

# Quick Guide for Front-Line Social Workers to the Upcoming Changes

## IN HEALTH CARE COVERAGE MANDATED BY THE ACA

The “Patient Protection and Affordable Care Act of 2010” (the ACA) is rapidly changing the delivery and financing of health care in the United States. The law’s major provisions will be in effect by January 2014, at which time, many of the barriers to health care coverage will be gone. The following are some of the key changes that front-line social workers can expect to see.

## Quick Guide

FOR FRONT-LINE  
SOCIAL WORKERS  
TO THE UPCOMING  
CHANGES IN HEALTH  
CARE COVERAGE  
MANDATED BY THE ACA



### **HOW CAN HEALTH CARE INSURANCE BE PURCHASED UNDER THE NEW LAW?**

Affordable coverage will be offered through health exchanges, which will operate in every state beginning January 1, 2014.

### **WHAT IS A HEALTH EXCHANGE?**

A health exchange is a virtual marketplace where individuals can shop for affordable coverage. It’s predicted that most major health plans in each state will offer coverage on the exchanges.

### **WHO WILL OPERATE THE HEALTH EXCHANGES?**

States can operate their own exchange or in partnership with the federal government, or have the federal government operate it entirely for them.

### **WHO IS ELIGIBLE TO PURCHASE COVERAGE ON THE HEALTH EXCHANGES?**

State health exchanges will be open to everyone, with the exception of undocumented immigrants.

### **HOW WILL LOW-INCOME PEOPLE AFFORD HEALTH INSURANCE ON THE EXCHANGES?**

People with incomes between 100% and 400% of the federal poverty line (FPL) will receive federal subsidies for purchasing insurance coverage on the exchange.

### **WHEN CAN PEOPLE BEGIN TO ENROLL IN THE HEALTH EXCHANGES?**

Exchange enrollment begins on October 1, 2013.

### **WHAT WILL HAPPEN TO MEDICAID COVERAGE?**

States have the option of expanding Medicaid coverage to individuals with incomes up to 133% of the FPL. For states that exercise this option, the federal government will cover no less than 90% of the health care costs for the expansion population. This population will be composed largely of adults without dependent children. States can choose to expand Medicaid at any time.

### **HOW CAN I HELP MY UNINSURED CLIENTS OBTAIN HEALTH COVERAGE?**

Getting coverage for your uninsured clients is paramount. Many of those newly eligible for health coverage will never have had health insurance before—and the enrollment process may be daunting for these individuals. Educating your uninsured clients about their coverage options and motivating them to apply is an important task for every front-line social worker.

# Quick Guide – ACA Changes



## Quick Guide

FOR FRONT-LINE  
SOCIAL WORKERS  
TO THE UPCOMING  
CHANGES IN HEALTH  
CARE COVERAGE  
MANDATED BY THE ACA



### **ARE THERE RESOURCES IN MY STATE TO HELP PEOPLE OBTAIN COVERAGE?**

Each state will have a navigator program to help people enroll in appropriate coverage. Contact your state health insurance commission to obtain information about your state's navigation and enrollment process.

### **HOW CAN MY AGENCY SUPPORT HEALTH COVERAGE EXPANSION?**

Make sure that all uninsured clients served by your agency are reviewed for coverage eligibility in the health exchange or Medicaid (if you are in an expansion state).

### **WILL THERE BE ANY CHANGES FOR MY AGENCY, AS A RESULT OF OUR CLIENTS OBTAINING NEW HEALTH COVERAGE?**

Agencies that have traditionally offered free, low-cost or grant-funded services may now be able to bill insurance for these services, if clients can obtain coverage. If your agency does not currently participate in health insurance plans, suggest to your finance office that they explore the possibility of your agency becoming a provider with your state's exchange plans.

### **WILL NEW BENEFICIARIES REQUIRE SPECIAL SERVICES?**

Many newly enrolled beneficiaries will have special needs and challenges. It is estimated that of the 38 million people newly eligible for coverage through the ACA, at least a third of them will have mental and behavioral health needs. In addition, many new beneficiaries will have other chronic health conditions for which they may not have received consistent treatment. When newly enrolled beneficiaries seek your agency's services, anticipate that they may require extra time to establish treatment plans.

### **MY CASELOAD INCLUDES MANY CLIENTS WITH MENTAL HEALTH AND SUBSTANCE USE DISORDERS. HOW DO I ENSURE THAT MY CLIENTS GET THE SERVICES THEY NEED THROUGH THE EXCHANGE HEALTH PLANS?**

The ACA requires that mental health and substance use disorder (MH/SUD) services are included in the "essential health benefits" (EHB) package, which all insurance plans offered on the state health exchanges must offer. The EHB is also a requirement for states that expand their Medicaid programs. EHB plans—which will ultimately cover 70 million Americans—must provide MH/SUD benefits at parity with medical/surgical benefits. Enforcement of the parity rule may be challenging initially. Whether you are employed by an agency or work in private practice, be an advocate for your clients in support of their parity rights.

### **WHAT CHANGES ARE ANTICIPATED IN SOCIAL WORK HIRING, AS A RESULT OF THE LARGE NUMBERS OF PEOPLE ENTERING THE HEALTH CARE SYSTEM IN 2014?**

With the influx of new beneficiaries in 2014, there will be increased demand for social workers in behavioral health positions and medical case management. Many practice settings will experience an increased need for social work services, including federally qualified health clinics (FQHCs), community mental health centers, and hospitals, particularly those with ambulatory care programs. Large physician practices and integrated health systems that operate Accountable Care Organizations (ACOs) may also increase the use of social workers.