Dear Neighbor,

For too long, hardworking Americans paid the price for health care that put insurance company profits ahead of patients. The federal Affordable Care Act (ACA) helps give New Yorkers the health security they deserve.

The ACA improves health care coverage for all of us and lowers the cost of health care. For many, the coverage will be offered for free or at a reduced cost through tax credits and subsidies that are only available through the New York State of Health exchange.

Beginning Oct. 1, 2013, millions of New Yorkers can enroll for health coverage through New York's health benefit exchange – known as the New York State of Health – as part of the ACA. New Yorkers can find important information at www.nystateofhealth.ny.gov, by emailing exchange@health.state.ny.us or by calling the exchange at 855-355-5777. Coverage through the exchange takes effect Jan. 1, 2014.

The ACA does many things. This pamphlet outlines the most important parts of the new law for you and your family and for small businesses.

Inside, you will find answers to the most common questions about the ACA. As always, if I can be of any assistance in this or any other community issue, please call 718-442-9932 or email me at titonem@assembly.state.ny.us.

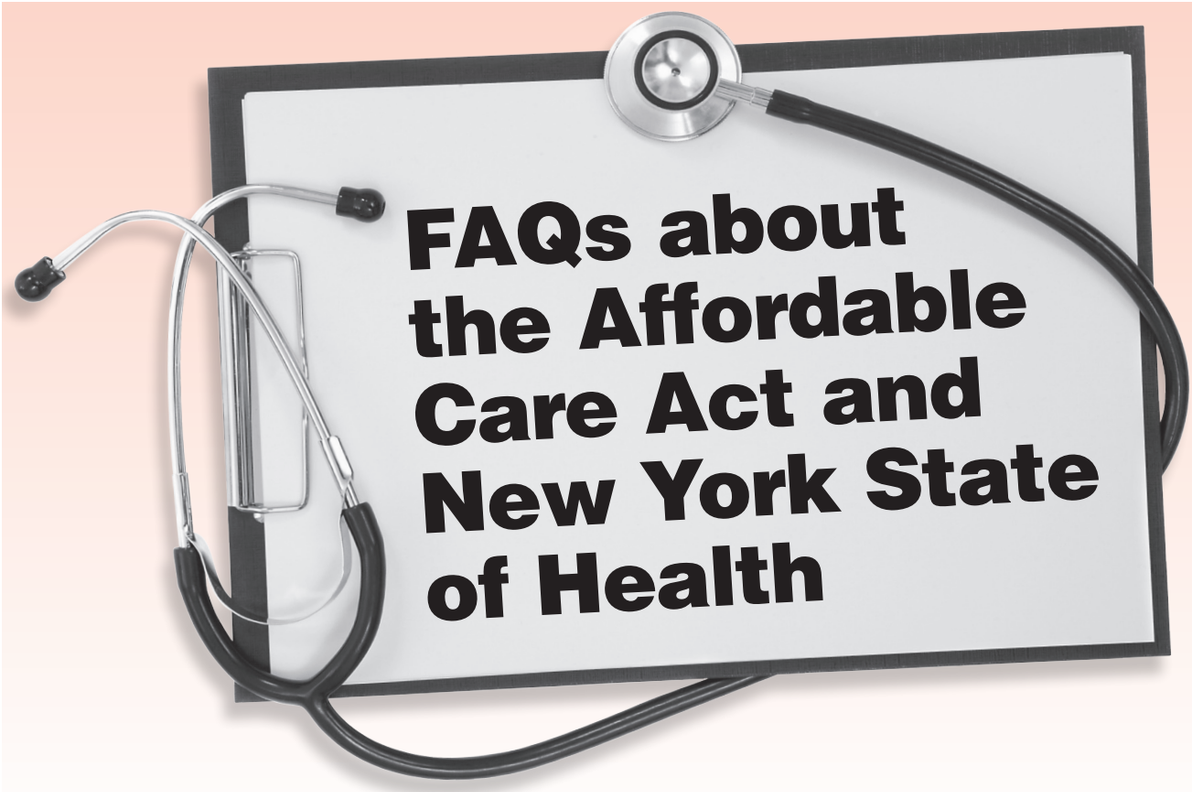
Sincerely,

Assemblyman Titone

New York State of Health: Understanding the Affordable Care Act

How health care reform is making a difference for the people of New York

Courtesy of Assemblyman
Matthew Titone



FAQs about the Affordable Care Act and New York State of Health

Q 1. Who does the ACA benefit?

A Whether you need health insurance or have it already, the ACA offers new rights and protections that make coverage fairer and easier to understand. For many individuals, families and businesses, additional benefits will depend on household income or the size of the business.

Before the ACA, many Americans were excluded from quality health insurance because they couldn't afford private insurance, didn't qualify for Medicaid or had low-quality coverage through their job. The ACA ensures hardworking families will get the care they deserve and protects Americans from insurance company abuse.

Under both the ACA and New York State law, insurance companies are required to spend the overwhelming majority of your premium dollars on health care, not administrative costs and profits.

Q 2. What is the New York State of Health benefit exchange?

A The New York health benefit exchange – known as the New York State of Health – is the new health coverage marketplace for New Yorkers. It's for individuals buying coverage – especially if your income qualifies you for tax credits under the ACA – and for small business owners who want coverage for their employees.

You're able to easily compare health insurance options and enroll in health coverage online, over the phone, in person or by mail. Think of it as a new way to compare and buy health insurance similar to the way many people buy airline tickets or book hotel rooms.

