

Konrad Jackson

From: Frank, Kris <FrankK@AETNA.com>
Sent: Friday, April 06, 2012 8:26 AM
To: Konrad Jackson
Subject: RE: House Labor & Commerce Hearing on "Child-Only Health Care Coverage"
Attachments: PCIP Memo re Child Only.pdf

Follow Up Flag: Follow up
Flag Status: Flagged

Thank you for understanding. Attached is a HHS memo that you may find helpful in our deliberation over child-only policies. In short, the last paragraph indicates that with regard to child policies the pre-existing condition requirement will be liberally construed with verification of treatment within the last year by a medical professional. I have been verbally informed that the condition does not need to be chronic and -- according to at least one insurance commissioner I have spoken with - the condition could be something as simply as the flu.

My point is that the federal high risk pool is available for these children today and it's likely to consist of better benefits and lower rates than mandating something in commercial market.

Kris Frank | State Government Relations| Aetna Inc. | 3100 Zinfandel Drive, Suite 125 | Rancho Cordova, CA 95670 | Office: 916-403-4151 | Fax: 860-754-9653 | frankk@aetna.com

From: Konrad Jackson [\[mailto:Konrad_Jackson@legis.state.ak.us\]](mailto:Konrad_Jackson@legis.state.ak.us)
Sent: Friday, April 06, 2012 8:56 AM
To: Frank, Kris
Subject: RE: House Labor & Commerce Hearing on "Child-Only Health Care Coverage"

Kris,

Thanks for getting back with me. I totally understand.

Have a great Easter.

Konrad Jackson
Staff to
Representative Olson
Labor & Commerce Committee
907-465-4954

From: Frank, Kris [\[mailto:FrankK@AETNA.com\]](mailto:FrankK@AETNA.com)
Sent: Friday, April 06, 2012 6:41 AM
To: Konrad Jackson

Cc: 'ReedStoops@aol.com'

Subject: RE: House Labor & Commerce Hearing on "Child-Only Health Care Coverage"

Konard. Thank you for the inquiry. Unfortunately, I will be on a plane this afternoon flying home to see my family for Easter.

Kris Frank | State Government Relations| Aetna Inc. | 3100 Zinfandel Drive, Suite 125 | Rancho Cordova, CA 95670 | Office: 916-403-4151 | Fax: 860-754-9653 | frankk@aetna.com

From: Konrad Jackson [Konrad_Jackson@legis.state.ak.us]

Sent: Thursday, April 05, 2012 2:00 PM

Subject: House Labor & Commerce Hearing on "Child-Only Health Care Coverage"

Hello,

Representative Olson has asked me to contact you in hopes that you would be interested in speaking the House Labor & Commerce Committee on Friday, April 6th regarding child-only health care coverage. The committee will again be taking up HB 326 which would mandate this coverage. Your participation would be appreciated.

If you or a representative from your company is available, please call 855-463-5009 at around 3:15 pm Alaska time and the chairman will call on you to get your comments. If you have questions prior to that time, I can be reached at 907-465-4954.

The bill and the associated documents can be found at the following link:

http://www.legis.state.ak.us/basis/get_bill.asp?bill=HB%20326&session=27

Thank you for your consideration and I hope you or a representative will be available tomorrow.

Best Regards,

Konrad Jackson

Staff to

Representative Olson

Labor & Commerce Committee

907-465-4954

This e-mail may contain confidential or privileged information. If you think you have received this e-mail in error, please advise the sender by reply e-mail and then delete this e-mail immediately. Thank you. Aetna

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Center for Consumer Information and Insurance Oversight
200 Independence Avenue SW
Washington, DC 20201

OFFICE OF INSURANCE PROGRAMS

Date: February 17, 2011

To: Federal High Risk Pool Contractors
State High Risk Pool Directors

From: Richard Popper, Director, Office of Insurance Programs

Subject: Eligibility for Children under Age 19 in the Federally-Administered Pre-Existing Condition Insurance Plan (Policy Letter #4)

The purpose of this memorandum is to inform your organization of a newly implemented eligibility clarification affecting children under age 19, in 23 States and the District of Columbia, with respect to how they may satisfy the pre-existing condition requirement in the federally-administered Pre-Existing Condition Insurance Plan (PCIP). Interim final regulations at 45 C.F.R. § 152.14(c)(4) permit a PCIP to elect, subject to approval by HHS, to apply criteria other than those set forth in paragraphs (c)(1)-(3) for determining whether an individual has a pre-existing condition when the individual is unable to obtain a denial from an issuer based on a pre-existing condition. In its role in the federally-administered PCIP, HHS is acting to make sure that the PCIP program remains a viable coverage option for children that may be unable to obtain a denial letter from an issuer. We encourage State-administered PCIPs to assess the availability of health coverage for children under age 19 in their States, particularly in the individual market, to ensure that children are able to demonstrate eligibility for PCIP. As necessary, we stand ready to assist PCIPs in providing additional ways for children to meet its PCIP pre-existing condition requirement. Please contact your designated HHS account manager or HHS point of contact if you have any questions about this guidance.

How can a child who is under age 19 qualify for the federally-administered PCIP?

Provided that a child applying for PCIP coverage is a U.S. citizen or U.S. national or is otherwise lawfully present in the U.S. and has been without creditable coverage for at least 6 months, he or she is able to satisfy the pre-existing condition requirement for the federally-administered PCIP in one of two ways. First, the federally-administered PCIP will accept evidence that the child had been offered individual insurance coverage by a licensed health insurance company during the 12 months prior to applying for enrollment in the PCIP for a premium that is at least twice as much as the premium for the PCIP Standard Option. Second, the child may qualify for the federally-administered PCIP on the basis of having a condition that was present before the date of enrollment for such coverage, whether or not any medical advice, diagnosis, care, or treatment was recommended or received before such date. “Pre-existing condition” is defined in the same

way for the purpose of the rules limiting pre-existing condition exclusions under the Public Health Service Act.

What eligibility documentation will PCIP require to determine whether a child has a pre-existing condition?

To document the presence of a pre-existing condition for a child under age 19, the federally-administered PCIP will accept a document dated within the past 12 months from a doctor of medicine, doctor of osteopathy, physician assistant, or nurse practitioner who is licensed to practice stating that such child used to have, or presently has a condition. The document will be reviewed to verify that: 1) it is dated within 12 months of the date of application; 2) it identifies the child and his or her condition; and 3) includes the name, license number, and signature of a doctor of medicine, doctor of osteopathy, physician assistant, or nurse practitioner for purposes of validating whether he or she is licensed to practice.