



# ENROLLMENT RESULTS FOR THE 2017 KANSAS HEALTH INSURANCE MARKETPLACE

*Almost 99,000 Kansans enrolled for 2017 coverage*

## Introduction

The fifth annual open enrollment period for Healthcare.gov, the health insurance marketplace created by the Affordable Care Act (ACA), will begin on November 1 and end on December 15, 2017. This 45-day open enrollment period—half as long as the open enrollment periods for the last three years—will be the only enrollment opportunity for consumers who wish to purchase individual health insurance coverage for 2018 through the federally facilitated Kansas marketplace. Individuals who qualify for a special enrollment period after December 15 due to a “life event” (e.g., loss of previous coverage or change in family status) must enroll within 60 days from the date of the qualifying event.

This brief looks back at the results of the open enrollment period for plan year 2017, during which 98,780 Kansans—and 12.2 million consumers nationwide—selected or were automatically re-enrolled in a marketplace plan.

## Enrollee Characteristics

Data from the U.S. Department of Health and Human Services (HHS) show that 132,262

Kansans shopped for a marketplace plan for 2017 and were determined eligible to enroll, but only 98,780 Kansans completed their enrollment and selected a plan or were automatically re-enrolled. HHS reported that 87.4 percent (86,310) of these enrollees “effectuated” their enrollment by paying premiums by March 15, 2017. HHS does not provide detailed data on those with effectuated enrollment, so this analysis is based on the set of 98,780 Kansans who were enrolled for 2017.

### Age

More than one in four (28.9 percent or 28,557) Kansas enrollees were age 18–34 (Figure 1, page 2), slightly higher than the national proportion of 27.1 percent for this age group for 2017. This age demographic is often noted as important because younger adults are generally healthier and their premiums help support the cost of older enrollees.

Kansans age 55–64 comprised more than a quarter (27.2 percent or 26,909) of total enrollees for 2017, slightly higher than their proportion nationally (26.8 percent). For individuals in this age group, who are

## KEY POINTS

- ✓ For 2017, 98,780 Kansans were enrolled in a plan offered on the health insurance marketplace created by the Affordable Care Act (ACA). Of these, 86,310 paid premiums and actually gained coverage.
- ✓ The average monthly premium on the Kansas marketplace for 2017 was \$476, and the average monthly APTC was \$379. For Kansans receiving APTC, the average net monthly premium after tax credits was about \$110.
- ✓ More than one in four (28.9 percent) Kansas enrollees were age 18–34, an important age group because of their generally better health status and lower expected health care costs.
- ✓ For the 2018 enrollment period that begins November 1, 2017, a total of 23 health plans will be offered by three companies and every Kansas county will have at least one insurer. The changes in premiums range from a decrease of 8.8 percent to an increase of 29.0 percent.
- ✓ The large majority (84.5 percent) of Kansans who obtained insurance through the marketplace received financial assistance in the form of either advance premium tax credits (APTC) or cost-sharing subsidies.

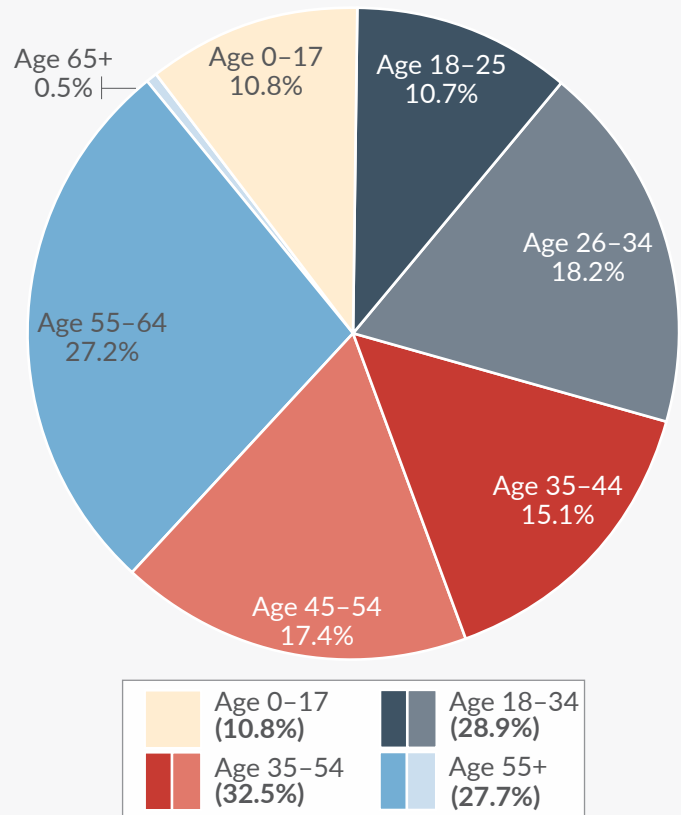
more likely to have a preexisting or chronic health condition, the ACA-required comprehensive health benefits included in marketplace plans are likely very attractive.

