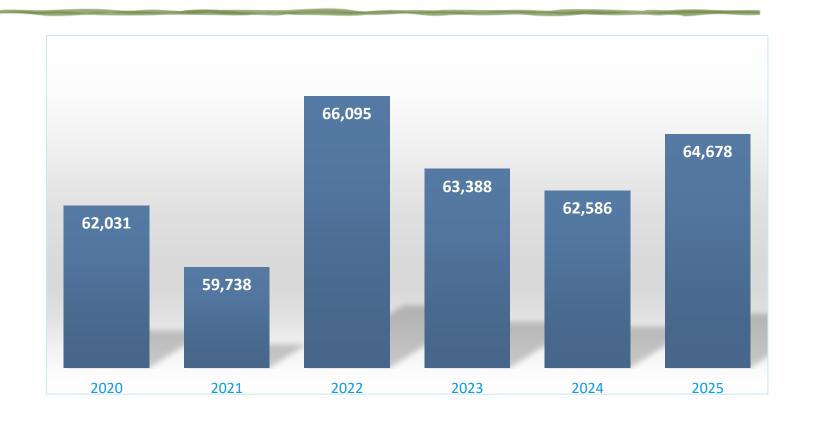


HC4ME – Federal Policy Changes to CoverME.gov

OCTOBER 7, 2025

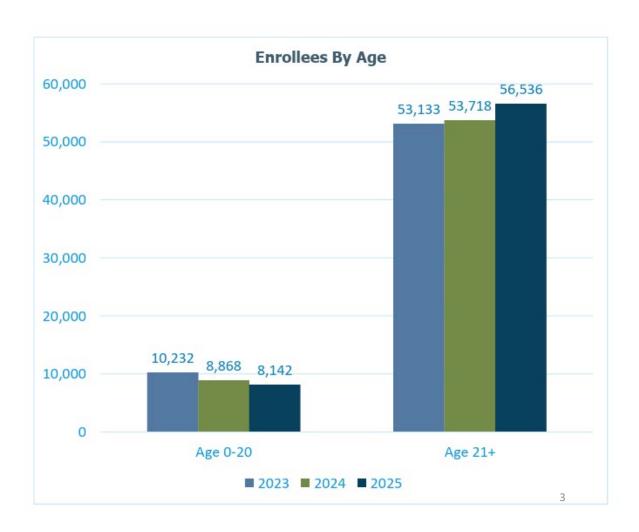
COVERME.GOV ENROLLMENT – OPEN ENROLLMENT PERIOD



MORE ADULTS, FEWER CHILDREN

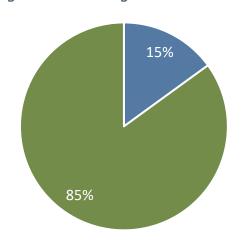
- 8% fewer children since 2024; 20% fewer since 2023.
- 5% increase in adults in last year

>7% increase in ages: 26-34 and 35-44!



FINANCIAL SAVINGS: ADVANCE PREMIUM TAX CREDITS

 85% of consumers with plan selections are receiving financial savings



■ No Financial Savings

■ Financial Savings

OE 2025 Average Premium Per Member Per Month

	All Consumers	Consumers Receiving APTC	Consumers Not Receiving APTC
Average Total Premium	\$758	\$785	\$611
Average Net Premium (Amt Paid by Consumer)	\$245	\$178	\$611
Average APTC Amount	\$513	\$607	\$0.00

2025 Plan Year Changes

Effective 8/25/25

- DACA: Deferred Action for Childhood Arrival recipients no longer eligible for CoverME.gov health coverage
- Loss of coverage due to underpayment: Change to rules that allow enrollees to maintain coverage if haven't paid their full premium
 - Carriers must use net percentage-based method (95% or higher)
 - > use gross-premium and fixed-dollar threshold method no longer allowed

Effective 10/24/25

- Income-based SEPs prohibited: "Under 150% FPL" Special Enrollment Period Eliminated
 - ➤ Eliminates ability for households with a projected income ≤150% federal poverty level to enroll in marketplace coverage at any time during the year
 - ➤ Often utilized by:
 - adults without children who are just above MaineCare cutoff, and
 - legal immigrants who are experiencing a waiting period for MaineCare eligibility due to citizenship status

2026 Plan Year Changes

Effective 1/1/26:

- Lawfully present immigrants <100% FPL not eligible for APTC: Immigrant households with incomes less than 100% FPL, including those waiting for Medicaid eligibility due to their immigration status, no longer eligible for Advance Premium Tax Credits.
- **APTC repayment limits eliminated**: Households with incomes higher than anticipated will have to repay the entire amount of any excess APTC they received, rather than a capped portion. <138% FPL remain protected by repayment caps.
- **Expansion of** HSAs: All bronze and catastrophic plans are HAS-eligible even if have pre-deductible coverage.
- **EPTC Expiration**: Enhanced Premium Tax Credits (EPTC) were *not included* in the Budget Reconciliation Bill and are set to *expire* December 31, 2025.

