

Additional New York State Federal Health Care Reform Updates

Consumer Assistance Program (CAP)

Lead Agency: Department of Health

Staff Contact: Judy Arnold, 518-474-0180

Community Health Advocates: 888-614-5400, www.communityhealthadvocates.org/

The purpose of this federally funded program is to provide independent health consumer assistance to individuals having problems finding, keeping or using health coverage. Required services include providing consumer information, assisting individuals with coverage questions, helping resolve coverage problems, and filing complaints and appeals. In addition, by law CAP programs will collect data on consumer inquiries and complaints to help the Secretary of Health and Human Services identify problems in the marketplace and strengthen enforcement.

Through the CAP grant, the State has partnered with the Community Service Society of New York (CSS) and the extensive statewide consortium of Community Health Advocates (CHA) agencies to help New Yorkers resolve a wide range of health coverage problems. This successful program has already served residents in nearly all counties of the State through its efforts to provide independent consumer assistance, expand walk-in services in key regions of the state, and raise consumer awareness.

Early Retiree Reinsurance Program

Lead Agency: Department of Civil Service

Staff Contact: Robert Dubois, 518-473-1977

Federal Website: www.errp.gov

Through the Affordable Care Act's Early Retiree Reinsurance Program, employers or health plan sponsors may receive reimbursement for 80% of claims incurred and paid during a plan year above a threshold of \$15,000 and below a ceiling of \$90,000 for early retirees (those between the ages of 55 and 64) and their covered dependents. This is a temporary program which will continue until the earlier of January 2014 or the \$5 billion appropriated for the program is exhausted. Proceeds of the program may not be used as general revenue and must be used to improve benefits or reduce premium contributions.

Employers and sponsors of multi-employer health insurance plans in New York have led the way in utilizing ERRP, which makes federal funding available to help offset the cost of providing health insurance coverage for early retirees. During 2010 more approved applicants for the program came from New York than any other state, as described in the U.S. Department of Health and Human Services' ERRP report released on March 2, 2010. (This report is available at <http://www.healthcare.gov/center/reports/retirement03022011a.pdf>.) These applicants include the State Department of Civil Service, which successfully participates in the program on behalf of the New York State Insurance Program (NYSHIP).

NY Bridge Plan

Lead Agency: State Insurance Department

Staff Contact: Eileen Hayes, 518-486-7815

NY Bridge Plan: 877-444-9622, www.nybridgeplan.com

The Affordable Care Act establishes a pre-existing condition insurance plan for high risk individuals. Coverage through this program will be available until January 2014 when more health insurance coverage options become available through a Health Insurance Exchange, pending sufficient funding from the federal government. New York's current allocation to fund the NY Bridge Plan, the State's pre-existing condition insurance plan, is approximately \$85 million annually. The NY Bridge Plan is administered by Group Health Incorporated (GHI), an EmblemHealth company. The program is available to legal U.S. residents of New York State who have a pre-existing medical condition and have been uninsured for at least six months.

The NY Bridge Plan covers a broad range of services, including primary and specialty care, inpatient and outpatient hospital care, and prescription drugs, as well as assistance from professional nurses and caseworkers to help members manage chronic conditions and maintain overall health. Premium rates are \$362/month for residents of upstate counties and \$421/month for residents of downstate counties.

As of April 11, 2011, the NY Bridge Plan has 1,286 enrolled members, with 961 having paid premiums, and has received 3,375 applications. (The gap between the number of enrolled members and applications received results from the following causes: denied applications (328); terminations (192); missing information in applications (890); pending review, including online applications awaiting supporting documentation (623).)