Wyoming Health Care Options Matrix

www.CoverageForAll.org

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 Individuals & Families**	**Children**	**Children with Special Health Care Needs**	**Women**	**Pregnant Women**	**Native American Indians**
Program	**U.S. Uninsured Help Line** 800-234-1317 **Group Plans** National Association of Health Underwriters 703-276-0220 www.nahu.org	**COBRA/Mini-COBRA** Then convert to a plan under: **HIPAA** Health Insurance Portability & Accountability Act 866-487-2365 www.dol.gov	**U.S. Uninsured Help Line** 800-234-1317 **Individual Plans** National Association of Health Underwriters 703-276-0220 www.nahu.org	**Wyoming Health Insurance Pool (WHIP)** 800-442-2376 307-634-1393 insurance.state.wy.us/whip.html **Pre-Existing Condition Insurance Plan (PCIP)** Run by the U.S. Department of Health and Human Services 866-717-5826 www.PCIP.gov	**Medicaid** 307-777-7531 www.health.wyo.gov/healthcarefin/equalitycare Contact the local public or health services department.	**KidCare CHIP** 877-543-7669 888-996-8786 www.health.wyo.gov (Search: CHIP) **Women-Infant-Children (WIC)** 800-994-4769 307-777-7494 www.health.wyo.gov/familyhealth/wic	**Children's Special Health Program (CSH)** 307-777-6921 www.health.wyo.gov/familyhealth/csh Contact the local public or health services department.	**Wyoming Breast and Cervical Cancer Early Detection Program (WBCCEDP)** 307-777-6006 800-264-1296 www.health.wyo.gov/phsd/bccedp	**Best Beginnings** 307-777-3545 www.health.wyo.gov/familyhealth/bestbeginnings Contact the local public or health services department.	**Indian Health Services (IHS)** 406-247-7107 www.ihs.gov (Search: Billings)
Coverage	Benefits will vary depending on the chosen plan. There is a maximum look-back period of 6 months and a maximum exclusion period of 12 months for enrollees who do not have prior coverage. ***Pre-Existing Health Conditions Covered***	**COBRA:** Coverage available for 18–36 months depending on qualifying events. Benefits are what you had with your previous employer. **Mini-COBRA:** Benefits are what you had with your previous employer. Coverage lasts 12 months. **HIPAA:** Benefits are based on program selected. There is no expiration of coverage. ***Pre-Existing Health Conditions Covered***	Benefits will vary depending on the chosen plan. There is a maximum look-back period of 6 months and a maximum exclusion period of 12 months for enrollees who do not have prior coverage. ***Limits on Pre-Existing Health Conditions May Apply***	**WHIP:** Provides 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, Rehabilitation, Durable medical equipment, and Mental health and substance abuse, among other services. There are three plans: Brown, Gold and Catastrophic. Lifetime maximum benefit for each of the Brown and Catastrophic Plan is $750,000, while Gold Plan's is $1 million. **PCIP:** Covers broad range of benefits, including primary and specialty care, hospital care, and prescription drugs. ***Pre-Existing Health Conditions Covered***	Services include but are not limited to Inpatient and outpatient hospital care, Nursing home care, Physician services, Laboratory and x-ray services, Immunizations and other Early and periodic screening, diagnostic, and treatment (EPSDT) services for children, Family planning, Health center and rural health clinic services, Nurse midwife and nurse practitioner services. Treatment for special health problems like breast cancer, kidney problems, nursing home needs, and AIDS. ***Pre-Existing Health Conditions Covered***	**KidCare CHIP:** Inpatient and outpatient hospital services, Doctor visits, Laboratory and x-ray services, Well-baby, well-child and well-adolescent care, Immunizations, Prescriptions, Mental health services, Dental services, Medically-necessary orthontics, Vision services, Physical therapy, and other Health benefits. **WIC:** Nutrition education and services, breastfeeding promotion and education, monthly food prescription of nutritious foods, and maternal, prenatal and pediatric health-care services. ***Pre-Existing Health Conditions Covered***	Services include care coordination, specialty medical care, some equipment and medications, lab and x-rays related to diagnostics, support services, and diagnostic evaluations. There is an annual coverage limit of up to $40,000. ***Pre-Existing Health Conditions Covered***	Office visits, Pelvic exams, Pap tests, Clinical breast exams, Mammograms, Certain breast & cervical lab tests, Certain diagnostic tests ***Pre-Existing Health Conditions Covered***	Financial assistance for eligible women, Pregnancy counseling and teaching, Eeferrals to appropriate resources in the community, Education about pregnancy, Smoking-cessation assistance and referral, Prenatal class/support group, parenting classes for parents of newborns, Home visits for moms and babies, and breastfeeding support. ***Pre-Existing Health Conditions Covered***	The Billings Area Indian Health Service (IHS) provides comprehensive health services for American Indians in Montana and Wyoming. The Billings Area clinical staff consists of approximately 54 physicians, 179 nurses, 29 dentists, and 33 pharmacists delivering health care through 3 IHS hospitals, 9 health centers, 6 heath stations and numerous health locations. ***Pre-Existing Health Conditions Covered***
