



From Coverage to Care: Helping the Newly Insured Connect to Care



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“Working to Achieve Health Equity”

What is *From Coverage to Care*?

- C2C is an effort to help educate consumers about their new coverage and to connect them with primary care and preventive services that are right for them so they can live long, healthy lives.
- Resources online and in print include the Roadmap, Discussion Guide, Enrollment Toolkit, videos, and more.
- C2C builds on existing networks of community partners to educate and empower newly covered individuals.

From Coverage to Care Resources

Visit <http://marketplace.cms.gov/c2c>

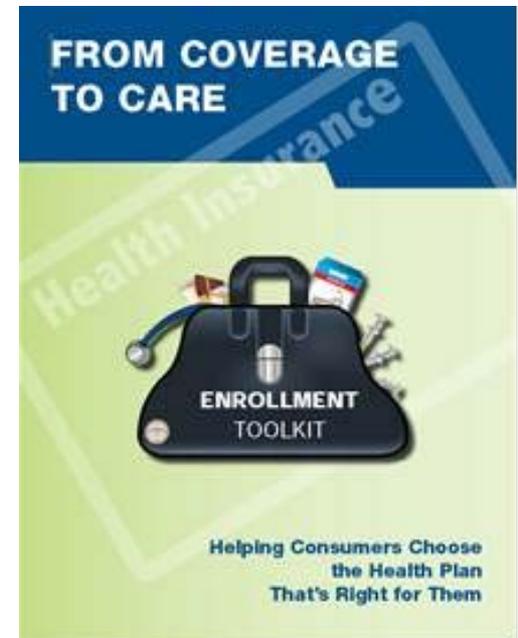
- Enrollment Toolkit
- Roadmap
 - Poster Roadmap
 - Consumer Tools
 - Insurance card
 - Primary Care vs. Emergency Care
 - Explanation of Benefits
 - Pull-out steps
- Discussion Guide
- Video vignettes



Print copies available from the CMS Clearinghouse

Enrollment Toolkit

1. Why sign up for health coverage.
2. Know before enrolling in a plan.
3. Help choosing a plan.
4. After enrollment.
5. Helping consumers with special circumstances.



Enrollment Toolkit:

What consumers should know when picking a plan

Topics:

- Plan selection: premiums vs. actual costs
- Review provider networks.
- Understand prescription drug coverage.
- Dental and vision coverage.

Resources:

- Marketplace coverage and metal levels
<https://www.healthcare.gov/choose-a-plan/plans-categories/>
- How to find information on health care providers
<https://www.healthcare.gov/choose-a-plan/find-provider-information/>

Enrollment Toolkit:

What consumers should do after they get coverage

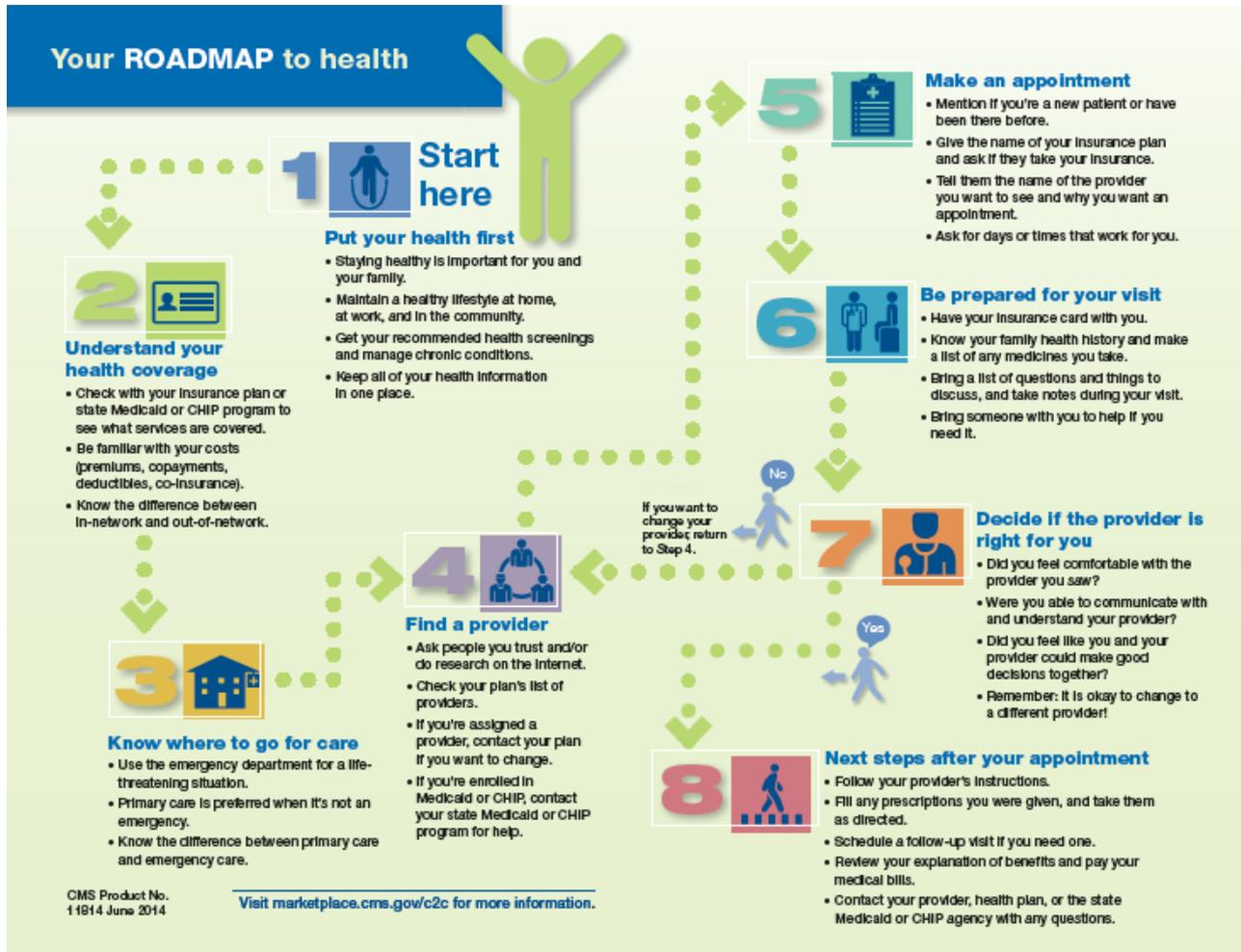
Topics:

