

Demographic	PRIVATE HEALTH INSURANCE			PUBLICLY SPONSORED PROGRAMS						
	Small businesses (1-50 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 and Disabled	Trade Dislocated Workers (TAA recipients)	Veterans
Program	<p>U.S. Uninsured Help Line 800-234-1317</p> <p>Group Health Florida Association of Health Underwriters www.fahu.org</p>	<p>COBRA and Mini-COBRA</p> <p>And 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 Florida Association of Health Underwriters www.fahu.org</p>	<p>Cover Florida 877-872-6580 www.coverfloridahealthcare.com</p>	<p>Medicaid 850-488-3560 www.fdhc.state.fl.us/Medicaid</p>	<p>Florida KidCare MediKids, Healthy Kids, Children's Medical Services and Medicaid 888-540-5437 877-316-8748 TTD www.floridakidcare.org</p>	<p>Breast and Cervical Cancer Prevention 800-227-2345 www.doh.state.fl.us/Family/bcc</p> <p>(Pregnant women see Medicaid)</p>	<p>Medicare 800-952-5253 800-MEDICARE www.medicare.gov</p> <p>Medicare Prescription Drug Program 800-633-4227</p>	<p>Health Coverage Tax Credit 866-628-HCTC www.irs.gov (key word HCTC)</p>	<p>VA Medical Benefits Package 877-222-8387 www.va.gov</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><i>Pre-Existing Health Conditions Covered</i></p>	<p>Cobra Subsidy: 9 months of partially subsidized COBRA premium</p> <p>COBRA /Mini-COBRA coverage is available for up to 18 months depending on qualifying events</p> <p>COBRA benefits are the same as what you had in your group coverage</p> <p>After COBRA expires, HIPAA individual plan conversion benefits are based on the program selected, no expiration</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Assorted plans depending on medical needs</p> <p>There is a 24-month look-back and exclusionary period limit for pre-existing conditions in traditional individual market health insurance products in Florida</p> <p>Pre-existing conditions may not be considered for HIPAA-eligible population</p> <p>Limits on pre-existing health conditions may apply</p>	<p>Six carriers have designed 25 creative health insurance products. Each carrier offers at least two benefit options – one with catastrophic and hospital coverage, and one without. Benefits include preventive services, screenings, office visits, as well as office surgery, urgent care, hospital coverage, emergency care, prescription drugs, durable medical equipment, and diabetic supplies.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Among some of the services: ambulatory surgical center birth center services, child health check up chiropractic care, durable medical equipment and supplies, federally qualified health centers, home health hospital inpatient/outpatient care, laboratory, licensed midwives, physician, podiatry prescriptions, rural health clinics, therapy, X-rays</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Comprehensive health insurance coverage</p> <p>Benefits vary based on the segment of the program in which a child participates—MediKids, Healthy Kids, or the Children's Medical Services (CMS) Network for children with special health care needs</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Breast and cervical cancer screening exams (mammograms, pap smears and clinical breast exams) are provided as necessary case management is provided to all clients</p> <p>Outreach, public education and professional education is provided</p> <p>Treatment for eligible women may be paid by Medicaid</p>	<p>Medicare offers two standard plans, A: Hospital Insurance and B: Medical Insurance, as well as several supplemental and advantage plans</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Will cover 80% of your COBRA if employer contributes less than 50% (or spouses' employer)</p> <p>Will cover individual insurance in which you were enrolled for last 30 days before TAA benefits</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 1-50 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>Groups of one have open enrollment during limited times during the year</p>	<p>GUARANTEED COVERAGE</p> <p>Cobra Subsidy: 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.</p> <p>All coverage terminated within the last 60 days (COBRA), or 63 days (HIPAA) for reasons other than gross misconduct or fraud</p> <p>For HIPAA, recently covered by a group program or a COBRA plan for 18 continuous months (COBRA option must have been selected if available and exhausted)</p> <p>For HIPAA you cannot be eligible for Medicare or other public or group insurance programs</p> <p>Mini-COBRA for companies 2-19 employees</p>	<p>Eligibility is subject to medical underwriting</p> <p>If you are denied coverage for a medical condition, you may be eligible for FCHA, see next column</p>	<p>GUARANTEED COVERAGE</p> <p>Ages 19 to 64 who have been without health insurance for at least six months – even if there are pre-existing health conditions. May also qualify if you lost your job that provided employer-sponsored health benefits, lost of benefits under COBRA; death of, or divorce from, a spouse who has provided employer-sponsored health benefits.</p>	<p>GUARANTEED COVERAGE</p> <p>Pregnant Women: 185% FPL</p> <p>Children (Ages 0-1): 200% FPL Children (ages 1-5): 133% FPL Children (ages 6-19): 100% FPL</p> <p>Aged, Blind and Disabled: 90% FPL Supplemental Security Income Recipients: 74% FPL</p> <p>Working Parents: 62% FPL Non-Working Parents: 23% FPL</p> <p>Medically Needy: 25% FPL, there is an asset limit \$5,000+ depending on family size</p> <p>No asset or resource requirements for children or pregnant mothers</p> <p>Florida resident</p>	<p>GUARANTEED COVERAGE</p> <p>Under age 19 and uninsured</p> <p>Have an income at or below 200% of the FPL</p> <p>Be a U.S. citizen or qualified non-citizen</p> <p>Not be the dependent of a state employee eligible for health insurance and not in a public institution</p>	<p>GUARANTEED COVERAGE</p> <p>Uninsured and underinsured women 50 to 64 years of age, at or below 200% of FPL</p>	<p>GUARANTEED COVERAGE</p> <p>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>	<p>GUARANTEED COVERAGE</p> <p>Must be receiving TAA (Trade Adjustment Assistance)</p> <p>Must not have access to employer plan that pays 50% of coverage cost</p> <p>Not enrolled in certain state plans</p> <p>Age 55 and older</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 and ± 15% of the Modified Community Rate</p>	<p>Cobra Subsidy: 35% of monthly premium</p> <p>Costs depend on previous employer contribution plus a 2% administrative fee; HIPAA could be higher</p> <p>Individual coverage is also available and may be less expensive, see next column</p>	<p>Costs for individual coverage varies</p>	<p>Premiums vary depending on the applicant's age, gender and chosen benefit options.</p>	<p>\$0 or \$1-3 co-pays, and coinsurance is limited to 5% up to \$300 for each visit to the Emergency Room</p> <p>No cost for pregnant women, children and certain others</p>	<p>Premium is based on household size and monthly income. Most families pay either \$15 or \$20 per family per month; some families may pay more. There may be co-payments required based on the service provided</p>	<p>\$0 or minimal share-of-cost</p>	<p>\$0 and share of cost for certain services; deductibles for certain plans</p>	<p>20% of the insurance premium</p>	<p>\$0 and share of cost and co-pays depending on income level</p>

