

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 & Individuals	Individuals & Families with Moderate Income	Children in Moderate Income Families	Immigrants Awaiting Legal Status	Native American Indians	Trade Dislocated Workers (TAA Recipients)
Program	<p>U.S. Uninsured Help Line 800-234-1317</p> <p>Group Plans Iowa Association of Health Underwriters www.eiahu.org</p>	<p>COBRA/Mini-COBRA 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 888-346-9562</p>	<p>U.S. Uninsured Help Line 800-234-1317</p> <p>Individual Plans Iowa Association of Health Underwriters www.eiahu.org</p>	<p>Health Insurance Plan of Iowa (HIPOWA) 877-793-6880 www.hiowa.com</p> <p>HIPOWA-FED Federal program run by the Iowa Comprehensive Health Association 877-505-0513 hiowafed.com www.PCIP.gov</p>	<p>Medicaid 515-281-6899 www.ime.state.ia.us/Members</p> <p>Medicaid for Employed People with Disabilities (MEPD) www.ime.state.ia.us (Search: MEPD)</p> <p>Both: 800-338-8366, 800-972-2017</p> <p>Or contact local county Department of Human Services.</p>	<p>IowaCare 800-338-8366 515-256-4606 www.ime.state.ia.us (Search: IowaCare)</p> <p>Or contact local county Department of Human Services.</p>	<p>Healthy and Well Kids in Iowa (Hawk-i) 800-257-8563 TDD: 888-422-2319 www.hawk-i.org</p>	<p>Emergency Medicaid 800-338-8366 www.ime.state.ia.us/Members</p> <p>Or contact local county Department of Human Services.</p>	<p>Indian Health Services 605-226-7582 www.ihs.gov (Search: Aberdeen)</p>	<p>Health Coverage Tax Credit 866-628-4282 www.irs.gov (Search: HCTC)</p>
Coverage	<p>Up to \$5M lifetime maximum, assorted deductibles.</p> <p>There is a maximum look-back period of 6 months and a maximum exclusion period of 12 months for pre-existing conditions on enrollees with no prior coverage or whose coverage had a break of more than 63 days.</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 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>Up to \$5M lifetime maximum, assorted deductibles.</p> <p>Elimination riders are permitted.</p> <p>There is a 12-month look-back and exclusionary period limit on pre-existing health conditions for standardized guarantee issue policies.</p> <p>For all other individual policies, there is a maximum 60-month look-back and a maximum 12-month exclusionary period limit on pre-existing health conditions.</p> <p><i>Limits on Pre-Existing Health Conditions May Apply</i></p>	<p>HIPOWA: Offers five comprehensive preferred provider plans each with a pharmacy benefit to choose from and a Medicare carveout plan. Will not pay for any pre-existing injury or sickness for the first six months of coverage.</p> <p>HIPOWA-FED: Covers broad range of benefits, including primary and specialty care, hospital care, and prescription drugs.</p> <p><i>Pre-Existing Health Conditions Covered with Some Limitations</i></p>	<p>All: Inpatient and outpatient hospital services, physician services, medical and surgical dental services, nursing facility services for persons aged 21+, family planning services, nurse/midwife services, chiropractors, podiatrists, optometrists, psychologists, dental services, physical therapy, therapies for speech hearing and language disorders, occupational therapy, prescribed drugs, prosthetic devices, vision, mental health, hospice care and more.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Inpatient and outpatient hospital, physician or advanced registered nurse practitioner, and dental services.</p> <p>Polk County residents may receive services at either Broadlawns Hospital or University Hospitals in Iowa City. Residents in other counties must receive services at University Hospitals in Iowa City. The state's four mental health institutes will offer mental health services.</p> <p>Unlike Medicaid, IowaCare is not an entitlement, meaning that it depends on specific appropriations.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Qualified children receive services through a health plan participating in the program: doctor visits, outpatient hospital services, vaccines and shots (immunizations) emergency care, inpatient hospital services, prescriptions, vision, dental, hospice, speech and physical therapy, nursing care services, chiropractic care mental health/substance abuse. Beginning 3/1/2010, dental-only coverage for children who have health insurance but may not have dental coverage will be available.</p> <p>Each county has one or more health plans.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Up to 3 days of Medicaid is available to pay for the cost of emergency services for aliens who do not meet citizenship, alien status, or social security number requirements. The emergency services must be provided in a facility such as a hospital, clinic, or office that can provide the required care after the emergency medical condition has occurred.</p>	<p>The Aberdeen Area Office in Aberdeen, South Dakota, works together with its 13 Service Units to provide health care to approximately 94,000 Indians on reservations located in North Dakota, South Dakota, Nebraska, and Iowa. The Area Office's service units include nine hospitals, eight health centers, two school health stations, and several smaller health stations and satellite clinics.</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>Can use credit to purchase plan through HIPOWA.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>
