

2022 AFFORDABLE CARE ACT HEALTH INSURANCE MARKETPLACE



ISSUE BRIEF

JANUARY

2022

Introduction

The ninth annual open enrollment period (OEP) for the Kansas health insurance marketplace created by the Affordable Care Act (ACA) began on November 1, 2021, and ends January 15, 2022. While the OEP has ended on December 15 for the past four years, the Centers for Medicare and Medicaid Services (CMS) announced a Final Rule on September 17 extending the 2022 OEP from December 15 to January 15 to provide consumers with an additional 30 days to review and sign up for coverage. Coverage for individuals who enrolled by December 15 became effective January 1, 2022. Coverage for individuals who enrolled after December 15 but before January 15 will become effective February 1, 2022.

The federal government continues to operate the marketplace in Kansas through Healthcare.gov. During the 2021 OEP that ended on December 15, 2020, 88,627 Kansans selected or were automatically re-enrolled in a health insurance plan through Healthcare.gov. However, in January 2021, CMS announced a special enrollment period (SEP) that started February 15 and ended May 15, 2021. On March 23, 2021, in conjunction with implementation of the American Rescue Plan Act (ARPA), CMS announced an extension of the SEP through August 15, 2021, to allow individuals without qualifying life events (QLE) to enroll or re-evaluate their coverage needs to take advantage of increased Advance Premium Tax Credits

(APTC) made available in the ARPA. During the SEP that ended on August 15, 2021, 21,220 Kansans enrolled in new marketplace coverage. These were individuals who were not actively enrolled as of February 14 and made a plan selection on or after February 15 that was still active as of August 15. This increased the total enrollment through the Kansas marketplace in 2021 to 109,847 Kansans.

This brief provides information about plan options offered for the 2022 plan year, health insurance costs, financial assistance options and factors impacting enrollment.

Plan Options

For the 2022 plan year, seven insurers are offering 123 health plans on the Kansas marketplace (*Figure 1, page 2*) — an increase from 2021 when 100 plans were available from six insurers. The companies include Medica Insurance Company (105 counties); Blue Cross and Blue Shield of Kansas, Inc. (103 counties); Ambetter from Sunflower Health Plan (91 counties); Cigna Healthcare (8 counties); US Health and Life (7 counties); Oscar Insurance Company (2 counties) and Blue Cross and Blue Shield of Kansas City (2 counties).

All seven insurers are offering expanded bronze, silver and gold plans. Three insurers are offering bronze plans, and two insurers are also offering catastrophic plans. For the fifth consecutive year, there are no platinum plans being offered to individuals on the Kansas marketplace. Like in

KEY POINTS

- ✓ For plan year 2022, seven insurers are offering 123 health insurance plans on the Kansas marketplace.
- ✓ The average monthly premium for a benchmark silver plan in Kansas in 2022 before applying the Advance Premium Tax Credit (APTC) decreased by around 4.0 percent, which was slightly more than the 3.1 percent decrease in the average premium before APTC for a benchmark silver plan nationally. However, some families may see monthly premiums of more than \$2,000 per month and deductibles of more than \$16,000 per year.
- ✓ For the 2022 plan year, the American Rescue Plan Act (ARPA) is making APTC available to consumers with household income above 400 percent of the federal poverty level (FPL) to help them pay for monthly premiums, unless the benchmark silver plan premium is less than 8.5 percent of their household income.
- ✓ Under ARPA, consumers with household income between 100 to 150 percent FPL may qualify for a free or nearly free plan if they enroll in a benchmark silver plan.
- ✓ The enhanced APTC is expected to expire at the end of 2022.

2021, all counties in Kansas have at least two insurers offering coverage. Unlike last year, all plans offered are exclusive provider organization (EPO) plans, which only cover services provided in-network by a “narrow network” of providers, except in an emergency.

