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March 16, 2021

Hon. Heather Sanborn, Senate Chair
Hon. Denise Tepler, House Chair
Joint Standing Committee on Health Coverage, Insurance, and Financial Services
Room 220, Cross Office Building
Augusta, Maine 04333

Re: LD 631, *An Act To Provide Funding for Maine's Health Insurance Consumer Assistance Program*

Dear Senator Sanborn and Representative Tepler:

I am writing to express my support for LD 631, *An Act To Provide Funding for Maine's Health Insurance Consumer Assistance Program*.

LD 631 would continue an appropriation that the Office of the Attorney General (OAG) received in the previous biennium for the purpose of funding the Health Insurance Consumer Assistance Program. This program continues to be a critical resource for Maine citizens.

Upon receipt of the funding, the OAG contracted with Consumers for Affordable Health Care (CAHC) to provide this service. Per the standards set in the legislation, the program is tasked with educating health insurance consumers on their rights and responsibilities, providing information to assist consumers in the process of obtaining health coverage (including any tax credits which would accompany it), assisting with appeals, and collecting and tracking complaints and consumer inquiries.

As required by our contract, CAHC produced a report on their execution of the program in 2020. That report is attached to this letter.

Given the many challenges Mainers face with their health care in the midst of the global pandemic, including the proliferation of low-benefit plans advertised online and in

phone solicitations, continuing to fund the Health Insurance Consumer Assistance Program is important. I urge the committee to vote LD 631 with a strong Ought To Pass recommendation.

Sincerely,

A handwritten signature in black ink that reads "Aaron M. Frey". The signature is written in a cursive style with a large, sweeping initial 'A'.

Aaron M. Frey
Attorney General

Enclosure

Maine's Health Insurance Consumer Assistance Program Consumers for Affordable Health Care

Pursuant to 24-A M.R.S. §4326 (2019)

Reporting period: 01/01/2020 – 12/31/2020

Purpose: Maine's Health Insurance Consumer Assistance Program (CAP) was authorized by statute to provide the following services:

- A. Assisting consumers with filing complaints and appeals with a group health plan, health insurance carrier or independent review organization and providing information about the internal and external appeal and grievance processes of a group health plan, health insurance carrier or independent review organization;
- B. Collecting, tracking and quantifying inquiries regarding health insurance and problems encountered by consumers;
- C. Educating consumers on their rights and responsibilities with respect to health insurance coverage;
- D. Assisting consumers with obtaining health insurance coverage by providing information, referrals or other assistance;
- E. Assisting with obtaining federal health insurance premium tax credits under Section 36B of the United States Internal Revenue Code of 1986, as amended; and
- F. Providing information to the public about the services of the consumer assistance program through a comprehensive outreach program and a toll-free telephone number.

Consumers for Affordable Health Care (CAHC) delivered these services statewide through its CAP (Consumer Assistance Program) Program, which includes three components: a toll-free HelpLine (1-800-965-7476), staffed by experts in eligibility and enrollment in private and public health insurance, Outreach and Education, and private appeals grievances and appeals specialists.

Overview: Since the inception of CAHC's HelpLine in 1997, consumer demand for services such as those described above has grown steadily. At the time the CAP legislation was adopted in 2019, CAHC had peaked at about 7,000 HelpLine calls per 12-month period. The 2020 calendar year, however, created new and unanticipated demand for assistance with private health insurance: it coincided with a once-in-a century pandemic that spurred economic disruption on a massive scale. According to the [Robert Wood Johnson Foundation and Urban Institute](#), between 72,000 and 131,000 Mainers were or continue to be at risk for losing employer-sponsored health insurance as a result of widespread lay-offs.

CAHC's Education and Outreach Manager often describes the health insurance industry as a set of conveyor belts. One conveyor belt takes you to private health insurance; the other to public insurance. The challenge is identifying the correct conveyor belt. People new to this system, such as people who formerly had employer-based insurance, are often confounded because there are so many variables: eligibility and documentation requirements, waiting periods, and, in the case of private insurance, limited time periods in which to enroll. Furthermore, those who formerly

insured their spouses and children through their employers may have to cope with the possibility that different family members qualify for coverage or assistance through different insurance programs. One helpline caller, for example, was a woman who lost her employer-based coverage which also covered her spouse and children. Some discussion with the caller revealed that the parents could enroll in a private Marketplace plan, while their children qualified for MaineCare. However, each source of insurance has different timelines for applying, enrollment processes, and documentation requirements. Understanding this complex, fragmented health system is difficult for anyone. It is particularly daunting for people who are unfamiliar with health insurance, have limited health coverage literacy, need access to health care or prescription drugs on an ongoing basis, or are struggling to meet other basic needs. CAHC staff take the necessary time to listen to each individual's unique circumstance, assess which option fits best, and assist them accordingly.

