

Demographic	PRIVATE HEALTH INSURANCE			PUBLICLY-SPONSORED PROGRAMS						Other Programs & Resources	
	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 Individuals & Families	Children	Women	Seniors & Disabled	Trade Dislocated Workers (TAA Recipients)		Veterans
Program	<p>U.S. Uninsured Help Line 800-234-1317</p> <p>Group Plans Pennsylvania Association of Health Underwriters 717-232-0022 www.pahu.org</p>	<p>COBRA/Mini-COBRA</p> <p>Then convert to a plan under:</p> <p>HIPAA Health Insurance Portability & Accountability Act 866-487-2365 www.dol.gov</p> <p>HIPP Health Insurance Premium Payment 800-644-7730 www.dpw.state.pa.us (Search: HIPP)</p>	<p>U.S. Uninsured Help Line 800-234-1317</p> <p>Individual Plans Pennsylvania Association of Health Underwriters 717-232-0022 www.pahu.org</p>	<p>PA Fair Care Federal program run by the Pennsylvania Department of Insurance 888-767-7015 www.PaFairCare.com www.PCIP.gov</p> <p>Blue Cross Blue Shield (Contact your regional carriers) 800-275-2583 www.ibx.com</p>	<p>Medical Assistance (Medicaid) 800-692-7462 www.dpw.state.pa.us</p>	<p>Children's Health Insurance Plan (CHIP) 800-986-5437 www.chipcoverspakids.com</p> <p>Healthy Baby Help Line 800-986-2229</p>	<p>Healthy Woman Program 800-215-7494 www.pahealthywoman.com</p>	<p>Medicare 800-633-4227 www.medicare.gov</p> <p>Medicare Prescription Drug Program 800-633-4227</p> <p>APPRISE (Medicare advice) 800-783-7067 www.aging.state.pa.us (Click: Health & Wellness)</p>	<p>Health Coverage Tax Credit 866-628-4282 www.irs.gov (Search: HCTC)</p>	<p>VA Medical Benefits Package 877-222-8387 www.va.gov</p>	<p>Partnership for Prescription Assistance 888-477-2669 www.pparx.org</p> <p>Women-Infant-Children (WIC) 800-942-9467 www.pawic.com</p> <p>Family Planning 877-724-3258 www.dpw.state.pa.us (Under: For Adults and Family Planning)</p> <p>Department of Insurance Consumer Helpline 877-881-6388 www.ins.state.pa.us</p>
Coverage	<p>There is a maximum 6-month look-back and maximum 12-month exclusionary period for pre-existing conditions on enrollees that do not have prior creditable coverage.</p> <p>Benefits will vary depending on the chosen plan.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>COBRA: Coverage available for 18–36 months depending on qualifying events. Benefits are what you had with your previous employer.</p> <p>Mini-COBRA: Benefits are what you had with your previous employer. Coverage lasts up to 9 months.</p> <p>HIPAA: Benefits are based on program selected. There is no expiration of coverage.</p> <p>HIPP: Benefits are the same as what you had with your previous employer. HIPP is a premium assistance program.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Assorted deductible and plan design options available for selection.</p> <p>Elimination riders are allowed, except for HIPAA-eligible individuals.</p> <p>There is a maximum 60-month look-back and maximum 36-month exclusionary period limit for pre-existing conditions on enrollees that do not have prior creditable coverage.</p> <p><i>Limits on pre-existing health conditions may apply</i></p>	<p>PA FairCare: Covers broad range of benefits, including primary and specialty care, hospital care, and prescription drugs.</p> <p>Blue Cross/Blue Shield: Plans operating in the state voluntarily serve as the carriers-of-last-resort for people seeking coverage in the individual market through a year-round open enrollment for specified products. Guaranteed issue coverage is available for five counties: Philadelphia, Delaware, Chester, Montgomery, and Buck. There is an exclusion period for pre-existing conditions for 1 year.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Office visits, Prescription drugs, Immunizations, Vision testing and eyeglasses, Emergency room care, Lab testing and x-rays, Hearing testing and hearing aids, Mental and substance abuse treatment.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>CHIP: Immunizations, Routine check-ups, Diagnostic testing, Prescription drugs, Dental, Vision, Hearing services, Emergency care, Maternity care, Mental health benefits and up to 90 days hospitalization in any year, Durable medical equipment, Substance abuse treatment, Partial hospitalization for mental health services, Rehabilitation therapies, Home health care.</p> <p>Healthy Baby: Provides health insurance assistance information and referral service for pregnant women.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Screening for breast and cervical cancer. Offers clinical breast exams, mammograms, pelvic examinations and Pap smears, education on breast self-exam, follow-up diagnostic care for an abnormal results.