



**The California Managed Risk Medical Insurance Board**

1000 G Street, Suite 450  
Sacramento, CA 95814  
Phone: (916) 324-4695  
Fax: (916) 324-4878

**Board Members**

Clifford Allenby, Chair  
Richard Figueroa  
Samuel Garrison  
Ellen Wu

**Ex Officio Members**

Jack Campana  
Diana S. Dooley  
Secretary, Business,  
Transportation and Housing  
Agency

**M E M O R A N D U M**

DATE: August 10, 2011  
TO: MRMIB Members  
FROM: Jeanie Esajian, Deputy Director for Legislation and External Affairs  
SUBJECT: MRMIB Media Report for July – August 2011

The last month has been a concentrated media period with coverage focusing on the following:

- Premium rate reductions for the Pre-Existing Condition Insurance Plan
- Dental quality efforts for Healthy Families subscribers
- MRMIB's post-budget activities

On August 2, 2011, MRMIB hosted a news conference to announce reductions to PCIP premiums. The news conference generated coverage from the following outlets: the Los Angeles Times, San Francisco Chronicle, California Healthline, California Health Report, La Opinion, Sacramento Business Journal, KGO TV – Channel 7 San Francisco, KQED FM – Public Radio and Becker's ASC Review. The conference was videotaped and a news story was fed to more than 20 California subscribers of the Capitol Television News Service. Legislative and External Affairs (LEA) staff anticipates that additional coverage is forthcoming and continues to work with other media outlets.

During the past 30 days, 10 reporters contacted MRMIB. These reporters represented the following outlets: California Healthline (web), California Health Report (web), KQED (public radio), San Francisco Chronicle (newspaper), Los Angeles Times (newspaper), Bureau of National Affairs (news service), Sacramento Business Journal (web), La Opinion (newspaper), and Capitol Television News Service (TV).

As part of the news conference on PCIP premiums, LEA staff offered to connect reporters with vetted PCIP subscribers who signed authorizations for the release of their information and were willing to speak about their experience in the program. Reporters contacted MRMIB to obtain contact information for those subscribers. Four PCIP

External Affairs Update  
Managed Risk Medical Insurance Board  
August 10, 2011  
Page 2

subscribers participated in these events. LEA staff is still working with media contacts in Bakersfield, Ventura, Fresno and Southern California to place additional pieces about the PCIP premium reduction.

In addition to the news conference, LEA staff continues to work with our federal partners to raise awareness about PCIP. In addition to working with CMS Regional Administrator David Sayen who participated in the news conference, LEA staff also provided CMS communications staff with support for an op-ed piece by Mr. Sayen on PCIP's benefits. This op-ed was published in the Alameda Sun, San Gabriel Valley Tribune, Redwood Times and other community newspapers throughout HHS Region IX.

LEA staff also facilitated an interview between a California Healthline reporter and MRMIB Benefits and Quality Monitoring Deputy Director Shelley Rouillard. The interview addressed the *Healthy Families - Healthy Smiles* dental quality initiative for the Healthy Families Program.

If you have any questions or comments regarding these articles, please feel free to contact me at (916) 324-0571 or at [jesajian@mrmib.ca.gov](mailto:jesajian@mrmib.ca.gov).



## Insurance available to people with pre-existing conditions

Wednesday, August 03, 2011

[Michael Finney](#)

People with pre-existing medical conditions have sometimes been denied medical coverage. Now, they can not only get coverage, but that coverage will be less expensive.

Premiums will be lowered for more than 3,500 Californians enrolled in the Pre-Existing Condition Insurance Program. It is part of the federal health reform passed last year.

The decreases just approved will range from 8 to 24 percent depending on the person's age and where they live.

A 27-year-old enrollee talked about severely injuring an ankle in a horse riding accident and then being denied coverage for a year after aging out of his mom's insurance program.

"It's kind of scary because, you know, if I have a problem what I am supposed to do? I can't go to the doctor, I can't get the coverage I need. You know, unless it's super important, I'm not going to go to the doctor because I know I can't afford it," said Brian McCarthy, a PCIP subscriber.