Under the ACA, dental coverage is an essential health benefit for children enrolled in an ACA-compliant health plan and is included in the premium cost, but not for adults. Some insurers offer policies with both health and dental coverage for adults, meaning the premium covers both health and dental policies and Advance Premium Tax Credits (APTC) can be applied. Alternatively, adults

can purchase a stand-alone dental plan, but they also must be enrolled in an ACA-compliant health plan and will be responsible for two separate premiums. APTCs cannot be applied to stand-alone dental plan premiums. There are a total of 16 stand-alone dental plans available from five insurers for 2022.

Health Insurance Costs

The consumer’s health care cost depends on their monthly insurance premiums and their out-of-pocket costs for deductibles, co-payments, co-insurance and uncovered services.

Figure 1. Marketplace Health Insurance Plans and Dental Plans Available in Kansas, 2022 Plan Year

	Company	Type	Availability by County	Plan Type					
				Catastrophic	Bronze	Expanded	Silver	Gold	Platinum
Health Insurance Plans	Ambetter from Sunflower Health Plan	EPO	Not available in Clark, Finney, Ford, Grant, Gray, Hamilton, Haskell, Kearney, Mead, Morton, Stanton, Stevens, Seward, and Wallace counties	0	2	8	11	4	0
	Blue Cross and Blue Shield of Kansas City	EPO	Johnson and Wyandotte counties	0	0	5	3	1	0
	Blue Cross and Blue Shield of Kansas, Inc	EPO	Not available in Johnson and Wyandotte counties	0	0	2	3	1	0
	Cigna Healthcare	EPO	Butler, Harvey, Johnson, Leavenworth, Miami, Sedgwick, Sumner and Wyandotte counties	0	2	4	10	4	0
	Medica Insurance Company	EPO	Plans available statewide	3	5	9	4	5	0
	Oscar Insurance Company	EPO	Johnson and Wyandotte counties	1	0	12	10	6	0
	US Health and Life	EPO	Butler, Cowley, Harper, Harvey, Kingman, Sedgwick, and Sumner counties	0	0	4	3	1	0
Total Health Plans: 123				4	9	44	44	22	0
Dental Plans	Company	Availability by County		Individual or Family					
	BEST Life	Plans available statewide		4					
	Dentegra Insurance Company	Allen, Anderson, Bourbon, Butler, Cherokee, Coffey, Crawford, Douglas, Elk, Franklin, Greenwood, Harvey, Johnson, Labette, Leavenworth, Linn, Miami, Montgomery, Neosho, Sedgwick, Wilson, Woodson and Wyandotte counties		2					
	Guardian	Not available in Cheyenne, Clark, Clay, Cloud, Decatur, Ellis, Finney, Ford, Geary, Gove, Graham, Grant, Gray, Greenley, Hamilton, Haskell, Hodgeman, Kearny, Lane, Logan, Meade, Morton, Norton, Rawlins, Riley, Saline, Scott, Seward, Sheridan, Sherman, Stanton, Stevens, Thomas, Wallace and Wichita counties		4					
	Renaissance Dental	Plans available statewide		4					
	Truassure Insurance Company	Plans available statewide		2					
Total Dental Plans: 16									

Note: Companies offering plans on the marketplace also must offer those plans off the marketplace. However, Advance Premium Tax Credits (APTC) and cost-sharing reductions are available only when enrolling in coverage through the marketplace.

Source: 2022: Overview of the Health Insurance Market in Kansas, Kansas Insurance Department.

Premiums on the Kansas marketplace decreased in plan year 2022. The average premium for a silver benchmark plan in Kansas is around 4.0 percent lower than it was in plan year 2021. The decrease in the average silver benchmark plan premium in Kansas was slightly larger than the 3.1 percent decrease nationally. *Figure 2* shows average monthly premiums across all counties in Kansas for the silver benchmark plan.

