

Marketplace Affordability Message Guide

The goal of the Community Catalyst Marketplace Affordability project is to reduce outof-pocket costs for individuals and families, improve the affordability and accessibility of coverage, and improve experiences for all. Our project also has an explicit focus on enhancing enrollment equity for communities harmed most by the current system due to structural racism, classism, and other forms of oppression - including Black, Indigenous, Latinx, Asian and Pacific Islander communities, as well as immigrants, LGBTQ+ people, people with disabilities, and other systemically excluded communities.

About this Guide.

This document is meant to equip state and national partners with messages to use in policy, advocacy, organizing, and outreach efforts. There are many promising policy options that could have an impact in lowering costs for individuals on Marketplace plans. Below is an outline of broad, values-based messages that make the case for these policies and others that lower the cost of care, increase access to health coverage, and improve health outcomes for individuals, families, and communities.

Each message also includes a policy spotlight that tailors each frame to a specific policy from the project's legislative priorities. Within the context of this project, we focused on policy solutions from Massachusetts, Colorado, Pennsylvania, Washington, and California. Our aim is for this guide to support communications about policy wins in those states as



well as help lay the groundwork for the ongoing affordability fight in other states across the country.

Advocates shouldn't assume that lawmakers and decision makers understand that there is an urgent need to make Marketplace plans more affordable and accessible. The problem statement below is useful if you need to explain the problem in more detail.

The Problem.

The Affordable Care Act (ACA) was passed to provide quality, affordable health care to individuals and families across the country. While the ACA was an important and meaningful step in expanding access to coverage, <u>recent research</u> shows that many people living in America still struggle to afford their care, even those who purchase their insurance through the ACA Marketplace. Despite having insurance, far too many people are unable to actually get the care they need because of the out-of-pocket costs associated with health insurance, like premiums, deductibles, and co-pays. Even people who purchase their insurance on the ACA Marketplace report delaying care or avoiding it altogether, rationing medication, and making impossible choices between getting and paying for health care and going into medical debt.

The tie between health and economic justice is clear and requires that we take action to ensure that all people can afford to get the coverage and care they want and need to be healthy and free. Due to structural racism, classism, and other forms of oppression, those impacted most are Black, Indigenous, Latinx, Asian and Pacific Islander communities, as well as immigrants, LGBTQ+ people, people with disabilities, and other systemically excluded communities.

A note on immigrant communities. While we continue to advocate for lowering out-ofpocket costs for people who enroll in Marketplace plans, we must also consider who is excluded from getting health coverage at all - and are therefore unable to access the health care they need. Immigrant communities already face barriers to accessing affordable health plans through the ACA Marketplace - and these health plans are entirely unavailable to undocumented immigrants. Our messaging and outreach must continue to



lift up the importance of lowering costs *and* expanding access so that all people - regardless of their immigration status - can stay healthy and well without the risk of medical debt.

If you have any questions or feedback about this guide, please reach out to Carrie Rogers (crogers@communitycatalyst.org).

Key Audiences

As we orient around the goals for the message guide, here is a reminder of our key audiences and how we can use these messages as a jumping off point for further outreach and conversation.

- Impacted Communities These messages can be used to activate people who are feeling the burden of unaffordable health care, priming them to take action, such as sharing their story, calling their lawmaker, posting on social media, or engaging in their community to call for reduced out-of-pocket costs.
- Advocates One of our primary goals is to equip advocates in our target states (Massachusetts, Washington, Pennsylvania, Colorado, and California) with top-testing messages for their ongoing outreach and organizing with both impacted communities and with state and federal legislatures. These learnings likely also apply to the collective fight to lower health care costs and expand coverage in other states across the country.
- Decision makers The messages outlined in this guide are meant to reach lawmakers and decision makers who can influence policy and create long-term change. These messages frame people's health care affordability challenges within the context of overall rising costs and also make the connection for lawmakers to existing policy wins and what change is possible.



Key Messengers

Below are a few suggestions for compelling messengers who can speak to the importance of lowering out-of-pocket costs for individuals and families.

- People with Lived Experience Whenever possible, amplify the voices and stories of people who are directly impacted by skyrocketing health care costs, medical debt, or lack of access to affordable health coverage. Have them share what it would mean for them and their families to have access to care to stay healthy and the sacrifices they are making in their daily lives because health care is out of reach.
- Health & Economic Justice Organizations The communities that are most burdened by high out-of-pocket costs are also those with limited economic mobility as a result of systemic oppression. Building bridges between organizations focused on health and economic justice organizations broadens both of our networks and grows our base of support. Tap into their networks, storybanking efforts, and outreach to lift up the communities that have historically been left out of health coverage and economic mobility, including Black, Indigenous, Latinx, Asian and Pacific Islander communities, as well as immigrants, LGBTQ+ people, people with disabilities, and other systemically excluded communities.
- Health Care Providers Look to physicians, hospital leaders, and other health care providers to amplify what it means for their patients to live with unaffordable health coverage or no coverage at all. Highlight real-world examples from local physician practices and hospitals to illustrate the widespread need for policy change. Some providers may also have notable social media presences or be engaged in community outreach efforts identify any prominent health care leaders who can use their platforms to amplify our messaging.
- **Researchers** It is also important to lift up relevant and timely data releases and reports that highlight legislative wins, the impact of lack of health coverage on



different demographics, and more. When considering an earned media strategy, it is often the most compelling when we can spotlight both a personal story and a recent data release.