When the pandemic hit, CAHC immediately grasped the magnitude and implications of this public health emergency. As detailed below, CAHC responded by enhancing its collaboration with the Maine Department of Labor (DOL), devised new and creative ways to reach uninsured Mainers and those at risk of losing health insurance, and increased its paid advertising and targeted social media. At the same time, CAHC maintained its capacity to actively assist Mainers seeking private or public health insurance who were not affected by job loss.

The COVID-19 epidemic necessitated a significant overhaul in CAHC's operations. All CAHC staff transitioned to working from home by early April. Because HelpLine assistance has always been provided via telephone, no disruption of service occurred in that aspect of the CAP's activities; however, equipping HelpLine staff with appropriate technology and the establishment of protocols related to maintaining confidentiality extended through the month. When the Governor declared a state of emergency, halting our ability to continue our in-person outreach and education, substantial effort went into adapting CAHC's trainings and presentations for enrollment professionals (i.e., social service, hospital, community health centers, providers, brokers) to remote delivery. In addition, CAHC created a new webinar geared specifically for consumers with limited health literacy to help them understand their options. CAHC created accurate and timely information about coverage for COVID-19 testing and treatment. CAHC made this information available on its website, the Enroll207 website, and disseminated this information through social media.

Open Enrollment (OE) for ACA 2021 Marketplace plans (11/01/20 – 12/15/20) posed its own challenges. CAHC HelpLine staff are Certified Application Counselors (CACs) who complete annual trainings provided through the federal government. CACs are qualified to help consumers sort through their private (and public) health coverage options through the Marketplace and can help in enrolling in coverage. Traditionally, these enrollments have taken place through in person meetings at our office. Despite the pandemic, some consumers wanted and needed that option. Consequently, CAHC staff worked diligently to put systems into place to offer people in need of enrollment assistance with both in-person and remote options. CAHC engaged a workplace safety consultant to take all possible precautions, consistent with Centers for Disease Control guidelines, to ensure both staff and consumers experienced safe, face-to-face visits

during OE. For those who preferred remote assistance, CAHC provided two options videoconferencing or telephone. CAHC also coordinated with Marketplace navigators and CACs elsewhere in the state to ensure local assistance was available for consumers to the extent possible.

CAHC's successes in meeting the challenges of delivering CAP services during the pandemic are reflected in increased activity across the board: the number of HelpLine calls, number reached through outreach and education, number helped during Open Enrollment, and the number of appeals and complaints handled.

A. Complaints and Appeals. CAHC offers several types of assistance for consumers seeking to challenge denied medical claims or eligibility determinations. In some cases, CAHC staff handle the appeals process directly as an authorized representative of the consumer. These cases involve considerable staff time devoted to medical policy analysis, research of medical literature, and writing the appeal(s) because each denied claim is different. In other cases, CAHC staff provided consumers with assistance in understanding the process and suggestions for self-advocacy. In still other cases, when consumers have greater health coverage literacy, resources, and understanding, CAHC provided them a copy of its consumer guide, [Do It Yourself Health Insurance Appeal: A step by step guide to exercising your rights](#) with an offer of additional assistance if needed. CAHC mailed out several copies of the guide and directed other consumers to the online version.

During the reporting period, CAHC staff handled six private health insurance appeals cases as the consumer's authorized representative. Two of those cases are still pending. CAHC staff advised seven consumers on how to handle challenging their denied claims on their own; two of those cases also involved a complaint to the Maine Bureau of Insurance. In one other case, CAHC staff provided analysis of a potential appeal and determined it was not timely. CAHC staff handled 19 eligibility appeals. Where CAHC was directly involved in the appeals process, CAHC staff helped consumers recover \$161,596 in medical benefit during the reporting period.