As shown in *Figure 3* (see insert), there is considerable variation in monthly premiums across counties. For example, in rating area 4 the difference in premiums for the silver benchmark plan for a couple age 60 is more than \$800, and premiums can be greater than \$2,000 per month for families and older adult couples. Premiums vary based on regional factors such as the cost of care, cost of living, and number and type of providers available. Premiums also vary based on specific characteristics of persons being covered, including age, where they live, whether they smoke and how many people are covered. Higher rates cannot be charged based on gender or for people with pre-existing health conditions.

In addition to the monthly premium paid, consumers are responsible for certain out-of-pocket expenses, including deductible, co-payment and co-insurance when they use services. Except for certain preventative and other services specified by plans, consumers generally must pay the deductible amount for covered services first before the insurance plan starts to pay. Co-payment or co-insurance are usually required after the deductible is met. The deductible for the benchmark silver plan ranges from \$3,700 to \$8,100 for an individual and \$7,400 to \$16,200 for a family in 2022.

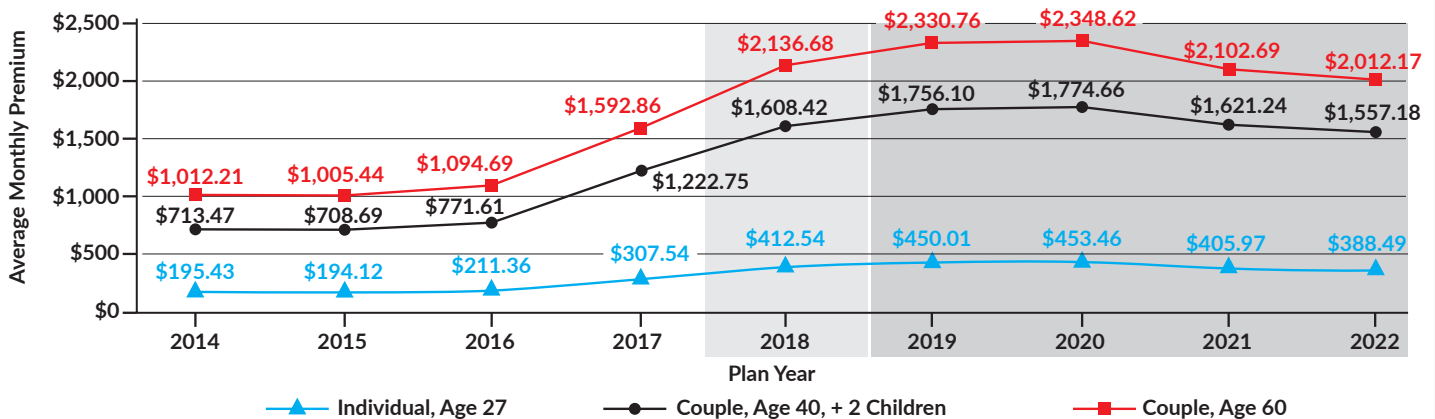
ACA marketplace plans also are required to state a maximum out-of-pocket cost, which is the most that consumers must pay for covered services in the plan year. This maximum amount varies by consumer's income. However, regardless of income (if eligible for marketplace coverage), the maximum amount a consumer could be expected to pay for covered services is up to \$8,700 for an individual or up to \$17,400 for a family of four.

Financial Assistance

The ACA made financial assistance available to marketplace enrollees at certain income levels to help pay monthly premiums and out-of-pocket expenses. Prior to enactment of the federal American Rescue Plan Act (ARPA), consumers with household income between 100 and 400 percent of the federal poverty level (FPL; \$26,500 to \$106,000 for a family of four in 2021) were eligible for Advance Premium Tax Credits (APTC) and spent between 2.0 to 9.83 percent of their income for their insurance premiums.