More than one in ten (10.8 percent or 10,717) Kansas marketplace enrollees were children age 0-17, which was higher than the national proportion for that age group (8.7 percent). It is also possible that additional Kansas children were identified by the marketplace as potentially eligible for Medicaid or the Children’s Health Insurance Program (CHIP) and were redirected to those programs. During the 2017 open enrollment period, the marketplace identified 9,173 individuals who were potentially eligible for Medicaid or CHIP, but the data do not show how many of those individuals were children or how many were ultimately determined to be eligible for those programs.

### Race/Ethnicity

The majority (64.1 percent) of Kansans who selected a marketplace plan for 2017 were White (Figure 2). During the 2017 open enrollment period, only 3.3 percent of Kansans who selected a plan were Black/African American and 6.3 percent were Hispanic, Any Race. However, nearly one-quarter (24.8 percent) of Kansans did not indicate their race when selecting a marketplace plan.

Figure 1. Kansas Marketplace Enrollees: 2017 Plan Year, by Age



Note: Percentages may not sum to 100 percent due to rounding.

Source: U.S. Centers for Medicare & Medicaid Services (CMS) 2017 Marketplace Open Enrollment Period Public Use Files.

Figure 2. Kansas Marketplace Enrollees: 2017 Plan Year, by Race and Ethnicity

| Race                      | Number of Kansans Who Selected a Plan | Percent of Kansans Who Selected a Plan |
|---------------------------|---------------------------------------|--|
| Asian                     | 5,105                                 | 5.2%                                   |
| Black/African American    | 3,288                                 | 3.3%                                   |
| White                     | 63,357                                | 64.1%                                  |
| Multiple Races            | 1,918                                 | 1.9%                                   |
| Other                     | 653                                   | 0.7%                                   |
| Unknown                   | 24,459                                | 24.8%                                  |
| Ethnicity                 |                                       |  |
| Hispanic/Latino, Any Race | 6,235                                 | 6.3%                                   |
| Not Hispanic/Latino       | 92,545                                | 93.7%                                  |

