ANSWERS TO QUESTIONS FROM THE HEALTH CARE LAW WEBINARS ON TEMPORARY INSURANCE FOR PEOPLE WITH PRE-EXISTING CONDITIONS

Question: What is a pre-existing condition?
Answer: A pre-existing condition is a condition, disability or illness (either physical or mental) that you have before you enrolled in a health plan.

Question: What is the Pre-Existing Condition Insurance Plan?
Answer: The Pre-Existing Condition Insurance Plan (PCIP) was created as part of the nation's new health insurance law, the Affordable Care Act. The PCIP program was designed to make health insurance available to you if you have been denied coverage by private insurance companies because of a pre-existing condition. PCIP provides a new health coverage option for you if you have been uninsured for at least six months, you have a pre-existing condition or have been denied health coverage because of your health condition, and are a U.S. citizen or are residing here legally. PCIP is a transitional program until 2014.

Question: Will the Pre-Existing Condition Insurance Plan (PCIP) be available in every state?
Answer: Yes—whether the state or the federal government runs the program depends on the state. The program name, and design may vary depending on which state you live in. To learn more about eligibility, how to apply, and benefits visit www.healthcare.gov and the PCIP Map to learn more about how PCIP works in your state.

Question: If I am eligible for the Pre-Existing Condition Insurance Plan when will my coverage start?
Answer: If you live in a state where the U.S. Department of Health and Human Services is running the program, you can apply and enroll starting July 1, 2010. 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 following month. To learn more about eligibility, how to apply, and benefits visit www.healthcare.gov and the PCIP Map to learn more about how PCIP works in your state.

Question: May I apply for the Pre-Existing Condition Insurance Plan if I already have health coverage?
Answer: You are not eligible unless you have been without health coverage for at least the last six months. For example, if you have coverage through your employer, Medicare, Medicaid, COBRA or TRICARE, or are in an existing state high-risk pool 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 have job-based coverage, or individual insurance coverage, you aren’t eligible to apply.

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

**Answer:** No, even if your COBRA or other continuation of coverage is about to run out, you won’t meet the requirement to be uninsured for at least the last six months. You also need to be meet the criteria for having a pre-existing condition.

**Question:** My COBRA coverage expires in October 2010 and I am unemployed with pre-existing health issues. Do I have to be uninsured for 6 months to qualify for the Federal plan? The only other option is my existing state High Risk Pool which is too expensive.

**Answer:** Yes, to qualify for the new Pre-existing Condition Insurance Plan, you need to be without health insurance for at least six months. Check with your State Health Insurance Assistance Program (SHIP) to see if you have any other coverage options. You can find the contact information for your local SHIP at [www.shiptalk.org](http://www.shiptalk.org).

**Question:** What health care providers are in the network?

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

**Question:** What if I can’t afford the premiums for the Pre-Existing Coverage Insurance Plan?

**Answer:** If you have limited income and resources (assets), you may be eligible for the Medicaid program in your state. If you are seeking insurance coverage for your child, go to [www.insurekidsnow.gov](http://www.insurekidsnow.gov) to learn more about children’s health insurance in your state.

**Question:** Who is eligible for coverage through PCIP?

**Answer:** Eligible individuals must:

- Be a U.S. citizen or a legal resident
- Have a pre-existing medical condition
- Not have been covered under creditable health coverage (as defined by Section 201(c)(1) of the Public Health Service Act) for the previous six months before applying for coverage.

Persons currently covered by a health plan, including employer plans, COBRA, TRICARE, Medicare, Medicaid and existing high-risk pool programs, are not eligible for PCIP.

**Question:** How do I find out about pre-existing conditions and what they are?
A wide variety of health conditions have been used by insurance companies as a reason to deny coverage. Different states may use different methods of determining whether you have a pre-existing condition and whether you have been denied insurance coverage. If you live in a state that guarantees insurance coverage, the state may consider you to have been denied coverage if you were offered coverage at an unreasonable price. Go to www.healthcare.gov to learn more about the eligibility requirements in your state.

**Question:** How do I enroll?

**Answer:** If the Pre-Existing Condition Insurance Plan (PCIP) in your state is run by the federal government, it’s simple. Download an application online at www.healthcare.gov.

**Question:** How do I know if the Pre-Existing Condition Insurance Plan (PCIP) in my state is run by the federal government?

**Answer:** Visit www.healthcare.gov, go to the state map and select your state. It will take you to the information on the plan in your particular state.

**Question:** How is the Pre-Existing Condition Insurance Plan (PCIP) funded?

**Answer:** The program is funded entirely by the federal government. The health reform law allocated $5 billion for the program nationwide. Funding will go toward health care claims and administrative costs that exceed the premiums collected for PCIP.

**Question:** What benefits are included for individuals enrolled in a Pre-Existing Condition Insurance Plan (PCIP)?

**Answer:** Coverage includes doctor visits, hospitalizations and prescription drugs. Enrollees will get better benefits when they use in-network providers. There are no waiting periods. Pre-existing conditions are covered.

