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Purchasing health insurance through Covered California



Oroville Hospital

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Looking Forward to a Healthier Community

We are entering a new era in health care, where having insurance and taking an active role in managing our health is the norm. As a community hospital, that means more patients coming in for wellness checks and, hopefully, fewer trips to the emergency room. We foresee a future where increased access to doctors and preventive care will lead to problems being caught early. This will help doctors better treat life-threatening illnesses or avoid them altogether.

Despite all the political banter surrounding the Affordable Care Act, I believe it can work. I see it working when previously uninsured patients come in to our practices for blood-pressure tests or flu shots or to see their primary-care physicians. In the long run, however, it will take the commitment of everyone for it to truly succeed.

In these first few years, while penalties for not signing up for health insurance are relatively low, it will be difficult for some people to see the value in getting insured. Why should a healthy 30-year-old fork over hard-earned money for something he's been living without for years? My answer: In the short term, something could come up and he could need that insurance to save him from costly medical bills. In the longer term, however, he'll be investing in his health by having access to preventive care.

He'll also be helping to ease the high costs of health insurance by addressing medical concerns early, when they are less costly to treat. Try to think of it this way: When you get a flu shot, you're not only saving yourself from getting sick, but also from having to go to the doctor, missing work, or possibly passing the virus along to family members. This one preventive measure can have a positive impact on not only you, but also the community and the entire health care system by reducing the spread of illness and eliminating the need for more costly medical care.

We know the concepts surrounding health care and insurance are sometimes difficult to understand. That's why we want you to know that at Oroville Hospital, we're here to help.

— **Robert J. Wentz, Oroville Hospital President and CEO**



Take Charge of Your Own Health

With insurance, you're covered,
from wellness checks to emergency visits

BY
MEREDITH J. GRAHAM

For many uninsured Californians, health insurance is foreign territory. The words alone — what's a copay or deductible? — are enough to turn off even the savviest among us. So, what's the point of getting insured if we are healthy and rarely go to the doctor?

The easy answer is that we never know what the future might hold. An unexpected fall could turn into \$5,000 in medical bills. And many diseases, when left undiagnosed or untreated, can end up costing more than money.

With the Patient Protection and Affordable Care Act, millions of Californians have access to health care who didn't in the past. And even those who don't qualify for free insurance through expanded Medi-Cal might be eligible for financial help to keep monthly payments low.

The beautiful thing about having health insurance is being able to manage your health fully. Instead of seeking medical help only in an emergency, insurance gives peace of mind in the availability of wellness checkups and other health screenings.

Some people are hesitant to sign up because the process seems intimidating or difficult. But there is help available. Enrollment specialists at Oroville Hospital can guide patients through the process of signing up and finding out what coverage is best for them. The future looks a little brighter when you take charge of your health and can stop worrying about the unexpected.



Learn the Lingo

If you've never purchased insurance before, there are a lot of terms you'll need to understand. Here's a quick glossary to help guide your way:

Copay Short for copayment, the amount you are required to pay to your physician each visit. If your copay is \$25, you pay \$25 to the doctor and your insurance pays the rest.

Deductible This is the amount you must pay before your health insurance benefits begin. So, with a \$500 deductible, you would pay for your health care costs up to \$500 and then your insurance coverage would begin.

Coinsurance This is different from a copay and kicks in after you've met your deductible. It's a percentage of costs. For example, you might pay 20 percent of your doctor's visit and your plan would pay 80 percent.

Provider A doctor, nurse practitioner, physician assistant, clinic or hospital that provides health services.

Network For some health care plans, coverage may be offered through a network of selected providers. Your insurance plan might charge you differently for services based on whether your health care provider is "in-network" or "out-of-network." If you have specific medical needs, make sure your provider is in your network. If not, consider changing insurance plans.

Out-of-pocket maximum This is the most you will pay before your insurance starts picking up 100 percent of your health costs. Most plans calculate your maximum per year. Some consider deductibles, copays and coinsurance payments as part of your out-of-pocket maximum, but others do not.

Premium The amount you pay per month for your insurance plan.

Your Guide to Getting Coverage

"The actual application process is pretty quick and easy."

*Autumn Sullender,
Certified Enrollment Counselor*

Autumn Sullender enjoys helping people navigate and sign up for Covered California as a certified enrollment counselor at Oroville Hospital.

PHOTO BY
JOVAN JOHNSON

Oroville Hospital counselors answer questions and help people sign up for insurance through Covered California

BY
MEREDITH J. GRAHAM

When it comes to Covered California, everyone's got a question or three. After I sign up, when will it take effect? How much will I have to pay? What's included?