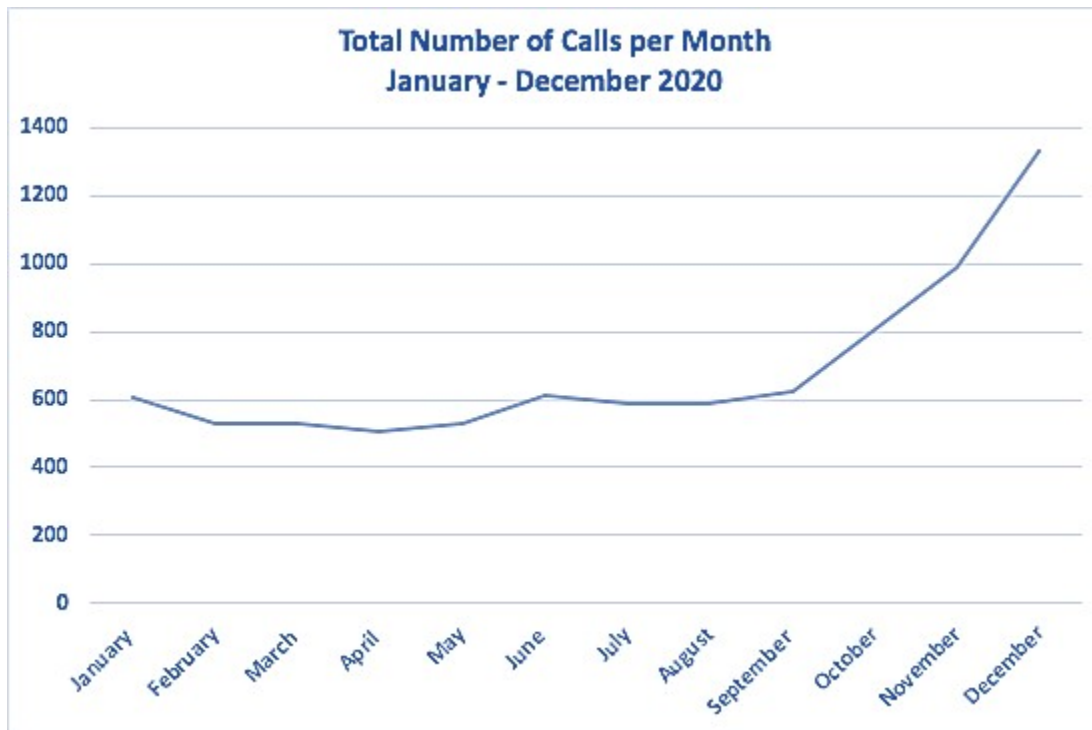
B. Collecting, tracking, and quantifying inquiries about health insurance. CAHC handled a total of 8,249 calls about health insurance during the reporting period. The distribution by caller type is shown in the chart below.

HelpLine Calls – 2020	
Consumers	6,942
Enrollment professionals (Navigator, CAC, Broker)	458
Other health professionals	703
Elected Officials	58
Other (legal services, advocacy organizations)	88
Total	8,249

These data show that consumers rely heavily on CAHC's HelpLine for information about health

insurance. Enrollment professionals, providers, elected officials also depend upon CAHC for accurate information about eligibility, documentation, enrollment, and use of coverage.

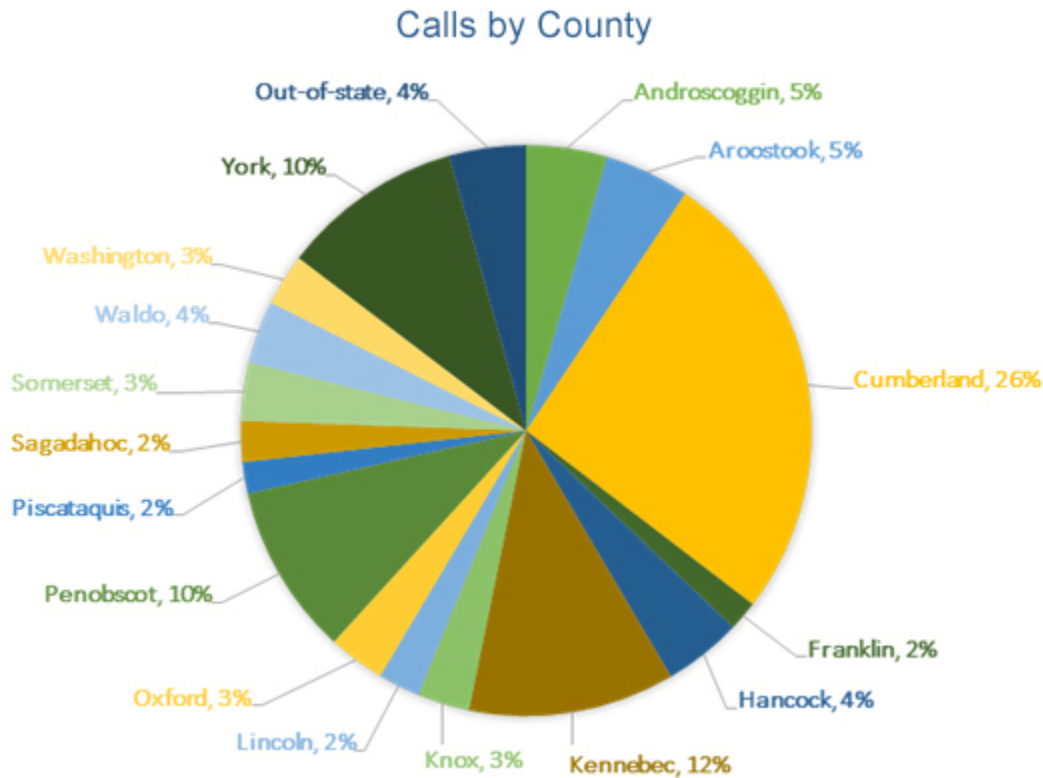
CAHC's HelpLine staff fielded an average of 31 calls per working day during 2020. However, as the chart below shows, the distribution was not even throughout the calendar year.



