

The Affordable Care Act was passed by Congress and signed into law by President Obama on March 23, 2010; the comprehensive health care reform has a number of changes that will affect you, your family, and your friends.

Understanding Health Reform **Pre-Existing Condition Insurance Plan**

In March of 2010, Congress passed and President Obama signed into law the Affordable Care Act—the new health care reform law. The law creates a new program—the Pre-Existing Condition Insurance Plan—to make health coverage available to you if you have been denied health insurance by private insurance companies because of a pre-existing condition.

Below are some frequently asked questions regarding pre-existing conditions and the newly established Pre-Existing Condition Insurance Plan.

What is a pre-existing condition?

A pre-existing condition is a condition, disability, or illness (either physical or mental) that you have prior to becoming enrolled in a health plan.

Is the Pre-Existing Condition Insurance Plan (PCIP) available in every State?

Yes—whether the State or the U.S. Department of Health and Human Services runs the program depends on the State. The program name, start, and design may vary depending on which State you live in. For more information on the Pre-Existing

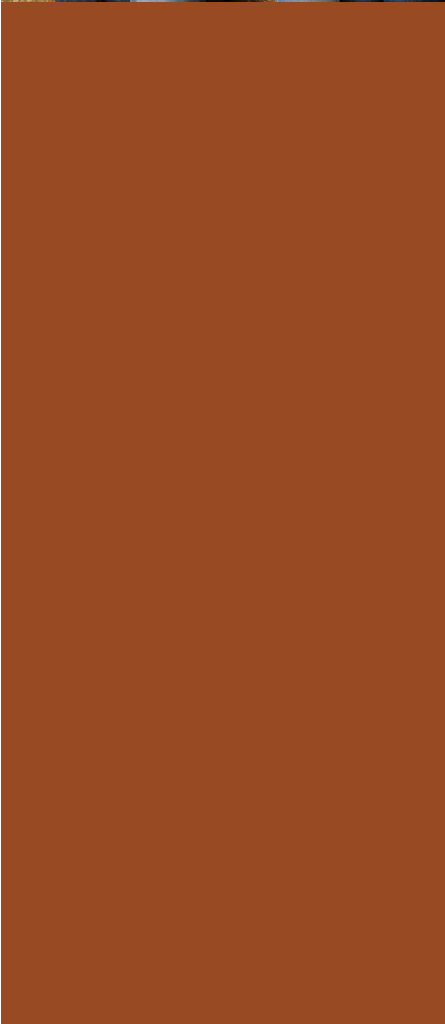
Condition Insurance Plan in your State, visit <http://www.healthcare.gov/law/provisions/preexisting> and click on your State.

When will my coverage be effective?

You can apply and enroll NOW. Generally, a completed application received on or before the 15th of the month will go into effect on the first day of the next month. A completed application received after the 15th of the month will go into effect on the first day of the next month. For example, if you apply and submit your application on November 3, your coverage will go into effect starting December 1. If you submit a completed application on November 20, your coverage will go into effect starting January 1.

Where can I apply for the Pre-Existing Condition Insurance Plan?

To apply, go to <http://www.healthcare.gov/law/provisions/preexisting> and click on your State, or click “Find Insurance Options” at <http://www.healthcare.gov> to find additional coverage options.



May I apply for the Pre-Existing Condition Insurance Plan if I have existing health coverage?

To be eligible for the Pre-Existing Condition Insurance Plan, you must have been without health coverage for at least the last 6 months. For example, if you currently have health coverage through Medicare or TRICARE (e.g., military), you shouldn't apply. If you are uninsured and have been told that you may be eligible for other coverage programs like Medicaid and the Children's Health Insurance Program, you should check out those programs first, as they may better meet your needs. If you currently have job-based coverage, or individual insurance coverage, you aren't eligible to apply.

May I apply for the Pre-Existing Condition Insurance Plan if I have COBRA health coverage or other continuation coverage?

No, even if your COBRA or other continuation of coverage is about to run out, you won't meet the requirement to be uninsured until 6 months after it runs out. You also need to meet the criteria for having a pre-existing condition and be a U.S. citizen or individual residing here legally to qualify for the Pre-Existing Condition Insurance Plan.

What health care providers are in the network?

The Pre-Existing Condition Insurance Plan will have provider networks that include a full range of services and specialists.

What do I do if I can't afford these premiums?

If you have limited income and resources (assets), you may be eligible for the Medicaid program in your State. Medicaid covers most pre-existing conditions. If you are seeking insurance coverage for your child, go to <http://www.insurekidsnow.gov> to learn more about children's health insurance in your State.

Where can I find more information about the Pre-Existing Condition Insurance Plan and other coverage options?

If you would like more information on the Pre-Existing Condition Insurance Plan or other health coverage options, please go to <http://www.healthcare.gov>, click "Find Insurance Options," and follow the directions from there.

Where can I find more information on Health Reform?

The Affordable Care Act was passed by Congress and signed into law by President Obama on March 23, 2010; the comprehensive health care reform has a number of changes that will affect you, your family, and your friends. There are a number of resources available to help you find information about the Affordable Care Act. Some resources available are:

- <http://www.healthcare.gov>
- <http://www.samhsa.gov/healthreform>
- <http://blog.samhsa.gov>
- <http://www.hhs.gov>
- <http://www.ncsl.org>

The most comprehensive resource available is the Federal Government's new Web site <http://www.healthcare.gov>. Healthcare.gov provides you with a number of resources. On healthcare.gov you can:

- Find and compare health care coverage options in your State, including Medicaid services.
- Access information and timelines about the different provisions in the Affordable Care Act.
- Compare care quality of hospitals.
- Learn about health prevention and get prevention tips.

If you want to know more about your rights under the Affordable Care Act, go to: http://www.healthcare.gov/law/provisions/billofright/patient_bill_of_rights.html.

Definitions

The Consolidated Omnibus Reconciliation Act of 1985 (COBRA) is a Federal law that may allow you to temporarily keep job-based health coverage after certain qualifying events, such as your employment ends, or you lose coverage as the spouse or dependent of the covered employee. If you elect COBRA coverage, you can be charged 100% of the premiums (the cost of the health coverage), including the share the employer used to pay, plus a small administrative fee. For more information, please go to <http://www.dol.gov> and search COBRA. COBRA may only last for 18 to 36 months.

Medicare

A Federal health insurance program for people who are age 65 or older and certain younger people with disabilities. It also covers people with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a transplant, sometimes called ESRD). For more information, please go to <http://www.Medicare.gov>.

Medicaid

A State-administered health insurance program for low-income families and children, pregnant women, the elderly, people with disabilities, and, in some States, other adults. The Federal Government provides a portion of the funding for Medicaid and sets guidelines for the program. States also have choices concerning how they design their program, so Medicaid varies State by State and may have a different name in your State. For more information on Medicaid, please visit <http://www.healthcare.gov>, click "Find Insurance Options," and follow the directions from there.

TRICARE

TRICARE is a health care program of the U.S. Department of Defense Military Health System. TRICARE provides civilian health benefits for military personnel, military retirees, and their dependents, as well as some members of the Reserve Component. For more information on TRICARE, please visit <http://www.tricare.mil>.