Eligibility	**GUARANTEED COVERAGE** Company size 2–50 employees. Owner can count as an employee. Owner name on business license must draw wages from the company. Eligible employees must work at least 30 hours a week. They do not include part-time, temporary, seasonal or substitute employees.	**GUARANTEED COVERAGE** **COBRA:** Available for employees who work for employers with 20 or more employees. You have 60 days from date of termination to sign up for COBRA coverage. **Mini-COBRA:** Available for employees who work for employers with less than 20 employees. Must have had group insurance 3 continuous months prior to termination. You have 31 days from date of termination to sign up for coverage. **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.	Eligibility is subject to medical underwriting. If you are denied coverage for a medical condition, you may be eligible for WHIP or PCIP. See next column.	**GUARANTEED COVERAGE** **WHIP:** Must be a Wyoming resident, denied insurance for health reasons, has health insurance coverage more restrictive or expensive (premium is higher by 12.5%) than WHIP's, or be under 65 and on Medicare disability. Must have exhausted COBRA, be uninsured, and ineligible for group plans. There are levels of eligibility based on income: Applicants earning or above 250% FPL will be on Level 1, while those earning under 250% FPL will be on Level 2. **PCIP:** Must have been uninsured for at least 6 months prior to applying. Must prove being a U.S. citizen or legal U.S. resident, a Wyoming resident, and having problems getting insurance due to a pre-existing condition.	**GUARANTEED COVERAGE** Must be a Wyoming resident and a U.S. citizen or legal alien who has lived in the U.S. for at least 5 years. Income limits for the following: Pregnant women: 133% FPL. Children ages 0–5: 133% FPL. Children ages 6 –18: 100% FPL. Children in foster care: 133% FPL for ages 0–5; 100% FPL for ages 6–18; children through 20 years old will still be covered if income limit is greater. Parents/caretakers living with children ages 0–18: $362/month for household of one, $512 for two, $590 for three, $659 for four. Aged, blind, and disabled: 75% FPL and with asset limit of $2,000 for singles; 83% FPL and with asset limit of $3,000 for couples. Individuals living in nursing homes or need inpatient hospital care: $2,022/month, with asset limit of $2,000 for singles and $3,000 for couples. $109,560 is the resource limit for couples if only one member of the couple is applying.	**GUARANTEED COVERAGE** **KidCare CHIP:** Must be Wyoming residents and U.S. citizens or legal aliens who have lived in the U.S. for at least 5 years. Must be children 0–18 years old with family incomes of up to 200% FPL. Must not be in a public institution, not a dependent of employees of the state of Wyoming, not eligible for Medicaid, and must have no insurance for 30 days prior to applying, unless insurance was involuntarily canceled. **WIC:** Must reside in Wyoming, be a pregnant or recently pregnant woman, infant or child up to age 5, and determined to be at nutritional risk. Income limit of 185% FPL.	**GUARANTEED COVERAGE** Must be a Wyoming resident under 19 years of age and suspected or known to have one of the medically eligible conditions, i.e. chronic illness or disability. Enrollee may also have insurance, KidCare CHIP, or Medicaid. Must have income at or below 200% FPL.	**GUARANTEED COVERAGE** Must be women living in Wyoming with incomes at or below 250% FPL, and must not have insurance coverage, including Medicaid. Must be 50–64 years old. Women ages 30–64 may be eligible if they did not take Pap tests in past 5 years. Women ages 18–50 may be eligible if they have abnormal results from breast or cervical exams.	**GUARANTEED COVERAGE** Eligibility requirements vary from county to county. Be sure to call your local office.	**GUARANTEED COVERAGE** Must exhaust all private, state, and other federal programs. Must be regarded by the local community as an Indian; is a member of an Indian or Group under Federal supervision; resides on tax-exempt land or owns restricted property; actively participates in tribal affairs; any other reasonable factor indicative of Indian descent; is a non-Indian woman pregnant with an eligible Indian's child for the duration of her pregnancy through post-partum (usually 6 weeks); is a non-Indian member of an eligible Indian's household and the medical officer in charge determines that services are necessary to control a public health hazard or an acute infectious disease which constitutes a public health hazard.
Monthly Cost	Costs depend on employer contribution and ± 35% of the insurance company's index rate.	**COBRA/Mini-COBRA:** Premiums range from 102%–150% of group health rates. **HIPAA:** Premiums will depend on plan chosen.	Costs for individual coverage vary. There are no rate caps.	**WHIP:** Monthly premiums range from $170.90 to $2,152.40 depending on age, income, and plan chosen **PCIP:** Monthly premiums range from $126 to $542 depending on your age and plan chosen.	**$0** or minimal share of cost.	**KidCare CHIP:** **$0–$25** for medical and dental co-payments. No charges to American Indians as long as KidCare CHIP has a copy of Certificate of Indian Blood. **WIC:** **$0** or minimal share of cost.	**$0** or sliding scale share of cost.	**$0** or minimal share of cost.	**$0**	**$0** or minimal share of cost.

Other Programs & Resources

Medicare
(Age 65 and up)
800-633-4227
www.medicare.gov

Medicare Prescription Drug Program
800-633-4227

Health Coverage Tax Credit
866-628-4282
www.irs.gov
(Search: HCTC)

VA Medical Benefits Package
877-222-8387
www.va.gov

Partnership for Prescription Assistance
888-477-2669
www.pparx.org

Wyoming Seniors
307-856-6880
www.wyomingseniors.com

Wyoming State Health Insurance Assistance Program
(Advice Line)
800-856-4398
307-856-6880

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.

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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)

Wyoming Department of Health
307-777-7656
866-571-0944
wdh.state.wy.us

(State program information)

LAWS & REGULATIONS

Wyoming Insurance Department
307 777-7401
800-438-5768
insurance.state.wy.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

National Association of Health Underwriters
703-276-0220
www.nahu.org

(National organization of insurance brokers)

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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WYOMING

Health Coverage Options Matrix

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

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