

443-002-0070

Benefits, Benefit Limitations, Benefit Exclusions and Claims Administration

Effective January 1, 2009, Benefits, Benefit Limitations, Benefit Exclusions and Claims Administration for the OMIP program are set forth in the OMIP individual benefit plan contracts as of January 1, 200~~8~~9, the OMIP application as of January 1, 200~~8~~9, the OMIP handbook as of January 1, 200~~8~~9, the OMIP Premium Rates and Instructions pamphlet as of January 1, 200~~8~~9, the OMIP Benefit Summary pamphlet as of January 1, 200~~8~~9 and any applicable endorsements. These documents are hereby incorporated into this rule by reference.

[Publications: Publications referenced are available from the agency.]

Stat. Auth.: ORS 735.610(6) & 735.625

Stats. Implemented: ORS 735.600 - 735.650

Hist.: OMIPB 2-2004, f. 12-30-04, cert. ef. 1-1-05; OMIPB 2-2005, f. 12-30-05, cert. ef. 1-1-06; OMIPB 1-2007(Temp), f. & cert. ef. 7-23-07 thru 1-5-08; OMIPB 1-2008, f. & cert. ef. 1-2-08

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Credit Towards the Six-Month Waiting Period for Pre-Existing Conditions Exclusion

(1) OMIP ~~shall grant~~may will reduce the six month wait period for pre-existing conditions for each month of creditable coverage the enrollee had prior to applying to OMIP if:

~~credit each month of prior creditable health benefit coverage toward the six-month waiting period for pre-existing conditions after the enrollee has met eligibility if: exclusion in the following situations after the applicant has met eligibility criteria:~~

(a) The enrollee's application to OMIP was received by OMIP or OMIP's third party administrator within 63 days from the prior health plan's termination date; and

~~The prior creditable coverage was in effect not more than 63 days prior to the date the OMIP application was received by OMIP's third party administrator; Coverage under a prior health benefit plan was continuous to a date not more than 63 days before the effective date of OMIP coverage; and~~

(b) The enrollee provided a Certificate of Coverage (COC) document reflecting the enrollee's name, effective date of coverage, and termination date. In addition, the enrollee included a summary of benefits for the prior health plan, to determine if the plan was creditable. , and a summary of benefits to verify that the prior coverage was creditable. OMIP closed enrollment, approved the applicant and placed him or her on a waiting list as described in OAR 443-005-0020.

(2) ~~OMIP may will not give issue credit for benefits, treatments, or and services iff: tThe applicant must request credit toward the six-month pre-existing condition exclusion at the time of application for OMIP coverage and, in situations where prior health benefit plans have been terminated, attach to the application a Certificate of Coverage from the previous health insurance company stating that the applicant had six months or more of continuous coverage in place and that he/she applied to OMIP within 63 days of losing prior group coverage:~~

~~(a) The enrollee had not satisfied any of the the prior health plan's -waiting exclusion or limitation- periods or if the benefit, treatment, or services were excluded by -as required by the previous health benefit plan. for specific benefits; or~~

~~(b) The previous creditable health benefit plan did not provide reimbursement for specific benefits.~~

(3) ~~In cases where the prior creditable health benefit coverage terminated and no waiting lists exist, OMIP will grant credit toward the six-month pre-existing wait period condition exclusion for the time that the prior a previous creditable health benefit plan covered the enrollee and the time the enrollee spent on the waiting list, provided that:~~

~~(a) The eligible enrollee's OMIP application was received by OMIP's third party administrator within 63 days of the date from the previous creditable health benefit plan's termination date; and applicant made application for OMIP coverage within 63 days of the date that the previous health benefit plan terminated coverage;~~

~~(b) OMIP closed enrollment, approved the applicant and placed the enrollee on a waiting list. The effective date of OMIP coverage shall be the previous health benefit plan termination date; and~~

~~(c) The eligible applicant must pay premiums from the date that the previous health benefit plan coverage terminated.~~

~~(4) In cases where the previous health benefit plan coverage terminated and a waiting list exists, OMIP will grant credit toward the six-month pre-existing condition exclusion for both the time the eligible applicant was covered under a previous health benefit plan and the time spent on the waiting list, provided that:~~

~~(a) The eligible applicant makes application for OMIP coverage within 63 days of the date that the previous health benefit plan terminated coverage;~~

~~(b) The effective date of OMIP coverage shall be the date of enrollment; and~~

~~(c) The eligible applicant must pay premiums from the date of enrollment.~~

~~(5) In cases where OMIP placed an approved application on a waiting list, OMIP will grant credit toward the six-month pre-existing condition exclusion for the time spent on the waiting list, provided that:~~