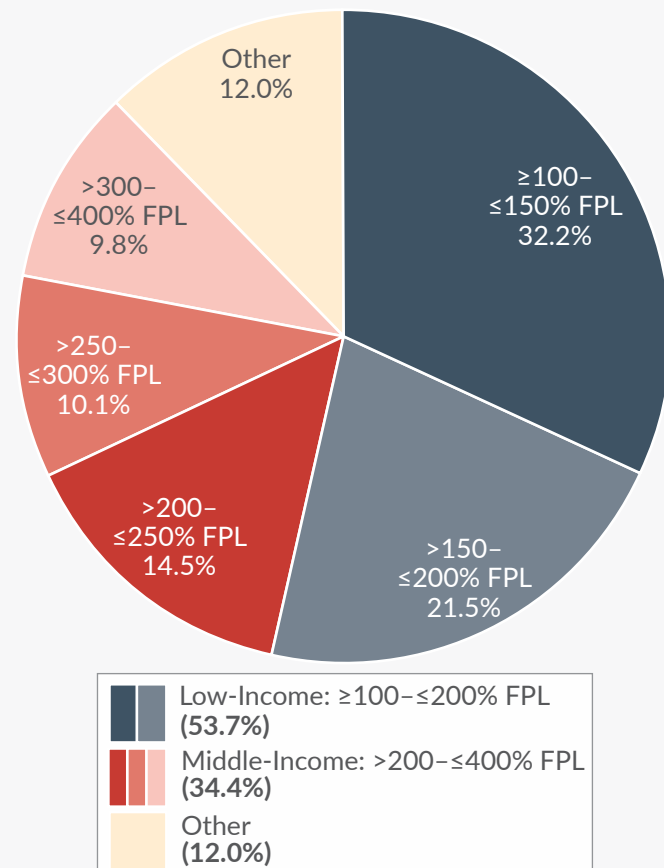
Note: “Other” = American Indian/Alaska Native and Native Hawaiian/Pacific Islander. “Unknown” = Kansans who did not indicate a race. “Hispanic/Latino” = Count of Kansans who indicated they were Mexican, Mexican American or Chicano/a, Puerto Rican, Cuban or Other ethnicity. Percentages may not sum to 100 percent due to rounding.

Source: U.S. Centers for Medicare & Medicaid Services (CMS) 2017 Marketplace Open Enrollment Period Public Use Files.

## Household Income

More than half (53.7 percent or 53,010) of Kansas enrollees had household incomes between 100 and 200 percent of the 2016 federal poverty level (FPL) (\$24,300 to \$48,600 for a family of four) (Figure 3). Under the ACA, individuals with household incomes

Figure 3. Kansas Marketplace Enrollees: 2017 Plan Year, by Family Income



Note: "Other" = approximately one-third of this group had incomes below 100 percent of FPL or above 400 percent of FPL, and two-thirds of this group did not provide their income. Percentages may not sum to 100 percent due to rounding.

Source: U.S. Centers for Medicare & Medicaid Services (CMS) 2017 Marketplace Open Enrollment Period Public Use Files.

between 100 and 400 percent of FPL (\$24,300 to \$97,200 for a family of four in 2016) may be eligible for premium tax credits to help them purchase plans on the marketplace. Individuals with incomes between 100 and 250 percent of FPL (\$24,300 to \$60,750 for a family of four in 2016) also may be eligible for subsidies that reduce out-of-pocket costs, such as deductibles and co-payments. This financial assistance is likely an important feature for low-income Kansans who purchase coverage on the marketplace. Although President Trump announced on October 12, 2017, that the federal government will no longer be reimbursing insurance companies for providing these cost-sharing subsidies, the ACA requires the companies to continue to provide the subsidies to low-income eligible enrollees. In anticipation of this decision by the Trump administration, the insurance companies offering coverage on the Kansas marketplace were allowed to adjust their premium rates for 2018 to account for the loss of those reimbursements.

## Plan Selection

During the 2017 open enrollment period, 23 insurance plans in four "metal" tiers (bronze, silver, gold and catastrophic) were offered on the Kansas marketplace (Figure 4) by Blue Cross and Blue Shield of Kansas City, BlueCross and BlueShield Kansas Solutions, Inc., and Medica Insurance Company. Most Kansas enrollees (65.5 percent) selected a silver plan, which covers about 70 percent of a typical population's health care expenses.

Plan selection in Kansas was similar to that nationally, with roughly the same proportion of enrollees in each tier except for the gold tier, which covers about 80 percent of a typical population's health care expenses. In Kansas, 7.9 percent of enrollees selected a gold plan compared to 4.1 percent nationally. This

Figure 4. Kansas and U.S. Marketplace Selection: 2017 Plan Year, by Metal Level

| Metal Level  | Number of Plans Available in Kansas | Kansans Enrolled | Percent of Total Kansas Enrollees | Percent of Total U.S. Enrollees |
|--------------|-------------------------------------|------------------|-----------------------------------|---------------------------------|
| Catastrophic | 1                                   | 817              | 0.8%                              | 0.9%                            |
| Bronze       | 9                                   | 25,412           | 25.7%                             | 22.9%                           |
| Silver       | 8                                   | 64,735           | 65.5%                             | 71.1%                           |
| Gold         | 5                                   | 7,816            | 7.9%                              | 4.1%                            |
| Platinum     | 0                                   | 0                | 0                                 | 1.0%                            |

Note: Platinum plans were not offered by the three Kansas health insurance companies in the 2017 marketplace.