Call volume was relatively high in January of 2020 compared to prior years. In the four months thereafter it decreased, perhaps reflecting uncertainty as the pandemic hit. In June through September call volume hovered around 600 a month, which is ordinarily when CAHC experiences something of a lull. In October, call volume increased nearly 30% over September. At the onset of OE in November, call volume increased an additional 24%. In December, call volume spiked to 1,332 calls, 34% higher than the previous month. Calls during OE constituted 28% of the total call volume for the year.

Equally important, on average the length of calls during OE for 2021 plans was 4 minutes longer. This increase was due in part to the different manner in which the additional \$600/week in unemployment benefits was counted by private Marketplace versus Medicaid. When determining Medicaid eligibility, that income did not count; however, when applying for individual coverage on the Marketplace, it did count. CAHC HelpLine Advocates spent 85,749 minutes on the telephone with consumers and enrollment professionals in 2020, as compared to 66,046 minutes in 2019, a 30% increase.

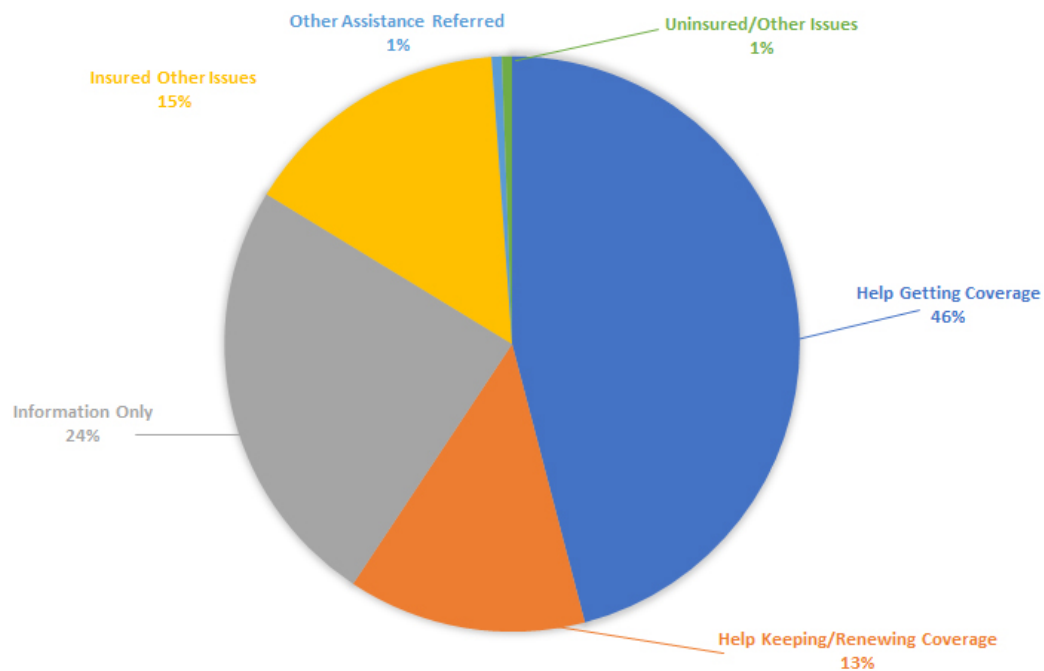
The chart below shows the volume of calls by Maine county.



