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DECEMBER 10, 2008

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Governor Crist Launches *Cover Florida*, Invites Florida's Uninsured to Consider Affordable Health Insurance Options

~ Six providers prepare to enroll consumers, beginning January 5 ~

TALLAHASSEE – To launch the *Cover Florida* Health Care Access Program available January 5, 2009, Governor Charlie Crist today witnessed the signing of contracts between six health insurance providers and Secretary Holly Benson of the Agency for Health Care Administration (AHCA) and Commissioner Kevin McCarty of the Office of Insurance Regulation (OIR). The new health insurance plans will make affordable, quality health insurance coverage and access to health care available to Florida's 3.8 million uninsured applicants age 19 to 64, with four of the six carriers insuring children of applicants.

"Many families and small business owners have worried about the possibility of costly medical bills, waiting for years for health insurance they can afford to buy," Governor Crist said. "In less than a month, *Cover Florida* will be available, and their waiting will be over. Affordable access to health care will be a reality for Florida's hard-working families and businesses."

The *Cover Florida* plan was unanimously approved by the 2008 Legislature, and no tax dollars are required to make the plans available to Floridians. The six carriers have designed 25 creative health insurance products, and each insurer offers at least two benefit options – one with catastrophic and hospital coverage, and one focusing on preventive care. Each plan has a robust set of benefit options that include coverage for preventive services, screenings, office visits, as well as office surgery, urgent care, hospital coverage, emergency care, prescription drugs, durable medical equipment, and diabetic supplies.

Selected by the State of Florida through a competitive bidding process, the six private insurance carriers were chosen based on their proposed robust, innovative and affordable health insurance products. *Cover Florida* plans contain no mandates for participation and are portable from one employer to another because they are individual policies. Voluntary for both employers and policyholders, employers also may voluntarily share in the cost of the plan with

their employees or may assist employees with a payroll deduction, providing a pre-tax benefit for the employee and a payroll tax break for the employer.

“The 25 *Cover Florida* plans will provide Floridians with flexibility and choices regarding their health care,” Secretary Benson said. “Like any good health insurance, they will help people take control of their health care by allowing them to choose primary and preventive care over costly visits to emergency rooms.”

Blue Cross Blue Shield of Florida and United Healthcare will be available in all 67 Florida counties. In addition, four counties will have further options. Florida Health Care Plans will be available in Flagler and Volusia counties; Medica Health Plan of Florida and Total Health Choice will be available in Broward and Miami-Dade counties. In addition, JMH Health Plan will also serve Miami-Dade County.

Acting jointly on behalf of the State of Florida, AHCA and OIR issued the competitive Invitation to Negotiate and reviewed insurers’ responses, along with representatives from the Executive Office of the Governor. Once the six providers were selected, the state agencies worked jointly with the insurance carriers to finalize the contracts. Throughout the competitive process, the state agencies worked to ensure that *Cover Florida* products would not only offer robust benefits but also be financially sound. Moving forward, OIR will monitor the sale of the products and address consumer concerns.

“Throughout the negotiation process, every effort was made to ensure that uninsured Floridians would get the greatest access to medical care for the best price,” Commissioner McCarty said. “One great feature of the plans is that no one can be turned away by a *Cover Florida* plan because of a pre-existing medical condition.”

Representing the six selected insurance companies were David Lewis, Florida chief executive officer of United Healthcare; Steven Smith of Blue Cross Blue Shield of Florida; Pam Mims of Florida Health Care Plans; Martin Perez, chief financial officer of Medica Health Plan; and Lyle Algate, chief executive officer of Total Health Choice.

Governor Crist was joined for the signing ceremony by Senator Durell Peaden; former Representative Aaron Bean; Fred Whitson, director of medical economics for the Florida Medical Association; Jim Bracher of the Florida Association of Health Plans; Bill Phelan, president and chief executive officer of Florida Health Care Association; Ralph Glatfelter, senior vice president of the Florida Hospital Association; Anna Small, Florida Nursing Association; Bruce Rueben, president of the Florida Hospital Association; Mark O’Bryant, board chair of the Florida Hospital Association and chief executive officer of Tallahassee Memorial HealthCare.

