

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 in Moderate Income Families	Pregnant Women & Infants	Women	Seniors & Disabled	Trade Dislocated Workers (TAA Recipients)
Program	<p><b>U.S. Uninsured Help Line</b> 800-234-1317</p> <p><b>Group Plans</b> North Carolina Association of Health Underwriters www.ncahu.org</p>	<p><b>COBRA/Mini-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>HIPP</b> Health Insurance Premium Payment 1-855-696-2447 www.mynchipp.com</p>	<p><b>U.S. Uninsured Help Line</b> 800-234-1317</p> <p><b>Individual Plans</b> North Carolina Association of Health Underwriters www.ncahu.org</p>	<p><b>Inclusive Health</b> North Carolina Health Insurance Risk Pool 866-665-2117 www.inclusivehealth.org</p> <p><b>Inclusive Health-Federal Option</b> Federal program run by North Carolina Health Insurance Risk Pool 866-665-2117 www.inclusivehealth.org www.PCIP.gov</p>	<p><b>Medicaid</b> 800-662-7030 919-855-4400 (for Wake County) TTY: 919-733-4851 www.ncdhhs.gov/dma/medicaid</p>	<p><b>North Carolina's Health Choice</b> 800-662-7030 919-855-4440 (for Wake County) www.ncdhhs.gov/dma/healthchoice</p> <p><b>Women-Infant-Children (WIC)</b> 919-707-5800 www.nutritionnc.com/wic</p>	<p><b>Medicaid for Pregnant Women</b> 919-707-5700 TTD: 877-452-2514 www.dhhs.state.nc.us/dma/medicaid</p> <p><b>Baby Love</b> 919-855-4260 www.ncdhhs.gov/dma/services/babylove.htm</p> <p><b>CARE-LINE</b> Run by: DHHS Customer Service Center 800-662-7030 TTY: 1-877-452-2514</p>	<p><b>Breast &amp; Cervical Cancer Control Program</b> (919) 707-5300 bcccp.ncdhhs.gov</p> <p><b>WISEWOMAN</b> (919) 707-5300 bcccp.ncdhhs.gov/wisewoman.htm</p>	<p><b>Medicare</b> 800-633-4227 www.medicare.gov</p> <p><b>Medicare Prescription Drug Program</b> 800-633-4227</p> <p><b>Senior Insurance Counseling (SHIIP)</b> 919-807-6900 800-443-9354 www.ncdoi.com/SHIIP</p>	<p><b>Health Coverage Tax Credit</b> 866-628-4282 www.irs.gov (Search: HCTC)</p>
Coverage	<p>There is a maximum 6-month look-back and a 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><b>Pre-Existing Health Conditions Covered</b></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>Mini-COBRA:</b> Coverage lasts up to 18 months. 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><b>HIPP:</b> Benefits are the same as what you had with your previous employer. HIPP is a premium assistance program.</p> <p><b>Pre-Existing Health Conditions Covered</b></p>	<p>Assorted plans depending on medical needs.</p> <p>There is a maximum 12-month look-back and exclusionary period limit for pre-existing conditions on enrollees that do not have prior creditable coverage.</p> <p><b>Pre-Existing Health Conditions Covered with Some Limitations</b></p>	<p><b>Inclusive Health:</b> Covers a broad range of services, including Preventive care, Urgent care, Outpatient services, a Prescription drug benefit and other common health care services. May have a 6 to 12-month waiting period for pre-existing conditions. Lifetime benefit maximum of \$1,000,000.</p> <p><b>InclusiveHealth-Fed:</b> Covers broad range of benefits, including primary and specialty care, hospital care, and prescription drugs.</p> <p><b>Pre-Existing Health Conditions Covered</b></p>	<p>Doctor visits, Hospital visits, Prescriptions, Dental, Vision, Medicare premiums, Nursing home care, In-home care, Mental health care, Most medically necessary services for children under age 21, Personal care services, Medical equipment, and other home health services.</p> <p><b>Pre-Existing Health Conditions Covered</b></p>	<p><b>NCHC:</b> Physician and clinic services, X-ray &amp; lab, Surgical services, Prescription drugs, Dental, Vision &amp; hearing, Durable medical equipment, Therapies (physical, speech, hearing, occupational) Hospice care, Home health care, Inpatient/outpatient mental health services and substance abuse treatment.</p> <p><b>WIC:</b> Nutrition education and services, breastfeeding promotion and education, monthly food prescription of nutritious foods, and access to maternal, prenatal and pediatric health-care services.</p> <p><b>Pre-Existing Health Conditions Covered</b></p>	<p><b>Medicaid for Pregnant Women:</b> Maternity services only. Prenatal care, delivery and 60 days postpartum care, treating medical conditions which may complicate the pregnancy (approval for some services needed), childbirth and parenting classes, family planning, Maternity Care Coordination services.</p> <p><b>Baby Love:</b> Maternity care coordination, childbirth education classes, counseling and emotional support, medical home visits, and referral to other programs.</p> <p><b>CARE-LINE:</b> Provides information, referral and advocacy services for pregnancy and child care issues.</p> <p><b>Pre-Existing Health Conditions Covered</b></p>	<p><b>BCCP:</b> Clinical breast exams, Screening mammograms, Pap tests, Diagnostic procedures as indicated (diagnostic mammograms, ultrasounds, colposcopies, breast and cervical biopsies), Medical consultations.</p> <p><b>WISEWOMAN:</b> Services include Heart disease risk factor testing, Blood pressure, Cholesterol, Blood sugar, Height and weight (BMI), Lifestyle intervention (classes, counseling, activities), Referrals to health care providers and sources of low cost medications.</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 C not covered by Medicare. Part D covers prescription drugs.</p> <p><b>SHIIP</b> answers questions and counsels Medicare beneficiaries and caregivers about Medicare, Medicare supplements, Medicare Advantage, Medicare prescription drug plans, long-term care insurance and other health insurance concerns.</p> <p><b>Pre-Existing Health Conditions Covered</b></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><b>Pre-Existing Health Conditions Covered</b></p>