Under the ARPA, consumers in 2022 with household income between 100 and 400 percent FPL will spend between 0 and 8.5 percent of their household income on premiums for a silver benchmark plan. Households with income above 400 percent FPL are now also eligible for APTC that cap their premiums for a silver benchmark plan at 8.5 percent of their income. Consumers with household income between 100 and 150 percent FPL (\$39,750 for a family of four in 2021) may qualify for a free or nearly free marketplace plan. In addition, lawfully present immigrants with annual household income below 100 percent FPL may be qualified for APTC and other savings on the marketplace if they are not otherwise eligible for

Figure 2. Average Monthly Premium, Before APTC, for the Silver Benchmark Plan on the Kansas Marketplace, 2014-2021 Plan Years



Note: The amounts shown are the statewide average monthly premiums for the "benchmark silver plan," which is a middle-of-the-road plan in terms of covered benefits and cost among the plans available on the marketplace. The benchmark silver plan is the second-lowest-cost silver plan (SLCSP) available in a county. The identification of SLCSP and premiums follows the methodology established by the Centers for Medicare and Medicaid Services (CMS) in the [Plan Year 2022 Qualified Health Plan Choice and Premiums in HealthCare.gov States report](#). Shading indicates a slight change in methodology for identifying the SLCSP.

Source: KHI analysis of data from the Centers for Medicare and Medicaid Services Health Insurance Marketplace, 2014-2022.

Medicaid and meet other eligibility requirements. Other people under 100 percent FPL are generally not eligible for financial assistance on the marketplace. These enhanced marketplace subsidies expire at the end of 2022.

APTC are based on the cost of the benchmark plan but may be used to purchase any plan available on the marketplace, regardless of the metal level. With APTC, consumers could be better off with a more benefit-rich gold plan with a lower deductible. For example, the cheapest gold plan in Sedgwick County could have a monthly premium of \$396 before APTC (or \$110 after APTC) and a deductible of \$750 for an individual with household income of 233 percent FPL. In comparison, the same individual can purchase the cheapest silver plan with a lower monthly premium of \$369 before APTC (or \$83 after APTC) but would have a higher deductible of \$3,700. Examples of reduced premiums from APTC in 2022 are shown in *Figure 4* (see insert).

Although the ARPA made changes in APTC eligibility and the calculation of APTC, the rules for cost-sharing reduction (CSR) subsidies remain the same. Under the ACA, consumers with household income between 100 and 250 percent FPL (\$26,500 to \$66,250 for a family of four in 2021) who enroll in silver plans continue to be eligible for CSR subsidies to lower their out-of-pocket expenses. CSR subsidies are not available with any other metal level. For example, the deductible could be lowered to \$600 with co-payment/co-insurance for a benchmark silver plan for an individual in Sedgwick County with income between 100 and 150 percent FPL. An individual in Sedgwick County with income between 151 and 200 percent FPL could see their deductible lowered to \$1,400 with co-payment/co-insurance for a benchmark plan.

Factors Impacting Enrollment on the ACA Marketplace

For the 2022 OEP, several factors may impact enrollment.

Enhanced APTC. For some consumers, the enhanced APTC provisions in the ARPA will make health plans on the ACA marketplace more affordable and likely increase the number of enrollees.

Increased Navigator Funding. To help people enroll in coverage through the ACA marketplace, the Biden Administration announced in August that it was awarding \$80 million in grants for the 2022 plan year to 60 navigator organizations across the country. Navigators, including community and consumer-focused nonprofit organizations, faith-based organizations, and hospitals, are authorized under the ACA to assist consumers with enrollment applications and identifying financial assistance. In Kansas, two organizations, Community Care Network of Kansas (CCNK) and Thrive Allen County, received almost \$1.7 million for the period of August 2021 through August 2022. CCNK will be serving consumers statewide and Thrive will be serving consumers in 42 rural and geographically isolated counties.

Special Enrollment Period for Low-Income Households. Starting in 2022, consumers with household income between 100 to 150 percent FPL (\$39,750 for a family of four in 2021) will be allowed to enroll throughout the year, making it easier for low-income individuals and families to sign up for coverage.

