

Demographic	PRIVATE HEALTH INSURANCE			PUBLICLY SPONSORED PROGRAMS						
	Small businesses (2-50 employees)	Individuals recently covered by an employer health plan	Individuals & families	Individuals with pre-existing, severe or chronic medical conditions	Low Income families & medically needy	Moderate income families	Women	Seniors and Disabled	Trade Dislocated Workers (TAA recipients)	Veterans
Program	<b>U.S. Uninsured Help Line</b> 800-234-1317  <b>Group Health</b> National Association of Health Underwriters 703-276-0220 www.nahu.org	<b>COBRA/Continuation Coverage</b>  Then <b>HIPAA</b> Health Insurance Portability and Accountability Act 866-4-USA-DOL www.dol.gov	<b>U.S. Uninsured Help Line</b> 800-234-1317  <b>Individual Plans</b> National Association of Health Underwriters 703-276-0220 www.nahu.org	<b>Carefirst Blue Cross Blue Shield</b> 800-321-3497 www.carefirst.com	<b>Medicaid</b> 202-724-5506 202-442-5988 http://doh.dc.gov/doh	<b>DC Healthy Families</b> 888-557-1116 202-727-1000 http://doh.dc.gov/doh	<b>Project Wish</b> (Breast and Cervical Cancer Early Detection Program) 202-442-5900 888-833-9474 TTD: 877-672-7368	<b>Medicare</b> 800-633-4227 1-800-MEDICARE www.medicare.gov  <b>Medicare Prescription Drug Program</b> 800-633-4227	<b>Health Coverage Tax Credit</b> 866-628-HCTC www.irs.gov (key word HCTC)	<b>VA Medical Benefits Package</b> 877-222-8387 www.va.gov
Coverage	Assorted deductibles  There is a 6-month look-back/12-month exclusionary period for pre-existing conditions on enrollees that do not have prior creditable coverage  <i>Pre-Existing Health Conditions Covered</i>	<b>Cobra Subsidy:</b> 9 months of partially subsidized COBRA premium  COBRA coverage available for 18-36+ months depending on qualifying events; benefits are same as group program  Continuation coverage is for 3 months  HIPAA individual-plan conversion benefits are based on the program selected, no expiration (through CareFirst you are guaranteed two options)  <i>Pre-Existing Health Conditions Covered</i>	At least three plans must be offered on a "guarantee issue" basis to all consumers  <i>Pre-Existing Health Conditions Covered</i>	Comprehensive plans available depending on needs of applicant  D.C. does require all policies to cover certain benefits – such as mammograms, prostate cancer screening, and diabetes treatment  Two month waiting period  <i>Pre-Existing Health Conditions Covered</i>	Doctor visits, immunizations (shots), school physicals, emergency care, hospital stays, prescriptions, prenatal labor and delivery, vision care and glasses, dental, family planning, transportation to doctor appointments, home health care, durable medical equipment, health education services, mental health services, drug and alcohol treatment and more  <i>Pre-Existing Health Conditions Covered</i>	Choose one of three health plans: Amerigroup Corporation DC Chartered Health Plan Health Right  Doctor visits, immunizations (shots), school physicals, emergency care, hospital stays, prescriptions, prenatal labor and delivery, vision care and glasses, dental, family planning, transportation to doctor appointments, home health care, durable medical equipment, health education services, mental health services, drug and alcohol treatment and more  <i>Pre-Existing Health Conditions Covered</i>	Cancer education, screening, and diagnostic services  <i>Pre-Existing Health Conditions Covered</i>	Medicare offers two standard plans, A: Hospital Insurance and B: Medical Insurance, as well as several supplemental and advantage plans  <i>Pre-Existing Health Conditions Covered</i>	Will cover 80% of your COBRA premium if employer contributes less than 50% (or spouses' employer)  Will cover individual insurance in which you were enrolled for last 30 days before TAA benefits  <i>Pre-Existing Health Conditions Covered</i>	Comprehensive preventive and primary care, outpatient and inpatient services  <i>Pre-Existing Health Conditions Covered</i>
Eligibility	<b>GUARANTEED COVERAGE</b>  Company size 2-50  Most carriers require proof of the business or business owner, viability etc.	<b>GUARANTEED COVERAGE</b>  <b>Cobra Subsidy:</b> If you were involuntarily terminated between Sept 1, 2008 and Dec 31, 2009, you are eligible for a COBRA subsidy from the Federal Government. If you become eligible for other insurance, you will no longer be eligible for the subsidy. If you turned down COBRA from Sept 1, 2008 to Feb 17, 2009, you are eligible for the subsidy. Must have an income at or below \$125,000 for individuals or \$250,000 for couples.  All coverage terminated within last 60 days (COBRA), or 63 days (HIPAA) for reasons other than gross misconduct or fraud  COBRA is for groups with 20+ employees  For HIPAA: recently covered by group program or a COBRA plan for 12 continuous months (COBRA option must have been selected if available and exhausted) Partial coverage may be available  State Continuation Coverage must apply within 45 days of losing coverage and cannot be eligible for COBRA, for companies with 2-19 employees	<b>GUARANTEED COVERAGE</b>  Eligibility is NOT subject to medical underwriting  There is a 12-month exclusionary period limit for pre-existing conditions for HMOs, and a 10-month exclusionary period limit for pre-existing conditions for Carefirst Blue Cross Blue Shield (except for those qualified under HIPAA)	<b>GUARANTEED COVERAGE</b>  If you are not HIPAA eligible and buy a GUARANTEED COVERAGE policy, CareFirst can impose a 10-month pre-existing condition exclusion period  CareFirst can exclude conditions for which you ever got care or for which the insurer thought you should have sought care; this is called the prudent person rule  CareFirst is not required to credit your prior health coverage toward preexisting condition exclusion periods	<b>GUARANTEED COVERAGE</b>  Children Ages 0-19 and Pregnant Women may have an income up to 300% of the FPL  Aged, Blind and Disabled: 100% FPL  SSI Recipients: 74% FPL  Medically Needy Individual: 53% FPL  Medically Needy Couple: 41% FPL  Resource requirements for everyone but children or pregnant mothers	<b>GUARANTEED COVERAGE</b>  For children, adolescents under age 19 who live alone, pregnant women, and parents/guardians  At or below 300% FPL	<b>GUARANTEED COVERAGE</b>  Ages 18 and older are eligible for a free annual clinical breast exam, Pap test, and pelvic exam  Ages 40 and older are also eligible for a free annual mammogram  Free transportation and interpreter services	<b>GUARANTEED COVERAGE</b>  Disabled or age 65 and older or people under age 65 with certain disabilities, and people of all ages with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant).	<b>GUARANTEED COVERAGE</b>  Must be receiving TAA (Trade Adjustment Assistance)  Must not have access to employer plan that pays 50% of coverage cost.  Not enrolled in certain state plans	<b>GUARANTEED COVERAGE</b>  "Veteran status" = active duty in the U.S. military, naval, or air service and a discharge or release from active military service under other than dishonorable conditions  Certain veterans must have completed 24 continuous months of service
Monthly Cost	Costs depend on employer contribution	<b>Cobra Subsidy: 35%</b> of monthly premium  Costs range from 102-150% of group health rates  In some cases rates may be higher, see next column	Costs depend on age and county/zone	Premiums can vary due to age, gender, health status, family size, and other factors.	<b>\$0</b> or share of cost	<b>\$0</b> or share of cost	<b>\$0</b>	<b>\$0</b> and share of cost for certain services; deductibles for certain plans	<b>20%</b> of the insurance premium	<b>\$0</b> and share of cost and co-pays depending on income level