This program is a temporary bridge until pre-existing coverage will become even more affordable beginning in 2014.

(Copyright ©2011 KGO-TV/DT. All Rights Reserved.)

# San Francisco Chronicle

## High-risk patients get health insurance rate break

### HEALTH INSURANCE

August 03, 2011 | By Victoria Colliver, Chronicle Staff Writer

More than 3,500 Californians are about to receive a rare benefit: reduced health insurance rates.

The state announced Tuesday that it will lower premiums by as much as 24 percent for new and existing subscribers of its health program for the medically uninsurable.

Monthly premiums for people in the federally funded high-risk pool, known as the Pre-Existing Condition Insurance Plan, will drop an average of 17.9 percent, or between 8.2 percent and 24.3 percent, according to the state's Managed Risk Medical Insurance Board, which manages the program.

"We're very pleased to be able to offer these lower premiums," said Cliff Allenby, chairman of the high-risk insurance board. "This class of people has been really disadvantaged over the years in terms of not being able to get health coverage."

California has been allotted \$761 million from the federal government to operate the program until 2014, when the federal health law will prohibit insurers from denying people coverage due to pre-existing conditions. The government has committed \$5 billion to administer the program nationwide.

But enrollment in the program, which has been up and running for nearly a year, has been slow to take off. So the federal government instructed states about how to recalculate their premiums.

In the Bay Area, the change means a 40-year-old would pay \$305 a month instead of \$344 and a 55-year-old would pay \$514 rather than \$624. The reductions will be reflected in bills as of Oct. 1, but will be retroactive to Aug. 1.

It will also be easier to apply for the program. Applicants no longer have to prove they've been rejected by insurers but instead will only need to provide a letter from their doctors explaining a deniable condition. The federal government is rolling out an outreach program to attract more subscribers.

The program is available to legal residents who've been uninsured for six months prior to applying and have a medical condition that has put private coverage out of reach.

Juan Chavez of Alameda is one of just over 3,500 subscribers in California's pre-existing condition plan. Uninsured for more than a year, he signed up shortly after the program became available.

Chavez, 38, works as an exporter/importer for an automotive parts company that helps employees pay for health insurance, but does not offer group coverage. Because Chavez has high blood pressure and diabetes, he could not find an insurer to cover him.

He said he's pleased about the rate drop, but is even more grateful that the program exists.

"Sometime we feel our government doesn't help us enough," Chavez said, "but then there are things like this that give us faith that our tax dollars are working."

### **Plan details**

For more information about the California Pre-Existing Insurance Condition Plan, go here: [links.sfgate.com/ZLBK](http://links.sfgate.com/ZLBK).

E-mail Victoria Colliver at [vcolliver@sfchronicle.com](mailto:vcolliver@sfchronicle.com).

# Los Angeles Times

## Rates drop for California safety-net health insurance

### Subscribers to the federally subsidized California Pre-Existing Condition Insurance Plan will see an average rate reduction of 18%.

By Duke Helfand, Los Angeles Times

August 4, 2011

Californians who rely on safety-net health insurance are getting an unexpected break on their rates.

The lucky recipients get their coverage through a little-known public program, started last fall, for people with preexisting medical conditions.

The federal government foots most of the bill and recently gave the state, which runs the program, permission to lower rates.

So starting this month, the 3,500 subscribers will see their monthly insurance bills fall an average of 18%. Some will get the maximum 24% break.

And thousands more may be eligible for the lower-cost insurance offered through the California Pre-Existing Condition Insurance Plan, created by the national healthcare overhaul that took effect last year.

For Kristian Magnani, an unemployed graduate student from Duarte, the rate cut will pare \$70 from his monthly insurance bill, dropping it from \$288 to \$218. Magnani, 33, has a congenital back disorder and went without insurance for more than a year before he discovered the insurance program when it debuted in October.