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Medicare offers Part A, inpatient care in hospitals and rehabilitative centers; Part B, doctor and some preventive services and outpatient care; Part C allows Medicare benefits through private insurance (Medicare Advantage); Part D includes Parts A, B, and C not covered by Medicare. Part D covers prescription drugs.</p> <p>APPRISE is a Medicare counseling service.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Inpatient and outpatient care (lab tests, x-rays, etc.), Doctor visits, Preventive and major medical care (surgery, physical therapy, Durable medical equipment, etc.), Mental health and substance abuse care, and Prescription drugs.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Comprehensive preventive and primary care, outpatient and inpatient services.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	
Eligibility	<p>GUARANTEED COVERAGE</p> <p>Company size 2–50 employees (including owner).</p> <p>Owner name on business license must draw wages from the company.</p> <p>Most small group carriers also require 75% employee participation and accept employees who sign a waiver indicating other coverage as counting towards the 75%.</p> <p>Eligible employees must work at least 17.5 hours a week. Eligible employees do not include temporary, substitute, or seasonal employees.</p>	<p>GUARANTEED COVERAGE</p> <p>COBRA: Available for employees who work for businesses with 20 or more employees. You have 60 days from date of termination to sign up for COBRA coverage.</p> <p>Mini-COBRA: Available for employees who work for employers with less than 20 employees. Must have been covered by group insurance continuously for 3 months prior to termination. Must sign up for Mini-COBRA within 30 days of receiving notice of right to continue coverage.</p> <p>HIPAA: Must have had 18 months of continuous coverage and completely exhausted COBRA or state continuation coverage. Must not have lost coverage due to fraud or non-payment of premiums. You have 63 days to enroll in a HIPAA-eligible plan.</p> <p>HIPP: You may be eligible for HIPP if you have a high-cost health condition, and are on Medicaid.</p>	<p>Eligibility is subject to medical underwriting.</p> <p>If you are denied coverage for a medical condition, you may be eligible for guarantee issue through Blue Cross Blue Shield or PA Fair Care. See next column.</p>	<p>GUARANTEED COVERAGE</p> <p>PAFairCare: Must be a U.S. citizen or lawfully present in the U.S. Must have been uninsured for at least 6 months prior to applying. Must have had a problem getting insurance due to a pre-existing condition.</p> <p>BlueCross/BlueShield: Must be a Pennsylvania resident, eligible for a HIPAA individual plan (see HIPAA in "Individuals Recently Covered by an Employer Health Plan" column in the left) and apply to one of BlueCross/BlueShield's designated Individual Traditional Plans within 63 days of losing group coverage.</p>	<p>GUARANTEED COVERAGE</p> <p>Must be a U.S. citizen or qualified alien and Pennsylvania resident.</p> <p>Income limits: Pregnant women and infants age 0–1: 185% FPL. Children ages 1–5: 133% FPL. Children age 6–18: 100% FPL.</p> <p>Parents/caretakers living with children ages 0-18: 36% FPL.</p> <p>Aged, blind and disabled: Singles and couples living up to 100% FPL, with asset limit of \$2,000 for singles and \$3,000 for couples.</p> <p>Medically-needy: Singles earning \$425 per month with asset limit of \$2,400, and couples earning \$442 per month with asset limit of \$3,200.</p>	<p>GUARANTEED COVERAGE</p> <p>CHIP: Child must be under 19, a U.S. citizen or qualified alien and Pennsylvania resident.</p> <p>Must not eligible for Medical Assistance.</p> <p>For low- or full-cost CHIP, enrollee must be uninsured for 6 months unless the child is under 2 years old, lost health benefits because a parent lost their job, or the child is moving from another public health insurance program. These requirements waived for enrollee eligible for free CHIP.</p> <p>No income limit.</p> <p>Healthy Baby: No eligibility requirements. Service is open to all.</p>	<p>GUARANTEED COVERAGE</p> <p>Must be Pennsylvania women who are U.S. citizens or qualified aliens, ages 40 to 64.</p> <p>Must have no insurance or limited insurance that does not cover breast and cervical cancer screening services. Must have income below 250% FPL. Not eligible if enrolled in Medicare Part B, Medicaid, or HMOs.</p> <p>Women 65 or older are eligible if not covered by Medicare.</p> <p>Women younger than 40 years old are eligible if they are symptomatic of breast cancer, require follow-up for an abnormal Pap test, or have not been screened in the past five years for cervical cancer.</p>	<p>GUARANTEED COVERAGE</p> <p>Both: Must be U.S. citizen or permanent U.S. resident, and:</p> <ol style="list-style-type: none"> 1) If 65 years or older, you or your spouse worked for at least 10 years in Medicare-covered employment, or 2) You have a disability or end-stage renal disease (permanent kidney failure requiring dialysis or transplant) at any age. 	