Health Care Reform:
Understanding the Affordable Care Act’s Pro-Active Approach to Mental Health Services

Presented by:
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Presenters

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NAMI Michigan

The nation’s largest grassroots organization representing people living with serious mental illness and their families.

NAMI engages in education, support and advocacy to improve the lives of people living with mental illness and severe emotional disorders through state offices in all 50 states and 1100 local affiliates nationwide.
Presenters Continued

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Michigan Consumers for Healthcare

• Working collaboratively with a diverse alliance of consumers, partners and policymakers to attain affordable, accessible, quality healthcare for all Michiganders

• Foundation funded and non-partisan.
History

• Healthcare reform has been discussed by every President since 1912
• Some have discussed single payer systems, some have discussed modifying our current system
• The Affordable Care Act passed in March of 2010
Why Healthcare Reform is Needed

• 17% of our nation’s GDP is spent on healthcare
• Over 50 million Americans are uninsured
• Over 1 in 4 adults experience a mental disorder any given year
• About 1 in 10 children live with a serious mental or emotional disorder
U.S. Spending on Healthcare Each Year

Spending per capita/per year on health care

- U.S.: $8,000
- Norway: $5,000
- Canada: $4,000
- U.K.: $3,000
- Japan: $2,700
Is this the best we can do?

30 other countries have lower infant mortality rates

The W.H.O ranks the U.S. 37th in the world behind countries like Cyprus & Malta

50.7 million Americans have no health insurance and no access to a family physician.
Healthcare reform legislation is designed to:

• Reduce healthcare cost growth for families, employers and the government.
• Provide Americans access to affordable quality health coverage.
• Strengthen and protect Medicare and Medicaid.
• Modernize our healthcare delivery system.
ACA Benefits for People with Mental Illnesses

• Insurers can no longer deny coverage because of pre-existing or chronic conditions

• Prior to 2014, adults can enroll in a state-run insurance option if they cannot find private insurance (HIP Michigan)

• Catastrophic out-of-pocket costs are limited ($5,995 for an individual and $11,950 for a family of 4)
ACA Protections

• Expanded insurance coverage for people with serious mental illness and substance use conditions

• Mental health and substance use coverage at parity

• It is required that mental health services, including behavioral health treatment be offered as essential health benefits
What is an Exchange?

• An exchange is a designated market place where insurers can offer their products if they meet specified criteria.

• Not a specific, physical location but rather a portal with multiple access points such as the internet, live telephone support, mail and email.

www.healthreformtruth.com
How an Exchange Works

• It allows for a wider comparison of coverage's
• You will be able to compare cost-to-coverage of multiple plans through one location
• You and your family will know quickly what plans you can participate in, and qualify for, including Medicare and Medicaid
ACA Expands and Strengthens Medicare and Medicaid

• Spend downs will be eliminated for most individuals

• In 2013, Medicaid reimbursement rates for primary care will be raised to the higher Medicare rate
• State health insurance programs under Medicaid will cover all families and individuals with incomes up to 133% of the Federal Poverty Level (if Michigan expands Medicaid to this level as prescribed in the ACA)
• Currently, over 11 million people with mental illness are uninsured
• For the first time ever, childless adults without a disability can qualify for Medicaid.
Expanding Treatment and Identifiers

- Provides better course of treatment options for people with mental health disorders
- Better treatment means earlier identification of potential issues
- Guaranteed acceptance by insurance providers eliminates gaps in treatments
ACA Provides More Accessible and Better Quality Health Care

• Invests in preventive and public healthcare to prevent illnesses and diseases before they require more costly treatment
• More training will be available for those serving people with mental health and/or substance use disorders
• Promotes care coordination between doctor, patient and community wellness programs
Families and individuals will receive tax credits to help pay for health insurance, depending upon income.

Tax credits will be available to families earning between 133%-400% of the Federal Poverty Level ($30,656- $92,200 for a family of four).

Tax credits are designed to keep premium costs between 2%-8% of income, on a sliding scale.
Security and Control

• Insurance companies won’t be able to terminate coverage if you become ill

• Medical Loss Ratio - all providers must put at least $.80 out of every dollar paid into your healthcare ($0.85 in a large market)

• If not, they must give you a rebate
Essential Health Benefits Coverage

Preventive care
Hospitals
Physicians
Prescription drugs
Mental health
Rehabilitation

Habilitation services
Substance abuse
Dental and vision care for children
Maternity care

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National Alliance on Mental Illness

NAMI
Michigan

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Financial Protections

- No annual or lifetime limits
- Spending caps will limit the amount consumers pay out of pocket each year.
- Eligible for tax credits
- Insurers must justify premium increases
Medicare

