



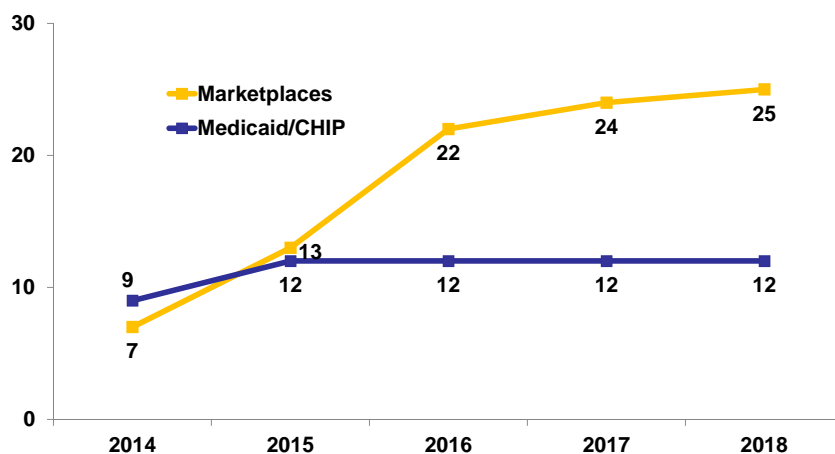
## State Health Insurance Marketplaces on the Eve of Open Enrollment: Key Implementation Issues

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### Exhibit 1. Seven Million People Estimated to Enroll in Plans Through the Health Insurance Marketplaces in 2014

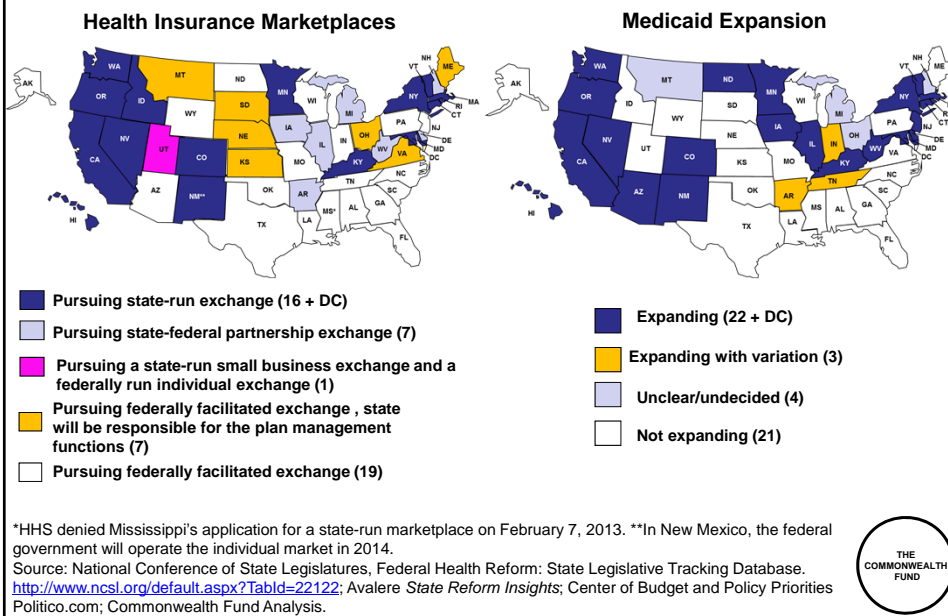
Millions of people, ages 0-64



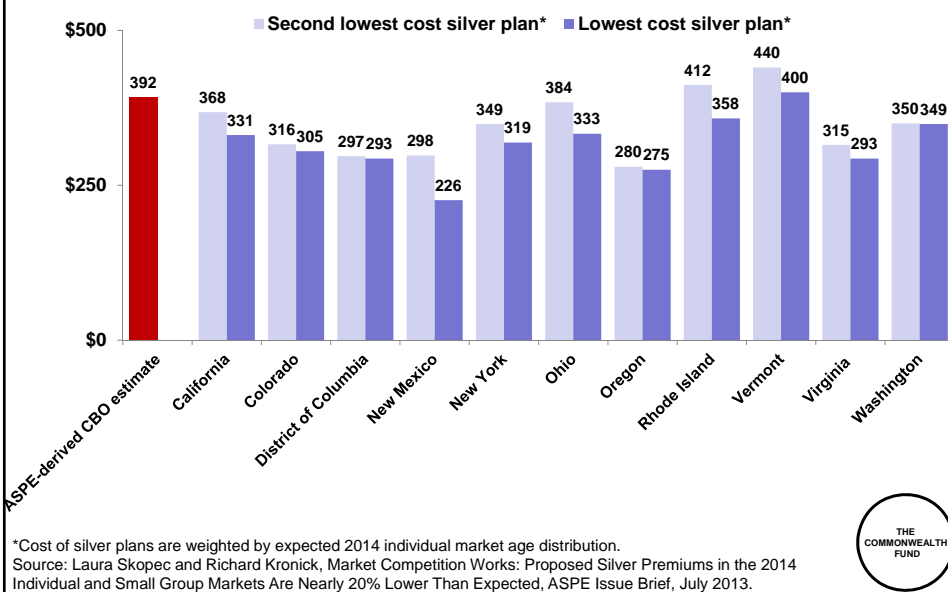
Source: Congressional Budget Office, May 2013 Estimate of the Affordable Care Act on Health Insurance Coverage, May 2013.  
[http://www.cbo.gov/sites/default/files/cbofiles/attachments/44190\\_EffectsAffordableCareActHealthInsuranceCoverage\\_2.pdf](http://www.cbo.gov/sites/default/files/cbofiles/attachments/44190_EffectsAffordableCareActHealthInsuranceCoverage_2.pdf)

