

**From:** McGlamery, Gabriel [REDACTED]  
**Sent:** Thursday, March 19, 2020 2:02 PM  
**To:** O'Brien, Kelly P. (CMS/CCIIO)  
**Subject:** Uninsured in Florida

**Follow Up Flag:** Follow up  
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Kelly,

You wanted hard facts about what the impact of a SEP might be and I happened to get some projections of the number of uninsured and the cost of coverage that illustrate the issue. Charts are below, but key points:

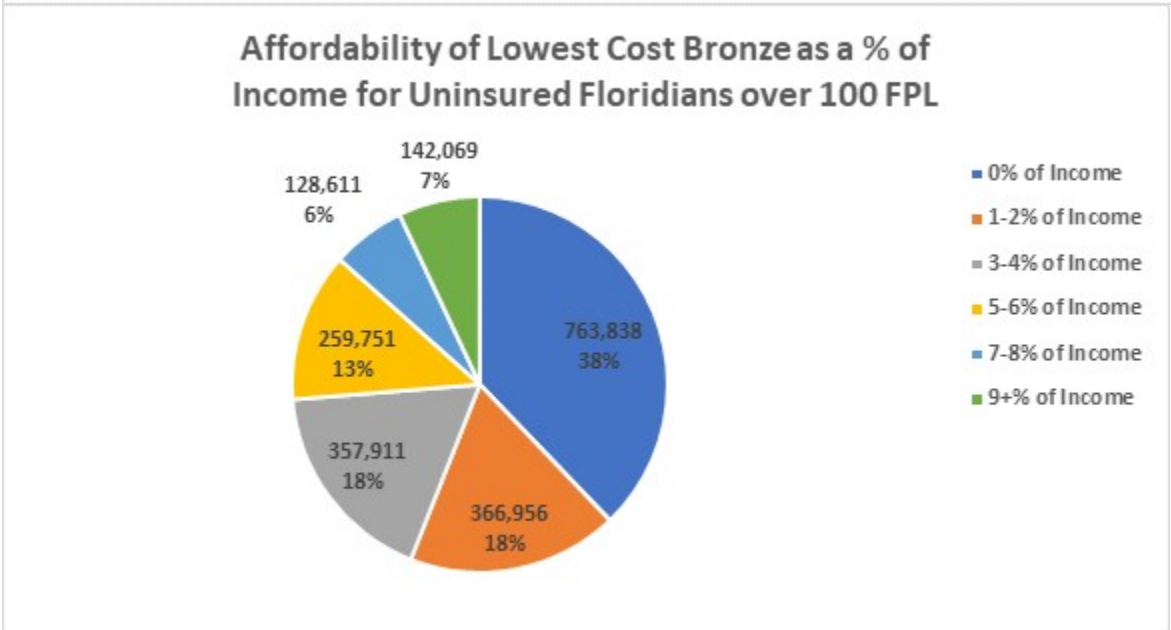
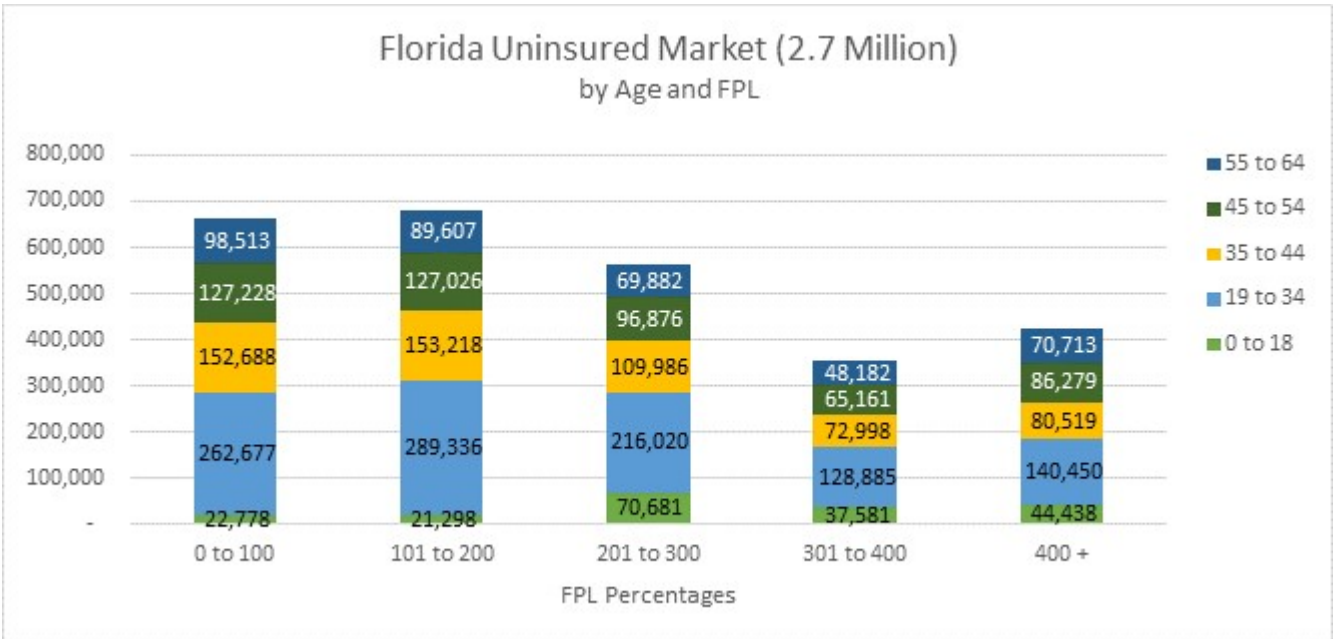
- 764k people in Florida should have access to \$0 Bronze, but are uninsured (and \$0 bronze is a great way to get people in the door so they buy silver CSR-eligible plans).
- 367k can get bronze for 1-2% of their income. That might have been a bad deal for a healthy person a month ago, but things are different today.
- Anyone in the high-risk age range (mid fifties and sixties) will almost always fall into one of those buckets if they're eligible for Marketplace subsidies – that includes people at 399% FPL.
- These are numbers using 2018 ACS data and 2020 premium rates. As people lose job and hours, income falls, and the number of people with access to cheap or free coverage through the Marketplace will increase.

So, **up to 1.123m Floridians could use the SEP to reconsider their decision not to buy health insurance** without worrying about financial hardship. Most of them are healthy and will be healthy (especially if they can access care safely). Many of these people might not have considered the value of insurance, might not have been aware of the size of subsidies, or might not be eligible (the model we used was very simple) but every person who forgoes testing because they're worried about their personal finances, or goes to an ED because they lack telehealth, will make it harder for us to recover from this crisis.

When I've looked, I've seen similar numbers of uninsured in the subsidy-eligible range, even in states with Medicaid expansion, like California or Colorado.

I hope this helps, but I look forward to touching base and learning if there is anything else I might do to get the SEP ASAP.

- Gabe



**Notes on our model:**

The data being used is from 2018.

Our uninsured count is lower than what IMI previously sent, but the numbers align with external data sources (Census/KFF).

Our population model focuses on IU65 ACA and we make two data edits to the uninsured population to account for IU65 focus:

- Individuals older than 65 are bucketed into Medicare
  - The reasoning here is that they would enroll in Medicare, and not IU65, if they were to get insurance.
- Individuals that are eligible for CHIP (0-18, <200% FPL) are moved to Medicaid
  - They are not eligible for ACA subsidies and healthcare.gov steers them towards CHIP

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