Core Messages.

MEDICAL DEBT IS A UNIQUELY AMERICAN PROBLEM. You shouldn't have to choose between paying the rent or getting their prescription filled — yet for many people, this is a reality. Everyone deserves to get the care they want without going into debt. As health care costs continue to skyrocket, high premiums and deductibles have become all too common. 4 in 10 people living in the U.S. have medical debt and medical bills are the cause of 62% of bankruptcies. High health care costs affect all of us. No one should live with the kind of fear and insecurity that comes from high health care costs. We all deserve to get quality, affordable care and coverage.

Policy spotlight: High premiums and deductibles have become too common of a barrier for people across the country seeking coverage and care. But it shouldn't be normal to struggle to afford the insurance you already pay for - especially as the cost of living is spinning out of control. Proposed legislation in **Massachusetts** to strengthen their premium rate review process by including affordability is an important step to reduce medical debt. No one should live with the kind of fear and insecurity that comes from high health care costs.

COVERAGE ALONE IS NOT ENOUGH. Even with insurance, too many people in America still struggle to afford health care. People who pay for their health insurance through the Marketplace may still face the sky high medical bills that follow an accident or injury. Even with coverage, they often still have to pay out-of-pocket costs that are out of reach - copays and high minimum deductibles on top of expensive monthly premiums. What's the point of health insurance if we can't afford to use it?

Policy spotlight: Many people who pay for their own insurance through the Marketplace still face financial devastation and medical debt from the bills that



come from prescription drug costs. This is especially true for people with chronic conditions (cancer, heart disease, etc.) who face frequent treatment and hefty price tags for their medication. Proposed legislation in **Massachusetts** to lower prescription drug costs will address these rising costs for people with certain chronic conditions.

EVERYONE DESERVES TO BE HEALTHY. Without our health, we have nothing. No matter who we are, how much money we have, where we live, or our immigration status, every person living in America has a right to affordable, quality health care. But, too often, communities of color - who face longstanding, structural barriers to care - don't qualify for Marketplace subsidies and can't get coverage at all. That leaves health care out of reach for too many and makes it especially challenging for them to get the care they need to be healthy and well.

Policy spotlight: Without our health, we have nothing. No matter who we are or how much money we have, every person living in America has a right to affordable, quality health care. Proposed legislation in **Colorado** requires all health care facilities to screen uninsured patients for eligibility for discounted care. Standardizing this practice is essential to ensuring that vulnerable populations, particularly communities of color - who face longstanding, structural barriers to care - can stay healthy and well.

PUTTING PEOPLE OVER PROFIT. Health care costs are high because the health care industry sets the prices high. These prices are often set by non-profit hospitals acting like for-profit entities, executives at health insurance companies, big pharma companies, and private equity firms that own our local hospitals and clinics. Lawmakers need to set standards for the Marketplace so that the health care industry can't keep putting profits over people. It's time we demand they put the care back in health care.

Policy spotlight: Health care costs are high because the health care industry sets the prices high. These prices are often set by non-profit hospitals acting like for-profit entities, executives at health insurance companies, big pharma companies, and private equity firms that own our local hospitals and clinics. That's why



lawmakers in **Washington state** are working to limit unfair price negotiations by big health systems and improve oversight of health care mergers. By reining in these egregious practices, they'll put the care back in health care.

STRONGER ECONOMIES. When people have access to affordable care, they are able to stay in the workforce, take care of their families, and contribute to their communities. Reforms to the Marketplace including standardization of plans, price transparency, and other measures to reduce medical debt would reduce out-of-pocket costs for people and also help create jobs, keep businesses open, and create a healthier and stronger workforce.

Policy spotlight: When people have access to affordable care, they are able to stay in the workforce, take care of their families, and contribute to their communities. A legislative proposal to establish a state Marketplace coverage affordability program in **Pennsylvania** would support individuals and families by reducing their out-of-pocket costs so they can get the care they want and need without going into debt. This would spur additional economic activity and help create jobs, keep businesses open, and create a healthier and stronger workforce.

