

Update from the HHS Office of Consumer Information and Insurance Oversight



Richard Popper

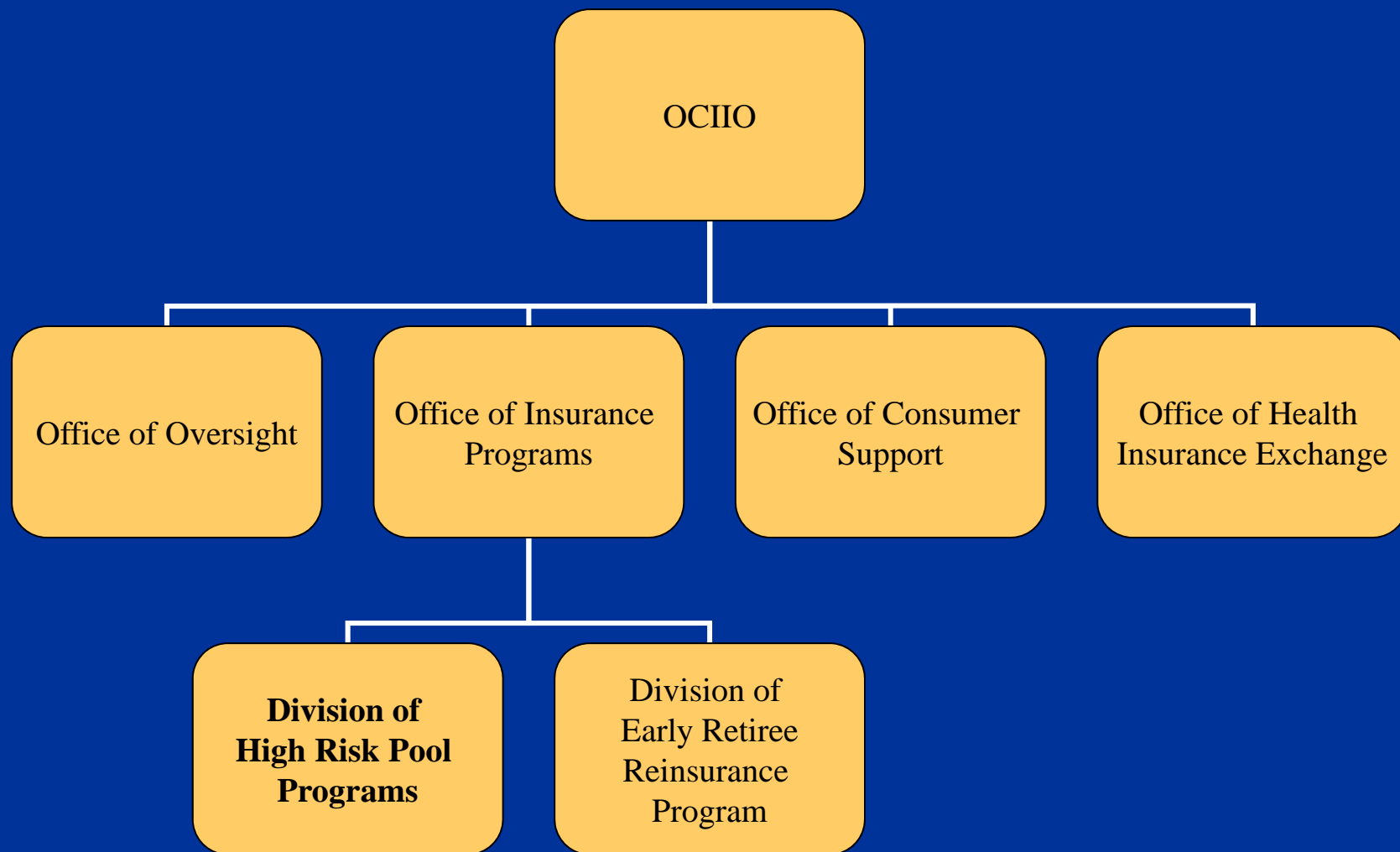
Director of Insurance Programs, OCIO



Presentation to the
Idaho Task Force on Health Reform
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Office of Consumer Information and Insurance Oversight (OCIIO)





Overview of the Pre-existing Condition Insurance Program (PCIP)

- Section 1101 of The Affordable Care Act requires that HHS establish a “temporary high risk health insurance pool program”
- Provides immediate coverage for individuals with pre-existing conditions until the Health Insurance Exchanges are available in 2014
 - Law required establishment within 90 days of enactment