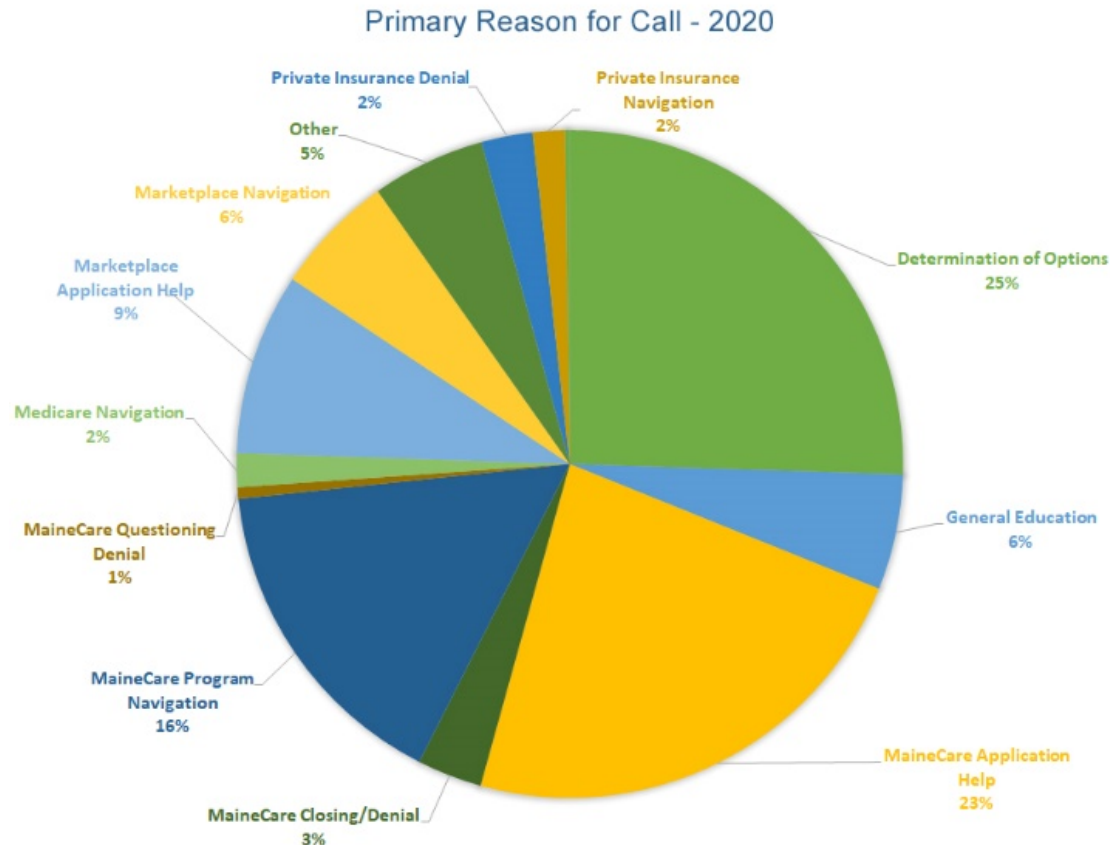
As is typical in any given year, a large percentage of calls come from Cumberland County, accounting for 26% of total HelpLine calls. Kennebec, York, and Penobscot Counties account for roughly the same percentage of calls, 12%, 10%, and 10% respectively. Collectively, these four counties account for more than half of the total HelpLine calls. Percentages of calls from the other 12 counties range between 2% and 5% of HelpLine calls. As we review our outreach and education plans for 2021 this chart provides CAHC HelpLine staff good insight into what areas we could focus on increasing our outreach work.

The chart on the next page shows the types of calls CAHC handled during the reporting period broken out by percentage of total calls. Nearly half of all calls (46%) were from people seeking help getting coverage. Another 13% required assistance in keeping or renewing coverage. Fifteen percent of the calls involved help with understanding or using health insurance or insurance appeals. Twenty-four percent of the calls pertained to general information about health insurance.

Calls by Type - 2020



The following chart breaks down the calls with greater specificity. The percentage of total calls in which private coverage was concerned was 44%. This percentage includes determination of options (25%), Marketplace application help (9%), Marketplace navigation (6%), private insurance navigation 2%, and private insurance denial (2%). Forty-three percent of the calls pertained to MaineCare: application help, program navigation, and closing or denials. This distribution is not surprising given that enrollment in MaineCare is available year-round, whereas enrollment in the Marketplace plans is limited to six weeks, unless a consumer qualifies for Special Enrollment Period (SEP). Many of our callers qualified for SEP given the loss of employer-based coverage. CAHC also handled calls pertaining Medicare navigation (2%) and miscellaneous calls (5%) pertaining to hospital free care, billing issues, COBRA, etc.



CAHC Helpline staff collect detailed information on barriers to enrollment in health coverage not only to help consumers resolve their problems, but to inform our administrative advocacy with the Maine Bureau of Insurance, Maine Department of Health and Human Services, and the Centers for Medicare and Medicaid Services (CMS) about institutional impediments to coverage.

One significant barrier is the so called “family glitch,” an issue that affects families who are offered family health coverage through work but who cannot afford it. Families fall into the “glitch” when an employer makes an offer of coverage to the employee’s *family members* but does not pay for that coverage. The *offer* of coverage, in most instances, makes the family members ineligible for advanced premium tax credit (APTC) subsidies (assistance paying monthly premiums) through the private insurance market. For example, CAHC worked with a caller whose spouse had employer-sponsored insurance, with offer of family coverage; however, while the cost to cover the employee was about \$30/week, the cost to cover the family of four would have been \$200/week (or \$10,360/year). Were this family of four able to shop on the Marketplace, they would be ineligible for both APTC and cost sharing reductions. Furthermore, this family’s income made the spouse and children ineligible for MaineCare, effectively making those family members unable to get any health insurance at all. CAHC staff encountered 99 instances where callers fell into the family glitch during the reporting period.

