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Background Brief on ...

Oregon Healthy Kids

In 2009, the Oregon Health Policy and Research Office (**OHPR**) reported that Oregon had approximately 576,000-621,000 uninsured individuals and approximately 12.5 percent of Oregon's children (ages 0-18) were uninsured.

The 2009 Legislative Assembly enacted House Bill 2116, a new health care program for children called Health Care for All Oregon Children (**HCAOC**) or "Healthy Kids." The intent of the Healthy Kids program is to provide affordable, accessible health care to all eligible Oregon children who are legally present in the state; who have a family income at or below 300 percent of federal poverty level (**FPL**); and who are age 18 or younger. Eligible children will receive 12 months of continuous eligibility and shall be automatically renewed for successive 12-month periods as long as the child is eligible. The Healthy Kids comprehensive health care coverage includes medical, dental, vision, mental health care, and prescription benefits.

Healthy Kids Application Process

There is one application for the Healthy Kids program, however there are three avenues of coverage: 1) Oregon Health Plan (**OHP**) Plus (Medicaid); 2) Employer Sponsored Insurance (**ESI**) insurance; or 3) Healthy KidsConnect (**HKC**), a private market insurance option. Plan placement depends on a family's income and circumstances. A family is informed of what insurance plan offerings are available through Healthy Kids once their eligibility is determined by the Department of Human Services (**DHS**).

Healthy KidsConnect (HKC)

The Office of Private Health Partnerships (OPHP) is administering the private market insurance component, Healthy KidsConnect. The Healthy KidsConnect plan is for families that earn too much to qualify for the Oregon Health Plan, but can't afford private health insurance. Uninsured children between 201 through 300 percent of the Federal Poverty Level (FPL) who are found eligible can receive a premium subsidy for the contracted insurance carriers in the HKC program. Uninsured children whose family income is above 300 percent of the FPL can purchase coverage through the insurance carriers' contract with the HKC program by paying the full premium cost. OPHP also administers an Employer Sponsored Insurance (ESI) component. Those with access to ESI through 300 percent of the FPL can receive premium assistance in the form of a reimbursement, as long as the employer plan meets federal guidelines.

Population Served

According to the 2009 recession caseload forecast completed by DHS, enrollment in the ESI and private health insurance option portions of this program is expected to reach 34,447 by the end of the 2009-2011 biennium, and 21,288 by the end of the 2011-2013 biennium.

DHS is directed to conduct statewide outreach and marketing for Healthy Kids, including the creation of community-based outreach grants and an Application Assistance program.

DHS and the Office of Private Health Partnerships (OPHP) are directed to develop HCAOC program rules implementing the HCAOC program upon receipt of the necessary federal approvals, and to phase in implementation in accordance with available funding.

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