



Lake County General Health District

Painesville, Ohio 44077

Painesville: (440) 350-2543

Cleveland: (440) 918-2543

Madison: (440) 428-4348 Ext. 2543

www.lcghd.org*Frank Kellogg, R.S., M.P.H., Health Commissioner*

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CONTACT: Dawn Cole, (440) 350-2417
LAKE COUNTY GENERAL HEALTH DISTRICT

HEALTH INSURANCE AVAILABLE FOR OHIOANS WITH PRE-EXISTING CONDITIONS

Lake County General Health District urges all Lake County residents who have been turned down for health coverage because of a pre-existing condition and have been without health insurance for more than six months to take advantage of the Ohio High Risk Pool. The Ohio High Risk Pool is designed to give uninsured Ohioans with pre-existing conditions access to quality health insurance. The federal health care reform law called for the creation of temporary health insurance programs for individuals with pre-existing conditions. These high risk pools will last until 2014, when full federal reforms take effect.

Ohio is expected to receive approximately \$152 million to operate this high risk pool until 2014. It is estimated that this will provide funding to cover approximately 5,500 individuals, while about five times that many are eligible. For this reason, applications will be taken on a first come, first served basis. Health Commissioner Frank Kellogg urges Lake County residents in need of such coverage to obtain and submit applications now as only a limited number will be accepted into this program. According to Ohio Department of Health's *Healthy Ohio Community Profiles 2008* report, 10.4% of adults and 3.8% of children in Lake County are currently uninsured.

To qualify for the Ohio High Risk Pool, you must meet the following eligibility criteria:

- Be a citizen or national of the United States or lawfully present in the United States;
- Be an Ohio resident at the time of application;
- Be uninsured for six months prior to the date you apply for coverage;
- Not be eligible for coverage under the federal Medicare program, the Ohio Medical Assistance Program, the Ohio Children's Health Insurance Program, individual coverage or an employer-sponsored group health plan, unless the individual is subject to a mandatory initial waiting period;
- Have a qualifying pre-existing condition as evidenced by a denial of coverage by two insurers, or by documentation from a health professional.

In addition, you must supply the following items during the application process to verify eligibility:

- Proof of U.S. citizenship;
- Proof of Ohio residency;
- Evidence of a pre-existing condition;
- First Month's Contribution Payment.

Applications are available at <http://www.ohiohighriskpool.com/> or by phone at 1-877-730-1117.

The Program is funded by the United States Department of Health and Human Services and administered through Medical Mutual of Ohio. Medical Mutual will offer plans with deductibles of \$1,500 or \$2,500. Coverage summaries and rate sheets for both plans, along with additional information about the program, are also available at <http://www.ohiohighriskpool.com/>. ###