"I'm just trying to get by," he said. "For me, \$70 a month in my pocket is huge."

The insurance plan targets individuals like Magnani who have been unable to find or afford health insurance in the individual market because of their medical conditions.

Insurers in that market can reject subscribers or charge high rates to those with even minor medical problems such as hay fever or back pain.

The new program is viewed as a temporary solution for such people until 2014, when, under the federal healthcare overhaul, insurers will no longer be able to reject policyholders or charge more for those who are sick.

State officials said they hope the lower costs will help attract more subscribers to the program, which has \$761 million in federal money to subsidize the cost of the insurance.

To qualify, applicants must have a letter from their doctor detailing their preexisting medical condition and have been uninsured at least six months. The program does not take income into consideration.

"The whole purpose is to help people get out of a cycle of being uninsured," said Jeanie Esajian, a spokeswoman for the state agency that runs the program. "It keeps money in their pocket."

The U.S. Department of Health and Human Services announced in May that it would lower the rates in states where it runs the program. But states that operate the plan themselves, such as California, had to get permission to slash premiums.

California's new rates, which took effect Aug. 1, will drop between 8% and 24%, with policyholders seeing an average decline of 18%, state officials said. The size of the reduction will depend on subscribers' age and where they live.

Los Angeles architect Richard Best was overjoyed that his monthly insurance bill would drop \$114, to \$381 from \$495. Best enrolled in the new program last year after reading about it on the Internet. He had been uninsured for more than three years.

"I'm 54 and this is the first time I've ever had a medical insurance rate go down," he said. "It's unbelievable."

[duke.helfand@latimes.com](mailto:duke.helfand@latimes.com)

Copyright © 2011, [Los Angeles Times](#)



## **Cost Drops for Patients with Pre-Existing Conditions**

by David Gorn

Enrollment for the Pre-Existing Condition Insurance Plan (PCIP) just got a big boost.

Cost has long been suspected as one of the limiting factors to signing up people to the federally funded PCIP program. Now, according to officials of the Managed Risk Medical Insurance Board (MRMIB), the cost of premiums in the plan are about to drop by an average of 18%.

"We have new premiums now with a significant reduction in cost," MRMIB chair Cliff Allenby said, "at an average of 18%, which is anywhere from 8.2% to 24.3% lower cost."

The lower premium prices were recently approved by CMS. Because enrollment in the program has been much lower than expected, California was eligible to recalculate its premium rates, according to David Sayen at CMS.

"PCIP was created as a bridge to take us to 2014," Sayen said, "when insurers won't be allowed to exclude based on pre-existing conditions." Sayen said that the slow uptake in the program is due to a variety of things, and not just price. Many people eligible for the program just don't know about it, he said.

"We're used to working with the elderly, with lower-income people," Sayen said. "The challenge is, we have to reach the millions and millions of people [in the nation] who have these pre-existing conditions."

To that end, MRMIB has been busy putting together an outreach program to reach all of those eligibles. And board member Richard Figueroa of MRMIB said there has been one other recent change in eligibility requirements that might help.

"Along with premium rate reduction, it will be easier now to get into the plan," Figueroa said. "Sometimes getting proof of denial can be a barrier, but now they can just submit a letter from their physician that says they have a pre-existing condition."

Read more: <http://www.californiahealthline.org/capitol-desk/2011/8/pcip-rates-targeted-to-boost-enrollment.aspx?p=1#ixzz1USZnKUAk>



## **California High-Risk Patients to See Premium Rates Fall up to 24%**

By Rachel Fields | August 03, 2011

California announced Tuesday that the state will decrease premiums by as much as 24 percent for new and existing subscribers of its health program for high-risk patients, according to a *San Francisco Chronicle* report.

The change could affect more than 3,500 Californians who participate in the health program, known as the Pre-Existing Condition Insurance Plan. Monthly premiums for patients in the federally funded high-risk pool are expected to drop an average of 17.9 percent, according to California's Managed Risk Medical Insurance Board.