Another barrier is the interface between the Marketplace and Medicaid. Many callers who applied on the Marketplace got to the end of the application only to discover their Eligibility

Notice indicated their application would be sent to Medicaid. With their lack of familiarity of private and public health insurance, they were uncertain whether they had any coverage at all. A related issue is how income is calculated because income guidelines differ between the two programs. In particular, the additional \$600/week in unemployment benefits provided for 17 weeks during the pandemic counted toward Marketplace income, but not toward Medicaid income. CAHC staff spent significant time educating confused consumers and enrollment professionals in Maine about how income calculations work for each program. This income chart details the complexity of this analysis: 2021 costs too expensive even with an APTC subsidy. For others, the out-of-pocket costs (deductibles, coinsurance copayments) put purchasing a plan out of reach. Others may not qualify for any coverage given, for example, their immigration status or other factors that affect eligibility for both public and private coverage. They consequently remain uninsured.

	Does it count for MaineCare?*	Does it count for the Marketplace?
Type of Income	MaineCare eligibility is based on current point-in-time monthly income .	Marketplace eligibility is based on projected 2020 annual income .
Tax rebates, including the special \$1,200 per person rebate being provided because of COVID-19	No	No
Unemployment Insurance (UI)	Some UI benefits are counted:	All UI benefits are counted:
"Base" UI benefits Calculated based on prior earnings.	Yes, but only in the month they are received.	Yes
Temporary extra \$600 UI provided due to COVID-19 Most people receiving unemployment benefits will also get an additional \$600 each week in Federal Pandemic Unemployment Compensation (FPUC) from 3/29/20 to 7/25/20.	No	Yes
Earnings from jobs Includes taxable wages and tips from a job. Earnings do not include any amounts deducted from paychecks for pre-tax withdrawals, such as contributions to retirement or health plans.	Taxable earnings are counted only in the month they are received:	All taxable earnings in 2020 are counted:
Earnings from a previous job	No	Yes
Earnings from a current job	Yes	Yes
Expected earnings from a future job Example: You were temporarily laid off but have a date you expect to return to work later this year.	No	Yes
Severance benefits	Yes, but only in the month they are received.	Yes

These are just a few examples of the complexities and problems Mainers face when talking with our Certified Application Counselors about coverage options.

C. Educating consumers about their rights and responsibilities. CAHC utilized a variety of strategies to educate consumers during the reporting period. The efforts emphasized eligibility

and documentation requirements for private and public health insurance, as well as providing information about using health insurance (e.g., selecting a plan, Explanations of Benefits, co-pays, co-insurance, in-network providers vs out-of-network providers).

In addition to the HelpLine callers we assisted, CAHC educated at least 3,746 consumers during the reporting period through webinars, Tele-town halls, and Facebook Live events, including:

- [“Understanding Your Health Insurance Options](#) webinar, designed as an efficient means to provide information to newly laid-off workers and the general public about private and public health insurance. It was presented live five times during the reporting period, posted on Facebook, and is currently available on our website.
- Health Care Update in Response to COVID-19, a webinar presented in conjunction with Maine Primary Care Association, presented on 03/25/20 to 109 people and 03/26/20 to 49 people.
- Community Discussion: Rx Dug Access & COVID-19 Health Coverage Update On 06/30/20. There were 967 participants.

CAHC maintains a [virtual library](#) on its website of more than 25 downloadable flyers that address various aspects of health insurance, including: 10 flyers on the ACA Marketplace (such as [Need Affordable Health Insurance?](#), [When and How to Pay for Health Insurance](#), [Health Insurance for New Moms and Pregnant Women](#), and [An LGBTQIA Guide](#)), 13 flyers on MaineCare, and 6 flyers on other programs and resources. These flyers are also distributed by CAHC’s network of enrollment professionals at hospitals, health centers, and Community Action Programs statewide and mailed/emailed to callers when appropriate.

D. Assisting consumers in obtaining coverage. CAHC HelpLine Advocates assist consumers in obtaining health coverage by evaluating their options. This process begins with a thorough screening to determine whether they are or may be eligible for private or public health insurance and providing application and enrollment assistance as needed. During Open Enrollment, CAHC enrolled 60 Mainers in ACA Marketplace plans, through safe, in-person meetings at CAHC’s office or remotely either by telephone, or videoconferencing. ACA enrollments typically take between 1 and 2 hours because staff work with the consumer to review a variety of plans in advance of selection. CAHC assisted another 1,349 consumers who appeared to be eligible for Marketplace plans by providing in-depth explanation about what Marketplace coverage is, including topics such as: metal levels (bronze, silver and gold plans) and the features each include, such as the types of subsidies associated with each, who qualifies for which type, what Special Enrollment Periods (SEP) are and who qualifies for an SEP, things to look out for when choosing a plan, and, the importance of reconciling tax credits.