**Other programs & resources**

**D.C. Health Program for Refugees**  
202-442-5841

**D.C. Free Clinic**  
202-667-1106  
www.wfclinic.org

**Healthcare Alliance**  
202-842-5809  
866-842-2810  
www.chartered-health.com

**Women-Infant-Children (WIC)**  
800-345-1942  
202-645-5663  
http://app.doh.dc.gov/services/wic/index.shtm

**Partnership for Prescription Assistance**  
888-4PPA-NOW  
(888-477-2669)  
www.pparx.org

**NOTE:** Government programs look at each family's circumstance to determine eligibility.

Income and assets tests may be required to determine eligibility for publicly sponsored programs.

FPL means Federal Poverty Level. See explanation on reverse side of this matrix.

**Guaranteed Coverage** means you cannot be turned down due to your health conditions.

Programs and plan availability, eligibility requirements, costs, and coverages are subject to change.



## Using this Health Care Options Matrix

Each state has a variety of health care coverage options. This Matrix is designed to help residents determine which option is best for them.

**STEP 1** For applicants potentially eligible for public programs, check the chart below to determine his/her FPL percentage.

**STEP 2** See reverse side of this Matrix brochure to determine options for which the applicant might qualify.

**STEP 3** Make a list of the programs and insurance coverage options that may apply to the applicant and then use the contact information provided to access coverage or services.