Looking Ahead

The addition of more plans and insurers, decreasing premiums, the continuing impact of COVID-19, and the enhanced APTC benefits provided by the ARPA could be expected to again increase enrollment nationwide and in Kansas for the 2022 plan year. While many consumers will likely take advantage of the enhanced APTC benefits provided by the ARPA, these provisions are set to expire at the end of 2022 and consumers will likely see a return to the pre-ARPA rules established in the Affordable Care Act for 2023 without new legislation.

On November 19, 2021, the House of Representatives narrowly passed H.R. 5376, the Build Back Better Act, which would extend the ARPA provisions that eliminated the APTC income eligibility cap and increased APTC amounts through the end of 2025. It is not clear at this point whether the bill will be considered by the Senate in 2022.

ABOUT THE ISSUE BRIEF

This brief is based on work done by Wendy Dang, M.P.H., C.P.H., Linda J. Sheppard, J.D., and Hina B. Shah, M.P.H.. It is available online at khi.org/policy/article/22-03.

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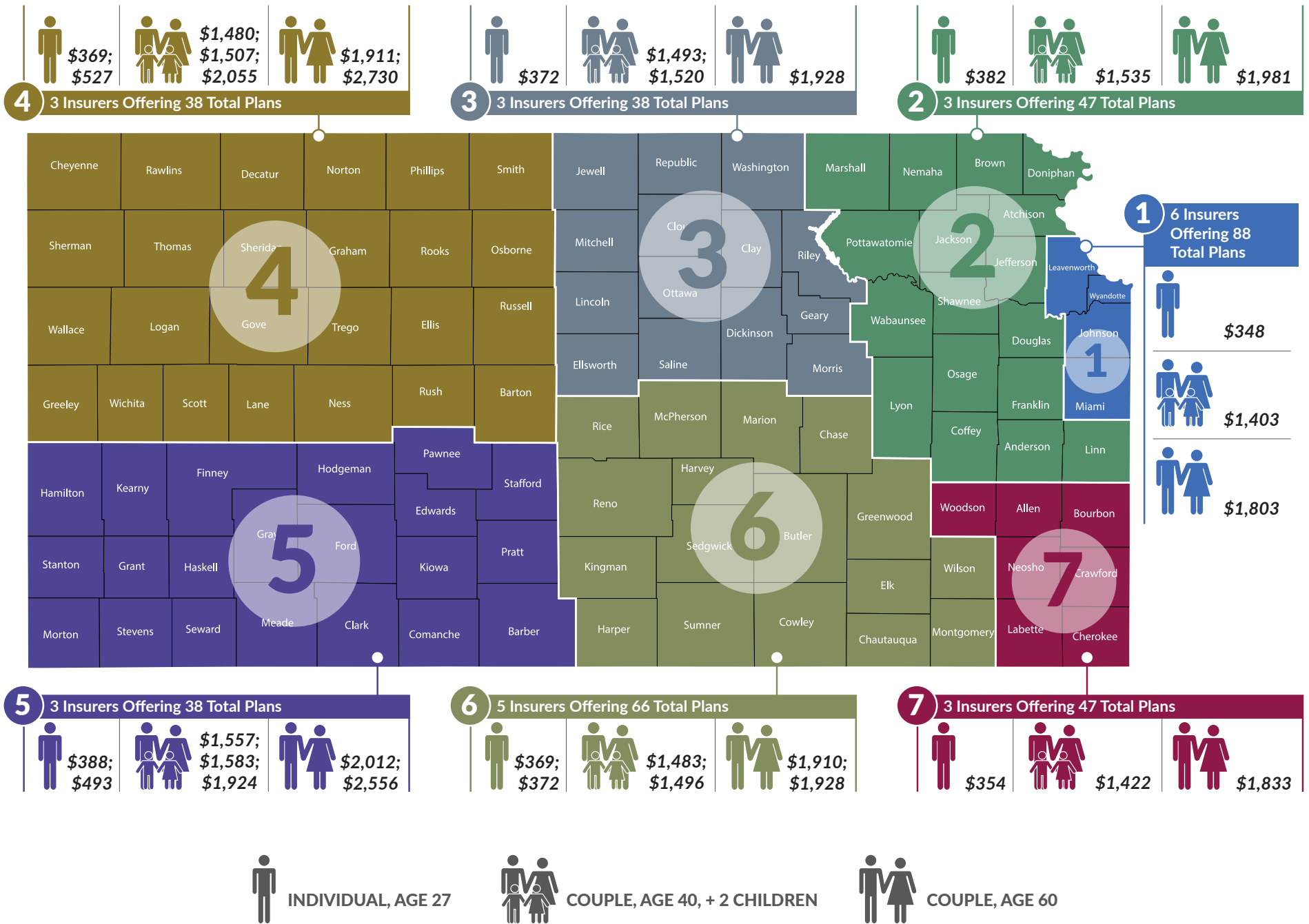


