

We the People

insure domestic Tranquility, provide for the common defence, promote the general Welfare, and our Posterity, We ordain and establish this Constitution for the United States of America



MEDICAL MUTUAL OF OHIO®

CAROLINA CARE PLAN

CONSUMERS LIFE

Healthcare re-FORUM

Healthcare Re-Forum: Issue No. 5

State Ombudsman Program

The Patient Protection and Affordable Care Act (PPACA) provides for grants to states to establish, expand or provide support for offices of health insurance consumer assistance or health insurance ombudsman programs. To be eligible, a state must designate an independent office to operate an ombudsman program directly or in coordination with state health insurance regulators and consumer assistance organizations. This office will handle questions and complaints concerning health insurance coverage under both federal and state laws with respect to federal health insurance requirements.

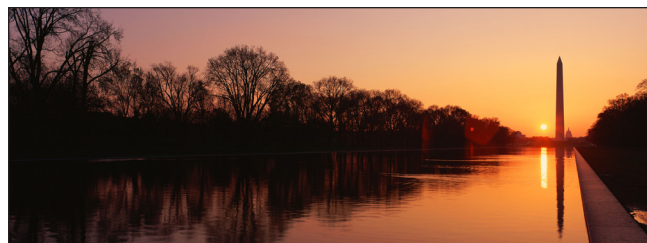
States receiving the grant must require their ombudsman program office to:

- Assist with the filing of complaints and appeals
- Collect, track and review problems and questions encountered by consumers
- Educate consumers on their rights and responsibilities with respect to group health plans and health insurance coverage
- Assist consumers with enrollment in a group health plan or health insurance coverage by providing information, referral and assistance
- Resolve problems regarding obtaining premium tax credits for small businesses under section 36B of the Internal Revenue Code of 1986 (as added by PPACA)

To ensure proper linkages between states and the federal government, states receiving the grant must collect and report the types of problems and questions received to the Secretary of Health and Human Services (HHS). HHS would then share the information with state insurance regulators and the Secretaries of Labor and Treasury for follow up if necessary.

Each state will decide whether or not to participate in this program. No list of participating states has been released.

The total grant pool is \$30 million for the first fiscal year for which this section applies. Additional monies will be allotted by the Secretary of HHS in subsequent fiscal years to support the state ombudsman program office. This provision went into effect March 23, 2010.



Summary of past Healthcare Re-Forum Issues

- **Issue 1, Grandfathered Plans**
Defines the reform regulations that apply to insured and self-insured grandfathered plan—those plans in existence prior to the passage of the March 23, 2010, Patient Protection and Affordable Care Act (PPACA).
- **Issue 2, Individual and Group Market Reforms**
Outlines market reforms that apply to group or individual health insurance plans that have gone into effect after March 23, 2010, (non-grandfathered).
- **Issue 3, Early Retiree Reinsurance Program**
Explains the early retiree subsidy program that will provide reimbursements to sponsors of employment-based health plans that provide benefits to early retirees.
- **Issue 4, Age of Dependents**
Reviewed regulations regarding adding dependent children up to age 26 and states that exceed the federal mandate.

Future Topics:

- Small Business Tax Credits
- National High Risk Pool
- Glossary of Terms
- Questions About Healthcare Reform