Messaging Considerations for Explaining Policy Solutions:

- Keep things simple. Don't over complicate the issue by trying to explain how it would work. A simple formula would be:
 - O State the value (e.g. everyone deserves to have access to affordable, quality health care)
 - O Name the problem (e.g., the health care industry is setting costs too high and putting profits over people)
 - O Describe the harm (e.g., millions of people are putting off doctor visits or going into debt, simply for seeking care)



- O Offer a solution (e.g., people want lawmakers to step in and take action to eliminate deductibles and protect people from mounting medical debt)
- Tailor your message to your audience's coverage type, where possible. If you know the type of coverage your audience has, address the specific costs they experience and demonstrate their stake in the issue. For example, if you are speaking to someone with insurance, you may say:
 - O What's the point of health insurance if we can't afford to use it?
 - O Co-pays and deductibles can be a drain on already-tight household budgets. You shouldn't have to pay more just to use your insurance.
 - O Medical debt can impact anyone, including those with insurance, but it doesn't impact us all the same.
- Make explicit connections to how policies help people avoid medical debt. Many already have medical debt in some form, and those that don't express a fear of being one bill away from debt. It's become common knowledge that hospital bills are the leading cause of medical debt and bankruptcy and your messaging should reflect this.
 - O The <u>medical debt crisis</u> is reaching a tipping point. Too many patients feel trapped in debt and see no way out. They are delaying care, skipping appointments, and feeling the emotional and mental consequences of mounting medical debt.
 - O Patients are counting on lawmakers to bring costs down and put an end to medical debt.
 - Proposals to expand access to health insurance, enforce prohibition of surprise medical bills, and improve transparency around charity care can prevent medical debt from occurring in the first place.
 - Lawmakers can also take action to alleviate the burden of medical debt by banning medical debt from credit reports, prohibiting hospitals and providers from suing patients over a medical bill, and lowering interest rates on debt.



- Use dollars and cents when you can. When talking about affordability measures, be as specific as you can. Making the potential savings real for audiences is powerful. For instance,
 - O In Alabama, the average benchmark premium is \$564. (Find other state statistics in this <u>KFF breakdown</u>.)
 - O The <u>average premium</u> for single coverage in 2023 is \$8,435 per year. For a family, the average premium is \$23,968 per year not to mention unpredictable out-of-pocket costs.
 - O A <u>single vial of insulin</u> that used to cost \$21 in 1999 cost \$332 in 2019. That's an increase of over 1000% for the exact same drug.
 - O A single Tylenol pill is \$15? A pair of sterile gloves for \$53? Anyone who looks closely at their hospital bill will see similar charges and they don't make sense.
- Keep the focus on the impact for people and families. Don't use pithy policy names without describing the impact the policy will have for people.
 - O This plan, called Medicare for All, would eliminate health insurance premiums, deductibles, and copays.
 - O Our new Prescription Drug Affordability Board will set caps on what drug companies can charge patients in our state, making sure people can afford the drugs they are prescribed.

Messaging Considerations for Sharing Policy Wins:

We know that it can be difficult to make time to celebrate the victories in the fight for affordable, equitable health care. There's always another fight around the corner, and there's never enough time or capacity. But, research has shown that far too often the public isn't aware of the affordability reforms and policies that are helping to lower the cost of their health care.



Not taking the time to celebrate and publicize our victories - big or small - is actually *hurting us* and may actually be a barrier to our progress and prevent us from winning the fights ahead. Many people feel like their lawmakers are unwilling or unable to act to lower out-of-pocket costs. We need to break through this feeling by showing the public that reform is not only possible, but it is happening.

Below is messaging guidance to help you take a well-earned victory lap, to spread the word of your recent policy wins, and to keep them in the public eye.

- **Repetition is key.** Don't stop talking about the policy just because it's in the past and don't assume people already know what it is.
- Keep it conversational & straightforward. Don't fall back into wonky jargon or acronyms.
- **Highlight the tangible impacts on peoples' lives.** Make sure they understand how this will lower costs for people and their families.
- Share timelines as much as possible. Bridge the gap between the announcement and when people will see the benefits.
- **Position this as part of the bigger fight to make the cost of living more affordable.** Speak to what the majority of people are concerned about by making explicit connections between health and economic justice.
- Talk about a win even if it's not exactly everything we want. Use language like "an important first step" or "a great start" to highlight it while emphasizing that there is more to do. This will help set the stage for future progress, and enable you to hold lawmakers accountable for additional reforms.
- Remind people that change is possible and that progress is being made. Use your policy wins as an example of things that state lawmakers and advocates are



achieving together. People want to be a part of a broader movement - and that requires that we center their ideas, wants and needs, as well as experiences in the narratives we put into the world.

- Keep the focus on ways people can get involved. Reinforce that we need public engagement to continue to build momentum and demand for affordable health care. Always provide a clear call to action. For example:
 - O Impacted Communities: Tell your story.
 - O **Advocates:** Share these messages in your organizing and legislative meetings.
 - O **Lawmakers:** Act now to pass policies to reduce health care costs and protect patients.