Eligibility	<p>GUARANTEED COVERAGE</p> <p>Company size 2–50 employees.</p> <p>Owner can count as an employee.</p> <p>Proprietor name on license must draw wages.</p> <p>Eligible employees must work at least 30 hours a week.</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 businesses with less than 20 employees. Must have had group coverage for at least 3 continuous months before date of termination. Must elect coverage within 31 days of termination.</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.</p>	<p>Eligibility is based on medical underwriting.</p> <p>Must be resident of state or documented immigrant.</p> <p>If you are denied coverage for a medical condition, you may be eligible for HIPOWA or PCIP. See next column.</p>	<p>GUARANTEED COVERAGE</p> <p>HIPOWA: 1) Must live in Iowa and prove residency of at least 60 days in Iowa, denial of insurance coverage in the last 9 months due to qualified pre-existing conditions, or offer of insurance with substantially reduced benefits (e.g. elimination riders) or premiums higher than that of HIPOWA's, or loss of health insurance not due to non-payment of premium. Or 2) if living in Iowa (not required to prove length of residency), can be qualified if one is a beneficiary of Trade Adjustment Assistance, HIPAA-eligible, or current holder of Basic and Standard Policy.</p> <p>HIPOWA-FED: 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 Iowa resident, and having problems getting insurance due to a pre-existing condition.</p>	<p>GUARANTEED COVERAGE</p> <p>All: Must be a U.S. citizen or legal alien and resident of Iowa.</p> <p>Medicaid: Pregnant women: 300% FPL. Parents/caretakers living with children ages 0–18: 83% FPL. Children ages 0–5: 133% FPL. Children ages 6–19: 100% FPL. Aged, blind, and disabled: Singles earning 75% FPL with asset limit \$2,000, and couples earning 83% FPL with asset limit of \$3,000.</p> <p>MEPD: Must be disabled (as determined by Department of Human Services), be under 65 years old, employed or self-employed, with income limit of 250% FPL and asset limits of \$12,000 for singles and \$13,000 for couples.</p>	<p>GUARANTEED COVERAGE</p> <p>Must be Iowa adults ages 19–64 with income limit of 200% FPL, not be eligible for Medicaid, and be uninsured.</p> <p>Also eligible:</p> <p>Pregnant women with incomes at or below 300% FPL, if their medical costs can bring their monthly incomes to 200% FPL.</p> <p>Patients who do not meet the 200% FPL test but who receive State Papers services for chronic health problems are also eligible.</p> <p>One can apply for a part of a household even if some members do not have legal immigrant status. Proof of immigration status is required for non-U.S. citizens.</p>	<p>GUARANTEED COVERAGE</p> <p>Must be a U.S. citizen or a qualified alien and live in Iowa, be under 19 years old, with an income up to 300% FPL.</p> <p>Must have no other health insurance. Must not be a dependent of a State of Iowa employee.</p> <p>Children who qualify for Medicaid cannot get Hawk-i.</p>	<p>GUARANTEED COVERAGE</p> <p>U.S. citizenship not required.</p> <p>Income limits:</p> <p>Pregnant women: 300% FPL.</p> <p>Parents/caretakers living with children ages 0–18: 83% FPL.</p> <p>Children ages 0–5: 133% FPL.</p> <p>Children ages 6–19: 100% FPL.</p> <p>Aged, blind, and disabled: Singles earning 75% FPL with asset limit \$2,000, and couples earning 83% FPL with asset limit of \$3,000.</p>	<p>GUARANTEED COVERAGE</p> <p>Must exhaust all private, state, and other federal programs.</p> <p>Must be regarded by the local community as an Indian or Alaska Native; is a member of an Indian or Alaska Native Tribe 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>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>
Monthly Cost	<p>Costs depend on employer contribution and ± 25% of the insurance company's index 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.</p>	<p>HIPOWA: Monthly premiums range from \$55.32–\$1,257.26 depending on age, gender, tobacco use, and plan chosen.</p> <p>HIPOWA-FED: Monthly premiums range from \$155.62 to \$765.61 depending on your age and tobacco use.</p>	<p>Medicaid: \$0 or minimal share of cost.</p> <p>MEPD: \$0 unless income is above 150% FPL. Otherwise, premiums range from \$34 to \$660 based on income.</p>	<p>\$0–\$75 for those earning 150% FPL or less. Otherwise premiums for:</p> <p>1 member: \$47 to \$60. 2+ members: \$63 to \$80 for each member.</p>	<p>\$0 or minimal share of cost depending on your income. Maximum payment of \$40. No cost for Native Americans.</p>	<p>\$0 or minimal share of cost.</p>	<p>\$0 or minimal share of cost.</p>	<p>20% of the insurance premium including COBRA premium if employer contributes less than 50%.</p>

Other Programs & Resources

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

Medicare Prescription Drug Program
800-633-4227

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

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

Women-Infant-Children (WIC)
800-532-1579
www.idph.state.ia.us/wic

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	\$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.

© Copyright 2011 by Philip Lebherz and the Foundation for Health Coverage Education®.

All rights reserved. Printed in the U.S.A.

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)

Iowa Department of Human Services
www.dhs.state.ia.us

(State program information)

Laws & Regulations

Iowa Insurance Division
800-325-2548
515-281-5705
www.iid.state.ia.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

Iowa Association of Health Underwriters
www.eiahu.org

(State organization of insurance brokers)

IOWA

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.