

This is a **preview** only. To edit or submit your comment, close this window.

[Print](#)

[Close](#)

**You are commenting on a NOTICES:  
Publication of Model Notice for Employers to Use Regarding Eligibility for Premium Assistance Under Medicaid or the Children's Health Insurance Program, Notice (EBSA-2010-0008-0001)**

## INFORMATION

First Name: Tracy  
 Middle Name:  
 Last Name: Gillies  
 Mailing Address:  
 Mailing Address 2:  
 City: Austin  
 Country: United States  
 State or Province: TX  
 State or Province:  
 Postal Code:  
 Email Address:  
 Phone Number:  
 Org/Company/Govt The Benefit Group  
 Agency: LLC

## COMMENT

Per the sample notice, "Once it is determined that you or your dependents are eligible for premium assistance under Medicaid or CHIP, your employer's health plan is required to permit you and your dependents to enroll in the plan – as long as you and your dependents are eligible but not already enrolled in the employer's plan. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance." Special Enrollment opportunities are designed to provide opportunities for election of coverage or changes in elections based on employment status changes or change in family status results in a potential gain or loss of coverage. I am very concerned that if eligibility for premium assistance is added to list of "Special enrollment" opportunities, there is no incentive to pursue assistance until there is a change in health status. In other words, eligible employees that waive coverage at initial enrollment or annual open enrollment, could easily wait until there is a health problem before seeking assistance. Many fully insured employer sponsored health plans do not have any pre-existing condition limitation period regardless of prior coverage. There can be first-day coverage for the insureds pre-existing condition even if there is no Proof of Creditable Coverage under the HIPAA guidelines. This, in conjunction with this "special enrollment" opportunity opens up employers, especially small employers, to an adverse selection environment. If all employees could wait until they have claims potential to enroll in the employer sponsored plan, the plan would quickly reach an unacceptably high loss ratio that will be reflected in higher renewal numbers. Eligibility for premium assistance should be tied to initial eligibility for open enrollment to encourage employee participation in the employer plan before health issues become the driving force to pursue assistance.