



GOVERNMENT RELATIONS

Pre-Existing Insurance Plan Update – Week of December 5, 2011

Lower premiums, relaxed eligibility continue to spur PCIP enrollment nationwide

The Department of Health and Human Services (HHS) announced this week that nearly 41,500 Americans were enrolled in pre-existing condition insurance plans (PCIPs) as of October 31st.

The PCIPs have continued to grow at a faster rate (about 4,000 per month nationwide) than before lower premiums and relaxed eligibility standards went into effect for all federal PCIPs and several state PCIPs last summer (see PCIP Update for Week of October 17th).

Growth has been highest among several federally-operated PCIPs in conservative states fighting the Affordable Care Act (ACA). Florida and Idaho continue to grow by more than 25 percent per month, with Florida now trailing only Pennsylvania, California, and Texas in total enrollment. Arizona PCIP enrollment increased at nearly the same rate, as that state joined Colorado and Oregon to move into the group of 12 states with over 1,000 enrollees.

The chart below identifies the number of people enrolled in each PCIP as of October 31st.

State	Federally/State Administered	Date Coverage for Enrollees Began (in 2010)	Number of People Enrolled and with Coverage in Effect Through October 31, 2011
Alabama	Federal	01-Aug	275
Alaska	State	01-Sep	48
Arizona	Federal	01-Aug	1391
Arkansas	State	01-Sep	333
California	State	25-Oct	4294
Colorado	State	01-Sep	1004
Connecticut	State	01-Sep	103
Delaware	Federal	01-Aug	124
District of Columbia	Federal	01-Oct	35
Florida	Federal	01-Aug	2864
Georgia	Federal	01-Aug	1279
Hawaii	Federal	01-Aug	64
Idaho	Federal	01-Aug	192
Illinois	State	01-Sep	1866
Indiana	Federal	01-Aug	540
Iowa	State	01-Sep	221
Kansas	State	01-Aug	273
Kentucky	Federal	01-Aug	321
Louisiana	Federal	01-Aug	303
Maine	State	01-Aug	29
Maryland	State	01-Sep	647
Massachusetts*	Federal	01-Aug	2
Michigan	State	01-Oct	588
Minnesota	Federal	01-Aug	159
Mississippi	Federal	01-Aug	145
Missouri	State	15-Aug	792
Montana	State	01-Aug	269
Nebraska	Federal	01-Aug	139
Nevada	Federal	01-Aug	470
New Hampshire	State	01-Jul	250
New Jersey	State	15-Aug	751
New Mexico	State	01-Aug	695

New York	State	01-Oct	2324
North Carolina	State	01-Aug	2535
North Dakota	Federal	01-Aug	27
Ohio	State	01-Sep	1924
Oklahoma	State	01-Sep	507
Oregon	State	01-Aug	1100
Pennsylvania	State	01-Oct	4337
Rhode Island	State	15-Sep	140
South Carolina	Federal	01-Aug	798
South Dakota	State	15-Jul	151
Tennessee	Federal	01-Aug	721
Texas	Federal	01-Aug	3297
Utah	State	01-Sep	624
Vermont*	Federal	01-Sep	0
Virginia	Federal	01-Aug	799
Washington	State	01-Sep	625
West Virginia	Federal	01-Sep	56
Wisconsin	State	01-Aug	875
Wyoming	Federal	01-Aug	121
Total			41427

*Massachusetts and Vermont are guarantee issue States that have already implemented many of the broader market reforms included in the Affordable Care Act that take effect in 2014.

STATE-OPERATED PLANS

California

MRMIB considers capping federal high-risk pool as claims exceed estimates

The Managed Risk Medical Insurance Board (MRMIB) disclosed this week that it has asked the federal government for permission to cap pre-existing condition insurance plan (PCIP) enrollment.

Although the U.S. Department of Health and Human Services (HHS) reports only 4,294 enrollees in California's PCIP as of October 31st, MRMIB figures have consistently run higher, breaking 5,000 enrollees earlier this fall (see PCIP Update for Week of October 24th).

MRMIB now claims to have enrolled 5,290 individuals as of December 1st, a figure that would exceed Pennsylvania for the highest PCIP enrollment in the nation. While this is well below the 23,000 individuals that MRMIB initially expected to enroll, the cost per claim has spiked since February when MRMIB was averaging just \$1,100 in monthly claims.

However, with claims now averaging over \$3,000, MRMIB anticipates it will only be able to enroll 6,900 individuals in order to stay within the \$761 million in federal funds allotted by the Affordable Care Act (ACA). As a result, MRMIB is asking HHS for permission to either cap enrollment or receive an additional \$500 million in federal funds that are not being used by those state PCIPs with lower than expected enrollment.