

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 & Adults	Children in Moderate Income Families	Women	Pregnant Women & Children	Native American Indians	Seniors & Disabled
Program	<p><b>U.S. Uninsured Help Line</b> 800-234-1317</p> <p><b>Group Plans</b> National Association of Health Underwriters 703-276-0220 www.nahu.org</p> <p>Health Care Group of Arizona (HCG) www.hcgaz.com 602-417-6755</p>	<p><b>COBRA</b> Then convert to a plan under:</p> <p><b>HIPAA</b> Health Insurance Portability &amp; Accountability Act 866-487-2365 www.dol.gov</p>	<p><b>U.S. Uninsured Help Line</b> 800-234-1317</p> <p><b>Individual Plans</b> National Association of Health Underwriters 703-276-0220 www.nahu.org</p>	<p><b>Medical Expense Deduction (MED) Program</b> Run by the Arizona Health Care Cost Containment System (AHCCCS) 602-417-4000 800-352-8401 www.ahcccs.state.az.us (Search: Medical Expense Deduction Program)</p> <p><b>Pre-Existing Condition Insurance Plan (PCIP)</b> Run by the U.S. Department of Health and Human Services 866-717-5826 www.PCIP.gov</p>	<p><b>AHCCCS</b> Arizona Health Care Cost Containment System (Arizona's Medicaid) 602-417-4000 800-654-8713 www.ahcccs.state.az.us</p>	<p><b>KidsCare</b> 877-764-5437 602-417-5437 www.kidscare.state.az.us</p> <p>(An enrollment cap is in place for KidsCare due to a lack of funding. Individuals and families can still apply and be placed on a waiting list, and they will be contacted when funding becomes available.)</p>	<p><b>Well Woman Health Check Program</b> Run by the Arizona Department of Health Services 888-257-8502 www.wellwomanhealthcheck.org</p>	<p><b>Baby Arizona</b> 800-833-4642 www.babyarizona.gov</p>	<p><b>Indian Health Services (IHS)</b></p> <p><b>Navajo</b> 928-871-4811 www.ihs.gov/Navajo</p> <p><b>Phoenix Area</b> 602-364-5179 www.ihs.gov/Phoenix</p> <p><b>Tucson Area</b> 520-295-2405 www.ihs.gov/Tucson</p>	<p><b>Medicare</b> 800-633-4227 www.medicare.gov</p> <p><b>Medicare Prescription Drug Program</b> 800-633-4227</p>
Coverage	<p>There is a 6-month look-back/12-month exclusionary period for pre-existing conditions on enrollees that do not have prior coverage.</p> <p>Benefits will vary depending on the chosen plan.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p><b>COBRA:</b> Coverage available for 18–36 months depending on qualifying events. Benefits are what you had with your previous employer.</p> <p><b>HIPAA:</b> Benefits are based on program selected. 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 are no limits to the look-back and exclusion periods on pre-existing conditions.</p> <p>Elimination riders are allowed.</p> <p><i>Limits on Pre-Existing Health Conditions May Apply</i></p>	<p><b>MED:</b> Provides medical coverage for individuals who do not qualify for other AHCCCS programs due to income. May be eligible if they have medical expenses in the month of application (or the previous month) that reduce their monthly income to 40% FPL.</p> <p><b>PCIP:</b> Covers broad range of benefits, including primary and specialty care, hospital care, and prescription drugs.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Some benefits include Preventive care, Doctor's visits, Hospital services, Lab and x-rays, Emergency care, Family planning, Dialysis, Surgery, Behavioral health services, Podiatry, pregnancy, immunizations, physical exams, annual well-woman exams, specialist care, Prescription drugs for non-Medicare recipients. Children under 21 also receive dental, vision, hearing services, and Early and Periodic Screening Diagnosis and Treatment (EPSDT).</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>A wide array of medical services including behavioral health services.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Cancer screening for women such as clinical breast exams, mammograms, pelvic exams and Pap smear tests.</p> <p>Provides financial help to women who are diagnosed with breast cancer through the program and are unable to qualify for other assistance or to pay for treatment on their own.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Gives prenatal care to pregnant women while they wait to see if they are eligible for AHCCCS Health Insurance. Staff will put the woman in touch with a doctor in her area that will help her apply for AHCCCS Health Insurance.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Available programs vary depending on health center and may include primary and child care, prenatal and post delivery care, family planning (birth control), minor surgical and orthopedic care, pharmacy, dental and orthodontics, optometry, nursing, mental health, laboratory and radiology.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p><b>Medicare</b> 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 C includes Parts A, B, and D not covered by Medicare. Part D covers prescription drugs.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>
Eligibility	<p><b>GUARANTEED COVERAGE</b></p> <p>Company size 2–50 employees.</p> <p>Eligible employees must work at least 20 hours a week.</p> <p>Owner can count as an employee.</p> <p>Owner name on business license must draw wages from the company.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>COBRA:</b> 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><b>HIPAA:</b> 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>Eligibility is subject to medical underwriting.</p> <p>If you are denied coverage for a medical condition, you may be eligible for the Medical Expense Deduction (MED) program run by the AHCCCS, or PCIP. To learn more, see next column.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>MED:</b> Must be an Arizona resident. Must not be eligible for other AHCCCS programs. Monthly income cannot exceed \$735 for a family of four, after deducting medical expenses, childcare, and each person employed. Resources cannot exceed \$100K. Only \$5K may be liquid assets: cash, bank accounts, stocks, bonds, etc. Home equity is counted toward the resource limit, but one vehicle is not counted.</p> <p><b>PCIP:</b> Must have been uninsured for at least 6 months prior to applying. Must prove being a U.S. citizen or legal U.S. resident, an Arizona resident, and having problems getting insurance due to a pre-existing condition.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Must be an Arizona resident and a U.S. citizen or permanent resident.</p> <p>Income limits:</p> <p>Children ages 0–5: Family income up to 133% FPL.</p> <p>Children ages 6–19: Family income up to 100% FPL.</p> <p>Pregnant women: Up to 200% FPL.</p> <p>Childless adults: Up to 100% FPL.</p> <p>Parents/caretakers living with their children ages 0–18: Up to 100% FPL.</p> <p>Aged, blind, and disabled: Up to 100% FPL.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Must be an Arizona resident and U.S. citizen or a qualified immigrant, under age 19, with income at or below 200% FPL, be ineligible for no-cost Medicaid or employer-based coverage, with no health insurance for the last 3 months at time of application. Parents with incomes of 200% FPL can also qualify.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Must be a woman with income at or below 250% FPL. Must have no insurance, or have insurance that does not cover preventive services or that has a high deductible (as determined by the program).</p> <p>For breast cancer screening, patient must be at least 40 years old or any age with qualifying symptoms.</p> <p>For cervical cancer screening, patient must be at least 18 years old.</p> <p>Women screened by the Well Woman HealthCheck Program that are under age 65, who are legal residents of the U.S. and do not have credible coverage may qualify for treatment through AHCCCS.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Must be an Arizona resident and U.S. citizen or qualified non-citizen.</p> <p>For pregnant women, the income limit is 150% FPL.</p> <p>If the mother ends up NOT qualified for AHCCCS due to income, then it's possible to get coverage from KidsCare (see "Children in Moderate Income Families" column).</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Must exhaust all private, state, and other federal programs.</p> <p>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.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Must be U.S. citizen or permanent U.S. resident, and:</p> <p>1) If 65 years or older, you or your spouse worked for at least 10 years in Medicare-covered employment, or</p> <p>2) You have a disability or end-stage renal disease (permanent kidney failure requiring dialysis or transplant) at any age.</p>
Monthly Cost	<p>Costs depend on employer contribution and ± 60% of the insurance company's index rate based on the health status of the group.</p>	<p><b>COBRA:</b> Premiums range from 102%–150% of group health rates.</p> <p><b>HIPAA:</b> Premiums will depend on plan chosen.</p>	<p>Costs for individual coverage vary. There are no rate caps.</p>	<p><b>MED:</b> \$0 or minimal share of cost.</p> <p><b>PCIP:</b> Monthly premium of \$104 to \$450 depending on your age and plan chosen.</p>	<p><b>\$0–\$5</b> co-pay for office visits.</p> <p><b>\$30</b> for non-emergency visits to ER.</p>	<p><b>\$10 to \$50</b> a month for one child or \$15–\$70 a month for two or more children.</p>	<p><b>\$0</b> or minimal share of cost.</p>	<p><b>\$0</b> when women begin prenatal care while eligibility is processed. If found ineligible, then coverage can be found from KidsCare (see "Children in Moderate Income Families" column).</p>	<p><b>\$0</b> or minimal share of cost.</p>	<p><b>\$0</b> 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>

