Health Coverage Options for Consumers Experiencing Homelessness

This job aid provides information and guidance for Navigators and Certified Application Counselors (CACs) (collectively, assisters) about individuals experiencing homelessness when serving consumers in the Federally facilitated Marketplaces (FFMs) – also known as the Health Insurance Marketplace[®].

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Version 2.0 June 2025. This information is intended only for the use of entities and individuals certified to serve as Navigators, certified application counselors, or non-Navigator personnel in a Federally-facilitated Marketplace (FFMs) – also known as the Health Insurance Marketplace®. The terms "Federally-facilitated Marketplace" and "FFM," as used in this document, include FFMs where the state performs plan management functions. Some information in this presentation may also be of interest to individuals helping consumers in State-based Marketplaces and State-based Marketplaces using the Federal Platform. This material was produced and disseminated at U.S. tax filer expense.

Overview

Assisters should be aware of health coverage options for individuals experiencing homelessness, as these individuals may present unique situations related to eligibility or enrollment in the Health Insurance Marketplace[®].

Many individuals experiencing homelessness have complex health challenges that both contribute to and are exacerbated by homelessness. They generally have limited access to health care because they are often un- or under- employed, lack employer-sponsored insurance, and live in impoverished conditions.

The Affordable Care Act benefits individuals experiencing homelessness by:

- Making health insurance more accessible and affordable both through affordable private insurance and expanded Medicaid eligibility — giving individuals greater protection from financial vulnerability that can lead to homelessness.
- Ensuring coverage of health care services that can help support individuals as they exit homelessness, including behavioral health care, rehabilitative services, and other supports.

Unique Challenges Impacting Individuals Experiencing Homelessness

There may be significant challenges to coverage and care for individuals experiencing homelessness:

- Unstable housing means priorities must be focused on basic needs such as shelter, food, and safety.
- Poor experiences with public systems may create distrust.
- Lack of mailing address can complicate the application process and may lead to frequently changing contact information making it difficult for assisters to follow-up.
- Low literacy (including tech literacy and health literacy).
- Significant behavioral health conditions create challenges navigating public programs without assistance.

Marketplace Coverage Options

If an individual experiencing homelessness wants to enroll in a Marketplace plan, assisters should explain that there are different types of Marketplace health insurance plans designed to meet different needs, including Catastrophic plans (described below).

Financial Assistance

Financial assistance can come in the form of premium tax credits (PTCs) to lower monthly insurance payments (called premiums) or cost-sharing reductions (CSRs) that lower the amount an individual has to pay for deductibles, copayments, and coinsurance. Consumers can use advance payments of the premium tax credit (APTC) to lower their monthly insurance payments when they enroll in a plan through the Marketplace. An individual's APTC is based on the estimated annual household income and the household size that the individual reports on their Marketplace application. The individual's PTC is determined after the end of the year based on the actual household income and household size for the year at tax filing. In general, individuals and families may be eligible for APTC for their Marketplace coverage if their household income for the year is at least 100 percent, but no more than 400 percent, of the federal poverty level (FPL) for their household size. The American Rescue Plan Act (ARP) expanded eligibility for PTC for Plan Year (PY) 2021 and PY 2022. Under ARP, APTC is now also available to individuals with an expected household income above 400 percent of the FPL. The Inflation Reduction Act extended these eligibility changes through PY 2025.

Catastrophic Coverage and Hardship Exemptions

Some individuals may choose a Catastrophic health plan as an affordable way to protect themselves from very high medical costs. Catastrophic health plans meet all QHP requirements but only cover three primary care visits per year before the annual deductible is met. The premium amount you pay each month for a Catastrophic health plan is generally lower than for other QHPs, but the out-of-pocket costs for deductibles, copayments, and coinsurance are generally higher.

Catastrophic health plans are available to individuals under age 30 or people of any age with an affordability or hardship exemption. Experiencing homelessness is a hardship category. To apply for an exemption, an individual can use the <u>Hardship Exemption Form</u>. They will select the type of hardship(s) they're applying for, the date the hardship started, when they expect it to end or if it's ongoing, and who in the tax household has experienced the hardship.

Hardship exemptions usually cover the month before the hardship, the months of the hardship, and the month after the hardship. In some cases, the Marketplace may provide the exemption for additional months, up to a full calendar year. For people who are ineligible for Medicaid solely because a state hasn't expanded Medicaid coverage, the hardship exemption will be granted for the whole calendar year.

If an individual's hardship exemption application is approved, they will receive a letter that will include information on Catastrophic health plans. For more information about Catastrophic plans, visit HealthCare.gov: How to pick a health insurance plan. For more information about hardship exemptions, visit HealthCare.gov: Health coverage exemption forms & how to apply.

Application Assistance

Individuals experiencing homelessness may face unique challenges when applying for health coverage through the Health Insurance Marketplace[®]. These challenges include:

- Lack of a mailing address. An address is required to complete the application process. Therefore, individuals experiencing homelessness or those who don't have an address will still need to provide one to complete a Marketplace application and get an eligibility determination. Individuals experiencing homelessness can list the following addresses on an application:
 - An address of a shelter, friend, or relative within the state in which they are applying for coverage.
 - A Post Office (P.O.) box.
- Lack of a phone number. For individuals experiencing homelessness, phone numbers may change periodically, making it difficult for the Marketplace or for assisters to reach individuals for any needed follow-up.
- Lack of documentation (e.g., birth certificates, ID cards, Social Security cards).
 Individuals experiencing homelessness may not possess documents, or the documents may be lost or destroyed.
- Low literacy or low health literacy. This may be a challenge, especially for those individuals who may be applying for insurance for the first time.

