

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	Children	Women	Refugees Newly Arriving in U.S.	Native American Indians	Seniors & Disabled
Program	<p>U.S. Uninsured Help Line 800-234-1317</p> <p>Group Plans National Association of Health Underwriters 703-276-0220 www.nahu.org</p>	<p>COBRA/Mini-COBRA</p> <p>Then convert to:</p> <p>HIPAA Health Insurance Portability & Accountability Act 866-487-2365 www.dol.gov</p>	<p>U.S. Uninsured Help Line 800-234-1317</p> <p>Individual Plans National Association of Health Underwriters 703-276-0220 www.nahu.org</p>	<p>South Dakota Risk Pool (SDRP) 605-773-3148 riskpool.sd.gov</p> <p>Pre-Existing Condition Insurance Plan (PCIP) Federal program run by the South Dakota Bureau of Personnel 605-773-3148 www.PCIP.gov</p>	<p>South Dakota Medical Assistance 800-305-3064 www.state.sd.us/social</p>	<p>Children's Health Insurance Program (CHIP) 800-305-3064 dss.sd.gov (Search: CHIP)</p> <p>Women-Infant-Children (WIC) 605-773-3361 605-773-3638 doh.sd.gov/WIC</p>	<p>All Women Count 800-738-2301 getscreened.sd.gov/count</p>	<p>South Dakota Medical Assistance 800-305-3064 www.state.sd.us/social</p> <p>Or contact local department of social services</p>	<p>Indian Health Services 605-226-7582 www.ihs.gov (Search: Aberdeen)</p>	<p>Medicare 800-633-4227 www.medicare.gov</p> <p>Medicare Prescription Drug Program 800-633-4227</p> <p>Senior Health Information & Insurance Education (SHIINE) 800-536-8197 605-333-3314 www.shiine.net</p>
Coverage	<p>There is a maximum look-back period of 6 months and maximum exclusion period of 12 months for pre-existing conditions on enrollees with no prior coverage.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>COBRA/Mini-COBRA: Coverage available for 18–36 months depending on qualifying events. Benefits are what you had with your previous employer.</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>There is a maximum look-back and exclusion period of 12 months for pre-existing conditions on enrollees with no prior coverage.</p> <p><i>Pre-Existing Health Conditions Covered with Some Limitations</i></p>	<p>SDRP: Offers four health plan options with similar benefits, including Daily hospital room and board, Miscellaneous hospital services, Surgical services, Anesthesia services, In-hospital medical services, and Out-of-hospital care including pharmaceuticals.</p> <p>PCIP: 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>Ambulance, Chiropractor, Clinics, Dental, Orthodontic services, Diabetes education, Durable medical equipment (DME), Family planning, Home health, Hospital, Hysterectomy, Mental health, Nursing home, Out-of-state coverage, Personal care, Physician, Podiatry, Prescriptions, Rehabilitative services, Sterilization, Other transportation services, Vision, wheelchair transportation, and Well-child exams.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>CHIP: Covers doctor appointments, Hospital stays, Dental and vision services, Prescription drugs, Mental health care and other medical services.</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>Pelvic exams, Pap smears, Clinical breast exams, Mammograms, Some additional diagnostic services</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Covered services include Doctor appointments, Hospital stays, Dental and vision services, Prescription drugs, Rehabilitation, Therapy, and Chiropractic, etc.</p> <p>Coverage is limited to 8 months from the date of the person's entry to the United States.</p> <p><i>Pre-Existing Health Conditions Covered</i></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 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>Medicare 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 D not covered by Medicare. Part D covers prescription drugs.</p> <p>SHIINE is a Medicare counseling service.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>