<p>GUARANTEED COVERAGE</p> <p>Must be receiving TAA (Trade Adjustment Assistance), or</p> <p>Must be 55 years or older and receiving pension from the Pension Benefit Guaranty Corporation (PBGC).</p> <p>Must not be enrolled in certain state plans, or in prison, or receiving 65% COBRA premium reduction, or be claimed as a dependent in tax returns.</p> <p>Must be enrolled in qualified health plans where you pay more than 50% of the premiums.</p>	<p>GUARANTEED COVERAGE</p> <p>"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.</p> <p>Certain veterans must have completed 24 continuous months of service.</p>	
Monthly Cost	<p>Costs depend on employer contribution (also see HIPP) with rate variations allowed up to 300% of the base rate.</p>	<p>COBRA/Mini-COBRA: Premiums range from 102%–150% of group health rates.</p> <p>HIPAA: Premiums will depend on plan chosen.</p> <p>HIPP: \$0 or minimal share of cost.</p>	<p>Costs for individual coverage vary. There are no rate caps.</p>	<p>PAFairCare: Monthly premiums are about \$283 per month, plus additional co-pays and coinsurance.</p> <p>BlueCross/BlueShield: Prices based on age and several coverage options, applicant needs etc.</p>	<p>\$0–\$3 co-pays. \$3–\$21 per hospital admission (except in institution for mental diseases).</p>	<p>CHIP: \$0 monthly premium for each child with incomes up to 200% FPL. \$43–\$70 monthly premium for families living at 200%–300% FPL, and \$195 monthly premium for families living above 300% FPL. Co-payments are \$5 to \$50.</p> <p>Healthy Baby: \$0</p>	<p>\$0</p>	<p>Both: \$0 and share of cost for certain services; deductibles for certain plans. Part A: \$0-\$450 based on length of Medicare-covered employment; Part B: \$96.40-\$369.10 depending on annual income; Part C: Based on provider; Part D: Varies in cost and drugs covered.</p>	<p>20% of the insurance premium including COBRA premium if employer contributes less than 50%.</p>	<p>\$0 and share of cost and co-pays depending on income level.</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 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 Coverage 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 gross income							
Family Size (Household)	100%	133%	175%	200%	250%	300%	400%
1	\$931	\$1,238	\$1,629	\$1,862	\$2,327	\$2,793	\$3,723
2	\$1,261	\$1,677	\$2,206	\$2,522	\$3,152	\$3,783	\$5,043
3	\$1,591	\$2,116	\$2,784	\$3,182	\$3,977	\$4,773	\$6,363
4	\$1,921	\$2,555	\$3,361	\$3,842	\$4,802	\$5,763	\$7,683
5	\$2,251	\$2,994	\$3,939	\$4,502	\$5,627	\$6,753	\$9,003
6	\$2,581	\$3,433	\$4,516	\$5,162	\$6,452	\$7,743	\$10,323
7	\$2,911	\$3,871	\$5,094	\$5,822	\$7,277	\$8,733	\$11,643
8	\$3,241	\$4,310	\$5,671	\$6,482	\$8,102	\$9,723	\$12,963
Based on yearly family gross income							
1	\$11,170	\$14,856	\$19,548	\$22,340	\$27,925	\$33,510	\$44,680
2	\$15,130	\$20,123	\$26,478	\$30,260	\$37,825	\$45,390	\$60,520
3	\$19,090	\$25,390	\$33,408	\$38,180	\$47,725	\$57,270	\$76,360
4	\$23,050	\$30,657	\$40,338	\$46,100	\$57,625	\$69,150	\$92,200
5	\$27,010	\$35,923	\$47,268	\$54,020	\$67,525	\$81,030	\$108,040
6	\$30,970	\$41,190	\$54,198	\$61,940	\$77,425	\$92,910	\$123,880
7	\$34,930	\$46,457	\$61,128	\$69,860	\$87,325	\$104,790	\$139,720
8	\$38,890	\$51,724	\$68,058	\$77,780	\$97,225	\$116,670	\$155,560

• A pregnant woman counts as two for the purpose of this chart.
 • Add \$330/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*.

*The following figures are the 2012 HHS poverty guidelines as of January 26, 2012.
 (Source: <http://aspe.hhs.gov/poverty/12poverty.shtml>)
 Monthly percentage data calculated by FHCE and rounded to the nearest dollar.*

Please visit www.CoverageForAll.org for further details and updates on the 48 continuous states, Hawaii and Alaska FPL charts.

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 & FREE OR LOW-COST BENEFITS

Government Benefits Finder
800-333-4636
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
888-275-4772
www.findahealthcenter.hrsa.gov

Department of Health and Human Services
www.hhs.gov

(Various health care search tools)

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)

Pennsylvania Department of Health
877-724-3258
www.health.state.pa.us

(State program information)

LAWS & REGULATIONS

Pennsylvania Insurance Department
877-881-6388
www.ins.state.pa.us

(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

Pennsylvania Association of Health Underwriters
717-232-0022
www.pahu.org

(State organization of insurance brokers)

PENNSYLVANIA

Health Coverage Options Matrix



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

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.

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