The exchange also makes it easy for people to check their eligibility for health care programs like Medicaid and Child Health Plus and to sign up for these programs if eligible.

Eligibility for Medicaid, Child Health Plus or subsidized private insurance is determined by the exchange and is based on household income, family size and other factors.

Families with incomes less than four times the poverty level, or $94,200 per year for a family of four, will have their out-of-pocket costs reduced or even eliminated through premium and cost-sharing assistance programs.

Q 3. When does the "individual mandate" take effect?

A Beginning Jan. 1, 2014, the ACA includes a mandate for most individuals to have health insurance either through their employer or individually, which can be obtained through the exchange.

Q 4. Why should I get insurance?

A We don't know when we'll need health care and it can be very expensive. Insurance can remove obstacles to care and protect you financially if you or someone in your family gets sick, has a chronic condition

Courtesy of Assemblyman Matthew Titone • titonem@assembly.stat

"The Affordable Care Act puts patients before insurance company profits. Find out how it will help your family or your small business."

– Assemblyman
Matthew Titone

or is injured. Coverage guarantees you'll have access to preventive care and emergency care if you need it.

Q 5. Will the exchange affect my Medicare coverage?

A No. The exchange doesn't affect anyone's Medicare coverage. The exchange is intended to help New Yorkers who aren't eligible for Medicare get health coverage.

The exchange doesn't affect your Medicare choices, whether you get coverage through Original Medicare or a Medicare Advantage Plan.

However, Medicare benefits have expanded under the ACA. Free preventive benefits, cancer screenings and annual wellness visits are now included. The "doughnut hole" in Part D drug coverage has been eliminated. You can also save money through discounts on brand-name prescription drugs.

Q 6. When can I sign up for health insurance through the New York State of Health benefit exchange?

A Starting Oct. 1, 2013, insurance coverage can be purchased through the exchange at www.nystateofhealth.ny.gov. However, coverage doesn't begin until Jan. 1, 2014. You can also apply for Medicaid or Child Health Plus through the exchange.

Q 7. How do I apply or enroll?

A To enroll, call the New York State of Health benefit exchange at 855-355-5777 or go to the website at www.nystateofhealth.ny.gov. To make an appointment with a trained enroller at Community Health Advocates – a network of 38 community-based organizations from around New York State selected to help New Yorkers shop for and enroll in health coverage – email cha@cssny.org.

You'll need to provide information for you and your family. You can then choose the plan that works best, get financial assistance if eligible and pay your plan premium, if any.

To find help in your area call Community Health Advocates at 888-614-5400 or visit www.communityhealthadvocates.org/chaagencies.

Q 8. What will I need to apply?

A To apply, you'll need:

- Social Security numbers, if available;
- birthdates;
- proof of income (pay stubs, W-2 forms or wage and tax statements);
- policy numbers for any current health insurance; and
- information about any health insurance you or your family could get from your employer.

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Q 9. What standards can I expect of my insurance after the change?

A Starting in 2014, all health insurance plans will have to meet certain standards. All plans have to offer high-quality coverage that includes preventive care, prescription drugs, emergency services, hospitalization, maternity and newborn care, mental health care, substance abuse treatment and pediatric services, including oral and vision care.

Additionally, insurers are prohibited from capping how much they'll cover per year or per lifetime.

Q 10. What preventive services will be covered without deductibles or co-pays?

A You may be eligible for free preventive screenings, like blood pressure and cholesterol tests, mammograms and colonoscopies, as well as vaccines, contraception and more, without having to pay a deductible or co-pay. More information on preventive care services can be found at www.healthcare.gov/what-are-my-preventive-care-benefits.

Q 11. I already have insurance through my job. What do I need to do?

A If you have health insurance through your job, you don't need to do anything. Some new benefits may be included under your existing plan, but you don't need to act for this to go into effect.

If your share of your job-based insurance premium costs more than 9.5 percent of your income, you can get financial assistance to buy insurance on the exchange by visiting www.nystateofhealth.ny.gov.

Q 12. I am a small business owner. What if I can't afford to offer health insurance?

A As part of the New York State of Health, community-based organizations have been designated as "navigators" and are available to come to your business at no charge to explain the new options to you and your employees. Navigators are also available to meet with individual employees during work hours or after hours to help them enroll in the exchange.

Trained and certified by New York State to offer free and independent assistance, navigators are available to help you choose a plan, enroll your employees and claim tax credits if you qualify. They can also explain health insurance verbiage and provide ongoing assistance with staff changes.

To find a navigator in your area, email Community Health Advocates at cha@cssny.org or call 888-614-5400.

Q 13. What benefits are there for small businesses? What will I need to enroll as a small business owner?

A Small businesses with 50 or fewer full-time employees earning an average of less than $50,000 a year are eligible to purchase insurance coverage through the New York State of Health. Employers that have less than 25 full-time employees earning an average of less than $50,000 a year are eligible for up to 50 percent in tax credits to help offset the cost of coverage for their employees. An employer will need to provide:

- the company's identifying information (e.g. FEIN, payroll tax number, etc.);
- how much the company is willing to contribute to its employees' plan (can be $0);
- a list of employees' names and identifying information (e.g. birthdates, SSNs, etc.);
- policy numbers for any current health insurance; and
- the average wages of employees if easily accessible (needed for tax credit purposes).