Lucky for Butte County residents, Oroville Hospital has employees like Autumn Sullender in its Financial Services Department to help people navigate the health insurance marketplace and find the plans that work best for them.

"We had a couple who came in the other day," she says. "The husband had a pre-existing condition. They did have CMSP (County Medical Services Program), but they'd gotten a letter saying they had to go through the exchange and sign up for insurance through Covered California. They came right in to find out what their options were."

One key element to the Affordable Care Act is that pre-existing conditions no longer affect your premium or, ultimately, your ability to obtain health coverage. So, when certified enrollment counselors like Sullender sit down to help someone apply with Covered California, health information is not a factor. All that is needed is an estimate of your annual income and a Social Security number or proof of legal residency.

Covered California seems to be opening doors for many people. Healthy and unhealthy; rich and poor; English-, Spanish- and Hmong-speaking — everyone is eligible, as long as their employer does not offer insurance.

"The actual application process is pretty quick and easy," Sullender says. "It's nice because after you go

through the application, it shows you the plans you're eligible for."

Based on their income, applicants may be eligible for government subsidies, which result in lower premiums owed each month.

"I worked with one gentleman, one of the first people I helped, who was paying for insurance because he's not insured through work. The coverage he had was not very good, and he was paying quite a bit for it," Sullender says. Instead of the \$400 he was paying for private insurance, with premium assistance he could owe as little as \$2 a month for the most basic coverage, she says.

It's success stories like those that help Sullender stay focused and positive in her job. She knows there's a lot about Covered California that many people find confusing and she invites anyone who wants assistance signing up — even if they just have a question — to make an appointment with someone in her office.

"There are so many things involved in getting insurance — deductibles and all that. Now they can meet with somebody and have it explained to them," she says. "They can have a better idea of how to manage their health."

Sullender also looks forward to a future where everyone is insured against the what-ifs in life.

"You don't know what's going to happen tomorrow," she says. "You never know when you're going to get sick."

Uninsured in California? You might not have to be.

With the expansion of Medi-Cal, more individuals and families can get access to health insurance. For those who do not qualify for Medi-Cal benefits, there's Covered California, the state's health insurance marketplace where individuals can purchase coverage. But how do you know which one is for you?

You are eligible for Medi-Cal if you:

- » earn up to 138 percent of the Federal Poverty Level, which equals \$15,856 for an individual living alone

You are eligible for Covered California if you:

- » earn more than 138 percent of the Federal Poverty Level
- » are a legal California resident, and
- » do not have access to affordable coverage through an employer or public assistance

As your income or family situation changes, where you get your health insurance may change, too. To find out whether you qualify for Medi-Cal or Covered California right now, visit www.CoveredCA.com. You can also call Oroville Hospital's Financial Services Department at (530) 532-8265 for an appointment to get help signing up.

From Caretaker to Needing Care

Couple searches for affordable coverage after Alzheimer's diagnosis

BY
MIKE BLOUNT



Michael Castano says he was relieved after he was able to sign up for affordable insurance coverage through Covered California. His wife, Eulanda, was diagnosed with Alzheimer's disease in 2012.

PHOTO BY JOVAN JOHNSON

The worst part for her was not remembering names. Even though 55-year-old Eulanda Castano had been working as a nursing assistant at the same care home facility for five years, she was suddenly forgetting the names of people she took care of. It was the first sign that something was wrong. There were other signs, too — short-term confusion, forgetting the proper procedures, what she was doing in any given moment. In January 2012, Eulanda was officially diagnosed with Alzheimer's disease.

Her neurologist wanted her to continue working because he believed it was the best stimulation for her brain. However, her employers felt her symptoms had progressed to the point where she was unable to perform her job. She was suspended and terminated six days later, losing her job along with her insurance coverage. Her husband, Michael Castano, 63, says his wife was frustrated, and her frustration was compounded by her inability to understand how or why it happened.

"A big part of the disease is not comprehending what is happening," Michael says. "You try to explain things and deal with it, but you can't fix it."

Michael also had no insurance coverage after the company he worked for downsized from more than 200 employees to just 22, and his hours were cut from 40 a week to 16. Because the company was no longer able to get a large-group discount, Michael's insurance rates increased dramatically to the point that he could no longer afford coverage for himself or his wife. And because he wanted to ensure his wife would be able to receive

the care she needed from the doctors who were already treating her, Michael began paying for her checkups out of pocket. While she qualified for Medi-Cal, her doctors would not accept it as payment.

