

# OUTLINE OF COVERAGE

## HIRSP Federal Plan

### Eligibility

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To qualify for the HIRSP Federal Plan, you must meet all of the requirements under **A** and at least one of the requirements under **B**:

**A. Base Criteria**

1. A resident of Wisconsin
2. A citizen or national of the United States, or lawfully present in the United States
3. Have not had creditable coverage in the six months prior to the HIRSP Federal Plan effective date
4. Not eligible for employer-offered group health insurance coverage
5. Not eligible for comprehensive Wisconsin Medicaid or BadgerCare Plus Standard plan

**B. Pre-Existing Condition Criteria (must have received one of the following based on medical underwriting in the past nine months)**

1. A notice of rejection from an insurer
2. A notice of reduction of limitation on coverage, including restrictive riders
3. A notice of reduction of an increase in premium of 50% or more
4. Two or more offers for insurance with premiums at least 50% higher than a standard risk would be changed for the coverage
5. Tested positive for HIV

If you qualify for the HIRSP Federal Plan, you will not be subject to a six-month waiting period of coverage of pre-existing conditions.

If you do not meet the requirements in **A** and **B**, you may be eligible for Wisconsin HIRSP. To get more information about Wisconsin HIRSP visit [www.hirsp.org](http://www.hirsp.org) or call 1-800-828-4777.

### Comparison of HIRSP Federal Plans

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	<b>Federal 500</b>	<b>Federal 1,000</b>	<b>Federal 2,500</b>	<b>Federal 3,500</b>
<b>Medical Deductible</b>	\$500 per year	\$1,000 per year	\$2,500 per year	\$3,500 per year
<b>Medical Coinsurance</b>	20% of allowed amount up to \$1,000 total per year	20% of allowed amount up to \$1,000 total per year	20% of allowed amount up to \$1,000 total per year	20% of allowed amount up to \$1,000 total per year
<b>Medical Out-of-Pocket Maximum</b>	\$1,500 per year	\$2,000 per year	\$3,500 per year	\$4,500 per year
<b>Drug Copay</b>	\$10 Tier 1/\$40 Tier 2 up to a maximum \$2,000 per year	\$10 Tier 1/\$40 Tier 2 up to a maximum \$2,000 per year	\$10 Tier 1/\$40 Tier 2 up to a maximum \$2,000 per year	\$10 Tier 1/\$40 Tier 2 up to a maximum \$1,450 per year

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### Medical Benefits

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#### Covered Services

HIRSP Federal Plan will cover medically necessary and appropriate services consistent with the HIRSP Federal policy. Prescription drugs must be obtained at a HIRSP-certified network pharmacy. A partial listing of covered services follows.

#### Covered Services

- \$150 of first dollar coverage for routine and preventive services
- Medical-surgical services
- Anesthesia services
- Consultation
- Prescription drugs
- Home Care
- Radiology services
- Laboratory services
- Pap test and pelvic exam
- Prostate cancer screening
- Skilled nursing care
- Hospice care
- Services and supplies for treatment of diabetes
- Hospital Services
- Yearly routine exam

#### Covered Services Requiring Prior Approval

- Durable medical equipment costing more than \$1,500 or rented for more than three months
- Transplant services
- Home Intravenous (IV) therapy or home infusion therapies including Total Parenteral Nutritional (TPN) and antibiotic therapy
- Prosthetics costing more than \$1,500
- Surgical Services for morbid obesity
- Reduction mammoplasty, septoplasty, and blepharoplasty
- Spinal surgeries\*
- PET scans\*
- MRA studies\*
- Dental repair related to an injury\*
- Inpatient non-emergency admissions, at least 3 business days prior to confinement
- Outpatient visits and transitional treatment for treatment of alcoholism, drug abuse and nervous or mental disorders beyond 50 visits per calendar year
- Pain management procedures, including injections
- Spinal cord stimulator
- Implantable infusion pain pump
- Genetic testing services for treatment of an illness

Visit [www.hirsp.org](http://www.hirsp.org) for more specific information on covered services

\* Prior approval not required in the event of an emergency

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### Noncovered Services

The following is a partial list of treatments, services, supplies and expenses that HIRSP Federal Plan does not cover.

- Cosmetic treatments
- Eyeglasses
- Charges for produres or services that are determined as not medically necessary and appropriate
- Infertility, impotence and sterilization services or drugs
- Routine dental care
- Custodial care
- Hearing aids
- Expenses incurred for procedures or services that are of questionable medical value, experimental or investigative (except drugs for the treatment of HIV infection)
- Healthcare services performed by members of your immediate family or anyone else living with you
- Any services covered by any other policy of healthcare insurance

*Refer to the HIRSP Federal policy for a full listing of covered/noncovered services, exclusions, conditions and limitations.*

### Provider Network

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To be covered by the HIRSP Federal Plan, healthcare providers **must** be Wisconsin Medicaid-certified. HIRSP Federal Plan will pay benefits up to the HIRSP Federal Plan allowed amount. You are responsible for any applicable deductible and coinsurance amounts.

If you receive emergency medical care from a healthcare provider located outside of the state of Wisconsin who is not Medicaid-certified, HIRSP Federal Plan will cover those health care services up to the HIRSP Federal Plan allowed amount. You are responsible for any applicable deductible and coinsurance amounts, and maybe balanced billed for the difference between the provider charges and the HIRSP Federal Plan allowed amount.

