



The Affordable Care Act: Creating New Health Insurance Marketplaces

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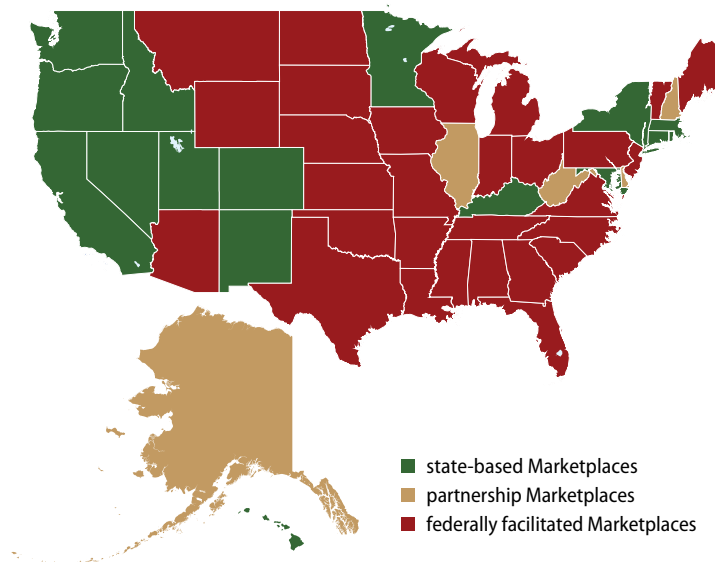
The Affordable Care Act will transform how LGBT people and families get the health care they need. The centerpiece of the law is the new Health Insurance Marketplaces. Starting in 2014 every state will have an online Marketplace where people can compare plans and buy affordable coverage that meets their needs. There are three different kinds of Marketplaces: state-based Marketplaces; partnership Marketplaces run jointly by states and the federal government; and federally run Marketplaces run by the Department of Health and Human Services. All Marketplaces will have both an individual and SHOP (small-business) component.

What is the federal government doing?

- Federal regulations prohibit Health Insurance Marketplace staff and contractors, as well as plans sold through the Marketplaces, from discriminating on the basis of sexual orientation and gender identity.
- Federal rules also prohibit all plans based on the Essential Health Benefits standard from discriminating on the basis of sexual orientation and gender identity, as well as on the basis of health condition.
- Federal regulators have made clear that states have flexibility to ensure that same-sex couples and their families can buy family plans through the Marketplaces.

Health Insurance Marketplaces: Key Facts

A breakdown of how Health Insurance Marketplaces will be run across the United States



20 million

people will buy plans through the Health Insurance Marketplaces

68 million

people will be covered by plans that must meet the minimum level of coverage set by the Essential Health Benefits standard

16 million

people will have Medicaid coverage for the first time, if all states expand their Medicaid programs to cover all lower-income adults

Sources: Institute of Medicine, "Essential Health Benefits: Balancing Coverage and Cost" (2011); Congressional Budget Office, "Updated Estimates for the Insurance Coverage Provisions of the Affordable Care Act" (2012); Kellan Baker, "Fighting for Survival: Why Gay and Transgender Communities Should Care About Health Reform" (Washington: Center for American Progress, 2012).

What can my state do?

States running their own Health Insurance Marketplaces can:

- Prohibit discrimination on the basis of sexual orientation and gender identity by Marketplace staff and contractors, as required by federal regulations
- Ensure enrollment policies for both individual and SHOP (small-business) Marketplaces include same-sex couples and their families
- Prohibit discrimination by Qualified Health Plan issuers on the basis of sexual orientation and gender identity, as required by federal regulations
- Select LGBT community-based organizations as Navigators
- Establish certification standards for Navigators, which are entities that will connect eligible individuals with coverage through the Marketplaces, that prohibit discrimination on the basis of sexual orientation and gender identity, as required by federal regulations
- Require LGBT cultural competency training for Navigators
- Include images and language relevant to LGBT people and their families in outreach, education, and marketing materials
- Provide information that accurately conveys information of importance to LGBT consumers, such as plans that offer domestic partner benefits and benefits such as long-term care, comprehensive mental and behavioral health services, and HIV/AIDS care
- Collect confidential data on the sexual orientation and gender identity of enrollees
- Adopt robust privacy protections for all demographic data collected from enrollees
- Prohibit discrimination on the basis of sexual orientation, gender identity, and health condition in any plan based on the Essential Health Benefits standard, as required by proposed federal regulations
- Expand their Medicaid program to serve all lower-income adults

States running Marketplaces in partnership with the federal government can:

- Choose to perform one or both of the following two functions:
 1. Regulate the Qualified Health Plan issuers participating in the partnership Marketplace.
 2. Operate consumer assistance programs, including Navigators.
- Prohibit discrimination on the basis of sexual orientation, gender identity, and health condition in any plan based on the Essential Health Benefits standard, as required by proposed federal regulations
- Expand their Medicaid program to serve all lower-income adults

When the federal government is running the Marketplace:

- States can prohibit discrimination on the basis of sexual orientation, gender identity, and health condition in any plan based on the Essential Health Benefits standard, as required by proposed federal regulations
- LGBT community-based organizations can apply for Navigator funding
- States can expand their Medicaid program to serve all lower-income adults

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