~~(a) The effective date of OMIP coverage shall be the date of enrollment;~~

~~(b) OMIP shall base the amount of credit granted on the number of months the approved applicant was on the waiting list; and~~

~~(c) The eligible applicant must pay premiums from the date of enrollment.~~

~~(6) In cases where an individual's health insurance coverage was in force less than six months before applying to OMIP, the individual may still receive credit toward the limitation period if he/she applies to OMIP within 63 days of losing that health coverage pursuant to ORS 735.625(5)(b). OMIP will base credit on the number of months the individual was previously insured under a comparable health benefit plan. OMIP will give month for month credit toward the limitation. OMIP will not credit coverage for benefits and services that the previous health benefit plan did not cover.~~

Stat. Auth.: ORS 735.610(6) & 735.625

Stats Implemented: ORS 735.600 - 735.650

Hist.: OMIPB 2-2004, f. 12-30-04, cert. ef. 1-1-05

Credit Towards the Six-Month Waiting Period for Pre-Existing Conditions Exclusion

(1) OMIP ~~shall grant~~will credit each month of prior creditable health benefit coverage toward the six-month waiting period for pre-existing conditions after the enrollee has met eligibility if: ~~exclusion in the following situations after the applicant has met eligibility criteria:~~

(a) The prior creditable coverage was in effect not more than 63 days prior to the date the OMIP application was received by OMIP's third party administrator; Coverage under a prior health benefit plan was continuous to a date not more than 63 days before the effective date of OMIP coverage; and

(b) The enrollee provided a Certificate of Coverage (COC) document reflecting the enrollee's name, effective date, termination date, and a summary of benefits to verify that the prior coverage was creditable. OMIP closed enrollment, approved the applicant and placed him or her on a waiting list as described in OAR 443-005-0020.

(2) OMIP will not issue credit for benefit and services if: The applicant must request credit toward the six-month pre-existing condition exclusion at the time of application for OMIP coverage and, in situations where prior health benefit plans have been terminated, attach to the application a Certificate of Coverage from the previous health insurance company stating that the applicant had six months or more of continuous coverage in place and that he/she applied to OMIP within 63 days of losing prior group coverage.

(a) The enrollee had not satisfied the exclusion or limitation period as required by the previous health benefit plan for specific benefits; or

(b) The previous creditable health benefit plan did not provide reimbursement for specific benefits.

(3) In cases where the prior creditable health benefit coverage terminated and ~~no~~ waiting lists exist, OMIP will grant credit toward the six-month pre-existing wait period~~condition exclusion~~ for the time that the prior a previous creditable health benefit plan covered the enrollee and the time the enrollee spent on the waiting list, provided that:

(a) The eligible enrollee's OMIP application was received by OMIP's third party administrator within 63 days of the date from the previous creditable health benefit plan's termination date; and ~~applicant made application for OMIP coverage within 63 days of the date that the previous health benefit plan terminated coverage;~~

(b) OMIP closed enrollment, approved the applicant and placed the enrollee on a waiting list. The effective date of OMIP coverage shall be the previous health benefit plan termination date; and

(c) The eligible applicant must pay premiums from the date that the previous health benefit plan coverage terminated.

(4) In cases where the previous health benefit plan coverage terminated and a waiting list exists, OMIP will grant credit toward the six-month pre-existing condition exclusion for both the time the eligible applicant was covered under a previous health benefit plan and the time spent on the waiting list, provided that:

(a) The eligible applicant makes application for OMIP coverage within 63 days of the date that the previous health benefit plan terminated coverage;

(b) The effective date of OMIP coverage shall be the date of enrollment; and

(c) The eligible applicant must pay premiums from the date of enrollment.

(5) In cases where OMIP placed an approved application on a waiting list, OMIP will grant credit toward the six-month pre-existing condition exclusion for the time spent on the waiting list, provided that:

(a) The effective date of OMIP coverage shall be the date of enrollment;

(b) OMIP shall base the amount of credit granted on the number of months the approved applicant was on the waiting list; and

(c) The eligible applicant must pay premiums from the date of enrollment.

(6) In cases where an individual's health insurance coverage was in force less than six months before applying to OMIP, the individual may still receive credit toward the limitation period if he/she applies to OMIP within 63 days of losing that health coverage pursuant to ORS 735.625(5)(b). OMIP will base credit on the number of months the individual was previously insured under a comparable health benefit plan. OMIP will give month for month credit toward the limitation. OMIP will not credit coverage for benefits and services that the previous health benefit plan did not cover.

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