‘Obamacare’ enrollment spikes as TennCare unwinding continues

Insurance navigators credit improved outreach, lower prices for increased interest

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JAN 23, 2024

A record 20.4 million people enrolled in Affordable Care Act health insurance this year, and Tennessee saw one of the biggest increases — a **49.8 percent jump** in members compared to last year’s open enrollment period.
As of Jan. 10, 521,341 people had enrolled in Affordable Care Act (often called Obamacare) coverage in Tennessee, up from 348,097 in the 2022-2023 open enrollment period. Just three states saw more growth than Tennessee: West Virginia at 63.4 percent; Louisiana at 62.7 percent; and Ohio at 51.9 percent.

Aida Whitfield, health care access manager for nonprofit Family and Children’s Service in Nashville, said the change is due to a few factors: the thousands of people dropped from TennCare as the state continues its unwinding process, cheaper costs for the insurance plans and improved outreach compared to previous years.

Earlier this month, TennCare released its most recent unwinding report. In October, 140,000 people were up for renewal, and 41,149 were deemed ineligible and dropped from coverage. An additional 25,386 members up for renewal were still pending.

Of the 875,159 people who underwent the renewal process from April to October, 538,748 were renewed, and 274,286 lost TennCare coverage. Of those dropped from the roll, some were deemed ineligible, but 76 percent lost coverage because of clerical issues — either they did not return the packet or failed to complete additional information.

The Affordable Care Act open enrollment period began Nov. 1 and lasted until Jan. 16, as usual (plus the additional day for Martin Luther King Jr. Day). However, this year, there is more opportunity for people to obtain insurance through the marketplace outside of open enrollment. Those dropped from TennCare can apply when they are notified that their coverage is ending, and a new special enrollment option allows those who make under 150 percent of federal poverty level to apply at any time.
Enrolling in Affordable Care Act coverage is cheaper than in previous years, too. The Biden administration has rolled out a series of additional tax credits for low income recipients, and some insurance plans lowered prices overall to entice potential enrollees. The marketplace is open to anyone, but tax credit amounts vary by income. Whitfield observed that plans that cost $100 in previous years, now cost $50 or $60 per month.

Whitfield said TennCare’s promise to refer those removed from the roll to the health insurance marketplace has been successful. TennCare forwards contact information for those dropped from the roll to Centers for Medicare and Medicaid Services, and as a state navigator organization, Family and Children’s Services is given a list of people to contact who would be eligible.

“Having the local navigator is useful because we are very aware of all the plans that are local, and what the network is, where they can be seen — all of that,” Whitfield said. “We are able to sit down and go through all that process. That helps them and gives them a peace of mind because they know that we are aware and knowledgeable about their medical needs.”

ACA is overcoming its PR problem, said Michele Johnson, executive director of Tennessee Justice Center. When the Affordable Care Act was introduced in 2010, people thought enrolling meant support for Democrats and did not have an accurate idea of how much it would cost, she said. The online portal was harder to use in the beginning, too.

“There’s just been an amazing public relations campaign to inform people about the pathway to coverage and the affordability of it,” Johnson said. “People are surprised at the cost — how cheap they can get comprehensive coverage through the ACA.”

Even with the jump in ACA coverage, there are still coverage gaps, Johnson notes. Tennessee is now one of 10 states that has not expanded Medicaid coverage under the ACA. Childless adults who fall in the TennCare coverage gap and cannot afford private insurance may not
make enough money to obtain a tax credit for ACA, which requires that a person has income at least as high as the federal poverty level, but not higher than 400 percent of that amount (or just north of $60,000 in annual income).

“The benefit of expansion is everybody knows there’s a pathway to coverage for everyone,” she said. “Then you start to really get people to apply and not have to be super nerdy health experts to get comprehensive coverage and peace of mind.”

Many who stayed on the TennCare roll for the past three or so years began to see more value in health insurance coverage, Johnson said.

“During the pandemic we had as close as we’ve been for a long time to universal coverage in Tennessee,” Johnson said. “People got used to being able to go to the doctor, and they got used to being able to get the medicine they need. That maybe got them off the fence about applying to the Affordable Care Act.”

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