

Background

The Family Health Insurance Assistance Program (FHIAP) was created by the 1997 Oregon Legislature to help uninsured, income-eligible Oregonians afford private health insurance. The program pays up to 95 percent (100 percent for kids ages 0 through 18) of its members' monthly premium for health insurance. FHIAP does not help pay for deductibles, co-pays, or other coinsurance.

Eligibility Criteria

FHIAP applicants and/or their dependents must:

- Be uninsured for the previous two months, except for those leaving the OHP/Medicaid program (and a few exceptions)
- Meet income guidelines
- Reside in Oregon
- Be a U.S. citizen or lawfully present
- Not be eligible for or receiving Medicare

Also

The health insurance plan must meet minimum benefit levels (benchmark).

How the Program Works

Group Market: FHIAP applicants who have access to employer-sponsored insurance must enroll in that coverage if the employer plan meets a minimum level of benefits and the employer pays a portion of the premiums. Once approved, the member has the premium withheld from their paycheck. FHIAP reimburses the employee after receiving a copy of the pay stub showing the premium withheld. FHIAP also subsidizes premiums for part-time employees who are allowed to buy health insurance through an employer but must pay the entire premium themselves.

Employees who qualify for FHIAP sometimes learn about the program shortly after enrolling in insurance at work. **In this case, employees and/or their dependents who have had their insurance less than 120 days may still apply to FHIAP.**

FHIAP is a "qualifying event," allowing FHIAP members to enroll in an employer's group plan immediately instead of waiting for open enrollment.

Individual Market: FHIAP can help applicants who do not have access to group insurance or work part-time and do not qualify for insurance. When openings are available they select an individual health plan from a list FHIAP provides. FHIAP then bills members for their share of the premium.

Program Openings: Applicants go online at fhiap.oregon.gov or call 888-564-9669 to put their names on a reservation list for an application.

FHIAP may subsidize dental and vision as well as medical insurance. The dental and/or vision plan does not have to meet a benchmark.

Benefits to Employers/Producers

FHIAP allows some business owners to offer health coverage for the first time because eligible employees can use FHIAP subsidies to offset their share of the cost and/or to add eligible dependents to a plan. That can result in 100 percent participation in an employer-sponsored plan.

Health insurance producers (agents) can assist employers with use of FHIAP. Health insurance coverage costs the same, with or without an insurance producer. Insurance producers can help with an application and plan selection. To request a referral to a local insurance producer ask for a FHIAP producer referral at 888-564-9669 or send an e-mail to ophp.mail@state.or.us.

The Employer Role

When an employee applies to FHIAP, the employer will be asked to complete a *Group Insurance Information (GII) form* and provide a summary of the health benefits (including prescription drug coverage) to the employee or FHIAP. FHIAP will ask the employee or the employer for a new summary of health benefits each year. Also, the employer completes a one-page form for each employee who is approved by FHIAP. As rate changes occur, the employer or employee provide updated information to FHIAP.

Questions/Information

Contact us by any of the methods below. Request publications at the website or ask for a member of FHIAP's Information, Education, and Outreach staff for additional assistance.

Visit FHIAP's website to learn more about the program. A health insurance producer (agent) should submit a *Producer Request for Benchmark Analysis*, or an employer can submit a *Group Insurance Information (GII) form* to make sure an employer's health plan meets FHIAP's benchmark.