

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 Children & Families	Women & Children	Families	Cancer Screening for Men & Women	Native American Indians	Trade Dislocated Workers (TAA Recipients)
Program	<p>U.S. Uninsured Help Line 800-234-1317 www.coverageforall.org</p> <p>Group Plans Oregon Association of Health Underwriters 877-412-6248 www.orahu.org</p>	<p>COBRA/Mini-COBRA Then convert to a plan under: HIPAA Health Insurance Portability & Accountability Act 866-487-2365 www.dol.gov</p>	<p>U.S. Uninsured Help Line 800-234-1317 www.coverageforall.org</p> <p>Individual Plans Oregon Association of Health Underwriters 877-412-6248 www.orahu.org</p>	<p>Oregon Medical Insurance Pool (OMIP) 503-225-6620 800-848-7280 www.omip.state.or.us</p> <p>Federal Medical Insurance Pool (FMIP) Federal program run by OMIP 503-225-6620 800-848-7280 www.PCIP.gov www.oregon.gov (Search: FMIP)</p>	<p>Oregon Health Plan (OHP) 503-945-5772 800-527-5772 TTY: 800-375-2863 www.oregon.gov (Search: OHP)</p> <p>Programs: OHP Standard, OHP Plus, OHP with Limited Drug Benefit.</p>	<p>Oregon Health Plan Plus (OHP Plus) 503-378-2666 www.oregon.gov (Search: OHP)</p> <p>OHP Plus includes the no-cost option of Healthy Kids</p> <p>Healthy Kids 503-378-2666 800-359-9517 www.oregonhealthykids.gov</p> <p>Women-Infant-Children (WIC) 971-673-0040 www.oregon.gov (Search: WIC)</p>	<p>Family Health Insurance Assistance Program (FHIAP) 503-373-1692 888-564-9669 www.fhiap.oregon.gov</p> <p>Program is full for adults, due to budget. Reservation list remains open.</p>	<p>Oregon Breast and Cervical Cancer Program (BCCP) 877-255-7070 www.oregon.gov (Search: BCCP)</p>	<p>Indian Health Services 503-414-5555 www.ihs.gov (Search: Portland)</p>	<p>Health Coverage Tax Credit 866-628-4282 www.irs.gov (Search: HCTC)</p>
Coverage	<p>There is a maximum 6-month look-back/12-month exclusionary period for pre-existing conditions on enrollees that do not have prior creditable coverage.</p> <p>Under Oregon law, newborns and adopted children are automatically covered under parents' health plan for the first 31 days, if the plan provides dependent coverage.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>COBRA: Benefits are what you had with your previous employer. Coverage available for 18–36 months depending on qualifying events.</p> <p>Mini-COBRA: Benefits are what you had with your previous employer. Coverage lasts up to 9 months.</p> <p>HIPAA: Benefits are based on program selected. There is no expiration of coverage.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Carriers must guarantee issue portability products to residents with 6 months of prior coverage, and elimination riders are not allowed.</p> <p>Pre-existing conditions may not be considered for portability products. Otherwise, there is no look-back or exclusionary period limit for pre-existing conditions on other kinds of individual policies.</p> <p><i>Pre-Existing Health Conditions Covered with Some Limitations</i></p>	<p>OMIP: Max lifetime benefit is \$2 million per covered person. Choose from 4 policy options. In some cases benefits will not be provided during the first six months of enrollment for expenses resulting from a pre-existing condition.</p> <p>FMIP: 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>OHP Standard: Acupuncture, Chemical dependency, Dental, Emergency/urgent hospital care, Hospice and hospital care, Immunizations, Labor and delivery, Laboratory and x-ray, medical equipment and supplies, Medical transportation, Mental health, Physician care, Podiatry, Prescription drugs, Vision care.</p> <p>OHP Plus: Includes OHP Standard benefits, plus hearing aids and hearing aid exams, home health, naturopathy, therapy (occupational, physical and speech) and private duty nursing.</p> <p>OHP with Limited Drug: Same benefits as OHP Plus, but no coverage for prescription drugs that Medicare Part D covers.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>OHP Plus/Healthy Kids: Acupuncture, Chemical dependency, Dental, Emergency/urgent hospital care, Hospice and hospital care, Immunizations, Labor and delivery, Laboratory and x-ray, Medical equipment and supplies, Medical transportation, Mental health, Physician care, Podiatry prescription drugs, Vision care, Hearing aids and Hearing aid exams, Home health, Naturopathy, Occupational therapy, physical therapy, Private duty nursing, and speech therapy.</p> <p>WIC: 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>Use FHIAP to buy the private health insurance plan you choose.</p> <p>If an employer-sponsored plan is available then you must use FHIAP assistance to enroll in that plan.</p> <p>Applicants have 75 days to fill out the forms and return them with supporting documents.</p>	<p>Screening for breast and cervical cancer; ultrasounds, breast biopsies, surgical consultations, colonoscopies.</p> <p>Cancer treatment for some women qualified through Medicaid.</p>	<p>The Portland Area Indian Health Service operates six Federal health facilities in five Tribal communities and one at Chemawa Indian School. They operate health centers and stations, preventative health programs and urban programs for the 43 Federally Recognized Tribes in Idaho, Oregon and Washington. Health centers are open 40 hours per week offering a wide range of clinical services. Health stations are open less than 40 hours a week and provide a limited range of clinical services. Preventive programs offer counselor and referral services.</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>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 17.5 hours a week for coverage.