

**From:** <earlysuccess@groups.io> on behalf of Elisabeth Burak <ewb27@georgetown.edu>  
**Date:** Friday, March 20, 2020 at 6:02 PM  
**Subject:** Re: [earlysuccess] Listserv Questions - Hazard pay for child care workers? Health insurance coverage for essential child care workers?

Hi Alliance friends-

Per this request we responded to NM re: health insurance coverage and wanted to share an updated version here. Please share any health insurance-related measures specific to the child care work force (e.g. outreach/enrollment) if you have them and Maggie and I can pull together additional info or details.

First, note that many, if not most, in the child care workers may qualify for ACA-subsidized marketplace or Medicaid coverage (especially in expansion states). In ACA marketplaces, loss of a job or an employer dropping employee health coverage are both conditions that qualify someone to enroll outside the regular enrollment period in the marketplace-- so newly uninsured folks can already enroll outside usually coverage periods. IN Medicaid, there is NO enrollment period-- you can enroll at any time and will be enrolled if you qualify, period.

Below are some ways states can help uninsured folks access health coverage-- including but not limited to essential child care workers who may be in harm's way with the spread:

**1) TAKE UP NEW FEDERAL MEDICAID COVID TESTING/ADMIN COVERAGE OPTION FOR UNINSURED** (at a minimum). The new law (and CCF will have an explainer next week!) provides states a new coverage option (effective March 18) for "uninsured individuals" for COVID-19 testing and its administration at 100% federal cost/FMAP. This could help on its own merits and could also be an enrollment "portal" to Medicaid or Marketplace coverage. This measure will be important for all states to take up, but especially key for states that have not expanded Medicaid.

**2) Create special enrollment period (SEP) for the marketplace** given the health emergency-- Decision points:

[Does your state run a state-based marketplace?](#) If YES, the state can designate an SEP today. 10 states have done this so far, mainly with 30-day SEPs (Maryland example [here](#)). [This blog](#) from our private insurance counterparts here Georgetown summarizes this and other ways states have taken action (which mainly applies to marketplaces/individual and small group markets-- federal law dictates large employer health plans). The blog lists 8 states, but since it was posted CA and MN also created SEPs.

IF NO, this means [your state is among the 32 federally-facilitated ACA marketplaces](#). For these states a new SEP requires federal action, which hasn't happened. [Some senators](#) are pushing the Administration/CMS to establish an SEP for the federal marketplace. State lawmakers are also starting to call for it: Pennsylvania's governor issued [this release](#) to ask for an SEP in the federally-facilitated marketplace. And we just received a Politico story that the private insurance industry is asking for a federal special enrollment period in the next package along with funding, so more to come as we learn more.

**2) Ramp up state-funded/supported outreach and enrollment efforts in both the state-based marketplace and Medicaid**, with essential child care workers as targeted group. And since most

workers should have access to Medicaid (in expansion states) or subsidized marketplace coverage (pending SEPs), it's where the work is-- finding and enrolling all who are eligible. There are also many eligible but uninsured adults and children in Medicaid, so it may be folks don't realize they are eligible but are... good time to check! As I mentioned on the call Monday, there are many things states can do right now to ease access to Medicaid among already-enrolled or eligible, such as waiving co-pays or premiums where/if required.

More to come on the new law with regard to Medicaid next week. Don't hesitate to contact us with additional questions.

Stay well and safe.

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