- Confirm coverage
- Pay monthly premium
- Review plan materials and learn about benefits
- Find a provider
- Keep information current on www.healthcare.gov

Resources:

- Confirming enrollment in coverage
<https://www.healthcare.gov/apply-and-enroll/complete-your-enrollment/>
- Health plan decision appeals
<http://marketplace.cms.gov/technical-assistance-resources/internal-claims-and-appeals.pdf>

Coverage to Care Roadmap



Step 1: Put Your Health First

- Remind consumers that staying healthy is important for them and their family.
- Encourage them to make time for physical activity, healthy eating, relaxation, and sleep.
- Empower them to take an active role in their health.
- Help them learn what they can do to stay healthy and encourage them to share that knowledge with friends and family.



STEP 1

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Put Your Health First: Prevention Is For Everyone

- Encourage consumers to find a provider and get recommended health screenings and manage chronic conditions.
- Remind consumers that many preventive services are available with no cost sharing.
- Resources to share:
 - www.healthfinder.gov/myhealthfinder
 - www.healthcare.gov/preventive-care-benefits/
 - www.medicaid.gov/medicaid-chip-program-information/by-topics/benefits/prevention.html
 - www.medicare.gov/coverage/preventive-and-screening-services.html

Step 2: Understand Your Health Coverage

Key Points for Consumers

- Check with your insurance plan or state Medicaid or CHIP program to see what services are covered.
- Be familiar with your costs (premiums, copayments, deductibles, coinsurance).
- Know the difference between in-network and out-of-network.



Key Questions for Consumers

- *Do you know how to find a provider in your network?*
- *Can you estimate how much you will pay when you see a provider?*



Key Terms On An Insurance Card

Key terms

- 1) Member Name
- 2) Member Number
- 3) Group Number
- 4) Plan Type
- 5) Copayment
- 6) Phone Numbers
- 7) Prescription Copayment

INSURANCE COMPANY NAME

Plan type **4**

Effective date

Member Name: Jane Doe **1**
Member Number: XXX-XX-XXX **2**

Group Number: XXXXX-XXX **3**

Prescription Group # XXXXX

Prescription Copay **7**
\$15.00 Generic
\$20.00 Name brand

PCP Copay \$15.00 **5**
Specialist Copay \$25.00
Emergency Room Copay \$75.00

Member Service: 800-XXX-XXXX **6**

Step 3: Know Where To Go For Care

Newly covered consumers may not know when to visit a **Primary Care Provider** and when to use **Emergency Department** services.