The state has received \$761 million from the federal government to keep the program running until 2014. After 2014, the healthcare reform law will force insurers to accept previously "uninsurable" patients despite pre-existing conditions.

The program will also provide an easier path for applicants, who will no longer have to prove they've been rejected by insurers. Going forward, applicants will simply have to provide a letter from a physician explaining a deniable condition. The California program is available to legal residents who have been uninsured for six months prior to applying and who have a medical condition that makes them ineligible for private coverage.

Read the *San Francisco Chronicle* report on [high-risk patients](#).



## **Alivio a pacientes con condiciones preexistentes**

En promedio, tendrán 18% de ahorro en las primas mensuales de sus seguros médicos.

- Araceli Martínez Ortega - araceli.martinez@laopinion.com |
- 2011-08-02

SACRAMENTO - Si usted es una persona con condiciones médicas preexistentes, prepárese para tener un ahorro en su presupuesto, ya que tendrá que pagar un poco menos por las primas mensuales de su seguro médico.

La Junta de Manejo de los Seguros Médicos de Riesgo de California anunció que las primas disminuyeron entre 8.2% a 24.3% dependiendo de la edad de la persona y su ubicación geográfica, lo que significa en promedio un ahorro de 18%.

Para alguien de 40 años que vive en Los Angeles, con una prima actual de \$339, el nuevo costo será de \$269 al mes.

Este descuento fue posible gracias a las nuevas directrices emitidas por el Departamento Federal de Salud y Servicios Humanos.

“Creemos que el costo de las primas era una barrera contra el acceso de muchos californianos y queremos asegurarnos que todo el que califique para este programa tenga acceso a estos beneficios y que el precio no los detenga”, dijo Cliff Allenby, presidente de la Junta.

Las nuevas primas entrarán en vigor el 1 de octubre pero las personas que se inscribieron en agosto y septiembre recibirán los beneficios de las reducciones a través de créditos.

“Esto es de gran ayuda especialmente en estos tiempos”, dijo Brian McCarthy, de 27 años, estudiante del Sacramento City College que tiene un seguro médico para personas con condiciones previas de salud debido a que ha necesitado de varias cirugías en la rodilla tras una caída de un caballo ocurrida a los 21 años.

Hasta el 27 de julio pasado, California tenía 3,532 personas inscritas en el plan de cobertura de salud para personas con condiciones médicas preexistentes (PCIP) que

nació con la reforma de salud. Este programa fue una de las principales provisiones de la reforma nacional de salud para dar cobertura a las personas con problemas médicos previos y cuyas solicitudes de seguro médico eran rechazadas por las aseguradoras comerciales o bien eran aceptados a precios por las nubes. Este programa es un puente hasta 2014 cuando las aseguradoras comerciales, por ley, no podrán declinar o rechazar más dar cobertura a los pacientes que tienen problemas médicos.

“Para estas personas, este descuento va a hacer más fácil unirse a estas primas de seguro médico económico y ya no tienen que pelear para que los acepten, lo que hará una diferencia en sus vidas”, dijo Richard Figueroa, miembro de la Junta de Manejo de Seguros Médicos de Riesgo.

Entre las condiciones médicas preexistentes figuran enfermedades del corazón, cáncer, diabetes, asma, alta presión y otros problemas crónicos, aunque también puede ser lesiones por accidentes.

## [HealthyCal.org](http://HealthyCal.org)



### **Rates drop for high risk insurance plan**

August 2, 2011 @ 10:17 pm In [California Health Report](#) | [No Comments](#)

**By Anandi van Diepen**

Uninsured California residents who can't get private coverage because of pre-existing health conditions are about to get a break: premiums for state-sponsored coverage financed by the federal government will be coming down by about 18 percent.

State officials said Tuesday they hope the lower rates will make the program more accessible to the people who need it, especially since so far only about 3,500 Californians have enrolled for coverage and the state has the ability to provide it to about 24,000 people.

