



High-Risk Pool FAQs – July 7, 2010

What is the high-risk pool program?

The new federal health care reform law requires the U.S Department of Health and Human Services to set up a temporary health insurance program – or “high-risk pool” – in each state for people with pre-existing health conditions. Currently, under the federal health care reform law, each state can decide whether it wants to run the new high-risk pool or have the federal government run the program instead. Around 30 states, including Ohio, have decided to run their own programs. The program will last until 2014, when full federal reforms will take effect.

How has Ohio chosen to administer the high-risk pool program?

The State of Ohio has designated Medical Mutual of Ohio as the non-profit entity to administer a temporary high risk pool program in Ohio. The program is designed to provide quality health insurance benefits at an affordable price to uninsured Ohioans with pre-existing health conditions as soon as possible. Medical Mutual is a non-profit mutual insurance company headquartered in Ohio which provides coverage on an insured and self-insured basis to individuals and groups throughout Ohio.

When will high-risk pool coverage be available in Ohio?

Applications should be available later in July. Medical Mutual will begin to accept applications for high risk pool coverage on August 1, 2010 with coverage to be effective for the first enrollees on September 1, 2010. Check the Ohio Department of Insurance website for updates: www.insurance.ohio.gov.

What is the difference between the federal high-risk pool program and the Ohio high-risk pool program?

Ohio has chosen to implement its own program rather than rely on the federal fallback program. Eligible Ohioans will secure coverage through Medical Mutual rather than the federal plan. The federal application will not work in Ohio. Ohio is developing its own application, which should be available later in July.

What are the benefits and how much will the coverage cost?

Medical Mutual will offer two PPO benefit plans to enrollees, one with a \$1,500 deductible and another with a \$2,500 deductible. Coverage will have no pre-existing conditions exclusions or waiting periods. Medical Mutual will provide coverage through a statewide provider network that is one of the most extensive in Ohio. Rates for non-smokers are expected to be in the range of \$188 to \$545 depending on the age of the enrollee and the benefits selected. Rates for smokers are somewhat higher. The benefit will encourage the use of in-network providers, although an out-of-network benefit will also be provided. The plans will have no annual or lifetime limits and will cap out-of pocket expenses in accordance with federal law.

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What is the criterion to determine if individuals are eligible to enroll in Ohio's high-risk pool program?

The individual must,

- Be a citizen or national of the United States or lawfully present in the United States,
- Be uninsured for 6 months prior to the date the person applies for coverage,
- Not be eligible for coverage under the federal Medicare program, the Ohio Medical Assistance Program, the Ohio Children's Health Insurance Program, or an employer-sponsored group health plan unless the individual is subject to a mandatory initial waiting period, and
- Have a qualifying pre-existing condition as evidenced by a denial of coverage by two insurers, or documentation from a health professional of a qualifying pre-existing condition.

What sort of information will be required from me during the application process?

The application process will include documentation requirements associated with the following:

- **Citizenship:** Proof that the individual is a citizen or national of the United States or is lawfully present in the United States (birth certificate, passport or visa).
- **Ohio Resident:** Provide proof of Ohio residency.
- **Evidence of a Pre-Existing Condition:** Either (1) a copy of letter or document verifying two carriers have refused to issue creditable coverage to the individual within the previous 6 months or would issue coverage only with an exclusionary rider or (2) written certification by a licensed physician or nurse practitioner, issued within the past 6 months, that the individual has a history of or suffers from a qualifying medical or health condition.

Who can I contact with questions about this program?

Check the Ohio Department of Insurance website for updates: www.insurance.ohio.gov. When more program details become available, customer service representatives will be available to answer questions.

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