### Your Federal Poverty Level (FPL) (Based on monthly family income)

Family Size (Household)	25%	50%	75%	81%	100%	133%	175%	200%	250%	300%
1	\$226	\$451	\$677	\$731	\$903	\$1,200	\$1,579	\$1,805	\$2,256	\$2,708
2	\$304	\$607	\$911	\$983	\$1,214	\$1,615	\$2,125	\$2,428	\$3,035	\$3,643
3	\$381	\$763	\$1,144	\$1,236	\$1,526	\$2,029	\$2,670	\$3,052	\$3,815	\$4,578
4	\$459	\$919	\$1,378	\$1,488	\$1,838	\$2,444	\$3,216	\$3,675	\$4,594	\$5,513
5	\$537	\$1,075	\$1,612	\$1,741	\$2,149	\$2,858	\$3,761	\$4,298	\$5,373	\$6,448
6	\$615	\$1,230	\$1,846	\$1,993	\$2,461	\$3,273	\$4,306	\$4,922	\$6,152	\$7,383
7	\$693	\$1,386	\$2,079	\$2,246	\$2,773	\$3,687	\$4,852	\$5,545	\$6,931	\$8,318
8	\$771	\$1,542	\$2,313	\$2,498	\$3,084	\$4,102	\$5,397	\$6,168	\$7,710	\$9,253

- A pregnant woman counts as two for the purpose of this chart.
- Add \$311/month for each additional family member after eight.
- Contact individual programs for deduction allowances on child/dependent care; working parent's work expenses; alimony/child support *received* or court ordered amount *paid*.

Source: Federal Register Vol. 74, No. 14, January 23, 2009, pp. 4199-4201. Monthly percentage data calculated by FHCE and rounded to the nearest dollar.

Note: There is no universal administrative definition of income that is valid for all programs that use the poverty guidelines. The office or organization that administers a particular program or activity is responsible for making decisions about the definition of income used by that program (to the extent that the definition is not already contained in legislation or regulation). To find out the specific definition of income used by a particular program or activity, you must consult the office or organization that administers that program.

The Health Care Options Matrix is a registered trademark of Philip Lebherz and was originally developed by Philip Lebherz and the Foundation for Health Coverage Education®, [www.coverageforall.org](http://www.coverageforall.org).

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## Other sources of information

### Financial aid and free or low-cost benefits

**Government Benefits Finder**  
800-FED-INFO  
[www.benefits.gov](http://www.benefits.gov)

(Search tool for grants, loans and other benefits)

**Catalog of Federal Domestic Assistance**  
[www.cfda.gov](http://www.cfda.gov)

(Search tool for grants, loans and other benefits)

### Finding local health care options

**Bureau of Primary Health Care**  
888-ASK-HRSA  
[www.ask.hrsa.gov/pc](http://www.ask.hrsa.gov/pc)

(Search tool by zip code)

**Department of Health and Human Services**  
[www.hhs.gov](http://www.hhs.gov)

(Various health care search tools)

**Self Help Clearing House**  
[www.mentalhelp.net/selfhelp](http://www.mentalhelp.net/selfhelp)

(Search tool for people sharing information on hundreds of diseases, health conditions and other health care related situations)

**District of Columbia Department of Health**  
202-727-1000  
<http://doh.dc.gov/doh>

(State program information)

### Laws and regulations

**District of Columbia Department of Insurance, Securities and Banking**  
202-727-8000  
<http://disb.dc.gov>

(General information on all types of insurance)

**Employee Benefits Security Administration**  
[www.dol.gov/ebsa](http://www.dol.gov/ebsa)

(Official information and rules from the U.S. Department of Labor)

### Help with this Matrix or finding a broker or agent

**National Association of Health Underwriters**  
[www.nahu.org](http://www.nahu.org)

(State organization of insurance brokers)

WASHINGTON D.C.

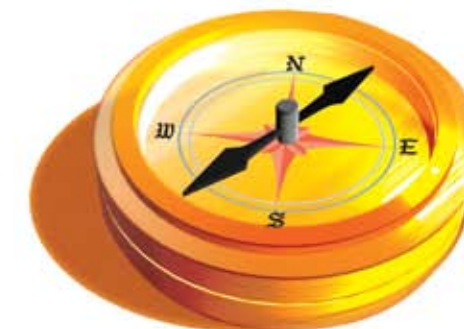
# Health Care Options Matrix™



This Matrix offers information about free and low-cost health care coverage for individuals, families, and small businesses.



Helping people navigate their health care options



The Foundation for Health Coverage Education® has created the Matrix public education program to ensure that every American has complete information about access and affordability to quality health care coverage. Every effort has been made to include the most up-to-date information available at the time of printing. Program and plan availability, eligibility requirements, costs, and coverages are subject to change. You are encouraged to call or visit the websites listed for each program to ensure that you have the most accurate information available.