The subsidized plan is one of the first elements of the federal health reform to kick in. The program is intended to help people find coverage until 2014, when insurance companies will be required by law to sell coverage to everyone, regardless of their medical condition, and to stop charging different rates to different people based on their health.

Known as the Pre-Existing Condition Insurance Plan, the program is funded by the federal government but run by the state. California is one of 27 states nationwide that opt to administer the program at the state rather than the federal level.

The PCIP, however, currently is serving only a fraction of those it was created to serve. The Managed Risk Medical Insurance Board, which administers PCIP, estimated from the program's outset that the federal money for the program would accommodate 24,300 eligible Californians.

"The estimate was a very early attempt," said Jeanie Esajian, who directs external and legislative affairs for the Managed Risk Board. "It's probably not

that useful anymore to look at that, because it was done so long ago, with not a lot of basis, with what we knew at that time.”

Even so, the program currently serves only 14 percent of its stated capacity, and the reasons for the low enrollment vary. Esajian said the cost of premiums is a deterrent for low-income applicants.

The program’s eligibility criteria—including a requirement to have been without insurance for six months—also rule out some in the overall pool of uninsurable people.

Consumer advocates, on the other hand, claim that the state lacks an effective outreach program, especially among communities of color and non-English speakers. .

As of mid-July, 3,418 qualified Californians with pre-existing conditions had enrolled in the state’s PCIP program, taking up only 14 percent of the 24,300 slots at first thought to be available with federal funding. Overall, the Managed Risk Board estimated in 2006 that between 165,000 and 396,000 Californians may be uninsurable due to pre-existing conditions.

Among the conditions that frequently prevent people from obtaining health insurance are asthma, cancer, diabetes and heart disease. Insurance companies may label less severe conditions as pre-existing, however, thus preventing applicants from obtaining medical insurance. There are no uniform guidelines to define a pre-existing condition.

Bryan McCarthy, a 27-year-old student at Sacramento City College, is among those who have already benefitted from the program. At age 21 he jumped off a horse and sustained severe ankle damage. When he was too old to stay on his mother’s health plan, McCarthy was uninsured and could not get treatment.

“When it finally came available, we jumped on it,” he said. “The biggest thing is I was able to get the surgery I needed.” He had four surgeries.

To enroll in the Pre-Existing Condition Insurance Plan, an applicant must be a U.S. citizen or legal resident; have lacked health insurance for at least the past six months; and have been denied insurance due to a pre-existing condition within the past 12 months.

“We had a pretty big grouping of applications submitted prior to the opening date,” Esajian said. “Since then, it has grown steadily.”

However, the program is operating nowhere near capacity. The barriers to entry exclude many would-be applicants, and some health advocates say that the state could reach out more effectively to California's uninsured.

"We think there is some more growing to do," said Anthony Wright, executive director of Health Access, a consumer advocacy group. "California should be very active in letting people know about this option."

According to the most recent national data, California has signed up the second highest statewide total of PCIP enrollees, below Pennsylvania.

In addition to PCIP, the Managed Risk Board also administers the Healthy Families and Access for Infants and Mothers programs.

But unlike AIM and Healthy Families, "PCIP is not a low-income type plan," Esajian said. The state charges a premium and, Esajian added, "Cost may be a barrier to some people."

Although federal directives reduced those premiums at the beginning of 2011 for an estimated 10 percent of the eligible pool, PCIP premiums may be insurmountable for some.

Premiums are determined by age and residency. For example, a 45-year-old enrollee from Monterey County would currently be charged a \$369 monthly premium. A similarly aged resident of San Bernardino County would pay \$335 a month.

The highest ratepayers—elderly people in the state's northern counties—got a 35 percent reduction of \$351 a month in January, according to figures from the Managed Risk Board. The premium changes reduced rates for PCIP's subscribers between 15 and 18 years old, as well as those over 60.

The latest reductions will take those rates down another 18 percent. For a 40-year-old resident of Los Angeles, for example, that would mean a reduction from \$339 per month to \$269.