Eligibility	<p><b>GUARANTEED COVERAGE</b></p> <p>Company size 1–50 employees (including owner).</p> <p>Owner name on business license must draw wages from the company.</p> <p>Eligible employees must work at least 30 hours a week.</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>Mini-COBRA:</b> Available for employees who work for employers with less than 20 employees. Must have been covered by group policy continuously for 3 months. Must elect coverage within 60 days of termination.</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><b>HIPP:</b> Enrollee must be eligible for Medicaid and have health insurance based on employment or COBRA.</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 Inclusive Health. See next column.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>InclusiveHealth:</b> Must not be eligible for Medicaid, Medicare, or any group insurance. Must be a legal resident of the U.S. and have been a continuous resident of North Carolina for at least 30 days. Must have been denied health insurance due to pre-existing medical reasons, offered coverage by an insurer but with a conditional rider limiting coverage, exhausted 18 months of COBRA, or with higher premiums, or you were diagnosed with a qualifying medical condition. Also qualified to enroll are HIPAA or HCTC-eligibles who do not need to fulfill 30-day North Carolina residency requirement.</p> <p><b>InclusiveHealth-Fed:</b> 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><b>GUARANTEED COVERAGE</b></p> <p>Must be a U.S. citizen or legal permanent resident and live in North Carolina. Income limits for the following:</p> <p>Pregnant women and infants ages 0–1: See “Pregnant Women and Infants”</p> <p>Children ages 1–5: 200% FPL.</p> <p>Children ages 6–18: 100% 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>Parents/Caretakers living with children ages 0–18, and children under age 21: \$362/month for 1 household member; \$472/month for 2; \$544/month for 3; \$594/month for 4; \$648/month for 5. Asset limit of \$3,000.</p> <p>Medically-needy: \$242/month with asset limit of \$2,000 for singles; \$317/month with asset limit of \$3,000 for couples.</p> <p>Working Disabled: 150% FPL and must be ages 16–64 and disabled by Social Security standards. Asset limit of \$21,192.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>NCHC:</b> Income limit of 200% FPL. Must not be eligible for Medicaid or have any other health insurance. Must be under age 19, and be a U.S. citizen or lawful alien and North Carolina resident.</p> <p><b>WIC:</b> Must reside in North Carolina, be a pregnant or recently pregnant woman, or child up to age 5, and have been determined to be at nutritional risk. Income must be at or below 185% FPL.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>Medicaid for Pregnant Women &amp; Baby Love:</b> Must be a resident of North Carolina and a U.S. citizen or legal permanent resident. Income of mother and infant age 0–1 must be at or less than 185% FPL. No asset limit.</p> <p><b>CARE-LINE:</b> No eligibility requirement. Services open to all.</p>	<p><b>BCCP:</b> Must be a woman between ages living in North Carolina. Uninsured or underinsured, without Medicare Part B or Medicaid. Between ages 40–64 for breast screening services and 18–64 for cervical screening services. Must have a household income at or below 250% FPL.</p> <p><b>WISEWOMAN:</b> Women who are enrolled in NC BCCCP and reside in counties that have a participating WISEWOMAN provider are also eligible for WISEWOMAN services.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>Medicare and SHIIP:</b> Must be U.S. citizen or permanent U.S. resident, and:</p> <ol style="list-style-type: none"> <li>1) If 65 years or older, you or your spouse worked for at least 10 years in Medicare-covered employment, or</li> <li>2) You have a disability or end-stage renal disease (permanent kidney failure requiring dialysis or transplant) at any age.</li> </ol>	<p><b>GUARANTEED COVERAGE</b></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 ± 20% of the insurance company's index rate.</p>	<p><b>COBRA/Mini-COBRA:</b> Premiums range from 102%–150% of group health rates.</p> <p><b>HIPAA:</b> Premiums will depend on plan chosen.</p> <p><b>HIPP:</b> \$0 or minimal share of cost.</p>	<p>Costs for individual coverage vary. There are no rate caps.</p>	<p><b>InclusiveHealth:</b> Monthly premiums range from \$85 to \$3,558 depending on age, gender, tobacco use, deductible, and plan chosen.</p> <p><b>InclusiveHealth-Fed:</b> Monthly premiums range from \$71 to \$724 depending on age and region.</p>	<p><b>\$0</b> or minimal share of cost.</p>	<p><b>NCHC: \$0–\$100</b> enrollment fee; <b>\$1–\$25</b> co-pays depending on service.</p> <p><b>WIC: \$0</b> to minimal share of cost.</p>	<p><b>Medicaid for Pregnant Women &amp; Baby Love: \$0</b> or minimal share of cost.</p> <p><b>CARE-LINE: \$0</b> (Toll-Free)</p>	<p><b>Both: \$0</b> or minimal share of cost.</p>	<p><b>Medicare: \$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> <p><b>SHIIP: \$0</b></p>	<p><b>20%</b> of the insurance premium including COBRA premium if employer contributes less than 50%.</p>

