Q&A: Summit helps explain health insurance marketplace

By Emma Reynolds, Stephanie Smart
August 27, 2013 | 11:06 p.m. CDT

COLUMBIA — More than 300 people gathered Tuesday to learn how Missouri’s new health insurance marketplace will work and how to enroll people in it.

Organized by the Missouri Foundation for Health and the Cover Missouri Coalition, the summit, held at the Holiday Inn Executive Center in Columbia, drew health care providers, as well as academic, civic and nonprofit representatives who have a role in educating the public about the new insurance exchange, part of the Affordable Care Act.

For more information

HealthCare.gov
(800) 318-2596

Missouri has defaulted to a federally facilitated marketplace.

All states must be ready to enroll citizens by Oct. 1, including states with federally facilitated marketplaces.

Jen Bersdale, executive director of Missouri Health Care For All, a statewide movement for quality, affordable health care, attended Tuesday’s summit and talked with the Missourian about how the health insurance exchange will operate and who can enroll:

What is the health exchange?

The health insurance marketplace is a new way for people to shop for health insurance. It is intended to offer better, more affordable options than people have had before and to make it easier to shop for insurance.

How will this come about, and how exactly will this work?

The new marketplace will open on Oct. 1 through March 31 for enrollment, with coverage starting as early as Jan. 1, 2014. When enrollment opens, the marketplace will ultimately be a website where people can shop online and compare different plans. It’ll work in some ways like travel sites where you can compare different options.

For people who have questions or don’t feel comfortable buying health insurance through a
website or on their own, there’s a federal 800 number you can call and get help. There will also be
organizations throughout the state that have people willing and ready to sit in person and walk
someone through the enrollment process.

How are you planning on executing your plan?

Our organization will be working with a lot of community presentations, in the community but also
in faith congregations and community organizations. We’ll be partnering with other folks doing
other things like media work and then trying to get information out through our networks, but
really working a lot on those in-depth presentations so people can ask a lot of questions.

What are some of the challenges for health care companies when trying to get the
message across?

I think the biggest challenge is that we have a lot of people to reach. We have over 800,000
uninsured Missourians. We’d like to get as many of them as possible to check out the new health
insurance exchange. We’ve got six months for the first enrollment period, so we’ve got a lot of
people to reach in that time.

We know a lot of people don’t know about the marketplace or have heard misinformation about
the new laws, so we’ll be working to reach as many people as possible and check out the new
options.

What are some of the challenges for the uninsured?

I think anytime you have something new and large, people have a lot of questions. It’s a whole new
system to learn, and there is a new legal requirement that most people have health insurance.
There will be a time when the health insurance marketplace isn’t new and overwhelming.

I know a lot of people have heard that requirement, but they don’t really know what that means.
Shopping for something as important as health insurance can be very daunting, and people have
had really bad experiences in the past. We’re really hoping to get people past the daunting and
past the bad experiences to see what there is for them now.

What are a few of the most important things for people to know who are
uninformed about the new health exchange marketplace?

The most important thing for them to know is that the marketplace is offering them more choices
and better choices that they didn't have before and they should check it out.

Who will be most affected?
It will be the folks who don't have health insurance through their employer.

**What does this mean for the already insured?**

People who already have employer-sponsored insurance likely won't be shopping for new insurance through the marketplace. People who have insurance they bought on their own can shop to see if there's a better plan or keep what they have. Those with employer-sponsored insurance have the peace of mind in knowing that if they lose their coverage, there's another way to get health insurance.

The new rules protect them, make sure their health insurance works better for them and give all of us security that if we lose our job, if our relationship ends, or we lose the insurance we have, we have the security of knowing there's another way to get coverage.

**Will those who have insurance be required to change their plans?**

It doesn't have to change, and if you have insurance through an employer, you probably won't shop the marketplace. I do know people who have health insurance now that isn't good coverage, it's very expensive, and some of them are very excited about going to the marketplace to see if they can get something better.

*Supervising editor is Katherine Reed.*