Linda Leu, a policy analyst at Health Access, said that her organization at first eagerly anticipated implementation of the new health care law.

"It was very disappointing when we began to see the numbers trickling in the way that they did," she said.

In addition to cost, Leu cites lack of outreach as another reason why she thinks enrollment has lagged. "There wasn't in our eyes a very comprehensive effort to get people enrolled. As a result you have your couple of thousand instead of tens of thousands," she said.

"We have concerns over whether there is information available in various communities that either are not connected to the Internet or whether there's information available in culturally and linguistically appropriate ways," Leu said. Current enrollment records from the Managed Risk Board indicate that Californians of African American, Asian American and Latin American descent are underrepresented.

Esajian acknowledged that the majority of the program's enrollees are white and said the state is about to launch a broad-based outreach campaign. The program will involve an outside communications firm, education of the public through legislative districts, media interviews with current subscriber and information offered through disease-oriented organizations.

"We expect that to have an effect on enrollment," she said.

Sources at both the Managed Risk Board as well as at Health Access said they believe that PCIP will steadily increase its enrollment over the course of the program.

"I think it will continually go up as people find out about it, all the way to 2014. It has room for growth," Wright said.

For more information on the program and how to apply, [go here](#).



## Subsidized state health insurance rates lowered

Sacramento Business Journal - by [Kathy Robertson](#), Staff writer

Date: Tuesday, August 2, 2011, 12:13pm PDT



Low enrollment in a subsidized health insurance program for individuals with preexisting conditions nationwide prompted the U.S. Department of Health and Human Services to revise guidelines in May to allow states to use a greater portion of their federal subsidy to offset premium costs.

A subsidized state health insurance program for individuals with preexisting conditions has lowered premiums an average of 18 percent, effective immediately.

That means a 40-year-old Sacramento resident with heart disease will pay \$289 per month instead of \$332. A 60-year-old with a preexisting health condition will pay \$530 instead of \$620; younger folks, ages 19 to 29, \$118 instead of \$138.

Low enrollment in the program nationwide prompted the **U.S. Department of Health and Human Services** to revise guidelines in May to allow states to use a greater portion of their federal subsidy to offset premium costs. California has \$761 million in federal money to run the program until 2104, but only 3,532 people had signed up as of July 27. Initial projections showed the money could support average annual enrollment of 25,000.

There are currently a total of only 168 individuals in the Sacramento region enrolled in the program. This includes eight in Yolo County, 14 in El Dorado, 30 in Placer and 116 in Sacramento County.

Authorized by the Affordable Care Act, the Pre-existing Health Insurance Program is designed to serve individuals who have been denied coverage or offered options they could not afford. The program is considered a bridge to 2014, when federal health reform will prohibit insurance companies from denying insurance to adults with preexisting conditions — or charging them more for coverage.

Premium reductions range from 8.2 percent to 24.3 percent, depending on subscriber age and geographic region. Rates for individuals in Placer, El Dorado and Yolo counties are a few dollars higher per month than Sacramento rates.

The premium cut will be reflected in billing statements starting Oct. 1, but there will be rate adjustments retroactive to Aug. 1, according to **Janette Casillas**, executive director of the Managed Risk Medical Insurance Board that runs the program in California.

In addition to the rate cut, it is now easier to qualify for the program.

Individuals will no longer be required to show they have been denied coverage by an insurance company. Instead, they may simply submit a letter from their doctor saying they have a declinable condition. A requirement that individuals have no insurance for at least six months before application still holds.

It's unclear why more people aren't signing up. This is the second time rates have been lowered to spur interest, although this cut is broader than one in March.

"Finding the people" who are eligible has been difficult, said **David Sayen**, regional administrator for Centers for Medicare and Medicaid Services, the federal agency that runs government health care programs for the elderly and poor

"We are used to working with people who are elderly and low-income," he said in a conference call Tuesday to announce the rate cuts. "The challenge is to reach millions of other people who may qualify for this program."

The feds plan to roll out an outreach program to address the problem, Sayen said.