"There were no real options," Michael says. "COBRA would have cost over half of what I was making at the time on Social Security. I had applied for disability for her, but it's a long process. We were just kind of living on borrowed time, hoping that something would come along that was affordable."

After seeing a couple of advertisements for it, Michael decided to look into getting coverage through the state's new health insurance marketplace, Covered California. Michael went to Oroville Hospital and spoke with an enrollment counselor.

"I was really happy because she walked me through the application process and helped me with some (questions) I wouldn't have been able to answer on my own," Michael says.

Eulanda was paying around \$350 a month for coverage before losing her job.

Michael had been without health insurance for 10 years. Now, the couple is paying just \$42.50 a month for Blue Cross coverage through the Silver Plan.

"Relieved is the best word for what we feel now that we have coverage," Michael says. "They even had less expensive packages, but the Silver Plan is what made sense for us. It's important that my wife gets the care that she needs, and now she will, so we can enjoy our time together."

"It's important that my wife gets the care that she needs, and now she will, so we can enjoy our time together."

Michael Castano

What Are Subsidies?

A subsidy is a form of financial assistance that can help individuals or families pay for health insurance. Subsidies lower the amount you spend on insurance premiums. Subsidies can also reduce out-of-pocket medical expenses you pay when you receive care, such as copays.

Under the Patient Protection and Affordable Care Act, individuals and families are eligible for subsidies if they are not offered affordable coverage through their employer and they do not qualify for Medi-Cal or Medicare. The Affordable Care Act limits the amount an individual or family has to pay for insurance premiums based on the

household size and a percentage of their annual income in relation to the **Federal Poverty Level (FPL)**.

The only way to qualify for a subsidy is through Covered California. To calculate your income percentage in relation to the FPL, divide your annual income by the FPL for your household size (found in the chart at bottom left). Then multiply by 100 — this number is your income as a percent of the FPL. If your income is up to 400 percent of the FPL, you could qualify for a subsidy. Find out if you are eligible for a subsidy at www.CoveredCA.com.

Household Size

Federal Poverty Level (FPL)

1

\$11,490

2

\$15,510

3

\$19,530

4

\$23,550

Do You Qualify For a Subsidy?

$$\frac{\text{HOUSEHOLD ANNUAL INCOME}}{\text{FPL FOR YOUR HOUSEHOLD SIZE}} \times 100 = \boxed{} \%$$

Is your income 400 percent of the FPL or less? You might qualify for a subsidy. Go to www.CoveredCA.com to find out.

*Federal Poverty Level guidelines are valid until March 31, 2014 and are re-evaluated yearly.

The Coverage She Needs

10 Essential Benefits

The Patient Protection and Affordable Care Act ensures that all private health insurance plans offered through Covered California must include these 10 essential benefits:

- 1 **Ambulatory patient services** (outpatient care you get without being admitted to a hospital)
- 2 **Emergency services**
- 3 **Hospitalization (such as surgery)**
- 4 **Maternity and newborn care** (care before and after your baby is born)
- 5 **Mental health and substance use disorder services, including behavioral health treatment** (this includes counseling and psychotherapy)
- 6 **Prescription drugs**
- 7 **Rehabilitative and habilitative services and devices** (services and devices to help people with injuries, disabilities or chronic conditions gain or recover mental and physical skills)
- 8 **Laboratory services**
- 9 **Preventive and wellness services and chronic disease management**
- 10 **Pediatric services**

Health insurance could have saved this woman \$5,000

BY MEREDITH J. GRAHAM

Linda Johnson knows what it's like to live without health insurance. And she doesn't like it. For the past four years, she's paid out of pocket for her medical expenses, including her blood-pressure checkups and prescriptions.

The prospect of getting insurance through Covered California, for Johnson, is enough to make her sigh with relief.

"I retired and was able to use the COBRA system for three years. I was paying about \$450 a month," she recalls. When COBRA — which allows people to continue their group health coverage after leaving work — expired for Johnson, she applied for private insurance. But, because she was on blood-pressure and cholesterol medicines, she had "pre-existing conditions," and her premium would have been \$700 a month.

"On a fixed income, I couldn't do it. I just had to drop it," she says.

That was four years ago. In the time since, Johnson has worked with her doctor to limit her tests to ones that monitor her blood pressure and cholesterol, and to make sure she gets her prescriptions refilled. Everything else has been put on the back burner.

