

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 and children	Moderate income families	Children with special needs	Women	Low income individuals	Seniors and Disabled
Program	<p>U.S. Uninsured Help Line 800-234-1317</p> <p>Group Health Kansas Association of Health Underwriters 703-276-0220 www.nahu.org</p>	<p>COBRA/ Mini-COBRA</p> <p>Then</p> <p>HIPAA Health Insurance Portability and Accountability Act 866-4-USA-DOL www.dol.gov</p>	<p>U.S. Uninsured Help Line 800-234-1317</p> <p>Individual Plans Kansas Association of Health Underwriters 703-276-0220 www.nahu.org</p>	<p>KHIA Kansas Health Insurance Association 800-362-9290 www.khiastatepool.com</p>	<p>Medicaid (KMAP) 800-766-9012 https://www.kmap-state-ks.us/</p> <p>Women-Infant-Children (WIC) 800-332-6262 785-296-1320 www.kdheks.gov/nws-wic/</p>	<p>Health Wave 800-792-4884 800-792-4292 TTY www.kansashealthwave.org</p>	<p>Children with Special Health Care Needs (CSHCN) 800-332-6262 785-296-1313 www.kdheks.gov/cyshcn</p>	<p>Women's Health Care and Family Planning Services 800-332-6262 785-296-1307 www.kdheks.gov/c-f/womens.html</p> <p>Early Detection Works 877-277-1368 785-296-1207 www.kdheks.gov/edw/</p>	<p>MediKan 800-766-9012 785-296-3959 www.srskansas.org</p> <p>Or contact local social services agency</p>	<p>Medicare (Age 65 and up) 800-MEDICARE 800-633-4227 www.medicare.gov</p> <p>Medicare Prescription Drug Program 800-633-4227</p> <p>SHICK Senior Health Insurance Counseling of Kansas 800-860-5260 www.agingkansas.org/SHICK/shick_index.html</p>
Coverage	<p>Up to \$5M lifetime maximum, assorted deductibles</p> <p>If uninsured for previous 1-6 months, a waiting period for coverage of pre-existing conditions may apply</p> <p>There is a 6-month look-back/3-month exclusionary period for preexisting conditions on enrollees that do not have prior creditable coverage</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>COBRA or Mini-COBRA: Coverage available for 18 to 36 months depending on qualifying events, benefits are the same as what you had with your previous employer</p> <p>COBRA Subsidy: 15 months of partially subsidized COBRA premium</p> <p>HIPAA: Benefits are based on the program selected and there is no expiration of coverage</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Up to \$5M, assorted deductibles depending on age and ZIP code</p> <p>There is a 12-month look-back and 24-month exclusionary period limit for pre-existing conditions</p> <p><i>Pre-Existing Health Conditions Covered with Some Limitations</i></p>	<p>Comprehensive coverage of doctor visits, prescription drugs, outpatient and in-hospital care, maternity, ambulance, labs and x-rays, skilled nursing care, hospice, home health visits, transplants, rehabilitation, durable medical equipment, mental health and substance abuse, physical, speech and occupational therapy, among other services</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Medicaid: Physical health services: office visits, regular checkups, immunizations, hospital services, inpatient and outpatient hospital, lab and x-ray, prescription drugs, eye doctor exams and glasses, hearing services and speech, and physical and occupational therapy; dental health services for children: checkups, cleanings, sealants, x-rays and fillings; Mental Health Services (Inpatient and outpatient): mental, behavioral and substance abuse services</p> <p>WIC: Provides nutrition education and supplemental foods to infants, children and women who are pregnant, postpartum or are breastfeeding</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Some of the services covered are Physical health services: office visits, regular checkups, immunizations, hospital services, inpatient and outpatient hospital, lab and x-ray, prescription drugs, eye doctor exams and glasses, hearing services and speech, and physical and occupational therapy; dental health services for children (checkups, cleanings, sealants, x-rays and fillings); mental health services - inpatient and outpatient</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Diagnostic services and treatment services include medical specialists, outpatient care, hospitalization, surgery, durable medical equipment, reimbursement for transportation to medical specialty care, and interpreter services. A limited amount of therapy (speech, PT, OT) is provided for eligible conditions</p> <p>Outreach clinics bring specialty diagnosis, consultation, and follow-along care as close to the child's home as possible. Clinics are conducted for hearing loss, orthopedic conditions, neurological impairment, cardiac diseases, and genetic diseases. counseling and planning services</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Women's Health Care and Planning Services: Services are provided by a physician or mid-level practitioner with assistance from public health nurses. In larger health departments social workers, health educators and nutritionists are available for consultation. If problems are discovered which are beyond the scope of the clinics, appropriate referrals will be made by the health care provider. Clients are seen on by appointments</p> <p>Early Detection Works: Services include breast and cervical cancer screenings, treatment and possibly other services</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Prescription drugs, mental health services and medical (doctor) coverage. We also cover inpatient hospital, hearing, dental, and eye-wear coverage for most persons. A managed care network serves many families and children. Program pays enrolled providers directly for the medically necessary services they perform</p> <p>Cash General Assistance also available</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Medicare offers two standard plans, Part A: Hospital Insurance and Part B: Medical Insurance, as well as several supplemental and advantage plans. It also includes a prescription drug program called Medicare Part D</p> <p>SHICK is a Medicare counseling service</p> <p><i>Pre-Existing Health Conditions Covered</i></p>