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Figure 3: Monthly Premium by Rating Area for Silver Benchmark Plan on the Kansas Marketplace, 2022 Plan Year



Note: Premiums shown are before application of Advance Premium Tax Credits (APTC). The premiums shown assume that all household members will enroll for marketplace health insurance coverage. Data are actual monthly premiums for the “benchmark plan,” a middle-of-the-road plan in terms of covered benefits and cost among the plans available on the Kansas marketplace. Technically, the benchmark plan is the second-lowest-cost silver plan (SLCSP). Some rating areas have more than one silver benchmark plan because some insurers offer plans in only some counties within a rating area. Number of total health plans includes all bronze, expanded bronze, silver, gold and catastrophic health insurance plans offered in each rating area. The same plan may be offered in more than one rating area.

Source: Kansas Health Institute analysis of 2022 health insurance marketplace data provided by the Centers for Medicare and Medicaid Services.

Figure 4. Monthly Premium Before Advance Premium Tax Credit (APTC) on the Kansas Marketplace, 2022 Plan Year

Below are the monthly premiums, before APTC, in the seven Kansas rating areas for the following plans: silver benchmark, lowest-cost bronze, lowest-cost gold, highest-cost gold and the lowest-cost catastrophic. Some rating areas have more than one silver benchmark plan because some insurers offer plans in only some counties within a rating area.

Premium – Individual, Age 27

Rating Area	Silver Benchmark Plan	Lowest Bronze Plan (Including Expanded)	Lowest Gold Plan	Highest Gold Plan	Lowest Catastrophic Plan
1	\$348	\$272	\$370	\$567	\$259
2	\$382	\$300	\$406	\$809	\$385
3	\$372	\$291	\$396	\$777	\$378
4	\$369; \$527	\$293	\$396	\$748	\$364
5	\$388; \$493	\$333	\$440	\$759	\$369
6	\$369; \$372	\$283	\$396	\$594	\$279
7	\$354	\$277	\$376	\$794	\$372

Note: Expanded bronze plans are included in the lowest-cost bronze plan column. Catastrophic plans are only available to individuals under age 30 and those with a hardship waiver.

Premium – Couple, Age 40, + 2 Children

Rating Area	Silver Benchmark Plan	Lowest Bronze Plan (Including Expanded)	Lowest Gold Plan	Highest Gold Plan	Lowest Catastrophic Plan
1	\$1,403	\$1,062	\$1,442	\$2,213	\$1,011
2	\$1,535	\$1,167	\$1,585	\$3,156	\$1,501
3	\$1,493; \$1,520	\$1,136	\$1,543	\$3,028	\$1,473
4	\$1,480; \$1,507; \$2,055	\$1,141	\$1,544	\$2,917	\$1,419
5	\$1,557; \$1,583; \$1,924	\$1,298	\$1,795	\$2,960	\$1,440
6	\$1,483; \$1,496	\$1,103	\$1,542	\$2,316	\$1,089
7	\$1,422	\$1,080	\$1,467	\$3,096	\$1,450

Note: Table assumes that both children are included in the family premium and not enrolled in Medicaid or the Children's Health Insurance Program (CHIP). Premiums will be lower if children are covered by Medicaid or CHIP.