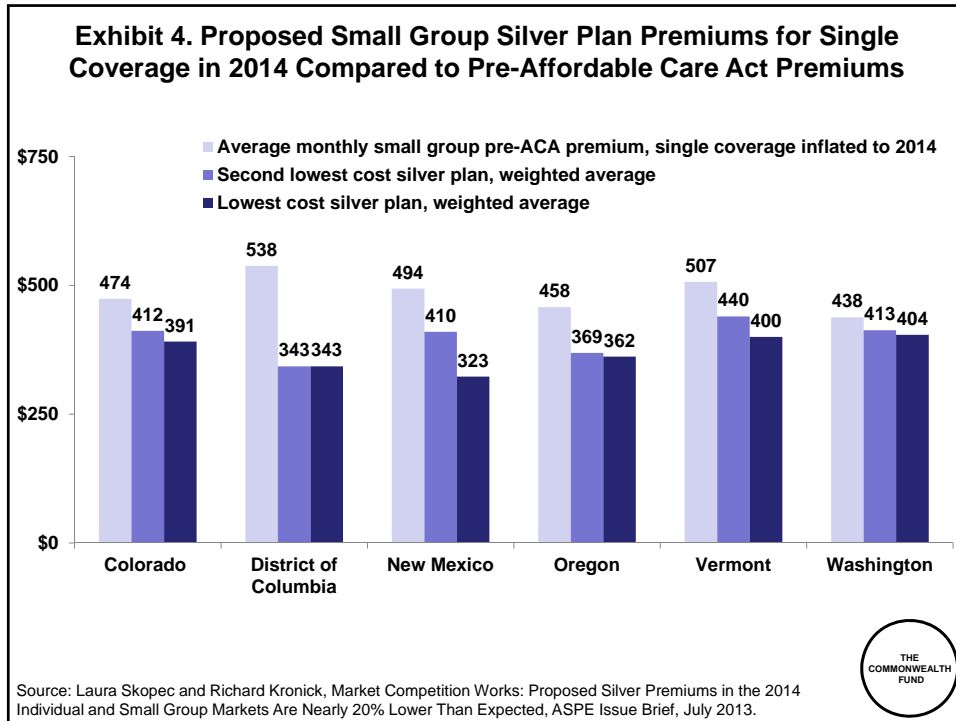


### Exhibit 2. State Action on Establishing Health Insurance Marketplaces and Participation in Medicaid Expansion, As of August 2013



### Exhibit 3. Proposed Individual Silver Plan Premiums in 2014 Compared to CBO Estimates





- ### Exhibit 5. Marketplaces: Key Implementation Questions
- Near-Term**
- How are the marketplaces shaping up? What are key differences?
  - What is variation across states in health plan participation, premiums?
  - What steps are federal/state governments taking to ensure broad public awareness of the marketplaces and eligibility for subsidies?
  - What will be the experience of people choosing plans, gaining access to subsidies? Do they enroll, why or why not?
  - How many states will participate in the Medicaid expansion next year?
- Short to Long-Term**
- Will different marketplace designs affect outcomes (individual and small business enrollment, customer satisfaction, uninsured and underinsured, plan competition, premium growth, costs to individuals/employers and government, delivery system innovation)?
  - How will state approaches to the Medicaid expansion affect enrollment, the marketplaces, individual and government costs?
  - How are state and federal governments coordinating exchanges and Medicaid programs? Efforts to reduce risks of gaps and “churn”?
- THE COMMONWEALTH FUND