

**Subject:** FW: Question from Fiscal Committee this morning

-----Original Message-----

From: Kate Walton

Sent: Thursday, November 21, 2002 10:07 AM

To: Lerdal, Sue; Leto, Sam; Lyons, Holly

Subject: FW: Question from Fiscal Committee this morning

This is the response to Senator McKinley's ?? yesterday regarding the hawk-i rule. Please let me know if you need additional information.

Kate

> -----Original Message-----

> From: Smith, Anita

> Sent: Wednesday, November 20, 2002 4:47 PM

> To: Walton, Kate

> Cc: Anderson, Cathy; Christensen, Ed; Bingaman, Deb; Ruggle, Anna;

> Goldman, Shellie

> Subject: RE: Question from Fiscal Committee this morning

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> This rule is the result of federal regulations.

>

> When the final SCHIP regulations came out, they contained a provision

> related to the definition of a targeted low-income uninsured child (who

> are the only children eligible under SCHIP). The regulations said that if

> a child was insured but did not have geographic access to the coverage,

> for the purposes of establishing SCHIP eligibility, the child was

> considered to be uninsured. I think the problem the regulations are

> trying to address are those situations where an absent parent who lives in

> another state carries insurance on the child but the child, who is

> technically insured, can't access the coverage. (i.e. dad lives in

> Florida and child lives in Iowa -- dad carries insurance through his

> employer's managed care plan)

>

> Geographic access, the 30 minute/30 mile rule, is an industry standard for

> establishing that a health plan's provider network is adequate for an

> individual to receive care from a primary care physician (60 minutes/60

> miles for specialty care). We have polled other states and this is the

> standard that they are using as well.

>

> These applications will all be evaluated on a case by case basis so their

> is no "automatically eligible" about it. Also, if a child is approved for

> hawk-i under these circumstances, the health plans are required to

**Attachment H**

- > coordinate benefits. So the other insurance is still primary and would
- > have to deny the claim before it could be paid under the hawk-i health
- > plan. Please let me know if you have any other questions or concerns.
- > Thanks!
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