

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	Women	Native American Indians	Seniors & Disabled	Trade Dislocated Workers (TAA Recipients)
Program	<p>U.S. Uninsured Help Line 800-234-1317</p> <p>Group Plans Tennessee Association of Health Underwriters www.tnahu.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>U.S. Uninsured Help Line 800-234-1317</p> <p>Individual Plans Tennessee Association of Health Underwriters www.tnahu.org</p>	<p>AccessTN 866-268-3786 www.covertn.gov (Click: AccessTN)</p> <p>Enrollment in AccessTN reopened December 2010. However, premium assistance remains closed.</p> <p>Pre-Existing Condition Insurance Plan (PCIP) Run by U.S. Department of Health and Human Services 866-717-5826 www.PCIP.gov</p>	<p>Medicaid (TennCare) 800-342-3145 www.tn.gov/tenncare</p> <p>CoverTN 866-268-3786 www.covertn.gov</p> <p>Effective December 1, 2009, new enrollment in CoverTN is suspended due to budget. Current members and those who have been approved for coverage effective in January 2010 will be unaffected by the suspension.</p>	<p>TennCare Standard 866-311-4287 www.tn.gov (Search: TennCare Standard)</p> <p>TENNderCare 866-311-4287 www.tn.gov (Search: TENNderCARE)</p> <p>CoverKids 866-620-8864 www.coverkids.com</p>	<p>Breast and Cervical Cancer Screening Program (BCCSP) 877-969-6636 health.state.tn.us/bcc</p>	<p>Indian Health Services (IHS) 615-467-1500 www.ihs.gov/nashville</p>	<p>Medicare 800-633-4227 www.medicare.gov</p> <p>Medicare Prescription Drug Program 800-633-4227</p> <p>Medigap Policy 888-486-9355 800-633-4227 www.medicare.gov/medigap</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 and a maximum 12-month exclusionary period for pre-existing conditions on enrollees that do not have prior coverage.</p> <p>Benefits will vary depending on the chosen plan.</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: Coverage lasts 3–15 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>Assorted plans depending on medical needs.</p> <p>Elimination riders are allowed.</p> <p>There is no limit to the look-back period, but there is a maximum exclusion period of 24 months for pre-existing conditions on enrollees that do not have prior coverage.</p> <p><i>Pre-Existing Health Conditions Covered with Some Limitations</i></p>	<p>AccessTN: Three plans with comprehensive health coverage similar to the benefits offered to state employees. Participants will be able to select the plan that is best for their situation. Refer to the benefit plan for more information on covered services.</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>Medicaid: Inpatient and outpatient hospital services, Prenatal care, Vaccines for children, Physician services, Nursing facility services for persons aged 21 or older, Family planning services and supplies, Rural health clinic services, Home health care for persons eligible for skilled-nursing services, Laboratory and x-ray services, Pediatric and family nurse practitioner services, Nurse/midwife services.</p> <p>CoverTN: Primary care doctor visits, Preventive care, Preventive mammogram, Specialist visits, Inpatient/outpatient hospital services, Emergency services, Diabetes, Durable medical equipment, and Prescription drugs.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>TennCare Standard: Same coverage as Medicaid.</p> <p>TENNderCare: Check-ups that include health history, complete physical exams, lab tests (as needed), immunizations, vision and hearing screening, developmental and behavioral screening (as needed), and counseling on how to keep your child healthy.</p> <p>CoverKids: Physician office visit, Hospital care, Prescription drug, Maternity, Routine health assessment and immunizations, Emergency room, Chiropractic care, Ambulance service (air and ground), Lab and x-ray, Physical, speech and occupational therapy, Inpatient and outpatient mental health and substance abuse treatment, Dental, and Vision care.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Clinical breast exams, mammograms, and Pap tests to screen for breast and cervical cancer.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>The Indian Health Service (IHS) provides federal health services for approximately 1.9 million American Indians and Alaska Natives who belong to 564 federally recognized tribes in 35 states. The Nashville office serves American Indians in the southern and eastern United States.</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 C not covered by Medicare. Part D covers prescription drugs.</p> <p>Medigap: Standardized private health insurance to fill the "gaps" in Original Medicare (Parts A and B) coverage. Each member of a couple must have his or her own Medigap policy. 12 different policies available with specific benefits (e.g. hospice, skilled nursing facility, etc.), but they do not cover long-term care, vision or dental care, hearing aids, eyeglasses, and private-duty nursing.</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 (including owner).</p> <p>Eligible employees must work at least 30 hours a week, and they do not include part-time, temporary, or substitute employees.</p>	<p>GUARANTEED COVERAGE</p> <p>COBRA: Available for employees who work for employers 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 had 3 months group coverage prior to job termination. You have 31 days from date of termination to sign up for Mini-COBRA.</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>Must be a Tennessee resident.</p> <p>Eligibility is subject to medical underwriting.</p> <p>If you are denied coverage for a medical condition, you may be eligible for Access TN, or PCIP. See next column.