



NEWS

from the Consumer Health Action Network

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Finding Health Insurance after Losing Your Job

Karen Nepomuceno, Intern

— If you've lost your job and you're struggling with bills, you're probably also worried about your health care. —
What will you do about you and your family's health coverage? If you lose your job, and the health insurance that goes with it, you have options. Look at all your options and consider them carefully.

1. If you can, you should try negotiating with your employer to keep your health insurance plan and pay what you did as an employee. Ask to stay on your company's health care plan for longer or for them to pay part of your COBRA premium.
2. You and your family may also be eligible for public programs, which cover pre-existing conditions. There are eligibility requirements for each program.
 - HUSKY is the program that covers children and some parents. It is a comprehensive plan, and costs are based on income. More information is available at 1-877-CT HUSKY or www.huskyhealth.com.
 - Medicaid is also available for low income individuals who are over age 65 or permanently disabled.
 - The SAGA medical program provides medical assistance to individuals with very low incomes.
 - The Charter Oak plan was designed to provide health coverage to all CT residents regardless of income level. The monthly premium and annual deductible will be based on income. More information is available in our tip sheet.
3. COBRA is another option. Your company must offer you COBRA, but it only lasts for 18 months. If you worked for a large company, you may have the right to keep the group health plan you had at your job. By law your company has to inform you of your COBRA rights. There is a new program to help you with your COBRA premiums. It will pay 65 percent of your COBRA premium for 9 months. Contact the human resources department of your former employer or call the US Department of Labor at 1-866-444-3272 for more information. More information about COBRA is available in our tip sheet.
4. If you lose your job, you can try joining your spouse's or domestic partner's insurance through their employer. Even if you turned down this insurance in the past, you may be eligible to join if you lost your coverage because you lost your job. Under federal law you have 30 days to join your spouse's plan even if it is not during the open-enrollment period.
5. Another option is coverage with the Health Reinsurance Association (HRA), the state's high-risk pool. The HRA guarantees coverage to individuals who can't get coverage because of pre-existing conditions. Generally the premiums are very high but it's a good set of benefits.
6. Try looking for individual insurance. Make sure you research your options. Prices are based on your age, health, gender, weight, and overall health status. Also, your policy does not have to cover treatment for pre-existing conditions. When looking into one of these plans, make sure you get information about: a) What are the total charges including premiums, deductibles, and co-pays? b) What benefits are covered? c) What prescriptions are covered? d) Are there limits for any benefits? e) Are there any pre-existing condition limitations? f) Does the plan cover your doctor? If not, can you still see your doctor?
7. Health Savings Accounts and medical discount cards might also be helpful, but you should think about them carefully. Only you can decide if they will work for you.
 - A Health Savings Account (HSA) is a tax-exempt savings account that you can open to save money for current and future health care costs. In order to open one, you must have a high deductible health plan. For further information, see our tip sheet.
 - Medical discount cards claim to give large discounts off the full price of medical care for an enrollment fee and monthly membership fee which may be very high. Discounts are not guaranteed and you have to pay your medical bills at the time of service. These discount cards are NOT insurance. For further information, please see the tip sheet about medical discount cards.

Health Impact of Governor's 2009 Budget Proposal

As promised, the Governor's state budget proposal for the next two years includes painful cuts. Recommended changes include charging co-pays to Medicaid clients, premiums for HUSKY adults, and increasing the HUSKY B premiums for children.

Co-pays for Medicaid clients would range from \$0.50 to \$5.70 and prescription co-pays would be capped at \$20 per month. Premiums for HUSKY adults would be on a sliding scale up to 10 or 20% of the cost. Premiums for children on HUSKY B would be increased from \$30 a month for one child and a maximum of \$50 per family to \$50 for one child, \$75 per child for two children and \$100 per child for more than two. There would also be new barriers to accessing care and applying for HUSKY.

The Governor proposes cuts to:

- community health centers
- school based health centers
- local health departments
- AIDS programs
- nursing education programs
- pharmacy
- Medicare Part D

The Governor's proposal eliminates:

- most dental care for adults who have SAGA or Medicaid
- vision and transportation services in SAGA
- SAGA, HUSKY or Medicaid coverage for legal immigrants who have lived in the US for less than five years
- prenatal care for undocumented immigrants
- interpretation services for Medicaid

The Governor also proposed eliminating the Office of Health Care Advocate (OHA). OHA has returned \$5 to consumers in health care services for every dollar spent on the office. OHA has lawyers, nurses and counselors who help people who are fighting with insurance companies. We rely heavily on OHA and refer many clients who need help. Cutting the office will do nothing to address the state's budget crisis. Cutting the office would only return OHA's \$1 million budget back to insurance companies as well as saving the insurance companies \$5 million per year in consumer bills they would no longer have to pay.

If you would like to let your legislators know what you think of the Governor's proposed budget, they can be reached at:

House Democrats	1-800-842-8267	Senate Democrats	1-800-842-1420
House Republicans	1-800-842-8270	Senate Republicans	1-800-842-1421
Governor	1-800-406-1527	And the blue pages of the phone book.	

If you need help finding your legislator or if you would like more information about the Governor's proposed cuts, please call us toll-free at 1-888-873-4585.

Can the hospital sue me over my medical bills?

By Otis Pitts, JD, Research Assistant

The hospital can sue you in court if you do not pay your bill, but they can **only** sue you after the hospital has decided that you aren't qualified for assistance programs. The hospital must also decide if you qualify for a discount.

- Hospitals have to decide if deceased patients could have qualified for assistance programs before they can sue relatives for debt.
- In Connecticut, hospitals can sue you for your husband or wife's medical debts **(unless you are legally separated or divorced)**.
- The hospital can sue both parents for the medical care of a child under the age of 18 even if the child does not live in your household.
- A hospital cannot sue you for the debt of a child that is 18 years of age or older at the time of medical treatment or for the debt of other relatives, unless you have signed a contract saying that you will pay for them.

What should I do if the hospital sues me over my medical bill?

If the hospital sues you for the medical bill you should talk to a lawyer. If you are not able to afford a lawyer, follow these steps to protect your legal rights.

Do not ignore official notice of a lawsuit: You should go to the court clerk's office and file an "Appearance" prior to the "Return Date," which should be clearly stated on the lawsuit notice that you were sent. If you do not meet this deadline, the hospital may automatically win the lawsuit. The address of the court clerk's office should be located on the notice. The clerk's office can give advice on filling out paperwork and can tell you how to apply for help so you won't have to pay court fees that are normally charged for filing court documents.

For help, call us toll-free at 1-888-873-4585.

**Join others who care about quality, affordable
health care for everybody
Go to www.healthcare4every1.org**

The Consumer Health Action Network is a program of the CT Health Policy Project

www.cthealthpolicy.org/action

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