Eligibility	<p>GUARANTEED COVERAGE</p> <p>Company size 2–50 employees. 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. They do not include temporary or substitute employees.</p>	<p>GUARANTEED COVERAGE</p> <p>COBRA: Available for employees who work for employers with 20 or more employees. 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 sign up for Mini-COBRA within 60 days from date of receiving notice of termination of group coverage. Eligibility for Mini-COBRA expires 90 days after date of termination of group 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 the South Dakota Risk Pool or PCIP. See next column.</p>	<p>GUARANTEED COVERAGE</p> <p>SDRP: Children must be U.S. citizens, ages 0–18, be denied coverage by at least one insurance company, and have been uninsured for 6 months. Also, adults and children ages 0–18 must be residents of South Dakota, have had at least 12 months of continuous creditable coverage, must have exhausted COBRA or state continuation coverage, and be ineligible for and not enrolled in any other health insurance. Must have lost insurance not due non-payment of premiums or fraud, and apply for SDRP within 63 days of losing prior coverage, and are near or have reached their lifetime maximum benefit of their insurance carrier.</p> <p>PCIP: 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 a U.S. citizen or legal alien and South Dakota resident.</p> <p>Income limits:</p> <p>Pregnant Women: 133% FPL.</p> <p>Children Ages 0–5 133% FPL.</p> <p>Children ages 6–18: 100% FPL.</p> <p>Parents/caretakers living with children under 19: 52% FPL.</p> <p>Aged, blind, and disabled: 75% FPL and asset limit of \$2,000 for singles; 83% FPL and asset limit of \$3,000 for couples.</p>	<p>GUARANTEED COVERAGE</p> <p>CHIP: Must be a U.S. citizen or legal alien and South Dakota resident. Must be children under 19 years old. Uninsured children must have family incomes of up to 200% FPL, and insured children with family incomes of up to 140% FPL.</p> <p>May not be eligible if, 3 months prior to enrollment in CHIP, private health insurance was deliberately dropped in order to qualify for CHIP. The exception is that if the private health insurance was dropped for "good cause" (i.e., children's insurance exceeds 5% of family's gross income; the parent providing primary insurance is fired or laid off; the employer discontinued the insurance). "Good cause" is determined on a case-by-case basis.</p> <p>WIC: Must reside in South Dakota, be a pregnant or recently pregnant woman, or a child up to age 5. Must be determined to be at nutritional risk. Income limit of 185% FPL.</p>	<p>GUARANTEED COVERAGE</p> <p>Must be a woman living in South Dakota whose income is below 200% FPL.</p> <p>Women ages 30-64 years old are eligible for Pap tests, and women ages 40-64 years old are eligible for mammograms.</p>	<p>GUARANTEED COVERAGE</p> <p>Must be a refugee in South Dakota.</p> <p>Income limit is 62% FPL.</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>Both: Must be U.S. citizen or permanent U.S. resident, and:</p> <ol style="list-style-type: none"> 1) If 65 years or older, you or your spouse worked for at least 10 years in Medicare-covered employment, or 2) You have a disability or end-stage renal disease (permanent kidney failure requiring dialysis or transplant) at any age.
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>Costs for individual coverage vary. Rates are ±30% of the base individual market rate.</p>	<p>SDRP: Monthly premiums range from \$126–\$1,441 depending on age, gender, tobacco use, and deductible.</p> <p>PCIP: Monthly premiums range from \$141 to \$626 depending on your age and tobacco use.</p>	<p>\$0 or minimal share of cost.</p>	<p>CHIP & WIC: \$0 or minimal share of cost.</p>	<p>\$0 or minimal share of cost.</p>	<p>\$0 or minimal share of cost.</p>	<p>\$0 or minimal share of cost.</p>	<p>\$0 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>SHIINE: \$0</p>

Other Programs & Resources

Health Coverage Tax Credit
866-628-4282
www.irs.gov
(Search: HCTC)

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)

South Dakota Department of Social Services
605-773-3165
www.state.sd.us/social

(State program information)

Laws & Regulations

South Dakota Division of Insurance
605-773-3563
dlr.sd.gov/insurance

(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

National Association of Health Underwriters
703-276-0220
www.nahu.org

(National organization of insurance brokers)

SOUTH 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.