</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 employers with less than 20 employees. Must have been continuously covered for 3 months by group insurance prior to termination. Ex-employees must sign up for continuation on the later of the following: A) In 10 days after the date of termination of coverage; or B) In 10 days after date when notice of the right to continue coverage was sent. Ex-employees cannot elect continuation more than 31 days after date of termination of coverage. Surviving/divorced spouses must elect continuation within 60 days after the date of mailing of the notice of the right to continue coverage.</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>Eligibility is subject to medical underwriting.</p> <p>If you are denied coverage for a medical condition, you may be eligible for OMIP or FMIP. See next column.</p>	<p>GUARANTEED COVERAGE</p> <p>OMIP: Must be an Oregon resident and have a qualifying medical condition, or denied coverage due to pre-existing conditions, or offered coverage with substantially reduced benefits (e.g. elimination rider). May be eligible if previous coverage was terminated for reasons other than non-payment of premium or fraud. Cannot be eligible for COBRA, or government programs.</p> <p>FMIP: 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>GUARANTEED COVERAGE</p> <p>Must be an Oregon resident and a U.S. citizen or a qualified non-citizen.</p> <p>OHP Standard: Must be parents and childless adults 19 years or older with asset limit of \$2,000, earning up to 100% FPL, and not getting Medicare. Must be uninsured for 6 months prior to enrollment (the six-month waiting period is waived in some cases), and paid all previously billed OHP premiums.</p> <p>OHP Plus: Aged and disabled singles earning 75% FPL, blind singles earning 78% FPL. Aged and disabled couples earning 83% FPL, blind couples earning 85% FPL. Asset limit for aged, blind and disabled singles is \$4,000, and for couples \$6,000.</p> <p>Pregnant women earning 185% FPL.</p> <p>Patients receiving TANF or Extended Medical Assistance.</p> <p>For children under 19, see "Healthy Kids" in the next column.</p> <p>OHP with Limited Drug Benefit: Must be eligible for both Medicaid and Medicare Part D.</p>	<p>GUARANTEED COVERAGE</p> <p>OHP Plus/Healthy Kids: Must be an Oregon resident and a U.S. citizen or qualified non-citizen, and 0–18 years old. Must have been uninsured for 2 months (though there are exceptions to this rule for special circumstances, like a parent's job loss or a child's serious medical need).</p> <p>OHP Plus pays for the full premiums for enrollees whose families earn to 200% FPL. Otherwise, those earning 201%–300% FPL will have their premiums subsidized, and those earning 301% FPL or more must pay for the full premium.</p> <p>WIC: Must reside in Oregon. Must be a pregnant or recently pregnant woman, or child up to age 5, and determined to be at nutritional risk. Income must be at or below 185% FPL.</p>	<p>GUARANTEED COVERAGE</p> <p>Must be an Oregon resident and U.S. citizen or legal immigrant, uninsured for at least 2 months (unless coming off OHP/Medicaid), and have investments and savings less than \$10,000 (including rental property). Income limit is 200% FPL. Must not be eligible for or receiving Medicare.</p>	<p>GUARANTEED COVERAGE</p> <p>Must be living in Oregon. Must have no insurance or insurance does not cover preventive health exams (e.g. mammograms, etc) or has unmet deductible of at least \$500. Income limit of 250% FPL.</p> <p>Women age 40 and older are eligible for annual breast and cervical cancer screenings (clinical breast exam, Pap smears, pelvic exams, mammograms, etc.).</p> <p>Men and women age 40 and under are eligible for breast diagnostic cancer services only if they have symptoms of breast cancer and per approval of BCCP.</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; 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>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 plan choice and the modified community 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>Costs depend on age and county.</p> <p>If you are self-employed and buy your own insurance you can deduct 100% of the cost of the premium from your federal income tax.</p>	<p>OMIP: Monthly premiums range from \$197 to \$810 for individuals depending on age and plan chosen.</p> <p>FMIP: Monthly premiums range from \$247 to \$783 depending on your age and family size.</p>	<p>OHP Standard: \$9–\$20 per month premiums. No co-payments.</p> <p>OHP Plus & OHP with Limited Drug Benefit: \$0 No premiums required from Native Americans and those earning up to 10% FPL.</p>	<p>OHP Plus/Healthy Kids: \$0 for families earning up to 200% FPL. Those earning 201%–300% FPL fees on a sliding scale based on income. Those earning at least 301% FPL pay \$165–\$475 per child.</p> <p>WIC: \$0 or minimal share of cost.</p>	<p>Depending on family size and income, FHIAP pays 50% to 95% of premium. FHIAP pays 100% of premium for children. Enrollees are responsible for co-pays, deductibles and co-insurance.</p>	<p>\$0 and sliding scale 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

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.

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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)

Oregon Department of Human Services
503-945-5944
www.oregon.gov/dhs

(State program information)

Oregon Helps
oregonhelps.org

(Program screener tool)

Oregon Health Authority
503-947-2340
877-398-9238
www.oregon.gov/oha

Laws & Regulations

Oregon Insurance Division
503-947-7980
www.oregoninsurance.org

(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

Oregon Association of Health Underwriters
877-412-6248
www.orahu.org

(State organization of insurance brokers)

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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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