In contrast to the Marketplace, enrollment in MaineCare can occur year-round if an individual or families meet certain income and other eligibility guidelines. During the reporting period, CAHC HelpLine staff assisted with 2,596 people who appeared eligible for MaineCare. In addition, CAHC made a substantial number of referrals: 823 to DHHS. 398 to the Marketplace; 135 to sliding-scale clinics or other safety net programs. 85 to Area Agencies on Aging; 78 to other

assisters around the state; 42 to the Bureau of Insurance; and, 16 to other nonprofits.

An important means by which CAHC augments its impact is to ensure that enrollment professionals statewide have adequate training to assist Maine consumers in obtaining health insurance. Prior to the onset of the COVID-19 pandemic in March, CAHC staff delivered two day-long MaineCare A-Z workshops for professionals, one in Cumberland County on 02/03/20 for 28 professionals, the other on 03/10/20 in Aroostook County for 12 professionals. While these workshops are primarily focused on MaineCare, they also address private insurance. It is important for enrollment professionals who help with private Marketplace enrollments to have a clear understanding of the other conveyor belt.

Following the onset of the COVID-19 epidemic, substantial effort went into adapting CAHC's in-person educational trainings to online video workshops. An example includes transforming the day-long, in-person MaineCare A-Z training into a compacted 3-hour MaineCare ABC webinar, which was presented four times over the reporting period. CAHC also developed an Advanced MaineCare training for enrollment professionals delivered as an online class over three weeks.

To prepare enrollment professionals for Open Enrollment, CAHC staff participated in three statewide Assister Roundtables, on 09/29/20, 10/01/20, and 10/03/20, training 83 enrollment professionals in all. In conjunction with Western Maine Community Action and Maine Primary Care Association, CAHC presented at Area Agencies on Aging Annual Marketplace Update meetings on 09/23/20 and 09/30/20, training 58 and 35 professionals, respectively.

Overall, CAHC trained 816 enrollment professionals during the reporting period, through presentations delivered via videoconferencing, and distributed 1,387 educational materials. Another service CAHC oversees to help enrollment professionals across Maine is a ListServ, which currently has 287 members from social service and health care provider groups. The ListServ is an efficient means of crowdsourcing technical assistance to enrollment professionals, navigators, and insurance brokers. There were 395 posts on 92 threads during the reporting period.

E. Assisting in obtaining federal health insurance tax credits. CAHC staff provide callers who are eligible for Marketplace plans, whether through Special Enrollment Period or during Open Enrollment, with in-depth education about private Marketplace coverage: how it is structured, what types of subsidies might be available to them, and how both APTC and Cost Sharing Reductions (CSR) work. The availability of these subsidies is an important component of making health insurance affordable for tens of thousands of Mainers. At the same time, consumers who take advantage of these subsidies incur significant responsibility. Callers need to fully comprehend that unexpected tax liability can result when an applicant's actual income, as compared to their projected income when they apply, increases over the calendar year.

In explaining the APTC subsidy, CAHC staff emphasize two points: 1) applicants should report any changes in income during the calendar year, and 2) applicants will be required to reconcile the APTC against their actual income when filing federal taxes and may have to pay back the subsidy

if their income increases. CAHC considers this a critical educational piece so consumers who take advantage of the availability of APTC are not caught unaware in the event of an income change.

F. Outreach and toll-free assistance. CAHC publicized the availability of free, professional assistance in finding and understanding, health insurance in a variety of ways during the reporting period. These included staff appearances at events, television advertisements, the distribution of printed material, and earned and social media. CAHC's toll-free number (1-800-965-7476) is listed on all private insurance Explanation of Benefit statements, on the Department of Human Services' CoverMe.gov website, and on Maine Department of Labor (DOL) DOL notices to filers for unemployment insurance.

CAHC worked closely with the Maine Department of Labor (DOL) to reach Mainers with employer-based health insurance who were laid off as a result of the COVID-19 epidemic. While CAHC has always supported DOL "rapid response" efforts to educate Mainers on an ad hoc basis, e.g., when various paper mills or other Maine businesses closed or laid-off workers, CAHC solidified a working relationship with DOL personnel and executed a plan to reach high numbers of laid-off workers.