**Other Programs & Resources**

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

**Safety Net Dental Services**  
919-707-5480  
www.ncdhhs.gov  
(Search: Safety Net Dental Clinics)

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

**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	\$233	\$465	\$698	\$754	\$931	\$1,238	\$1,629	\$1,862	\$2,327	\$2,793
2	\$315	\$630	\$946	\$1,021	\$1,261	\$1,677	\$2,206	\$2,522	\$3,152	\$3,783
3	\$398	\$795	\$1,193	\$1,289	\$1,591	\$2,116	\$2,784	\$3,182	\$3,977	\$4,773
4	\$480	\$960	\$1,441	\$1,556	\$1,921	\$2,555	\$3,361	\$3,842	\$4,802	\$5,763
5	\$563	\$1,125	\$1,688	\$1,823	\$2,251	\$2,994	\$3,939	\$4,502	\$5,627	\$6,753
6	\$645	\$1,290	\$1,936	\$2,090	\$2,581	\$3,433	\$4,516	\$5,162	\$6,452	\$7,743
7	\$728	\$1,455	\$2,183	\$2,358	\$2,911	\$3,871	\$5,094	\$5,822	\$7,277	\$8,733
8	\$810	\$1,620	\$2,431	\$2,625	\$3,241	\$4,310	\$5,671	\$6,482	\$8,102	\$9,723

- 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.

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](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)

**North Carolina Department of Health and Human Services**  
800-662-7030  
877-452-2514 (TTY)  
919-855-4400  
919-733-4851 (TTY)  
[www.dhhs.state.nc.us](http://www.dhhs.state.nc.us)

(State program information)

### Laws & Regulations

**North Carolina Department of Insurance**  
800-546-5664  
919-807-6800  
[www.ncdoi.com](http://www.ncdoi.com)

(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

**North Carolina Association of Health Underwriters**  
[www.ncahu.org](http://www.ncahu.org)

(State organization of insurance brokers)

## NORTH CAROLINA

# 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.

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