HEALTH CARE IS CHANGING:

How to Navigate Choices on Your Covered CA or Employer Sponsored Plan

Presented by: Michelle Rice

Moderated by: Carson Knight

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WHAT IS THE BLEEDING DISORDERS COUNCIL OF CALIFORNIA (BDCC)?

Our Beginning

BDCC is a 501(c)3 nonprofit organization formed in 1985 to coordinate the shared advocacy agenda of the four California hemophilia organizations.

Our Focus

BDCC coordinates statewide access, education and advocacy efforts on behalf of individuals living with bleeding disorders and rare or chronic conditions.

Our Advocacy

BDCC advocates to protect access to care, promote progressive treatment options and advance the quality of life for these individuals, families and caregivers.

HOW TO NAVIGATE CHOICES ON COVERED CALIFORNIA OR YOUR EMPLOYER SPONSORED HEALTH PLAN

Michelle Rice, CEO & President
Michelle Rice & Associates, LLC

CHOOSING A HEALTH PLAN

- **Choosing a Health Plan that is Right for You and Your Family**
  - Difficult & Time Consuming
  - Impacts both your physical and financial health
  - Changes in 2026 due to passage of the One Big Beautiful Bill Act

Ten Tips For Choosing A Health Plan

1. Start early – don't procrastinate
2. Make sure you have everything you need to begin your review
3. Have a copy of personal health history guides for each member of your family
4. Compare plan costs – including premiums, deductibles, copays and coinsurance
5. Have a glossary of commonly used health coverage terms available
6. Review the plan's provider network – are your doctors included?
7. Review the plan's summary of benefits (Search for "Extra Benefits" if offered)
8. Use a checklist to compare plans
9. Take your time, once a choice is made you are often "stuck" with it for 12 months.
10. Ask for help if you need it.

COVERED CALIFORNIA – CHANGES FOR 2026

Current Enrollees

- Plan Renewal
  - Begins October 15th, 2025
  - Automatically re-enrolled in same plan in 2025 if plan is still available and eligibility has not changed

- Financial Assistance Available 2026
  - May be lower than 2025 – exact amount determined at renewal – proof of income required

New Enrollees

- Open Enrollment
  - Begins November 1, 2025 – January 31st, 2026
    - Enroll in November or December for plan to start January 1, 2026

- Financial Assistance Available 2026
  - Assistance amounts will be lower than in 2025 - proof of income is required

COVERED CALIFORNIA – CHANGES FOR 2026

The following changes apply to new and existing enrollees:

- Financial Help and Pre-Enrollment Verification
  - Beginning September 2025 – automatic 60-day extension to fix income inconsistencies will no longer be available; people will have the standard 95 days to resolve
  - Those needing more time can call Covered California

- Low-Income Households
  - The federal government ended the special enrollment period for those with low-incomes ($22,590/yr for individuals; $46,800/yr for families) – will have to enroll during open enrollment of special enrollment IF they have a qualifying event

COVERED CALIFORNIA – CHANGES FOR 2026

- DACA
  - As of August 31, 2025, health and dental insurance eligibility was terminated by the federal government for DACA recipients through Covered California

- Health Savings Accounts
  - In 2026, Bronze and minimum coverage (catastrophic plans) through Covered California will count as high-deductible health plans (HDHPs) allowing you to contribute to a health savings accounts
  - HSA funds can be used to pay for direct primary care fees (a monthly membership feel allowing you to get a range of primary care services) – individuals can use up to $150 / month and families can use up to $300 per month

- Gender Affirming Care
  - Under state rules that protect against discrimination, health insurers in CA must continue to provide gender affirming care

POTENTIAL CHANGES TO EMPLOYER SPONSORED CARE

The One Big Beautiful Bill impacts employer plans in both direct and indirect ways

- **Indirect Impact**
  - Sweeping cuts and reforms to Medicaid and tighter enrollment rules for the ACA Marketplace are expected to result in a loss of coverage for millions of Americans
  - New Medicaid work requirements, cost-sharing provisions and eligibility redeterminations every 6 months may cause many to lose their public coverage
  - Higher premiums and reductions in financial assistance for those in the marketplace may result in healthier individuals foregoing coverage and shrinking the risk pool and making the marketplace plans more expensive
  - Either may lead to greater reliance on employer sponsored health coverage options, increasing costs to the employer and potentially the employees

DIRECT ENHANCEMENTS TO EMPLOYER HEALTH BENEFITS

CHOICE Arrangements (New Version of ICHRAs)

- A new way for employers to help pay for health insurance.
- Employers can:
  - Give workers tax-free money to buy their own health insurance.
  - Still offer regular group insurance at the same time.
- Small businesses (under 50 workers):
  - Get about **$100 per worker each month** in the first year.
  - Get about **$50 per worker each month** in the second year.
- Could start as soon as **2026**.
- Goal: Make health insurance more **personal, flexible, and portable**.

EXPANDED HEALTH SAVINGS ACCOUNTS (HSAS)

- New rules make HSAs easier and more useful.
- What's new:
  - Telehealth visits count before you meet your deductible.
  - HSA money can pay for:
    - Direct Primary Care (monthly doctor fees)
    - Gym memberships
    - Other wellness costs
  - Bronze and Catastrophic ACA plans now work with HSAs.
- Benefit: More **flexibility** for both workers and employers.

OTHER BENEFIT IMPROVEMENTS

- **Dependent Care FSA** limit rises:
  - From $5,000 → $7,500 in 2026.
  - Helps parents save more for childcare, tax-free.
- **Paid Family & Medical Leave (PFML):**
  - Tax credit is now **permanent**.
  - Easier rules for more families to qualify.
- **Telehealth Coverage:**
  - Employers can cover telehealth with **no cost to workers**.
  - Does not affect HSA eligibility.

WHY IT'S IMPORTANT TO KEEP UP WITH HEALTH COVERAGE CHANGES

- **Don't Lose Coverage** – Rules can change, and knowing them helps you stay insured

- **Save Money** – New programs may help lower your costs

- **Get More Care** – Changes may add benefits like telehealth or wellness programs

- **Be Ready** – Knowing what's coming helps you plan ahead

- **Protect Your Family** – Making smart choices keeps everyone covered

- **Use All Your Benefits** – Don't miss out on new services you can use

- **Have More Choices** – Staying informed gives you more options.

CALIFORNIA'S GENETICALLY HANDICAPPED PERSONS PROGRAM- ANOTHER FORM OF HEALTH COVERAGE IN CA

- GHPP provides health care services for adults with genetic diseases such as hemophilia and other genetic conditions. GHPP helps people who qualify with their health care needs.
- If you have other insurance, GHPP is your secondary coverage. You can have GHPP in addition to Medi-Cal, Covered CA, TRICARE or private insurance.
- Annual enrollment fee is calculated on adjusted gross income. At 200-299% of FPV your fee is 1.5% of your adjusted gross income. At 300% and above it will be 3%. If you qualify for Medi-Cal, there will be no fee.

Apply NOW don't wait. GHPP application and instructions available on the DHCS website: https://www.dhcs.ca.gov/services/ghpp/Pages/default.aspx

For video on more about GHPP and tips for applying, please visit: https://www.bdcouncilca.org/webinars/past-webinar-ghpp-what-you-need-to-know

Questions?

Thank you!

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THANK YOU!

NEED HELP?

Contact **Lynne Kinst** at (916) 572-7771 or lynne@bdcouncilca.org

www.bdcouncilca.org

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