Eligibility	<p>GUARANTEED COVERAGE</p> <p>Company size 2-50 employees</p> <p>Two employees must work for at least 6 months out of the year, and work 20 hours per week for coverage</p> <p>Owner can count as an employee</p> <p>Owner name on business license must draw wages from the company</p>	<p>GUARANTEED COVERAGE</p> <p>COBRA or Mini-COBRA: If you were involuntarily terminated between Sept 1, 2008 and May 31, 2010, you are eligible for a 65% COBRA subsidy from the Federal Government. If you become eligible for other insurance, you will no longer be eligible for the subsidy. Must have an income at or below \$125,000 for individuals or \$250,000 for couples. You have 60 days from date of termination to sign up for COBRA coverage</p> <p>Mini-COBRA: Applies to small businesses with less than 20 employees</p> <p>HIPAA: After you have exhausted your COBRA benefits or if you had 18 months of continuous coverage and your company went out of business, you may convert to a HIPAA individual plan, even if you have pre-existing conditions. You have 63 days from the date you lost your previous coverage to sign up for HIPAA</p>	<p>Eligibility is subject to medical underwriting</p> <p>If you are denied coverage for a medical condition, you may be eligible for KHIA, see next column</p>	<p>GUARANTEED COVERAGE</p> <p>You are eligible if your previous coverage was terminated for reasons other than non-payment of premium or fraud (such as a pre-existing condition)</p> <p>Cannot be eligible for COBRA or government programs (except "end stage renal disease" covered under Medicare)</p> <p>Applicants must have applied for health insurance and been declined by two carriers because of a health condition</p> <p>Must prove denial of coverage or offer of higher premium than KHIA rate</p> <p>Live in KS and had 12 months of continuous coverage</p>	<p>GUARANTEED COVERAGE</p> <p>Medicaid: Children ages 1-5: 133% FPL; Ages 6-19: 100% FPL; Pregnant Women and Infants ages 0-1:150% FPL; Supplemental Security Income Recipients: 74% FPL; Medically Needy Individual: 66% FPL; Medically needy couple: 49%; Working Parents: 34%; Non-working Parents: 27%; U.S. citizen, Kansas resident</p> <p>WIC: Women who are pregnant, Breastfeeding, up to baby's first birthday, Non-breastfeeding mothers, up to six months after baby's birth, Children under five years old, Family income up to 185%. Automatically eligible if enrolled in Food Stamp Program, Temporary Assistance for Families, and Medicaid Program</p>	<p>GUARANTEED COVERAGE</p> <p>All applications will be screened for HealthWave 19 (Medicaid) first</p> <p>At or below 200% FPL</p> <p>Live in Kansas</p> <p>Complete the application and list all household members, sign and date the application and provide all household income verification for 3 months (2 months for renewals)</p> <p>If self-employed, provide your most recent tax return, including all schedules and attachments, or 3 months of business ledgers</p>	<p>GUARANTEED COVERAGE</p> <p>Under age 22 living in Kansas</p> <p>Youth with a medical condition covered by the program.</p> <p>Up to 185% for SHS Program</p> <p>Up to 300% for PKU Food</p> <p>Kansas residents of any age with covered genetic and/or metabolic conditions</p>	<p>GUARANTEED COVERAGE</p> <p>Women's Health Care and Planning Services: Depends on facility</p> <p>Early Detection Works: Age 40 -64 years</p> <p>Do not have insurance or have insurance that does not pay for these services or has insurance with a high deductible</p> <p>Ineligible for Medicare Part B or Medicaid/MediKan</p> <p>Income up to 250% FPL</p>	<p>GUARANTEED COVERAGE</p> <p>Children up to age 19; pregnant Women, persons who are blind or disabled by Social Security rules, persons age 65 or older, persons receiving inpatient treatment for tuberculosis, low income families with children (people who qualify TAF cash assistance), Persons screened and diagnosed with breast or cervical cancer apply to all medical plans</p> <p>Kansas Residency citizenship and Immigrant Status- persons must be citizens or immigrants with a certain status. Some immigrants must wait 5 years before they can get coverage</p>	<p>GUARANTEED COVERAGE</p> <p>Medicare: 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)</p>
Monthly Cost	<p>Costs depend on employer contribution and ± 25% of the insurance company's index rate</p>	<p>COBRA or Mini-COBRA: With the 65% subsidy you are responsible for 35% of the monthly premium for the first 15 months. Once subsidy expires you are responsible for full premium</p> <p>COBRA, Mini-COBRA, HIPAA: Premiums range from 102%-150% of group health rates; individual coverage may be less expensive, see next column</p>	<p>Costs for individual coverage varies</p>	<p>Premium rates are determined according to the KHIA plan you select, your age, gender, and tobacco use.</p>	<p>Medicaid & WIC: \$0 or minimal share-of-cost</p>	<p>HealthWave 21: \$0 for most families; \$20-\$30 for others (premiums are subject to change at anytime); no co-pays, deductibles, or exclusions for pre-existing health conditions.</p> <p>HealthWave19: \$0 or small share of cost (There are minor co-pays for adults)</p>	<p>\$0 or some people must pay a premium</p>	<p>\$0 or minimal share-of-cost</p>	<p>\$0 or minimal share-of-cost</p>	<p>\$0 and share of cost for certain services; deductibles for certain plans</p>