"It's been four years since I had a mammogram," Johnson says. "A lot of those preventive things that I should have been doing I have not done because I can't afford it."

Her lack of health insurance really hit home last year when Johnson fell in her backyard. Like most accidents, this one was unexpected. She ended up breaking a toe, injuring her wrist and badly bruising her face.

"In those few hours after the fall, I incurred over \$5,000 in medical bills," she says. "I'm now going down and paying \$100 a month to the hospital to try to get out of that debt."

During one of her recent visits to Oroville Hospital to pay her monthly bill, she was approached by one of the certified enrollment counselors about getting enrolled in Covered California. She decided on the spot to give it a shot.

"It was just wonderful how she was able to get my application finished online," Johnson says. "Now it's just a matter of trying to get through to the insurance company."

Johnson has not yet finalized the process of receiving insurance through Covered California, though she did say she received a letter saying she's been enrolled. Now, she's just counting the days before she can start using the first insurance she's had in four years.

"The first thing I want to do is get a wellness appointment and establish myself with a new primary physician. Once I know I'm OK, I can just maintain," she says. "(Without insurance), you feel like you're on borrowed time. There's this helplessness of not being able to plan for something that may happen."



"A lot of those preventive things that I should have been doing, I have not done because I can't afford it."

Linda Johnson

When Linda Johnson retired, she didn't realize her "pre-existing conditions" would limit her health insurance options.

PHOTO BY MELANIE MACTAVISH

Pick a Plan

Insurance offered in your area

BY
MICHELLE CARL

Covered California used a competitive process to find health insurance companies that offer affordable, quality coverage. In Butte County, two insurance providers met those standards: Anthem (PPO) and Blue Shield (EPO). Enrollees have the opportunity to choose from these plans to find one that offers the choice, value and service that meets their health needs. Each plan offers the same benefits, so you can make apples-to-apples

comparisons when shopping for coverage. Oroville Hospital accepts all insurance plans offered through Covered California.

What is an EPO? An Exclusive Provider Organization offers a full array of covered benefits from a single network. If you visit a doctor or hospital outside the network, the insurance will not pay for those services.

What is a PPO? A Preferred Provider Organization contracts with participating doctors and hospitals to create a network. You pay less if you use doctors and hospitals that belong to that plan's network, but you can use doctors and hospitals outside the network for an additional cost.

How much will I pay?

When you're shopping and find what you're looking for, your next question will be: How much does it cost?

The monthly premium cost for health insurance plans purchased through Covered California is determined based on your age, number of people in your household, annual household income and ZIP code. You can visit www.CoveredCA.com and use the Shop and Compare Tool to enter your information and find plans available in Butte County. The tool will also tell you if you or your children qualify for no-cost or low-cost Medi-Cal.

Premium assistance

Eligibility for premium assistance is based on your household size and income. Using your annual income in relation to the Federal Poverty Level, a maximum amount you will have to contribute toward your monthly premium is determined. The government will pay for the rest. Premium assistance will be applied immediately to lower your monthly payment. Use the Shop and Compare Tool at www.CoveredCA.com to find out if you qualify for premium assistance and how much you can receive.

Coverage level

Coverage is offered in four levels: Bronze, Silver, Gold and Platinum. These levels determine how much you will pay and how much the insurance company will pay when you receive a medical service. Bronze has the lowest monthly premium, but you will pay more when you see the doctor or go to the hospital. Silver has a higher monthly premium, but you will pay less when you see the doctor or go to the hospital.

Examples

Here are some examples of what Oroville residents might pay, based on three scenarios:

Single mom, 40, three children, \$35,000 income

This mother's children would be covered by Medi-Cal. She can purchase Enhanced Silver-94-level insurance for herself for as low as \$105 a month, after receiving \$207 in premium assistance.

Single man, 30, no children, \$30,000 income

This man can purchase Bronze-level coverage for as low as \$131 a month, after receiving \$76 in premium assistance.

Married couple, 40, two children, \$70,000 income

This whole family can get coverage with a Bronze-level plan for as low as \$286 a month, after receiving \$413 in premium assistance.

**Scenarios based on information from Covered California's Shop and Compare Tool using ZIP code 95966.*



10 Things

you may not know about getting insurance through Covered California

BY
MICHELLE CARL

1. Your pre-existing condition won't affect the cost of your insurance.

What you pay for in a monthly premium is based only on age, where you live (ZIP code), household size, and the health plan and coverage level you select. Health insurance plans offered through Covered California cannot charge you more or refuse to cover you because you have a pre-existing health condition.