For more information, [including rates and an application form, see the California Pre-Existing Insurance Plan website.](#)



## Health insurance for people who can't get it

By David Sayen  
Posted: 08/06/2011 12:02:12 AM PDT

If you've been turned down for health insurance because of a pre-existing condition, or offered coverage only at an unaffordable price, you may have another option: California's Pre-Existing Condition Insurance Plan.

The Pre-Existing Condition Insurance Plan, or PCIP, is available to children and adults who've been locked out of the health insurance market because they have cancer, heart disease, diabetes, HIV/AIDS, asthma, or some other pre-existing medical condition.

With PCIP, you'll be insured for a wide range of benefits, including primary and specialty physicians' services, hospital care, and prescription drugs.

Like commercial insurance plans, PCIP requires you to pay a monthly premium, a deductible, and some cost-sharing expenses. But you won't be charged a higher premium because of your medical condition and your eligibility isn't based on your income.

When you enroll in PCIP you'll have access to a provider network that includes 67,000 physicians, 5,906 pharmacies and 354 hospitals throughout the state.

A visit to the doctor will cost you \$25. PCIP also covers emergency and ambulance services, surgery and anesthesia, organ transplants, x-ray and lab services, pregnancy and maternity care, skilled nursing care, home health services, orthotics and prosthetics, durable medical equipment, and inpatient and outpatient mental health, alcohol, and substance abuse care.

PCIP is already changing the lives of Americans who don't have health coverage and need medical care. James H., who lives in Texas, was diagnosed with brain cancer in 2010. Shortly after his diagnosis, James' insurance company rescinded his insurance coverage, claiming that his cancer was a pre-existing condition. James knew that his lack of coverage was a death sentence. Fortunately, he was able to join PCIP in Texas and is now receiving the treatment he needs.

To qualify for PCIP, you must have been denied health insurance within the past 12 months. You also have to live in California and be a U.S. citizen or legal resident. In addition, you must have been uninsured for at least six months before applying for PCIP.

Your premiums will be based on where you live and the amount you'd pay if you had no pre-existing condition and were able to purchase individual insurance in the open market.

For example, a Central Valley resident aged 50-54 would pay \$481 per month for PCIP. A San Francisco Bay Area resident aged 45-49 would pay \$377 per month. Someone 18 years

old or younger living in Del Norte, Humboldt, Siskiyou, or Shasta counties would pay \$145 monthly.

You'll pay a 15 percent coinsurance for most in-network services after meeting a \$1,500 annual medical deductible. PCIP also has a \$500 annual deductible for brand-name drugs. There are no out-of-pocket costs for preventive care, including regular physical exams, cancer screenings, immunizations, and well-child care. As a PCIP subscriber, you'll pay no more than \$2,500 a year out-of-pocket. When you reach this \$2,500 cap,

PCIP pays all costs for covered services received within the PCIP network for the remainder of the calendar year (although you have to keep paying your monthly premium to stay enrolled.)

And this is important: PCIP has no cap on annual or lifetime benefits.

The Pre-Existing Condition Insurance Plan was created under the Affordable Care Act. It's a transitional program until 2014, when all Americans - regardless of health status - will have access to affordable health insurance as the nation shifts to a new marketplace.

*David Sayen is Medicare's regional administrator for California. For more information, visit [www.pcip.ca.gov](http://www.pcip.ca.gov) or call 1-877-428-5060 Monday through Friday from 8 a.m. to 8 p.m., or Saturday from 8 a.m. to 5 p.m.*



August 02, 2011 - Capitol Desk

## **Dental Trips Emphasized for Young Children**

by David Gorn

Low-income children are not getting good dental care, even though many of them have coverage through the state. Shelley Rouillard would like to do something about that.

Rouillard, deputy director of benefits and quality monitoring at the Managed Risk Medical Insurance Board (MRMIB), is leading an effort at MRMIB to get more young children to see the dentist -- as early in their lives as possible, she said.