Premium – Couple, Age 60

Rating Area	Silver Benchmark Plan	Lowest Bronze Plan (Including Expanded)	Lowest Gold Plan	Highest Gold Plan	Lowest Catastrophic Plan
1	\$1,803	\$1,411	\$1,916	\$2,939	\$1,343
2	\$1,981	\$1,550	\$2,105	\$4,192	\$1,994
3	\$1,928	\$1,509	\$2,049	\$4,022	\$1,957
4	\$1,911; \$2,730	\$1,515	\$2,052	\$3,875	\$1,886
5	\$2,012; \$2,556	\$1,725	\$2,279	\$3,933	\$1,914
6	\$1,910; \$1,928	\$1,465	\$2,049	\$3,077	\$1,447
7	\$1,833	\$1,435	\$1,949	\$4,112	\$1,926

Note: Expanded bronze plans are included in the lowest-cost bronze plan column. Catastrophic plans are only available to individuals under age 30 and those with a hardship waiver.

MONTHLY PREMIUM



PREMIUM TAX CREDIT



ACTUAL MONTHLY COST TO CONSUMER

Advance Premium Tax Credit (APTC) on the Kansas Marketplace, 2022 Plan Year

The Advance Premium Tax Credit (APTC) is based on the premium for the silver benchmark plan in each county. The APTC can then be applied to any plan on the marketplace, excluding catastrophic plans. The APTC shown in this figure is based on the cost of the benchmark plan in Sedgwick County, which is in Rating Area 6, and may vary slightly in other rating areas. Depending on household annual income and benchmark premium, consumers may not receive an APTC to reduce premium cost and will pay the maximum of 8.5 percent of income towards a marketplace health insurance plan. The effective maximum income to receive APTC is shown below for each household.

Premium – Individual, Age 27

FPL	Annual Income	Monthly Premium Tax Credit Estimate	Max Cost Per Month	Percent of Income Paid
100%	\$12,880	\$369	\$0	0.0%
155%	\$20,000	\$365	\$4	0.2%
233%	\$30,000	\$286	\$83	3.3%
311%	\$40,000	\$160	\$209	6.3%
400%	\$51,520	\$4	\$365	8.5%
404%	\$52,094	\$0	\$369	8.5%

Premium – Couple, Age 40, + 2 Children

FPL	Annual Income	Monthly Premium Tax Credit Estimate	Max Cost Per Month	Percent of Income Paid
100%	\$26,500	\$1,438	\$0	0.0%
113%	\$30,000	\$1,438	\$0	0.0%
226%	\$60,000	\$1,285	\$153	3.1%
340%	\$90,000	\$914	\$524	7.0%
400%	\$106,000	\$687	\$751	8.5%
766%	\$203,012	\$0	\$1,438	8.5%

Premium – Couple, Age 60

FPL	Annual Income	Monthly Premium Tax Credit Estimate	Max Cost Per Month	Percent of Income Paid
100%	\$17,420	\$1,910	\$0	0.0%
115%	\$20,000	\$1,910	\$0	0.0%
230%	\$40,000	\$1,804	\$106	3.2%
344%	\$60,000	\$1,555	\$356	7.1%
400%	\$69,680	\$1,417	\$494	8.5%
1,548%	\$269,647	\$0	\$1,910	8.5%

Note: Amount of APTC shown in the table assumes that eligible children will enroll in Medicaid or CHIP. In Kansas, children may be eligible if family income is less than 232 percent of the federal poverty level (FPL) (\$61,840 for a family of four in 2021).