

What Does National Health Reform Mean for Children in Rhode Island? The First Six Months

Rhode Island KIDS COUNT September 23, 2010

The *Patient Protection and Affordable Care Act* (PPACA, often referred to as “national health reform”) was signed into law in March 2010. National health reform contains many provisions that will improve health coverage and access to health services for Rhode Island children. The law will benefit all children, including those who are covered through employer-sponsored coverage; those enrolled in public health coverage through Rite Care, Rite Share and Medicaid; and those who currently have no insurance.

The health reform provisions that affect children have various implementation dates. While some provisions took effect immediately upon the signing of national health reform, others take effect on September 23, 2010 (six months after enactment) and others will phase in over the next several years. This publication explains the **immediate and six-month health reform provisions** that will help bring health coverage to more children in Rhode Island.

Effective Date	Key Health Reform Provisions for Children in Rhode Island
Upon passage Until 2019	<p style="text-align: center;">Rite Care Eligibility is Protected</p> <p>All states must maintain eligibility levels in their Medicaid and Children’s Health Insurance Program (CHIP) programs for children until September 30, 2019. All states also are required to maintain their current enrollment practices and cannot make it more difficult for children to enroll or maintain coverage by changing application requirements or timeframes, for example.</p> <p>Health care reform continues the federal CHIP program through 2019. In 2015, states are scheduled to receive a 23 percentage point increase in the CHIP match rate, which will raise the percentage that the federal government pays for CHIP in Rhode Island to nearly 90% of CHIP costs.</p> <p>Eligibility levels for Rite Care (Rhode Island’s combination Medicaid/CHIP program) for children will remain at 250% FPL (approximately \$45,775 for a family of 3) until at least September 30, 2019.</p>
Upon passage Until June 2011 (at least)	<p style="text-align: center;">Rite Care Premiums will Remain at Current Levels</p> <p>In addition to the maintenance of effort provisions regarding eligibility, health care reform also contains some protection for Medicaid premiums. States must maintain premium levels in their Medicaid programs until June 30, 2011. The U.S. Department of Health and Human Services is expected to issue further guidance to the states regarding what latitude exists, if any, in changing premium amounts after that date.</p> <p>Families earning less than 133% FPL pay no monthly premium for Rite Care coverage. Families with incomes between 133%-250% FPL pay a range of monthly premiums between \$61 and \$92, depending on income and family size. Rite Care’s premiums are already among the highest in the U.S.</p>

	Preventive Services and Wellness Care will be Free Under New Plans
September 23, 2010 Indefinitely	<p>New private health plans will be required to cover many of the preventive screening and services for infants, children, and adolescents recommended by the American Academy of Pediatrics' Bright Futures standards and the immunizations recommended by the Advisory Committee on Immunization Practices. Prevention and wellness benefits must be exempt from deductibles and co-pays.</p> <p>There are no deductibles or co-pays for preventive/wellness services for children in Rite Care.</p> <p>This provision does not apply to "grandfathered" plans, which were in effect when health reform was passed on March 23, 2010. This provision applies to new group or individual plan years that begin on or after September 23, 2010. This means that some plans will begin to offer this option in September, while most will begin to offer it when plans are renewed by individual employers. Families should check with employers regarding their own health coverage.</p>
	Insurers Cannot Deny Coverage for Children who have Pre-Existing Conditions
September 23, 2010 Indefinitely	<p>This provision includes both providing coverage for preexisting conditions for currently insured children and not excluding children with pre-existing conditions from future coverage.</p> <p>Rite Care has never denied coverage based on pre-existing conditions.</p> <p>Children with certain types of commercial health insurance coverage in Rhode Island also have been protected from this exclusion previously, but health reform now protects more children.</p>
Plan years beginning September 23, 2010 Indefinitely	<p align="center">Young Adults Up to Age 26 Can be Covered as Dependents on their Parent's Coverage</p> <p>Young adults will be allowed to stay on their parents' health care plan until age 26.</p> <p>This provision is effective with insurance policies initiated or renewed after September 23, 2010. Married and unmarried young adults qualify for this coverage. This rule applies to all plans in the individual market and to new employer plans. It also applies to existing employer plans unless the adult child has another offer of employer-based coverage via their job.</p> <p>Note: Beginning in 2014, young adults up to age 26 can stay on their parent's employer plan even if they have an offer of coverage through their employer.</p> <p>Families should check with their employers regarding their health coverage. Some plans have already begun to offer it, some will begin to offer this option in September and others will offer it upon starting their new plan year, which varies by employer.</p>
	No Lifetime Caps or Restrictive Annual Limits on Health Coverage
September 23, 2010 Indefinitely	<p>Lifetime limits on how much insurance companies cover if beneficiaries get sick will be eliminated.</p> <p>Annual limits in all new plans and existing employer plans will be limited starting this year, and then all annual limits will be prohibited starting in 2014.</p>
	Insurers Cannot Drop Coverage for Children or Parents if They Get Sick
September 23, 2010 Indefinitely	Insurance companies will be banned from dropping people from coverage when they get sick.