ACA Established Basic Eligibility Requirements

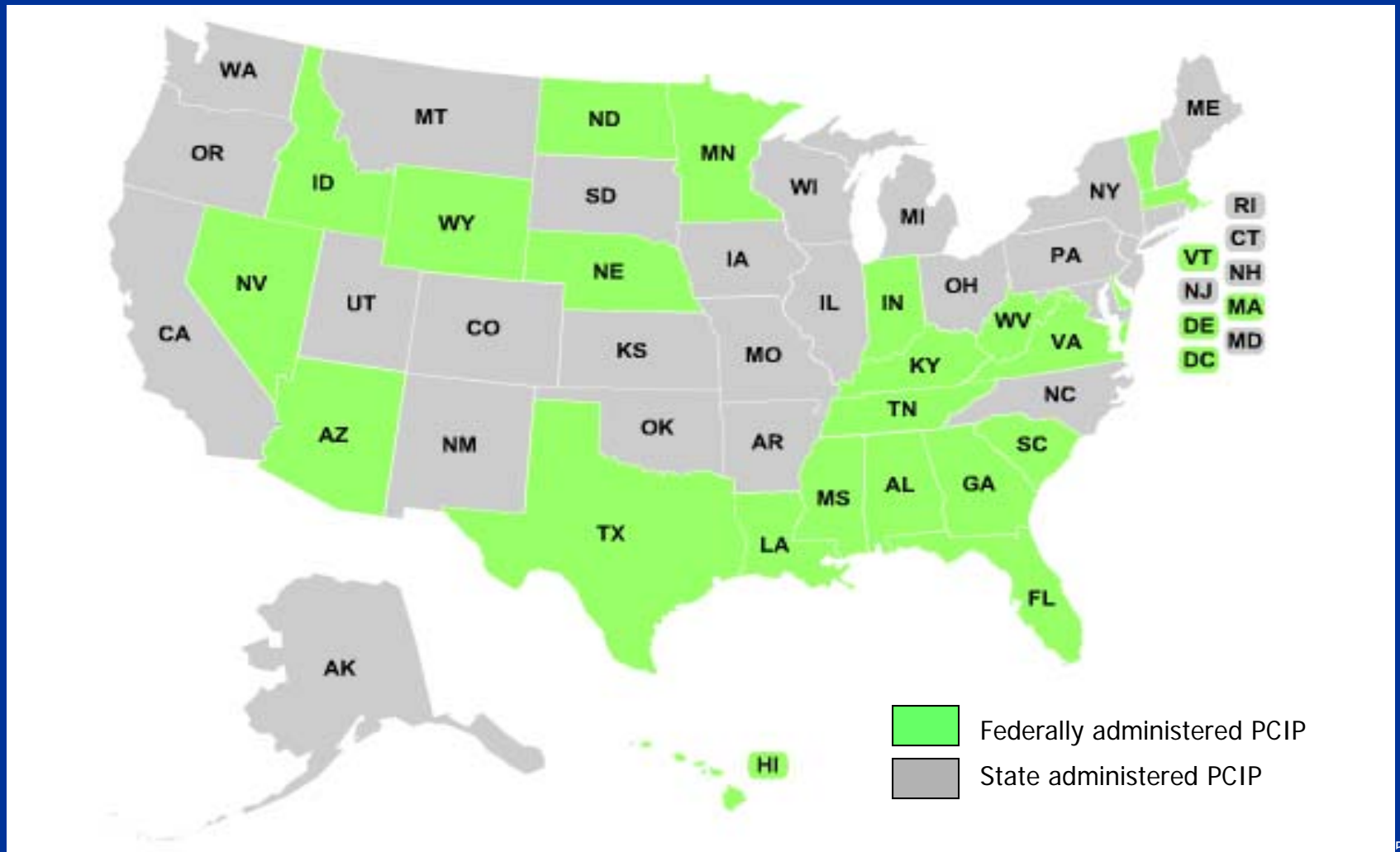
- In order to qualify for PCIP, an individual must:
 - Be a U.S. citizen or lawfully present in the U.S.;
 - Have been uninsured for a minimum of 6 months before applying to PCIP; and
 - Demonstrate inability to access commercial insurance
 - In the federal PCIP, applicants may provide a denial of coverage, offer of coverage with a rider, or offer of coverage at a substantially higher rate*
 - Some states use condition lists to establish eligibility; these vary by state

PCIP applicants in Idaho must provide evidence that they cannot access commercial coverage.

*Rate must equal at least 200% of corresponding PCIP rate. Permitted for select applicants.



