

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 in Low-Income Families	Children in Moderate Income Families	Women	Native American Indians	Trade Dislocated Workers (TAA Recipients)
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><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>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>Comprehensive Health Association of North Dakota (CHAND)</b> 800-737-0016 701-277-2271 www.chand.org</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>Medicaid</b> 800-755-2604 701-328-2321 701-328-8950 (TTY) www.nd.gov/dhs/services/medicalserv/medicaid/</p>	<p><b>Healthy Steps</b> 877-543-7669 www.nd.gov (Search: Healthy Steps)</p> <p><b>Women-Infant-Children (WIC)</b> 800-472-2286 www.health.state.nd.us/wic</p>	<p><b>Caring for Children Program</b> 800-342-4718 701-277-2227 www.ndcaring.org</p>	<p><b>Women's Way</b> 800-449-6636 www.womensway.net</p>	<p><b>Indian Health Services</b> 605-226-7582 www.ihs.gov (Search: Aberdeen)</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 12-month exclusionary period for pre-existing conditions on enrollees with no prior creditable coverage.</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>Mini-COBRA:</b> Coverage available for 39 weeks to 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>Elimination riders are not allowed.</p> <p>There is a maximum 6-month look-back and a 12-month exclusionary period for pre-existing conditions on enrollees with no prior creditable coverage.</p> <p><i>Pre-Existing Health Conditions Covered with Some Limitations</i></p>	<p><b>CHAND:</b> Two comprehensive coverage options with \$500 or \$1000 deductibles including: 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, Mental health and substance abuse, Physical, speech and occupational therapy, Preventive care, and other services. Covered services have a lifetime limit of \$1,000,000.</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>Hospital, Nursing facility, clinics, Rural health clinics, Hospice, physicians, Prescription drugs, Chiropractor, EPDST, Home health, Durable medical equipment and supplies, Dental, Family planning, Sterilization, Podiatry, Mental health, Ambulance, Transportation, Vision, Therapies, Waivers for certain services, Home and community based services, Traumatic brain injury, out-of-state services.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p><b>Healthy Steps:</b> Inpatient/ outpatient hospital services, clinic, Mental health and substance abuse, Prescription drugs, Preventive services, Dental and vision, Prenatal, and Orthodontia.</p> <p><b>WIC:</b> Nutrition education and services, breastfeeding promotion and education, monthly food prescription of nutritious foods, and maternal, prenatal and pediatric health-care services.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Well-child visits, Physician office visits and routine physicals, Immunizations, emergency accident care, Inpatient and outpatient hospital care, Diagnostic tests, Dental services, Mental health and chemical dependency.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Provides clinical breast exams, Pap tests, pelvic exams for breast and cervical cancer.</p>	<p>The Aberdeen Area Office in Aberdeen, South Dakota works with 13 service units that have nine hospitals, eight health centers, two school health stations, and several smaller health stations and satellite clinics. They serve about 94,000 Indians on reservations located in North Dakota, South Dakota, Nebraska, and Iowa.</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><i>Pre-Existing Health Conditions Covered</i></p>
Eligibility	<p><b>GUARANTEED COVERAGE</b></p> <p>Company size 2–50 employees.</p> <p>Owner can count as an employee.</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 continuously covered for 3 months under group insurance. Must elect continuation coverage within 10 days after date of termination, or date of receiving notice of right to continue coverage (whichever is later). However, if more than 31 days passed after date of termination, you cannot elect continuation.</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 CHAND or PCIP. See next column.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>CHAND:</b> You must have resided in North Dakota for at least 183 days. You have written evidence of denial of coverage from at least one carrier due to health reasons, or offered coverage with substantially restricts benefits for specific conditions, or with rates exceeding the CHAND rate. Must have written evidence from a medical professional of the existence of a qualifying condition and proof of exhausting most recent coverage within 90 days of application. Must be ineligible for health benefits under North Dakota's medical assistance program, COBRA or other government programs.</p> <p>A Medicare supplement plan is also available.</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, a North Dakota resident, and having problems getting insurance due to a pre-existing condition.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Must be a North Dakota resident and a U.S. citizen or legal permanent resident. Some legal permanent residents may have to wait for 5 years for full Medicaid benefits but there is no waiting period for emergency services.</p> <p>Income limits:</p> <p>Pregnant women and children ages 0–6: 133% FPL.</p> <p>Children ages 6–19: 100% FPL.</p> <p>Parents/caretakers living with children ages 0–18: 59% FPL.</p> <p>Aged, blind and disabled: 75% FPL for singles and 83% FPL couples, with asset limit of \$3,000 for singles and for \$6,000 couples.</p> <p>Medically-needy: 83% FPL for singles and couples.</p> <p>People with high medical expenses that when subtracted from income they may be eligible.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>Healthy Steps:</b> Must be a North Dakota resident and U.S. citizen or legal permanent resident. Must not be covered by health insurance (including Medicaid). Must be under 19 years old with income of 160% FPL. Single 18-year-olds with eligible incomes may also apply.</p> <p><b>WIC:</b> Must reside in North Dakota. Must be a pregnant or recently pregnant woman, or a child up to age 5 and be at nutritional risk. Income must be at or below 185% FPL.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Must be a U.S. citizen or legal permanent resident and resident of North Dakota. Must be without comprehensive medical coverage through Medicaid, Healthy Steps or a private insurance carrier. Must be 0–18 years old with income between 161% and 200% FPL.</p> <p>Enrollees who have voluntarily cancelled medical insurance are not eligible to participate in Caring for Children for 6 months after the date the coverage was cancelled.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Must be woman, age 40–64, and a U.S. citizen and North Dakota resident with an income of up to 200% FPL. Must be uninsured or have insurance that doesn't cover Pap tests and/or mammograms or can't afford to pay her deductible or co-payments. Must not be enrolled in or eligible for Medicaid or Medicare Part B.</p> <p>Women ages 65 or older can be eligible for the program, but they must not be eligible for Medicare or cannot afford Medicare Part B.</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 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 ± 35% 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>Costs for individual coverage vary.</p>	<p><b>CHAND:</b> Monthly premiums range from \$232.50 to \$1052.60 depending age, deductible and plan chosen.</p> <p><b>PCIP:</b> Monthly premiums range from \$133 to \$571 depending on your age and plan chosen.</p>	<p><b>\$1–\$3</b> co-pay for office visit. \$75 per admission in hospital except institution for mental diseases.</p>	<p><b>Healthy Steps: \$0–\$50</b> co-payments depending on service. No payments required from federally-recognized Native Americans.</p> <p><b>WIC: \$0</b> or minimal share of cost.</p>	<p><b>\$0</b></p>	<p><b>\$0</b> or minimal share of cost.</p>	<p><b>\$0</b> or minimal share of cost.</p>	<p><b>20%</b> 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

**Children's Special Health Services**  
800-755-2714  
TTY: 701-328-2436  
www.ndhealth.gov/CSHS

**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)

**North Dakota Department of Human Services**  
701-328-2310  
800-472-2622  
[www.nd.gov/dhs](http://www.nd.gov/dhs)

(State program information)

### Laws & Regulations

**North Dakota Insurance Department**  
701-328-2440  
800-247-0560  
[www.nd.gov/ndins](http://www.nd.gov/ndins)

(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)

## NORTH DAKOTA

# 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.