Other programs & resources

Women-Infant-Children (WIC)
800-342-3556
http://www.doh.state.fl.us/family/wic/

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

Florida Alzheimer Disease Initiative
850-414-2000

Florida AIDS Insurance Continuation Program
305-592-1452
www.doh.state.fl.us

Florida Epilepsy Services
850-414-2000

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.

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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

Bureau of Primary Health Care
888-ASK-HRSA
www.ask.hrsa.gov/pc

(Search tool by zip code)

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)

Florida Health and Human Services
www.dcf.state.fl.us/ess

(State program information)

Laws and regulations

Florida Office of Insurance Regulation
800-342-2762
www.floir.com

(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

Florida Association of Health Underwriters
www.fahu.org

(State organization of insurance brokers)

FLORIDA

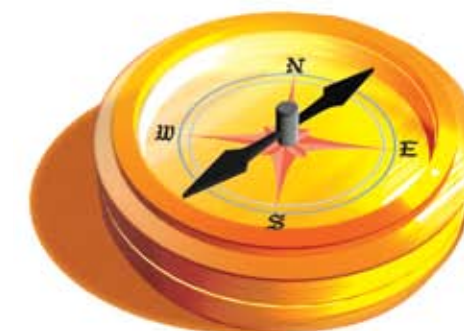
Health Care Options Matrix™



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.