"Studies show that the younger the child (who gets dental care) the less it costs over their life for dental services," Rouillard said. "So we want the percentage of kids who see a dentist to change, and we're targeting the youngest kids. We'd like the children ages 0 to 3 to start being seen."

Many low-income children don't get dental checkups, and have diets high in sugar, Rouillard said. Many infants and toddlers sip on fruit drinks from bottles and sippy cups, setting the stage for drinking lots of sodas among youngsters and teens.

"Once kids are past 7, it's hard to change their pattern," Rouillard said. "When you look over a larger population, getting to them when they're young gives you the biggest bang for the buck."

The oral health program at MRMIB, called Healthy Families Healthy Smiles, attacks the utilization problem in several different ways:

- Health plans in Southern California (in Santa Barbara, Ventura, San Diego and Los Angeles counties) are participating in a collaborative effort to change beneficiaries' dental habits. "We have a directory of preferred providers, and we're developing a risk assessment program," Rouillard said.
- MRMIB is contacting pediatricians, trying to get more providers to give an oral exam.

- A community engagement program and outreach education effort is being coordinated with existing programs such as First Five and the Women, Infants and Children nutrition program, to emphasize dental health for children. For instance, organizers try to connect with families at health fairs in the community. "We're building support for getting services where kids are," Rouillard said, "rather than always getting them to come in."
- MRMIB has asked health plans to report on utilization, such as the rate of preventive dental exams among specific age groups. "We just received baseline data from all of that, and there will be quarterly reporting of data," Rouillard said. That means MRMIB could see the first preliminary signs of progress sometime in November, she said, though getting a real idea of outcomes will take a year or more.

"All of these efforts are important," Rouillard said, "because you have to attack this issue from all angles. It's a synergistic effect. I mean, you're impacting behavior here, and that takes coming at it from all sides."

July 20, 2011 - Capitol Desk

## Children's Programs Slowly Moving Forward at MRMIB

by David Gorn

Reports of the demise of the Managed Risk Medical Insurance Board were a little premature. There it was, alive and well at its monthly meeting last week, discussing expansion of existing programs and establishment of new ones.

MRMIB runs four programs: Healthy Families, Access for Infants and Mothers (AIM), the Pre-Existing Condition Insurance Plan (PCIP) and the Major Risk Medical Insurance Program (MRMIP).

The agency was slated for elimination under the governor's May budget revision. The current plan still is to phase out MRMIB's activities by 2014, when much of its mission will be taken over by the new federal health care reform law. But when the Gov. Jerry Brown (D) announced in May that he wanted to move 900,000 children from the Healthy Families program to a Medi-Cal managed care plan, Brown also proposed the quick elimination of MRMIB, since Healthy Families is such a large part of what MRMIB does.

That suggested elimination prompted a three-page response of protest from MRMIB officials, which remains [posted](#) prominently on its website.

Once the state decided to move a bit more slowly on transitioning youngsters out of Healthy Families, that gave new life to MRMIB. Now there is talk of actually expanding MRMIB's role, as it might be the agency to implement the proposed Basic Health Program, which is currently making its way through the Legislature with little opposition. The BHP could insure as many as 800,000 low-income Californians, and its resemblance to the patient base of Healthy Families could make it a natural fit for MRMIB.

In the meantime, the agency is busy trying to sign up more subscribers to the PCIP program, which currently has a little more than 3,300 people signed up.

At last week's meeting, MRMIB staff was directed to work with the Department of Insurance to send out a letter to alert eligible beneficiaries to the benefits of the program. "I agree that what they've done so far is relatively passive," board chair Cliff Allenby said.

"If it's the only marketing tool we have for now," board member Richard Figueroa added, "I'd like to make it more spicy."

MRMIB also is launching an organized outreach effort, and a new oral health push that focuses on children, particularly those ages 6 and below.

Read more: <http://www.californiahealthline.org/capitol-desk/2011/7/mrmib-is-not-acting-dead.aspx?p=1#ixzz1SfnDsUwS>