PREMIUM TAX CREDITS - 2026 PLAN YEAR

PTC = Benchmark Plan Premium - Maximum Expected Contribution

- Enhanced premium tax credits (EPTC), authorized in the American Rescue Plan Act of 2021 (ARPA) and
 extended in the Inflation Reduction Act (IRA), temporarily increased amount of premium tax credits and
 expanded eligibility to households above 400% FPL, eliminating a premium "cliff" for those households.
- EPTC expires 12/31/25 unless Congress takes action to extend the enhanced health care tax credits.
- If EPTC expires, households will be expected to pay a greater share of income on marketplace health insurance:

Income Ranges for:		% of Income Expected to Contribute to Premium of "Benchmark" Plan		
Single Individual	Family of 2	Family of 4	With EPTC	After EPTC Expires
<\$23,475	<\$31,725	<\$48,225	0%*	2.10%-4.19%
\$23,475-<\$31,300	\$31,725 - <\$42,300	\$48,225 - <\$64,300	0%*-2%	4.19%-6.60%
\$31,300-<\$39,125	\$42,300- <\$52,875	\$64,300 - <\$80,375	2%-4%	6.60%-8.44%
\$39,125 - <\$46,950	\$52,875 - <\$63,450	\$80,375 - <\$96,450	4%-6%	8.44%-9.96%
\$46,950 - <\$62,600	\$63,450 - <\$84,600	\$96,450 - <\$128,600	6%-8.5%	9.96%
\$62,600+	\$84,600+	\$128,600	8.5%	N/A – do not qualify

^{*}Maine households in this category will have to pay a nominal monthly premium to cover benefits that are required to be covered by state law that go beyond the "benchmark" plan.

EXPIRATION OF EPTC - CASE STUDIES

Case Study: Fort Kent



Family of two (ages 60, 60) in Fort Kent with annual household income of \$85,000 (402% FPL).

- Premium (with EPTC) for silver plan: \$7,200/year (8.5% income)
- Premium (without EPTC) for bronze plan: \$25,000/year (29% income)

Case Study: Kittery



Family of 5 (ages 45, 43, 18, 15, and 8) in Kittery with annual household income of \$140,000 (372% FPL).

- Premium (with EPTC) for silver plan: \$10,480/year (7.5% income)
- Premium (without EPTC) for bronze plan: \$13,950/year (10.0% income)

Case Study: Calais



Family of 3 (ages 60, 63, and 25) in Calais with annual household income of \$200,000 (750% FPL).

- Premium (with EPTC) for silver plan: \$17,000/year (8.5% income)
- Premium (without EPTC) for same plan: \$37,100/year (19% income)

ADVANTAGES OF STATE-BASED MARKETPLACE

- Certain provisions of new federal rule do not apply to SBMs:
 - The FFM, beginning PY 2026, is requiring enrollees with a \$0 premium to re-enroll each year, excluding auto-enrollment, or have APTC reduced such that they pay a minimum \$5 premium
 - For PY 2026, the FFM is newly required to conduct preenrollment eligibility verification for special enrollment periods for at least 75% of enrollees
 - The FFM, beginning for PY 2027 will have open enrollment run from Nov 1 – Dec 15. SBMs can run OE for an additional two weeks, until Dec 31.

- Control of marketing and outreach funding
 - Messaging and images reflect Maine
 - Meet Mainers where they get their information
- Control of navigator funding
- Close partnerships with:
 - Brokers
 - Maine Enrollment Assisters
 - Health and Dental Plans
 - Bureau of Insurance
 - DHHS MaineCare
 - Other relevant state agencies
- Local relationships support program integrity
- Transparency and Tone



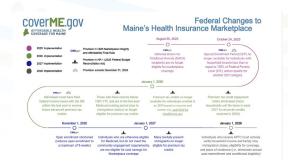
WHAT IS COVERME.GOV DOING?

Communications and Outreach

- Prioritizing transparency amid confusion
- Direct outreach to individuals and families losing coverage
- Targeted, income-based, outreach to those losing financial assistance
- Working with carriers to align messaging
- Focus on value of coverage; testimonials

Policy and Operations

- Working to expand eligibility for special enrollment periods, based on existing regulation
- Working directly with the Office of Family Independence and MaineCare to align changes to referral processes
- Contingency planning for outstanding legal decisions







IMPACT IN THEIR OWN WORDS