States Chose Whether to Run PCIPs



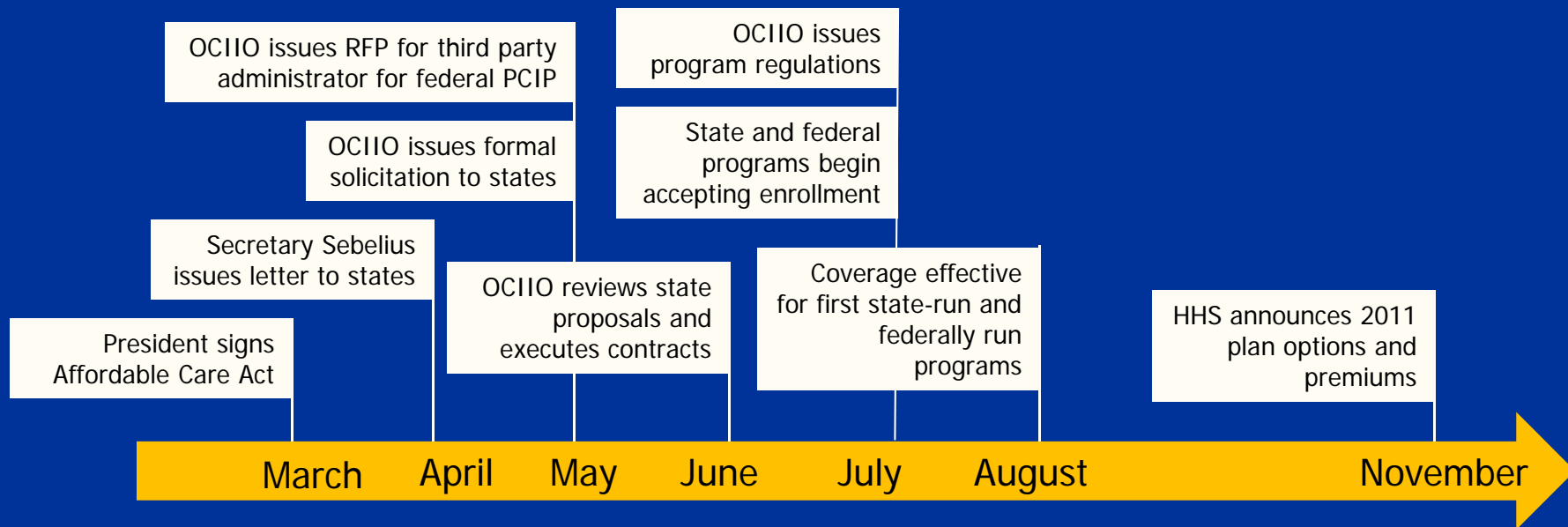


Interaction of PCIP with State Pool

- Idaho has an existing state-run pool, the Individual High Risk Reinsurance Pool (IHRRP) for residents with pre-existing conditions
- This program will continue to operate alongside PCIP, and is not affected by PCIP regulation or guidance
- There are several important differences between IHRRP and PCIP, including:
 - Coverage (self versus family)
 - Plan options
 - Premiums
 - Eligibility criteria



Program Milestones to Date





2011 Plan Options and Premiums

In 2011, consumers in the federally run PCIPs will be able to choose among three plans with different premiums and cost-sharing requirements

Summary of 2011 Plan Options

	Standard Option	Extended Option	HSA-eligible Option
Premium range (per month; all ages)	\$133 - \$424	\$179 - \$571	\$138 - \$441
Medical deductible (per year)	\$2,000	\$1,000	\$2,500
Drug deductible (per year)	\$500	\$250	Incl. in medical
Office Visit Copay (per visit)	\$25	\$25	\$25
Drug Copay (per prescription)	\$4, \$40, \$80	\$4, \$30, \$60	\$4, \$30, \$60
Annual out-of-pocket limit	\$5,950	\$5,950	\$5,950

NOTE: All deductible and copayment amounts are for in-network benefits.



PCIP Moving Forward

- Focus on Outreach
 - Refining benefit package and premium schedule to offer consumers the best value
 - Pursuing a targeted outreach and enrollment strategy
 - Partnering with external groups to educate consumers
 - Working with insurers, agents, and brokers to increase awareness about PCIP



We need your help

Can PCIP contact info be added to notice for individuals declined commercial coverage and referred to Idaho Reinsurance Pool plans?

Are there upcoming Idaho forums where HHS-PCIP can train agents, providers, consumer groups on PCIP eligibility & benefits?

Do Idaho DOI call center and consumer staff need training or materials on PCIP?



For more information on the Pre-existing Condition Insurance Plan, please visit www.healthcare.gov

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