- Over time, the ACA closes the gap ("the donut hole") in drug coverage and lowers cost of brand name drugs for people on Medicare
- Provides incentives for better coordinated care and use of evidence based medicine

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Medicare

- No co-pays for preventive services in 2011
- Enhanced payments for primary care physicians
- Establishes exam equipment accessibility standards.
- Medicare Trust Fund solvency is extended at least 9 additional years
Caretakers and Young Adults

People in the sandwich generation and caretakers will have guaranteed coverage and affordable choices. Young adults can stay on their parents plans until age 26.
ACA Helps to expand the healthcare workforce

• Sections 5001 through 5605 directly address the healthcare workforce

• Covers recruitment, retention, grants, training and education

• Focuses on primary care, nursing, mental health workforce, healthcare workforce diversity and other workforce components
Health Care Workforce

- The ACA gives grants to health programs at colleges and universities to increase the racial diversity of the healthcare workforce.
- The ACA will provide loan repayments and scholarships for students who work in underserved areas.
Having a healthy pregnancy and baby is a challenge, one that can vary across Michigan due to the uneven distribution of obstetrics/gynecology physicians in the state. Fully a fourth of Michigan’s counties (22 out of 83) do not have a single practicing OB/GYN doctor. Almost all the counties without an OB/GYN are found in the Upper Peninsula and the upper half of the Lower Peninsula.

**DISTRIBUTION OF OB/GYNS**

- Counts with 0 OB/GYNS
  - *decrease from 2007*
- Counties that had increase from 2007
- Counties that had decrease from 2007
- **No change in OB/GYNS**

Source: U.S. Department of Health and Human Services  
Note: All figures for 2010, most recent year available
Loan Repayments and Forgiveness

Public Service Loan Forgiveness

• There are many provisions within the ACA to reduce the length of student loans
• Only certain loans qualify for forgiveness and some consolidated loans will qualify
• Must meet specific employment and graduation qualifiers
Prevention and Wellness

• Grants for community wellness programs
• Incentives for doctors to improve patients’ health
• Restaurants are required to post nutrition information
ACA Protections Recap

• No more pre-existing condition exclusions or annual / lifetime limits
• Insurance providers are no longer able to charge different rates for mental health services than for medical services
• All insurance plans will be required to cover preventive screening for things like depression
What can you do?
FOLLOW THE MOVEMENT!

www.nami.org
www.namimi.org
www.consumersforhealthcare.org
What Else Can You Do

Join MCH’s email list, find us on Twitter @MICHhealthcare or http://Facebook.com/consumersforhealthcare

Use the Legislative Action Center at www.consumersforhealthcare.org

Visit www.healthreformtruth.org
So how do I Apply for the Pre-existing Condition Program (PCIP).

• You must have a pre-existing condition.
• You must have been uninsured for 6 months.
• You must provide:
  – Proof of US citizenship and Michigan residency
  – Letter from a physician (issued in the last 6 months) that you have a qualifying condition, OR
  – Denial letter stating that, for health reasons, you were denied coverage in the last six months
• Qualifying conditions are listed at www.hipmichigan.com
• To apply, contact PHP of Mid-Michigan at 877-459-3113 or
• www.hipmichigan.com
Additional Resources
How do I apply for...

**MEDICAID:**
- Contact “Michigan Enrolls” at 1-888-367-6557
- Fill out form and print online from: [http://www.michigan.gov/documents/dhs/DHS_Information_Booklet_and_Assistance_Application_242170_7.pdf](http://www.michigan.gov/documents/dhs/DHS_Information_Booklet_and_Assistance_Application_242170_7.pdf)
- Contact your local DHS office

**MiChild, Healthy Kids, Plan First and MOMS:**
- Online at [https://healthcare4mi.com/michild-web/](https://healthcare4mi.com/michild-web/)
- Call 1-888-988-6300
- Health Departments
- Some Federally Qualified Health Centers (FQHCs)
- Contact your local DHS office
How do I apply for Medicare?

Contact the Michigan Medicare/Medicaid Assistance Program at

http://www.mmapinc.org/, or

1-800-803-7174
How do I apply for MiRxn?

- Online at www.mihealth.org or 1-866-755-6479
- The MiRxn (My Prescription) Card is a prescription drug discount program for Michigan residents who do not have any prescription drug coverage.
- The MiRxn Card program is free. Card holders take their prescription and their MiRxn card to a local participating pharmacy. Card holders are charged the MiRxn discounted price for any medicine the pharmacist stocks and your doctor prescribes.
- Over-the-counter drugs are not covered even if they are prescribed by your doctor.
How do I use the health insurance exchange?

Exchanges will not be active until 2014. Visit www.healthcare.gov for more information.

How do I check the quality of my hospital?

www.hospitalcompare.hhs.gov
www.healthcare.gov