**Other Programs & Resources**

**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

**Women-Infant-Children (WIC)**  
800-252-5942  
www.azwic.gov

**Federal Emergency Services (FES)**  
(for people who cannot verify Citizenship or immigration)  
800-352-8401  
www.ahcccs.state.az.us

**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	\$227	\$454	\$681	\$735	\$908	\$1,207	\$1,588	\$1,815	\$2,269	\$2,723
2	\$306	\$613	\$919	\$993	\$1,226	\$1,630	\$2,145	\$2,452	\$3,065	\$3,678
3	\$386	\$772	\$1,158	\$1,251	\$1,544	\$2,054	\$2,702	\$3,088	\$3,860	\$4,633
4	\$466	\$931	\$1,397	\$1,509	\$1,863	\$2,477	\$3,259	\$3,725	\$4,656	\$5,588
5	\$545	\$1,090	\$1,636	\$1,766	\$2,181	\$2,901	\$3,816	\$4,362	\$5,452	\$6,543
6	\$625	\$1,250	\$1,874	\$2,024	\$2,499	\$3,324	\$4,374	\$4,998	\$6,248	\$7,498
7	\$704	\$1,409	\$2,113	\$2,282	\$2,818	\$3,747	\$4,931	\$5,635	\$7,044	\$8,453
8	\$784	\$1,568	\$2,352	\$2,540	\$3,136	\$4,171	\$5,488	\$6,272	\$7,840	\$9,048

- A pregnant woman counts as two for the purpose of this chart.
- Add \$318/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. 76, No. 13, January 20, 2011, pp. 3637-3638. Valid through 2011 unless updated.  
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 & Free or Low-Cost Benefits

**Government Benefits Finder**  
800-333-4636  
[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

**Health Resources and Services Administration**  
888-275-4772  
[www.findahealthcenter.hrsa.gov](http://www.findahealthcenter.hrsa.gov)

**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)

**Arizona Department of Economic Security**  
800-352-8401  
[www.azdes.gov](http://www.azdes.gov)

(State program information)

### Laws & Regulations

**Arizona Department of Insurance**  
800-325-2548  
[www.id.state.az.us](http://www.id.state.az.us)

(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**  
703-276-0220  
[www.nahu.org](http://www.nahu.org)

(National organization of insurance brokers)

## ARIZONA

# 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.