

## **Your Rights under Michigan Health Insurance Law**

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The only guarantee issue policies for individuals in Michigan are from Blue Cross Blue Shield Michigan. They provide a variety of plans which may or may not cover doctor visits or prescriptions. BCBSM can impose a six month waiting period for pre-existing conditions. Pregnancy is considered a pre-existing condition but will be covered after the six month period.

Under Michigan law, individual health insurance policies are limited to one year exclusion riders on pre-existing conditions. Because of this, most Michigan Health Insurance Companies reject applicants who have serious pre-existing medical conditions that may be acceptable in other states who allow a longer exclusion rider period. If a medical condition is accepted with a one year rider the pre-existing condition must be covered after the one year period by all Michigan Health Insurance companies who provide individual health insurance.

Newborn children and legally adopted children must be covered for the first 31 days under either the father's or mother's Michigan health insurance policy as per federal law. Because of this, Michigan Health Insurance companies offering individual health insurance policies will not cover an expectant parent even though they may not be married or the company does not cover maternity.

Your Health Insurance policy cannot be cancelled because you get sick. Michigan Health Insurance companies must renew your policy as long as the premium payments are paid up to date and the questions on the original application were answered truthfully.

Michigan HMO's are required to offer their policies during a one month open enrollment period of their choosing regardless of pre-existing medical conditions. They are not required to offer prescriptions with their healthcare plans.

Group health insurance in Michigan must accept all pre-existing medical conditions with the following provisions. A Michigan Health Insurance Company can impose an 18 month waiting period for pre-existing medical conditions if the employee was not previously covered under another plan within the previous 63 day period. Under the new Michigan small group reform act, Michigan Health Insurance companies must adjust the rates for groups of two to fifty employees annually within a pre-determined range to spread out the risk among all insurance companies. As per the Federal HIPAA act of 1996, groups of 20 or more employees must provide Michigan health insurance through the COBRA program to separated employees or dependents of employees if divorce or death occurs. You cannot be charged more than 2% higher than the actual premium for the COBRA coverage. No pre-existing exclusion period can be applied by a Michigan health insurance provider without appropriate written notice.

Low income families can purchase Michigan health insurance for their children from the Michigan MICHild or Wellchild program for \$5 a month. Expectant single mothers of low income also can qualify for maternity coverage under this program. They can be reached by calling 1-888-988-6300.

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