If individuals experiencing homelessness need additional help, assisters can direct them to the state Medicaid agency or other services for individuals who are experiencing homelessness, like shelters and free community clinics. Be sure to follow all applicable CMS guidance when making referrals to organizations that are not other Federally-facilitated Marketplace (FFM) assisters or Department of Health and Human Services (HHS) entities.

Medicaid and CHIP

Medicaid

Medicaid is an important avenue for individuals experiencing homelessness to secure basic health care services. Additionally, certain Medicaid benefits can help people who are at risk of or are experiencing chronic homelessness to achieve greater independence, including:

- Behavioral health services, including mental health and substance use disorder services;
- Case management;
- Personal care/personal assistance services; and
- Home and community-based services

Medicaid coverage may be new to many individuals who are experiencing homelessness. Prior to Medicaid expansion, many individuals experiencing homelessness were not eligible for Medicaid coverage. However, there are still a significant number of individuals experiencing homelessness in Medicaid expansion states who are not enrolled and are not aware of their eligibility.

- In states that have not expanded Medicaid, there may be a coverage gap between eligibility for Medicaid and Marketplace subsidies for individuals who have incomes below the income eligibility for Marketplace subsidies but above an applicable Medicaid limit in their state.
- Some of these individuals may benefit from the resources listed in the Resources for Uninsured Individuals section below.

Assisters should remind individuals that even if their state hasn't expanded Medicaid and they believe their income is below the level to qualify for financial assistance with a Marketplace plan, they should fill out a Marketplace application. Each state has coverage options that could work for them – particularly if they have children, are pregnant, or have a disability. When they provide more detailed income information, their income may then fall into the range to qualify for Medicaid.

CHIP

Children experiencing homelessness may be eligible for the Children's Health Insurance Program (CHIP) if they are in families with incomes too high to qualify for Medicaid but too low to afford private coverage. States have the flexibility to adopt their own coverage standards, but they must adhere to certain conditions. A child must be:

- Under 19 years of age;
- Uninsured (determined ineligible for Medicaid and not covered through a group health plan or creditable health insurance);
- A U.S. citizen or have qualifying immigration status;
- A resident of the state: and
- Eligible within the state's CHIP income range based on family income.

States may also elect to cover pregnant individuals, children whose parents have access to public employee coverage, and/or lawfully residing children and pregnant individuals in CHIP that meet the eligibility standards outlined above.

For more information on Medicaid and CHIP, refer to <u>Health Coverage Options for the Uninsured job aid</u> and <u>Medicaid.gov</u>. Assisters can direct consumers to <u>Medicaid.gov</u>: Where Can People Get Help with Medicaid & CHIP to find contact information for their state office.

Outreach

Assisters should be aware of targeted strategies for outreach and enrollment for individuals experiencing homelessness. Partnering with organizations, such as those that provide services to individuals experiencing homelessness, may help identify locations to reach these individuals and learn best practices for discussing their health coverage needs. Taking time to build trust with communities through consistent outreach can help individuals experiencing homelessness feel more comfortable discussing and learning about enrollment options.

HRSA Health Center Program

One way that individuals experiencing homelessness may access health care is through health centers that receive Health Center Program federal grant funding through the Health Resources and Services Administration (HRSA). These health centers are community-based and patient-directed organizations that deliver comprehensive, culturally competent, high-quality primary health care services.

The Health Care for the Homeless (HCH) program is part of the larger community Health Center Program. HCH programs are a "special populations" category of health centers that are required to prioritize serving people experiencing homelessness.

Health centers integrate access to pharmacy, mental health, substance use disorder, and oral health services. Health centers focus on coordinated care for patients with complex health needs and make use of quality improvement practices like health information technology. For more information about the Health Center Program, refer to HRSA's About the Health Center Program.

Individuals experiencing homelessness may receive additional support from health centers that benefit from the 340B Drug Pricing Program^v, which allows health centers to purchase outpatient drugs at significantly reduced costs. Health centers can pass the savings on to their patients through reduced drug prices.

Resources for Uninsured Individuals

Assisters should also be familiar with other coverage options that may benefit individuals who may not qualify or are otherwise unable to access Marketplace or Medicaid/CHIP health coverage, including:

- Short-term, limited-duration insurance (STLDI).
- Free or low-cost health care.
- Prescription medication discounts.
- Retail-based health care clinics and urgent care clinics.
- Emergency department care.

- Charity care.
- The Centers for Disease Control and Prevention (CDC) and local health departments.
- Copay/coinsurance relief programs.
- Local homeless shelters.
- Good faith estimates for uninsured (or self-pay) individuals and the patient provideprovider dispute resolution.

For more information about these resources, please refer to the <u>Resources for the Uninsured</u> webinar and the <u>Health Coverage Options for the Uninsured job aid</u>.

Assister Resources

- HHS Programs to Address Homelessness
- Resources for the Uninsured
- Medicaid and CHIP Overview
- Other resources (CMS offers these links to non-governmental third-party websites for informational purposes only, and inclusion of these websites should not be construed as an endorsement of any third-party organization's programs or activities.):
 - National Health Care for the Homeless Council
 - Homeless Shelter National Directory



¹ Health Insurance Marketplace[®] is a registered service mark of the Department of Health & Human Services.

For people eligible for Indian Health Services, the hardship exemption lasts as long as the consumer remains eligible. For people under 21 who are eligible for an exemption due to religious conscience, they'll need to reapply if they remain a member when they turn 21.

^{# 42} USC § 254b: Health centers

iv 42 USC § 254b(h): Homeless population

^v 340B of the Public Health Service (PHS) Act