</p>	<p>GUARANTEED COVERAGE</p> <p>AccessTN: Must be a Tennessee resident, U.S. citizen or qualified legal alien and age 64 or younger. Must be uninsurable by medical or insurance determination and have no access to employer-sponsored health insurance (other than CoverTN) at the time of application. Must have been denied by two unaffiliated insurance carriers for individual coverage due to a health-related condition and without coverage for 6 months.</p> <p>PCIP: 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 Tennessee resident, and having problems getting insurance due to a pre-existing condition.</p>	<p>GUARANTEED COVERAGE</p> <p>All: Must be located or reside in Tennessee and be U.S. citizens or qualified aliens.</p> <p>Medicaid: Income limits: Pregnant women and infants ages 0–1: 185% FPL. Children ages 1–5: 133% FPL. Children Ages 6–19: 100% FPL. Parents living with their children under 19: 129% FPL. Aged, blind and disabled: 75% FPL and asset limit of \$2,000 for singles; 83% FPL and asset limit of \$3,000 for couples. Individuals living in nursing homes: \$2,022 per month.</p> <p>CoverTN: Employers and Local County Governments: Must have 50 employees or less, and 50% of employees earn less than \$55K. County government must not have offered health insurance to its workers in the last 12 months. Employers must not have offered health insurance to its workers in the last 6 months, or paid 50% or less of its employees' premiums.</p> <p>Individuals: Must be at least 19 years old. Employees (in private and local county government sectors) must work an average 20 hours a week, earn \$55K or less a year, and have had no group health insurance in last 6 months. Unemployed must have worked at least 20 hours a week in the last 6 months, or had his/her work hours reduced to less than 20 hours week, have been unemployed for at least 6 months, used to earn \$55K or less per year, and be currently uninsured. Spouses must have been uninsured in the last 6 months.</p>	<p>GUARANTEED COVERAGE</p> <p>TennCare Standard: Medicaid-covered children ages 0–18 whose eligibility for and enrollment in Medicaid are ending. Must have no access to group health insurance, and have incomes of up to 200% FPL. If above 200% FPL, then patient must have problems getting health insurance due to a pre-existing medical condition.</p> <p>TENNderCare: Children with TennCare up to age 21.</p> <p>CoverKids: Must be Tennessee residents and U. S. citizens or qualified aliens. Must either be pregnant women or children ages 0–18. Must have no access to state-sponsored health insurance, and are ineligible for TennCare. Children enrollees must have been uninsured and pregnant women must have had no maternity coverage within the last 3 months prior to enrolling in CoverKids. There is no income limit but anyone making more than 250% FPL must pay full premiums.</p>	<p>GUARANTEED COVERAGE</p> <p>Must be women at least age 40 residing in Tennessee with no insurance, or have insurance that do not pay for these services covered by the BCCSP, and with incomes at or below 250% FPL.</p>	<p>GUARANTEED COVERAGE</p> <p>Must exhaust all private, state, and other federal programs. 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>Medicare: Must be U.S. citizen or permanent U.S. resident, and:</p> <ol style="list-style-type: none"> If 65 years or older, you or your spouse worked for at least 10 years in Medicare-covered employment, or You have a disability or end-stage renal disease (permanent kidney failure requiring dialysis or transplant) at any age. <p>Medigap: Must have Original Medicare (Parts A and B).</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 (PBG).</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>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. There are no rate caps.</p>	<p>AccessTN: Premiums could be \$284–\$1,225 depending on age, weight tobacco use, and plan chosen. Financial assistance for certain income levels could reduce price by 30%–70%.</p> <p>PCIP: Monthly premiums range from \$133 to \$571 depending on your age and plan chosen.</p>	<p>Medicaid: \$0 or small share of cost.</p> <p>CoverTN: Monthly premiums range from \$37.53 to \$109.03 depending on age, weight and tobacco use. Must agree to pay one-third or two-thirds share of premium depending on qualifications.</p>	<p>TENNderCare & TennCare Standard: \$0 or small share of cost.</p> <p>CoverKids: \$0 monthly premiums for families living at or below 250% FPL. Premiums around \$244 per month if income is greater than 250% FPL. No co-pays are required from federally recognized American Indian or Alaskan Native tribes.</p>	<p>\$0</p>	<p>\$0 or minimal share of cost.</p>	<p>Medicare: \$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>Medigap: Costs vary based on plan. Original Medicare and your Medigap policy will pay their shares of covered health care costs.</p>	<p>20% of the insurance premium including COBRA premium if employer contributes less than 50%.</p>

Other Programs & Resources

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

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

Women-Infant-Children (WIC)
800-342-5942
health.state.tn.us/WIC

CoverRX
888-560-2649
866-268-3786
www.covertn.gov
(Click: CoverRX)

Tennessee Health Options Services
888-486-9355

Prescription Assistance
888-486-9355

Family Planning
615-741-7353
health.state.tn.us/womenshealth

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)

Tennessee Department of Health
615-741-3111
health.state.tn.us

(State program information)

Laws & Regulations

Tennessee Department of Commerce and Insurance
615-741-2218
800-342-4029
www.state.tn.us/commerce/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

Tennessee Association of Health Underwriters
www.tnahu.org

(State organization of insurance brokers)

TENNESSEE

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.