



## **Health Care Reform Important Information Regarding: Preventive Care, Dependent to Age 26 and Lifetime Limits**

Gowrie Group is committed to guiding you through the maze of Health Care Reform. We want to let you know about three changes that will go into effect upon the renewal of your group's health insurance (on or after September 23, 2010).

### **1. Preventive Care**

The Affordable Care Act requires new health plans to provide coverage and eliminate cost-sharing requirements for certain preventive services. According to the Act, if you or your family enroll in a new health plan on or after September 23, 2010 then that plan will be required to cover recommended preventive services including well-child care, without charging you a copay, coinsurance or deductible.

These protections apply to health plans that are not grandfathered. If your company sponsored a plan before March 23, 2010 it may be considered a 'grandfathered' plan. Grandfathered plans are exempt from certain health care reform requirements, including this preventive care requirement and other patient protections.

### **2. Dependent to Age 26**

The health care reform law allows parents to keep their children on their plan until they turn 26 years old. This new requirement will go into effect upon your group's renewal. The guidelines specify that the child need not be financially dependent on their parents for support, they need not be claimed on their parent's tax returns, and they need not be enrolled in full-time school/college unless their residence is outside of their parent's state. The new federal law has also extended the benefit to those children who are married. "Children-n-law" (spouses of children) and grandchildren do not qualify for coverage.

Employees who want to add children who are younger than 26 years old to their health plan have a one-time special enrollment right under the law. This enrollment right applies to adult children under 26 who previously lost coverage because they aged out. The enrollment right must last at least 30 days.

### **3. Lifetime Limits**

Effective September 23, 2010, upon your group's renewal the health care reform law no longer allows group health plans to establish lifetime limits on benefits. This applies to medical and pharmacy benefits only, not dental or vision.

If an employee's coverage was previously cancelled because he or she reached the lifetime dollar limit of the plan, the employee must be offered a special one-time enrollment right to take advantage of this change. That period must be during the first 30 days of your plan year on or after September 23, 2010, or your open enrollment period if it precedes that start of your plan year and is at least 30 days.

As always, Gowrie Group will continue to keep you posted on the ever changing climate of Health Care Reform. You can also visit our [Health Care Reform online news section](#) anytime to review current and past updates ([click here](#) or type [www.gowrie.com/news](http://www.gowrie.com/news) and go to the *Health Care Reform tab*). Please call our benefits team at 860.399.5945, or Michelle or me directly with any questions.

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