2. A family of four that earned \$58,875 in 2013 may qualify for help paying a monthly premium.

Eligibility for premium assistance is based on household income and family size. Assistance is given on a sliding scale, which gives those who make less money more financial support to pay their monthly premium. Premium assistance is only available through Covered California.

3. If you can get insurance through your workplace, you may not qualify for assistance.

If you can get affordable health insurance through another source such as an employer or government program, you may not qualify for assistance through Covered California to help pay for your premium. If your employer's insurance is determined to be unaffordable, you may be able to qualify for premium assistance.

4. Your children may qualify for Medi-Cal, even if you do not.

The Shop and Compare Tool at www.CoveredCA.com will notify you if all or part of your family qualifies for Medi-Cal.

5. You may be charged a penalty on your taxes if you don't have insurance.

If you are uninsured, you could be charged 1 percent of your annual income or \$95 (whichever is greater) on your 2014 taxes. A family will be charged \$95 per uncovered adult and \$47.50 per uncovered child (up to \$285 for a family). For 2015, the penalty increases to \$325 per adult and \$162.50 per child (up to \$975 for a family) or 2 percent of family income (whichever is greater).

6. A preventive care visit with your doctor is free.

Your annual physical and other preventive care services such as immunizations, cervical cancer screening and autism screening for children will be completely covered by your insurance, thanks to a provision in the Patient Protection and Affordable Care Act.

7. Your costs for care will vary depending on the coverage level you choose.

While it might sound nice to pay less for your monthly premium, it may mean you have to pay more when you go to the hospital or see a doctor. Pay attention to your deductible (the amount you will pay before your insurance starts to pick up the costs) and copays (the set amount you pay for a certain service, such as an emergency room visit). Plans may have a \$5,000 deductible, or no deductible at all. Some plans may have a \$3 generic drug copay, others a \$19 copay.

8. If your income changes, you should report it to Covered California.

Your income level helps determine your eligibility for Medi-Cal coverage or a subsidy to help pay your monthly premium. If your income changes over the year, your premium assistance will be adjusted. If your income changes and you do not report it to Covered California, you will be responsible for repayment of some or all of the assistance received.

9. If you need help enrolling, you can find it on the phone and in your community.

The Covered California Service Center is available to help at (888) 975-1142 and Oroville Hospital has Covered California certified enrollment counselors ready to assist you. Call (530) 532-8265 to speak with a counselor.

10. Qualifying events can trigger a special enrollment.

Even if you have coverage right now, certain events will trigger special enrollment, allowing you to sign up for insurance through Covered California after the open enrollment period has ended. These events include losing your job, having a child or making more money than allowed under Medi-Cal income limits. Open enrollment for coverage in 2014 ends March 31. The next open enrollment period will begin in Fall 2014.





You're Covered

A review of **Oroville Hospital** services and Covered California

Oroville Hospital is a private, nonprofit corporation that has been serving the community's health needs for more than half a century. The facility, which was once a small, community hospital, has grown into a large operation and adapted over the decades to maintain the highest level of patient care possible. Here is just some of what Oroville Hospital now offers:

Childbirth services
Ambulatory care
Vascular surgery

General surgery
Intensive care
Emergency care services

Diabetes care
Rehabilitation services
Cancer care

Doctors know that prevention is the key to health. Oroville Hospital has always been dedicated to offering preventive-care services. Now that more community members will have access to these screenings and tests through Covered California, the hospital and its staff have made it a priority to not only continue the high quality of medical care they've become known for, but also to educate the public on how to take advantage of health care options available to them.

Preventive-care services offered through Covered California health plans include:

Blood-pressure screenings
Immunizations
Flu shots

Annual wellness exams
Mammograms
Autism screening for infants

Sexually transmitted
infection testing and
counseling

Oroville Hospital can help you sign up for health insurance through Covered California. Just call the Financial Services Department at (530) 532-8265 to set up an appointment.

You can also go directly to www.CoveredCA.com or call Covered California at (800) 300-1506.

Brought to you by Oroville Hospital as a community service. The information provided has been compiled to the best of our ability and is believed to be accurate and current.

Oroville Hospital

2767 Olive Highway
Oroville, CA 95966
(530) 533-8500
www.OrovilleHospital.com
info@orohosp.com

Hospital Administration
(530) 532-8550

**Financial Services
Department**
(530) 532-8265

**Insurance Enrollment
Specialist**
(530) 533-9611



Oroville Hospital