

Children's Health Insurance in CO, DC, IL, MA, NM and SD: eHealthInsurance Answers Open Enrollment Questions

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MOUNTAIN VIEW, CA, Jul 27, 2011 (MARKETWIRE via COMTEX) -- Today eHealthInsurance (NASDAQ: EHTH), the leading online source of health insurance for individuals, families and small businesses, released a summary review of states offering July open enrollment periods for "child-only" individual health insurance plans. The company also released answers to frequently asked questions about child-only coverage.

Child-only individual health insurance plans are those made available to children age 18 and under with no parent or guardian covered on the same policy. Federal health care reform legislation prevents insurers from declining applications for children due to pre-existing medical conditions. However, the implementation of the law differs from state to state.

In some states, insurers offering individual health coverage to adults are required to also offer individual health coverage to children. Separately, certain states have created "open enrollment" periods for child-only plans -- specific annual or biannual enrollment windows when applicants can enroll children in individual health insurance plans without danger of being declined due to their medical history. If children who do not have other health insurance alternatives are not enrolled during an open enrollment period, they may remain uninsured for the entirety of the next year.

States offering open enrollment periods for child-only health insurance coverage in the month of July this year include the following:

The answers provided to the frequently asked questions below represent a snapshot of current rules and processes governing child-only health insurance in select states. This document is not a comprehensive review of every state's plan for compliance with the federal health care reform law, and the information relating to child-only plans may change. Be sure to check with your state department of insurance for more detailed information.

Child-only Health Insurance Coverage: Frequently Asked Questions

Question: "In my state there are only specific times when I can enroll my child in a child-only health insurance plan. Why aren't children allowed to enroll in individual health insurance any time of year?"

Answer: Many states have established annual enrollment periods for child-only health insurance policies to prevent parents with uninsured children from simply waiting until a child gets sick to sign them up for coverage. If children were only enrolled when ill, it could potentially cause a spike in the cost of coverage. It could also discourage some insurers from offering these types of plans. By creating specific enrollment periods for child-only health plans, individual states may hope to promote broader consumer access to individual health insurance for children, or to keep prices in check.

Question: "When can I sign up my child for coverage under a child-only individual health insurance plan?"

Answer: The answer is going to vary depending on your state. Some states have instituted annual or biannual enrollment periods. Others have instituted floating enrollment periods that may depend on your child's date of birth.

Question: "I want to enroll my child in a health insurance plan of his or her own. Where can I find access to child-only health insurance plans in my state?"

Answer: Work with a licensed agent like eHealthInsurance.com, or one in your local area, to see which health insurance plans are available for children in your state. You may also wish to contact the health insurance company directly since not all child-only plans are made available through licensed agents. Your state department of insurance can provide you with more information.

Question: "Are these special enrollment periods the ONLY time when I can sign up a child for coverage under a child-only individual plan?"

Answer: Many states and health insurance companies allow for enrollment of children in child-only plans outside of special enrollment periods under

certain circumstances. Special enrollment opportunities may be triggered throughout the year when a "qualifying event" occurs. Qualifying events may differ from state to state but could include:

- -- Birth
- -- Adoption
- -- Marriage of a parent
- -- Divorce of a parent
- -- Loss of employer-sponsored health insurance
- -- Loss of eligibility for Medicaid or a state-sponsored child plan
- -- Valid court order mandating the child be covered

Question: "Can I still enroll my child in an employer-sponsored group plan or individually purchased family plan at other times of year?"

Answer: Yes. Generally speaking, special enrollment periods for child-only health plans do not affect your child's eligibility for coverage under employer-based health insurance plans or under privately-purchased plans when a parent or guardian is covered under the same policy.

Question: "Are rates for child-only health insurance policies going to change?"

Answer: It is not yet clear how this specific provision of the health reform law will affect the overall cost of health insurance for children.

Question: "Does this mean that a child with pre-existing medical conditions will pay the same as a healthy child if enrolled during the open enrollment period?"

Answer: Not necessarily. While insurers offering child-only plans may not decline applications for children with pre-existing medical conditions during a specified open enrollment period, some states may allow insurers to charge high-risk children higher monthly premiums than those they charge for healthier children.

Question: "What counts as a pre-existing medical condition?"

Answer: A pre-existing medical condition may be any past or present medical diagnosis, whether or not the child is still suffering from or being treated for the condition. Not all medical conditions are of concern to health insurance carriers and different carriers may be more -- or less -- concerned by different conditions.

Question: "What if there are no child-only health insurance plans available in my state?"

Answer: While some states have required insurers offering individual health insurance policies to adults or families to also offer child-only health insurance plans, others have not. To find out which insurance companies -- if any -- are offering child-only health insurance plans in your state, contact your state's department of insurance. Some insurers offer child-only plans for sale to consumers directly, while others may also make them available through licensed agents.

If there are no child-only coverage options in your area, you may still be able to apply for a privately purchased family plan covering yourself and your child together. Be sure not to cancel your current health insurance plan until you're approved for a new one.

If purchasing family coverage is not an option and you are unable to add your child to an employer-sponsored group plan, contact the non-profit Foundation for Health Coverage Education (www.coverageforall.org) to learn more about government-sponsored options.

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For more health insurance news and information, visit the eHealthInsurance consumer blog: Get Smart - Get Covered.

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