Primary Care Provider	Emergency Department
<p>You'll pay your primary care copay, if you have one. This may cost you between \$0 and \$50.</p>	<p>You'll likely pay a copay, co-insurance, and have to meet your deductible before your health plan pays for your costs, especially if it's not an emergency. Your copay may be between \$50 and \$150.</p>
<p>You go when you feel sick and when you feel well.</p>	<p>You should only go when you're injured or very sick.</p>
<p>You call ahead to make an appointment.</p>	<p>You show up when you need to and wait until they can get to you.</p>
<p>You may have a short wait to be called after you arrive but you will generally be seen around your appointment time.</p>	<p>You may wait for several hours before you're seen if it's not an emergency.</p>
<p>You'll usually see the same provider each time.</p>	<p>You'll see the provider who is working that day.</p>
<p>Your provider will usually have access to your health record.</p>	<p>The provider who sees you probably won't have access to your health records.</p>
<p>Your provider works with you to monitor your chronic conditions and helps you improve your overall health.</p>	<p>The provider may not know what chronic conditions you have.</p>
<p>Your provider will check other areas of your health, not just the problem that brought you in that day.</p>	<p>The provider will only check the urgent problem you came in to treat but might not ask about other concerns.</p>
<p>If you need to see other providers or manage your care, your provider can help you make a plan, get your medicines, and schedule your recommended follow-up visits or find specialists.</p>	<p>When your visit is over you will be discharged with instructions to follow up with your primary care provider and/or specialist. There may not be any follow-up support.</p>
<p>In some areas, you may be able to go to an Urgent Care Center. If Urgent Care is available in your area, call your health plan before you go to find out how much you will have to pay.</p>	

Step 8: Next Steps After Your Visit

Key Points for Consumers

- Write down your providers' instructions and healthy living tips so you can act on them every day.
- Schedule any follow-up or other visits and fill prescriptions so you don't forget or get too busy.
- Review any documents or bills you receive and contact your plan or state Medicaid or CHIP program if you have questions.



Key Questions for Consumers

- *Do you know what to do now to keep yourself healthy?*
- *Do you know what number to call if you get sick and need to make a same-day appointment or come back?*

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STEP 8

Explanation of Benefits (EOB)

It's a summary of health care charges from the care you or those covered under your policy received. It is NOT A BILL!

Explanation of Benefits (EOB)

Customer service: 1-800-123-4567



Statement date: XXXXXX
 Document number: XXXXXXXXXX
THIS IS NOT A BILL

Member name:
 Address:
 City, State, Zip:

Subscriber number: XXXXXXXXXX ID: XXXXXXXXXX Group: ABCDE Group number: XXXXXX

Patient name:		Provider:		Claim number: XXXXXXXXXX							
Date received:		Payee:		Date paid: XXXXXXXXXX							
Claim Detail				What your provider can charge you		Your responsibility			Total Claim Cost		
Line No.	Date of Service	Service Description	Claim Status	Provider Charges	Allowed Charges	Co-Pay	Deductible	Co-Insurance	Paid by Insurance	What You Owe	Remark Code
1	3/20/14-3/20/14	Medical care	Paid	\$31.60	\$2.15	\$0.00	\$0.00	\$0.00	\$2.15	\$0.00	PDC
2	3/20/14-3/20/14	Medical care	Paid	\$375.00	\$118.12	\$35.00	\$0.00	\$0.00	\$83.12	\$35.00	PDC
			Total	\$406.60	\$120.27	\$35.00	\$0.00	\$0.00	\$85.27	\$35.00	

Remark Code: PDC—Billed amount is higher than the maximum payment insurance allows. The payment is for the allowed amount.

Other Information in the Roadmap

- Glossary of health coverage terms.
- Resource list.
- Personal health tracking checklist.
- Health information page for coverage and provider information.

From Coverage to Care Resources in Other Languages

DE LA COBERTURA AL CUIDADO DE SU SALUD
Una Guía para Un Mejor Cuidado y Una Vida Más Saludable

من التغطية إلى الرعاية الصحية
خطة لرعاية
وصحة أفضل

DE PWOTEKSYON A SWEN
Yon Fèy de wout pou amelyorasyon jan ou ka resevwa swen ak sante pibyen

ОТ СТРАХОВАНИЯ К МЕДИЦИНСКОМУ ОБСЛУЖИВАНИЮ
План действий: как получить лучшее медицинское обслуживание и укрепить своё здоровье

從保險到醫療
改善醫療、增進健康路線圖

의료보장에서부터 진료까지
보다 나은 진료 및 건강한 삶을 향한 로드맵

TỪ ĐÀI THỢ ĐẾN CHĂM SÓC
Con đường dẫn tới việc Chăm Sóc Tốt Hơn Và Sống Khỏe Mạnh Hơn

Who's Using Our Resources?

- Community Health Centers
- Hospitals
- Insurance Companies
- State and County Health Departments
- Area Agencies on Aging
- Tribal Organizations
- Assistors and Brokers
- Libraries
- Faith-Based Organizations
- Congressional Offices
- Voter Rights Organizations
- Legal Aid Societies
- Universities
- United Way
- SHIP Counselors
- Primary Care Associations
- Dialysis Facilities
- Ryan White Providers

Conclusion

“A journey of a thousand miles begins with a single step.” (Lao-tzu, 604 BC - 531 BC)

Together we can ensure that all Americans have access to quality affordable health coverage, and that disparities in health are eliminated.

Get Resources

Marketplace.cms.gov/c2c

Contact Us

Coveragetocare@cms.hhs.gov