### Customer Service & Website

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Customer Service                      1-888-253-2698 or 1-608-221-5315  
Monday – Thursday from 7:00 AM to 7:00 PM CST  
Friday from 7:00 AM to 4:30 PM CST

Administration                        1-800-332-0903  
Monday – Thursday from 7:00 AM to 5:00 PM CST  
Friday from 7:00 AM to 4:30 PM CST

Web Site                                [www.hirsp.org](http://www.hirsp.org)

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## HIRSP Federal Plan

### Frequently Asked Questions

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#### **How can I compare which plan is better for me?**

The HIRSP Federal Plan will offer four deductible options. The deductible options will be \$500, \$1,000, \$2,500 and \$3,500. Premium rates for the HIRSP Federal Plans will be lower than current HIRSP plan rates. However, if your household income is below \$33,000 per year, you may qualify for a premium subsidy under HIRSP. If you qualify for subsidy under HIRSP, your premium may be lower than the premium on the HIRSP Federal Plan. Please check the HIRSP website at [www.hirsp.org](http://www.hirsp.org) frequently for more details regarding the HIRSP Federal Plan premiums and plan details.

#### **What are the benefits for the HIRSP Federal Plan?**

The HIRSP Federal Plan will offer medical and drug benefits that are comparable to Wisconsin HIRSP. The HIRSP Federal Plan will not have a pre-existing waiting period. To view the benefits, various plan options and out of pocket costs available under the Wisconsin HIRSP plan, please visit the HIRSP website at [www.hirsp.org](http://www.hirsp.org).

#### **Prescription drug coverage? More than just generics?**

The HIRSP Federal Plan will offer a drug benefit, including generic and brand name drugs, that are comparable to Wisconsin HIRSP, with no waiting period for pre-existing conditions. [View the Wisconsin HIRSP benefits.](#)

#### **What are the eligibility requirements, other than those posted on the web site?**

To be considered for the HIRSP Federal Plan, at a minimum, a person must:

1. Be a citizen or national of the United States, or be lawfully present; and
2. Be uninsured for at least 6 months before applying for coverage; and
3. Have a preexisting medical condition. (Please note that the federal definition of a preexisting medical condition has not yet been determined.)

NOTE: If a person enrolls in any of the BadgerCare Plus plans or Wisconsin HIRSP, they will NOT be eligible for the HIRSP Federal Plan once it becomes available because they have to be uninsured for at least 6 months.

#### **What qualifies as a pre-existing condition?**

The federal definition of a preexisting medical condition has not yet been determined. However, it is likely that it will require proof of uninsurability due to a pre-existing medical condition. Such proof would include a letter of rejection from an insurance carrier. It is recommended that you consider applying for individual insurance coverage as soon as possible. You can obtain a letter of rejection from a private insurance carrier up to 9 months prior to applying to the HIRSP Federal Plan. More information will be available soon on the HIRSP web site at [www.hirsp.org](http://www.hirsp.org).

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### **Do I have to be uninsured for 6 months?**

At a minimum, to be considered for the HIRSP Federal Plan

1. you must be without creditable coverage\* for 6 months,
2. be a citizen or national of the United States or be lawfully present, and
3. have a preexisting medical condition.

The complete listing of requirements will be available soon at [www.hirsp.org](http://www.hirsp.org).

\* Creditable Coverage: coverage under qualifying group health plans and insurance from any of the following:

- A. a group health plan.
- B. health insurance coverage.
- C. Medicare Parts A, B and D.
- D. Medicaid.
- E. TriCare, formerly the Civilian Health and Medical Plan of the Uniformed Services (CHAMPUS).
- F. Civilian Health and Medical Plan of the Veterans Administration (CHAMPVA).
- G. a medical care program of the federal Indian health service or of an American Indian tribal organization.
- H. a state health benefits risk pool.
- I. a federal employee health plan.
- J. a public health plan.
- K. a Peace Corps health plan.

### **Will I lose my place on the BadgerCare Plus Core plan waiting list if I apply for this program?**

You will not lose your place on the BadgerCare Plus Core plan waiting list if you enroll in the HIRSP Federal Plan. However, if you enroll in the BadgerCare Plus Core or Basic plan first, you will not be eligible for the HIRSP Federal Plan.

### **If I enroll in the BadgerCare Plus Basic plan, will this make me ineligible for the HIRSP Federal Plan?**

If a person enrolls in BadgerCare Plus Basic or Core plan, they will NOT be eligible for the HIRSP Federal Plan. To be eligible for the HIRSP Federal Plan you must be uninsured for the past 6 months.

### **Can I apply over the internet?**

Applications will be available on July 15, 2010. At that time, an application will be available to download. A notice will be posted on the HIRSP website at [www.hirsp.org](http://www.hirsp.org) when applications can be completed online.

### **Will plans be able to backdate for charges incurred in the past?**

Applications will be available for the HIRSP Federal Plan on July 15, 2010. The earliest effective date available for the HIRSP Federal Plan will be August 1, 2010. Any services provided prior to the member's effective date will not be covered by the HIRSP Federal Plan.