

Governor's Proposals Related to Private Health Insurance FY 10-11 Executive Budget

Background

- Currently, 1.3 Million Ohioans are uninsured and many of them don't have access to affordable health insurance coverage. As a result, they do not get the care they need to maintain healthy and productive lives.
- According to the Ohio Family Health Survey, the uninsured rate for Ohioans age 18-64 increased from 15% in 2004 to 17% in 2008. With the number of uninsured increasing, we must act quickly to enact policies that expand coverage.
- The Governor has offered innovative proposals that would provide access to affordable private health insurance coverage
- These proposals are reasonable and fiscally responsible first steps to expand private health insurance to more for 109,000 Ohioans.

Details

- In group policies, expand dependent child coverage up to age 28 and extend the state tax deduction for employer sponsored coverage to all family and dependent coverage.
 - Beginning July 1, 2010, provides Ohioans the opportunity to purchase coverage for their children who are just starting out.
 - 21,000 Ohioans will benefit.
 - Reform Ohio's individual open enrollment programs.
 - Beginning January 1, 2009, Open enrollment rates will decrease 50 to 70%, making coverage more affordable for individuals and families; individual market rates will increase 5.5%.
 - 52,000 Ohioans will benefit.
- Require employers to offer to uninsured employees the opportunity to purchase coverage with pre-tax dollars through Section 125 cafeteria plans.
 - Beginning January 1, 2011, employees may save up to 40% off the cost of coverage for themselves and families.
 - 37,000 Ohioans will benefit.
- Extend state continuation coverage (Ohio's "mini-COBRA" program) from 6 to 12 months so that employees of small businesses who lose their jobs can maintain health insurance coverage for themselves and their families.
- Create the Ohio Health Care Coverage and Quality Council and assist in funding implementation of the Ohio Health Quality Improvement Plan.
- Conduct a study of how health coverage programs can and should be financed going forward.
- Fund health information technology to provide broad use of electronic medical records and develop an electronic medical home.
- Require insurers to file all individual and small group health insurance rates and loss ratio data with the Department of Insurance.
- Consolidate within the Department of Insurance all network adequacy review and regulation.
- Allow the Department of Insurance to order independent reviews of health claim denials.