Source: U.S. Centers for Medicare & Medicaid Services (CMS) 2017 Marketplace Open Enrollment Period Public Use Files.

may indicate that more Kansans anticipated needing a health plan with richer benefits.

Beginning with the second open enrollment period in November 2014, HHS began to actively engage with previous marketplace enrollees about re-enrolling in coverage for the following year. Each year since, enrollees have been encouraged to return to the marketplace to “actively” re-enroll in their current plan or to select a new plan for the coming year. Individuals who failed to actively re-enroll were automatically re-enrolled in their current plan or a similar plan if their plan was no longer available. During the 2017 open enrollment period, over two-thirds of Kansans selecting a marketplace plan were re-enrollees, with 52,378 actively re-enrolling and 14,914 being automatically re-enrolled by the marketplace. Of the active re-enrollees, 50.5 percent (26,435) switched to a new plan for 2017. Nearly one-third (31.9 percent or 31,488) of Kansas enrollees were “new consumers” who did not have marketplace coverage in 2016.

For 2017, almost 22,000 Kansas marketplace enrollees selected a stand-alone dental plan; most of them (61 percent) were age 35–64.

## Financial Assistance and Premiums

The average premium for a Kansas marketplace plan in 2017 was \$476 per enrollee per month. However, more than eight in ten (84.0 percent or 83,014) enrolled Kansans received advance premium tax

credits (APTC) to reduce the cost of their monthly premium payments (Figure 5), slightly higher than the national rate of 82.7 percent. The average APTC received by Kansas enrollees was \$378.76 per month, and their average premium was \$110 per month after APTC. Over half of Kansas enrollees (54.7 percent or 54,075) received cost-sharing subsidies (CSR), slightly lower than 57.7 percent nationally.

## 2018 Open Enrollment

While some states have struggled to ensure the availability of health plan options for their consumers, the Kansas Insurance Department (KID) confirmed on October 2, 2017, that three insurance companies will be offering Kansas consumers a total of 23 health plans during the open enrollment period beginning on November 1. Medica, a company that began offering coverage in Kansas in 2017, will be offering plans in all 105 counties; Blue Cross and Blue Shield of Kansas will offer coverage in 103 counties—all but Johnson and Wyandotte; and Sunflower State Health, Inc. (a division of Centene) will be offering marketplace coverage for the first time in Johnson and Wyandotte Counties only.

KID also reported that the range of average premium rate changes for 2018 is from 8.8 percent less to 29.0 percent more than 2017 rates for plans that were offered on and off the marketplace in 2017. All three companies also will be offering new plans for 2018.

Figure 5. Kansas Marketplace Enrollees: 2017 Plan Year, by Financial Assistance

| Enrollment Status    | Kansans Enrolled | Percent of Total Kansas Enrollees |
|----------------------|------------------|-----------------------------------|
| With APTC and/or CSR | 83,494           | 84.5%                             |
| With APTC            | 83,014           | 84.0%                             |
| With CSR             | 54,075           | 54.7%                             |

Source: U.S. Centers for Medicare & Medicaid Services (CMS) 2017 Marketplace Open Enrollment Period Public Use Files.

### ABOUT THE ISSUE BRIEF

This brief is based on work done by Linda J. Sheppard, J.D., and Hina B. Shah, M.P.H. It is available online at [khi.org/policy/article/17-29](http://khi.org/policy/article/17-29).

### KANSAS HEALTH INSTITUTE

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