Other programs & resources
<p>Health Coverage Tax Credit 866-628-HCTC 866-628-4282 www.irs.gov (key word HCTC)</p> <p>VA Medical Benefits Package 877-222-8387 www.va.gov</p> <p>Partnership for Prescription Assistance 888-4PPA-NOW 888-477-2669 www.pparx.org</p> <p>Kansas Foundation for Medical Care (Assistance) 800-432-0770 785-273-2552 www.kfmc.org/</p>

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 Issue 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.

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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

(Search tool for grants, loans and other benefits)

Catalog of Federal Domestic Assistance
www.cfda.gov

(Search tool for grants, loans and other benefits)

Finding local health care options

Health Resources and Services Administration
888-ASK-HRSA
888-275-4772
www.findahealthcenter.hrsa.gov

Self Help Clearing House
www.mentalhelp.net/selfhelp

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

Department of Health and Human Services
www.hhs.gov

(Various health care search tools)

Kansas Department of Social and Rehabilitation Services
785-296-3959
888-369-4777
www.srskansas.org

(State program information)

Laws and regulations

Kansas Insurance Department
785-296-3071
800-432-2484
www.ksinsurance.org

(General information on all types of insurance)

Employee Benefits Security Administration
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

Kansas Association of Health Underwriters
www.nahu.org

(State organization of insurance brokers)

KANSAS

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.