

FHIAP Summary



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 from 50 to 95 percent (100 percent for children up to 19 years of age) 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 a qualified non-citizen
- Not be eligible for or receiving Medicare

Also

The employer's insurance plan must meet certain minimum benefit levels.

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 (benchmark) and the employer pays a portion of the premiums. Once approved, the member has the premium withheld from his or her paycheck. FHIAP reimburses the employee after receiving a copy of the pay stub showing that the premium was withheld. FHIAP also will subsidize premiums for part-time employees who are allowed to buy health insurance through the employer but must pay the entire premium themselves.

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

Also, many health insurance carriers make FHIAP eligibility a "qualifying event," allowing FHIAP members to enroll in the employer's group plan immediately instead of waiting for open enrollment.

Individual Market: Applicants who do not have access to group insurance or work part-time and do not qualify for insurance, may select an individual health plan from a list FHIAP provides. FHIAP then bills members for their share of the premium.

Program Openings: Applicants may call 1-888-564-9669 to put their names on a reservation list for an application or, they may do this online: www.fhiap.oregon.gov.

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 the 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 you with your application and plan selection. If you would like a referral to an insurance producer in your area call and ask for a FHIAP producer referral at 1-888-564-9669.

The Employer Role

When an employee applies to FHIAP, the employer will be asked to complete a *Group Insurance Information* 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. Ask for brochures/posters or a member of FHIAP's Information, Education, and Outreach staff to conduct a FHIAP workshop.

Visit FHIAP's Web site (see below) to learn more about the program. If you are an employer or health insurance producer (agent), print the "Request for Benchmark Analysis" form to learn how to make sure the employer's health plan meets FHIAP's minimum standards.

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