter -0 Stop	26				
156	III Rena				4 from line 25. Enter th	e difference here	27				
art		nce payment of PTC.									
art	Excess adva	nce payment of PTC. limitation (see instruc				1	28				

- Individuals that received APTC are required to reconcile their tax credits with the IRS.
- IRS form 8962 must be completed and filed with IRS form 1040.

Out-of-Pocket Costs





Out-of-Pocket Costs

Individuals enrolled in COFA Islander Health Care receive a cost sharing card from Navia Benefit Solutions to pay for out-of-pocket costs, which include:

- Copays
- Deductibles
- Co-insurance
- Prescriptions



Out-of-Pocket Costs

The card cannot be used to pay:

- Insurance premiums
- Charges not covered by insurance
- Out-of-network providers
- Non-medical items

COFA islanders will receive monthly bills for their premiums, which are for their records only. Premiums are paid by HCA directly to the insurance carrier.



Cost Sharing Card





- There are two styles of the same cost sharing card.
- The card has a \$300 monthly limit.
- At the beginning of the next month, the card is refilled.
- Contact HCA during the month if additional funds are needed.



Cost Sharing Scenario

Scenario one

Susie went to the doctor and filled her prescriptions. She used her cost sharing card and spent a total of \$200 in March.

How much will be added to her card for April?

\$200.00 will be added. HCA will always deposit up to the maximum monthly amount of \$300. In this case, she had \$100 remaining, therefore \$200 was added to equal \$300.

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Cost Sharing Scenario

Scenario two

Jean has COFA Islander Health Care and needs to get his medicine. The prescription is covered by his insurance and will cost \$25.00. He already had medical bills totaling \$300 this month (maximum amount) and cannot wait.

How can he pay for his prescription?

He can contact HCA and request additional funds or if it is the weekend, he can use his own funds and get reimbursed.





Scenario one: "I got a bill for my premiums"

Maple enrolled in a silver level QHP and is approved for COFA Islander Health Care. She received a bill from her insurance plan for her monthly premium and is concerned because she has an appointment next week.

Should she pay her bill?

No. HCA pays the insurance premiums directly to the carriers for individuals enrolled in COFA Islander Health Care. The bill is for her records only.



Scenario two: "I got a bill from my doctor"

Maple enrolled in a silver level QHP and is approved for COFA Islander Health Care. She went to the hospital and gave them her insurance information and later received a bill for \$225.00.

What steps should she take?

Maple should take the following steps:

- 1. Confirm that her insurance plan has paid their part of the bill.
- 2. Use the cost sharing card for the patient responsibility.



Scenario three: "Can I go to the dentist?"

Barry is selecting his silver level QHP in Washington Healthplanfinder in May 2020. He needs to go to the dentist and sees that he can also choose a qualified dental plan.

Can Barry get dental insurance?

Yes, he can, however he will be responsible for the dental premiums and out-of-pocket costs. Dental insurance is not covered by COFA Islander Health Care.



Scenario four: "I had Washington Apple Health Pregnancy medical and it ended."

Oak had Washington Apple Health Pregnancy Medical and had her baby in July. She renews her medical coverage, but it will end in September. She wants to keep free insurance after the Apple Health ends.

Can she enroll in COFA Islander Health Care?

Yes, if she continues to meet all eligibility requirements, including enrolling in a silver level QHP. She will be granted a special enrollment period to enroll in a QHP due to the end of her Apple Health.



Scenario five: "My doctor says I don't have COFA."

Oak enrolled in a QHP that starts 09/01 and is approved for COFA Islander Health Care. She goes to the doctor on 09/04 and tells her doctor she has COFA, but the doctor says she doesn't have insurance.

What are her next steps?

- 1. Tell her doctor which QHP she chose. COFA Islander Health Care is not insurance; it is a program that pays for the QHP and out-of-pocket costs.
- 2. If her doctor tells her that her insurance plan is not active, call HCA for assistance.

COFA Dental



COFA Islander Dental Care



COFA Islander Dental Care

Engrossed Senate Bill 5274 was passed by the legislature to give COFA islanders who are also Washington residents dental benefits under a qualified dental plan.

The dental benefits will begin January 2021 (open enrollment 2020).



COFA Islander Dental Care

To qualify for COFA Islander Dental Care, an individual must be enrolled in COFA Islander Health Care or have Medicare and:

- Be a COFA islander and a Washington resident;
- Have countable income under 133% of the Federal Poverty Level (FPL).

Resources





Resources

- COFA Islander Website <u>hca.wa.gov/cofa</u>
- Email <u>COFAQuestions@hca.wa.gov</u>
- Phone number1-800-547-3109
- 1095A Tax Form Webpage wahbexchange.org/1095A
- Form correction request wahbexchange.org/currentcustomers/your-1095-a-statement/1095-a-correction-requests/