Representatives of Florida businesses and local governments attending the event included Bill Herrle, National Federation of Independent Businesses; Heather Wildermuth, Florida Association of Counties; John Sebree, Florida Realtors Association; Keyna Cory, Associated Industries of Florida; and Joanna Bonfanti, the Florida Chamber of Commerce.

Details About Cover Florida Coverage

The cost of plans varies, depending on the applicant's age, gender and choice of preventive coverage or catastrophic and hospital coverage. Fourteen of the 25 *Cover Florida* plans have monthly premiums on average of \$155 or less, with all of the preventive plans offering coverage for, on average, \$155 or less. Examples of coverage and costs include the following:

- Available anywhere in Florida is a plan that offers preventive coverage to a 25-year-old female for \$83.55 a month, with no annual deductible. A 25-year-old male would pay \$50.75 for the same coverage. Benefits would include the following:
 - a. Doctor Office Visits: \$10 co-pay for a primary care physician; up to 45 visits per year.
 - b. Preventive Care: \$0 co-pay for preventive services. Includes annual adult exam; annual gynecological, prostate, colorectal, cervical cancer screening and mammogram.
 - c. Hospital Emergency Care Services: Consumer pays 20 percent; insurer pays 80 percent of charges, Up to \$1,500 per year.
 - d. Prescription Drugs: \$10 co-payment for generic drugs; \$45 co-pay for brand diabetic supply use.
 - e. Behavioral Health Services: \$40 co-payment; up to five office visits per year.
 - f. Diabetic Supplies: \$25 co-pay.
 - g. Health Discounts for Other Services: Enrollees will receive a discount on other services, including dental, vision, wellness, infertility, hearing, and chiropractic care.

- One of the plans available only in Miami-Dade County offers a 50-year-old female catastrophic coverage with no annual deductible for \$151.85 a month while a 50-year-old male would pay a monthly premium of \$172.11 for the same coverage. Some of the benefits include, but are not limited to the following:
 - a. Doctor Office Visits: \$25 co-pay for a primary care physician and \$50 co-pay for a specialist.
 - b. Annual Adult Wellness/Health Exam: \$25 co-payment.
 - c. Hospital coverage: \$200 per day co-payment for first five days of admission; \$0 after the fifth day.

- d. Urgent Care: \$50 co-payment.
- e. Emergency Services: \$200 co-payment; waived if admitted.
- f. Prescription Drugs: \$10 co-payment for generic drugs and plan discounts for brand name drugs.
- g. Behavioral Health Services: \$50 co-payment for office counseling services; up to \$1,200 per year.
- h. Diabetic Supplies: Consumer pays 20 percent; insurer pays 80 percent of charges for lancets, syringes, insulin, strips and monitor.

- A 30-year-old female in Volusia County could purchase catastrophic coverage for \$177.28 monthly, with a \$250 annual deductible. The same coverage for a 30-year-old male costs \$109.17 monthly and includes the following:

- a. Doctor Office Visits: \$20 co-pay for a primary care physician and \$75 co-pay for a specialist.
- b. Annual Adult Wellness/Health: \$20 co-payment.
- c. Hospital Coverage: \$750 per day co-payment; up to 12 days per year.
- d. Urgent Care: \$75 co-payment.
- e. Emergency Services: \$250 co-payment.
- f. Prescription Drugs: \$10 co-payment for generic preferred/ \$10 co-pay for generic non-preferred
- g. Behavioral Health Services: \$50 co-payment for individual services; \$25 co-pay for group counseling session; Up to 12 outpatient visits per year.
- h. Diabetic Supplies: Glucometer covered in full; \$12 co-pay for lancets and 50 test strips.

Cover Florida plans are available to Florida applicants age 19 to 64 who have been without health insurance for at least six months, or who are recently unemployed – even if there are pre-existing health conditions. Floridians may also be eligible if, during the previous six months, they have lost employer-sponsored health benefits or are no longer covered by public health insurance program.

For more information about *Cover Florida* benefit options, visit www.CoverFloridaHealthCare.com.