During the reporting period, CAHC outreach staff participated in 14 DOL-organized calls with laid off workers from: Pixelle Specialty Solutions in Jay, Tasman Leather Group in Hartland, Penn Gaming in Bangor, Vic Firth Co. in Newport, and Dragon Paper in Oxford. CAHC distributed 2,642 educational materials through these companies, including flyers entitled: [Need Affordable Health Insurance?](#), [When and How to Pay for Health Insurance](#), and [Missed Open Enrollment? Don't Give Up!](#). CAHC outreach staff also participated in two DOL "[Rapid Response](#)" videos, one of which is posted on YouTube and has 3,719 views.

CAHC published two advertisements, headlined "Help for Mainers who are worried about losing or paying for health insurance," in regional newspapers. The ads emphasized that help was available for people who lost employer-based insurance or who had a change in income. They directed readers to call CAHC's HelpLine or go to CoverMe.gov. The ads ran in the Franklin Focus on and the Lake Region Reporter the first week of May 2020 and were available online. The Franklin Focus is mailed directly to 10,750 homes and has an estimated population circulation of 32,250. The Lake Region Reporter is mailed directly to a total of 15,207 and has an estimated population circulation of 41,904.

CAHC organized or participated in a variety of virtual workshops, presentations, webinars, and Tele-Town Halls to educate Mainers about health insurance, COVID -19 coverage, and access to prescription drugs. These include:

- Health Care Update in Response to COVID-19, a webinar presented in conjunction with Maine Primary Care Association, presented on 03/25/20 to 109 people and 03/26/20 to 49 people.
- Community Discussion: Rx Dug Access & COVID-19 Health Coverage Update On

06/30/20. There were 967 participants.

- Presentation to Maine Primary Care Association Executive Directors on 07/23/20 with an eligibility update.
- Presentation on 9/14/20 to Department of Corrections and probation staff regarding private marketplace and public coverage options for individuals moving through Corrections and Court systems.
- Northern Light Health/FQHC Fall 2020 Collaboration Meeting, Private Marketplace Open Enrollment and Medicaid Expansion discussion on 10/29/20 with 40 participants.

To prepare Mainers for Open Enrollment, CAHC participated in the following:

- OE Press Event on 11/09/20, in conjunction with Western Maine Community Action (which holds the ACA Navigator grant in Maine) and Maine Primary Care Association. The event was posted on Facebook and on CAHC's website and hosted 36 consumers.
- [Maine Calling: ACA: Understanding Enrollment & Provisions of Fed. Health Coverage](#) on 11/16/20.
- CAHC's services and toll-free number were mentioned in an Op-Ed by State Senator Linda Sanborn in the Portland Press Herald, [Sign Up for Health Insurance Now](#), published 11/20/20. This Op-Ed was linked to the Scarborough Leader.
- [Press release](#) from the Office of Governor Janet T. Mills marking "Get Covered 2021 Day," 12/10/20.
- CAHC reached out to local newspapers, allies in health care, the Maine Principal's Association, Maine Chamber of Commerce, and Senator King's office with a suggested email blast to publicize the Open Enrollment deadline of 12/15/20.

CAHC ran radio ads on WBLM, WEBB, and WPKQ in June, highlighting CAHC's toll-free number and directing listeners to [CoverMe.gov](#) for health insurance information and assistance. In addition, CAHC ran a [television ad](#) on WCSH-6 for six weeks beginning 08/27/20, which ran ten times daily between 5am -7am and 4pm – 5pm. CAHC also operates [Enroll207.com](#).

CAHC distributed 6,378 printed educational materials about the ACA Marketplace (e.g., [When and How to Pay for Health Insurance](#), [Taxes and the Marketplace](#), [Special Enrollment Periods](#), and [Marketplace and MaineCare](#)), MaineCare, and safety-net programs (community health centers, medication assistance programs, etc.) through Maine DOL-organized "Rapid Response" events, a VA (Veterans Administration) Resource Fair, food drives in Augusta and Old Orchard Beach, and upon request from health care organizations such as Kennebec Behavioral Health, Discovery House, and Planned Parenthood offices. CAHC also shared information through social media, targeting some information ads to areas in which lay-offs had occurred. CAHC's educational posts on Facebook had 327,963 impressions. On Twitter, we had 169,331 impressions. In addition to supplying general information and news on social media, we directed people to CAHC's website. Our website had 375,385 hits during the reporting period, with 1,517,307 page views, nearly double the website usage over the prior 12 months.

These figures illustrate the immense need for CAHC's timely, accurate, and reliable information

about health insurance in Maine, particularly in light of the COVID-19 epidemic, as Mainers were losing their jobs and employer-based coverage.

Conclusion: CAHC is pleased to serve as Maine’s Health Insurance Consumer Assistance Program. The staff takes great pride in our ability to provide these important services to Maine people without interruption over the past year. We look forward to expanding our reach in upcoming years to address the health insurance needs of all Maine people. We also appreciate helping our state as it works to address Mainers’ health care needs during the pandemic and as part of the State’s recovery efforts.