

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	Women	Seniors & Disabled	Trade Dislocated Workers (TAA Recipients)	Veterans
Program	<p>U.S. Uninsured Help Line 800-234-1317</p> <p>Group Plans Florida Association of Health Underwriters 321-244-0427 www.fahu.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 Florida Association of Health Underwriters 321-244-0427 www.fahu.org</p>	<p>Pre-Existing Condition Insurance Plan (PCIP) Run by the U.S. Department of Health and Human Services 866-717-5826 www.PCIP.gov</p> <p>NOTE: Due to the PCIP, Cover Florida is no longer being offered. If you are enrolled in Cover Florida, please call your health plan to find out more about your coverage continuation.</p>	<p>Medicaid 850-488-3560 www.fdhc.state.fl.us/Medicaid</p>	<p>Florida KidCare MediKids, Healthy Kids, Children's Medical Services and Medicaid 888-540-5437 TTD: 877-316-8748 www.floridakidcare.org</p>	<p>Breast and Cervical Cancer Prevention 800-227-2345 www.doh.state.fl.us/Family/cancer/bcc</p>	<p>Medicare 800-633-4227 www.medicare.gov</p> <p>Medicare Prescription Drug Program 800-633-4227</p>	<p>Health Coverage Tax Credit 866-628-4282 www.irs.gov (Search: HCTC)</p>	<p>VA Medical Benefits Package 877-222-8387 www.va.gov</p>
Coverage	<p>No Lifetime Limits.</p> <p>There is a 6-month look-back/12-month exclusionary period for pre-existing conditions on enrollees with no prior coverage or whose prior coverage had a break of more than 63 days.</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 up to 18months 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>There is a 24-month look-back and exclusionary period limit for pre-existing conditions on enrollees with no prior coverage.</p> <p>If eligible for HIPAA portability, pre-existing conditions are covered.</p> <p><i>Limits on Pre-Existing Health Conditions May Apply</i></p>	<p>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>Among some of the services: Ambulatory, Surgical centers, Birth center services, Child health check ups, Chiropractic care, Durable medical equipment and supplies, Federally qualified health centers, Home health, Hospital inpatient/outpatient care, Laboratory, Licensed midwives, Physician, Podiatry, Prescriptions, Rural health clinics, Therapy, and X-rays.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Comprehensive health insurance coverage.</p> <p>Benefits vary based on the segment of the program in which a child participates—MediKids, Healthy Kids, or the Children's Medical Services (CMS) Network for children with special health care needs.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Breast and cervical cancer screening exams clinical breast exams, mammograms, and Pap smears.</p> <p>Some diagnostic exams are covered and referral to treatment as necessary.</p> <p>Outreach, public education and professional education are provided.</p> <p>Treatment for eligible women may be paid by Medicaid.</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><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>	<p>Comprehensive preventive and primary care, outpatient and inpatient services.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>
Eligibility	<p>GUARANTEED COVERAGE</p> <p>Company size 1–50 employees.</p> <p>Owner can count as an employee. Owner name on business license must draw wages from the company.</p> <p>Groups of one have open enrollment during limited times during the year.</p> <p>Eligible employees must work at least 25 hours a week.</p> <p>Employers must provide copies of their federal income tax Schedule K or Schedule C forms for insurance carriers. Also, if there is an employee or owner who is not drawing a paycheck, carriers require a letter from CPA or Attorney stating when business was formed and who works for the business and number of hours.</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 businesses with less than 20 employees. You have 30 days from receiving election notice from insurance carrier to sign up for Mini-COBRA 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 Cover Florida or PCIP. See next column.</p>	<p>GUARANTEED COVERAGE</p> <p>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 Florida resident, and having problems getting insurance due to a pre-existing condition.</p>	<p>GUARANTEED COVERAGE</p> <p>Must be U.S. citizens or legal aliens and Florida residents.</p> <p>Income limits: Pregnant women: 185% FPL. Children ages 0–1: 200% FPL. Children ages 1–5: 133% FPL. Children ages 6–18: 100% FPL. Parents/caretakers: 0-20% FPL Aged, blind and disabled: 88% FPL. SSI Recipients: 74% FPL. Parents/caretakers living with children ages 0–18: 53% FPL. Medically-needy: 20% FPL with asset limits of \$5,000 for singles, and \$6,000 for couples. No asset or resource requirements for children or pregnant mothers.</p>	<p>GUARANTEED COVERAGE</p> <p>Must be a U.S. citizen or qualified non-citizen and live in Florida. Must be under age 19 years old, uninsured, and have an income at or below 200% FPL.</p> <p>Must not be eligible for Medicaid, or be the dependent of a state employee eligible for health insurance, or be in a public institution.</p>	<p>GUARANTEED COVERAGE</p> <p>Must be women 50 to 64 years of age, living at or below 200% FPL. Must either be uninsured or have insurance that does not cover breast or cervical cancer screening.</p>	<p>GUARANTEED COVERAGE</p> <p>Must be U.S. citizen or permanent U.S. resident, and:</p> <p>1) If 65 years or older, you or your spouse worked for at least 10 years in Medicare-covered employment, or</p> <p>2) You have a disability or end-stage renal disease (permanent kidney failure requiring dialysis or transplant) at any age.</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>	<p>GUARANTEED COVERAGE</p> <p>"Veteran status" = active duty in the U.S. military, naval, or air service and a discharge or release from active military service under other than dishonorable conditions.</p> <p>Certain veterans must have completed 24 continuous months of service.</p>
Monthly Cost	<p>Costs depend on employer contribution and ± 15% of the indexed rate depending on the health, residence and number of the group members. Groups with 10 or more employees may use group medical questionnaire. Groups of under 10 employees must answer individual medical questionnaires.</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>Monthly premiums range from \$118-\$505 depending on your age and plan chosen.</p>	<p>\$0–\$3 co-pays per visit. 5% of payment up to \$15/visit for non-emergency services in the ER.</p>	<p>Premium is based on household size and monthly income. Most families pay either \$15 or \$20 per family per month; some families may pay more. There may be co-payments required based on the service provided.</p> <p>No monthly premiums or co-payments required from federally-recognized American Indians.</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>20% of the insurance premium including COBRA premium if employer contributes less than 50%.</p>	<p>\$0 and share of cost and co-pays depending on income level.</p>

Other Programs & Resources

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

Women-Infant-Children (WIC)
800-342-3556
www.doh.state.fl.us (Search: WIC)

Florida Alzheimer Disease Initiative
850-414-2000

Florida AIDS Insurance Continuation Program
305-592-1452
www.doh.state.fl.us (Search: AICP)
There is a waiting list as of October 2011.

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)

Florida Health and Human Services
www.dcf.state.fl.us
www.doh.state.fl.us

(State program information)

Laws & Regulations

Florida Office of Insurance Regulation
800-342-2762
www.floir.com

(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

Florida Association of Health Underwriters
321-244-0427
www.fahu.org

(State organization of insurance brokers)

FLORIDA

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.