**Question:** What will people enrolled in Pre-Existing Condition Insurance Plans pay for premiums?

**Answer:** Premiums will vary depending on the state you live in. For information, visit www.healthcare.gov.

**Question:** What doctors and hospitals are included in the plan?

**Answer:** Enrollees will have access to the Pre-Existing Condition Insurance Plan network of providers.

**Question:** What happens to people who are enrolled in existing state-based high-risk pools?

**Answer:** The new national program will not affect individuals already covered by a state high-risk pool. Those individuals will maintain their current coverage.

**Question:** Can my family be covered under my plan?

**Answer:** Coverage is only available to an eligible individual. There are no family plans or premium levels in PCIP.

**Question:** What if someone calls me or sends a letter asking me to enroll in a Pre-Existing Condition Insurance Plan?
**Answer:** You can only enroll in the Pre-Existing Condition Insurance Plan by applying for coverage using the methods described on www.healthcare.gov. Do not respond to phony calls or letters asking you to enroll for a fee.

**Question:** Is the Pre-Existing Condition Insurance plan available now, or is that in 2014?

**Answer:** The Pre-Existing Condition plan is available in most states now. Go to www.healthcare.gov to get details on this new coverage for people who have not been uninsured for at least 6 months and have a pre-existing condition.

**Question:** What happens when the Pre-Existing Condition Insurance Plans end in 2014?

**Answer:** The Pre-Existing Condition Insurance Plan (PCIP) is a "transitional" program because on January 1, 2014, health insurance companies will be prohibited from denying coverage due to a pre-existing condition. PCIP is a bridge until 2014 for people who have been denied health insurance by health insurance companies. At that time, enrollees in PCIP will transition into receiving health care coverage through new state-based health care exchanges.

**Question:** Why must you have no health coverage for 6 months prior to applying for the Pre-Existing Condition Insurance Plan (PCIP)?

**Answer:** This is something that is a requirement by federal law. The law stipulates that an individual must be uninsured for at least 6 months and meet other criteria prior to applying for the Pre-Existing Insurance Plan.

**Question:** Can a husband & wife enroll in a Pre-Existing Condition Insurance Plan (PCIP) if only one has been without insurance for 6 months or more?

**Answer:** The Pre-Existing Condition Insurance Plan (PCIP) is only available for individuals. Family plans are not available in this program. If both you and your wife meet the eligibility requirements, you would each have to apply individually for the program.

**Question:** If I obtain coverage under the Pre-Existing Condition Insurance plan and then obtain group coverage through a new employer, but then lose that coverage; must I go through the six month waiting period a second time?

**Answer:** Yes, if you have health coverage and lost that coverage you must still meet the requirement to be uninsured for at least the last six months. 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.

**Question:** How much does the Pre-Existing Condition Insurance Plan cost?

**Answer:** Premiums and other cost sharing will vary depending on the state you live in. For information, visit www.healthcare.gov. However, after you pay your monthly premiums for the year, your out of pocket costs for covered care you get from health care providers in the plan’s network can’t exceed $5,950 per year.
Question: What is the out of pocket maximum cost that one can expect to pay yearly?
Answer: After you pay your monthly premiums for the year, the out of pocket costs for covered care you get from health care providers in the plan’s network cannot exceed $5,950 per year.

Question: Once in PCIP, how long do you have to wait until your coverage starts and you can be treated?
Answer: Once you are approved and enrolled in the Pre-Existing Insurance Plan in your state, there is no waiting period to receive covered health services.

Question: Does the PCIP cover prescription drugs?
Answer: Coverage includes doctor visits, hospitalizations and prescription drugs.

Question: You mentioned that the new PCIP is a "transitional" program. What does this mean?
Answer: The Pre-Existing Condition Insurance Plan (PCIP) is a "transitional" program because on January 1, 2014, health insurance companies will be prohibited from denying coverage due to a pre-existing condition. PCIP is a bridge until 2014 for people who have been denied health insurance by health insurance companies. At that time, enrollees in PCIP will transition into receiving health care coverage through new state-based health care exchanges.

Question: If I have health insurance from employer, can I still get the PCIP coverage in my state?
Answer: You are not eligible unless you have been without health coverage for at least the last six months. For example, if you have coverage through your employer, Medicare, Medicaid, COBRA or TRICARE, or are in an existing state high-risk pool 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 have job-based coverage, or individual insurance coverage, you aren’t eligible to apply.

Question: What is the web address for the site that links people to the Pre-Existing Condition Insurance Plan in their states?
Answer: Visit www.healthcare.gov to find the Pre-Existing Condition Insurance Plan in your state.

Question: What are the illnesses that are considered pre-existing conditions?
Answer: A pre-existing condition is a condition, disability or illness (either physical or mental) that you have before you enrolled in a health plan. Check with the Pre-Existing Insurance Plan in your state to get a list of the pre-existing conditions that would qualify for this coverage.
WHAT SHOULD I DO NOW?

Question: I understand that state insurance exchanges will offer coverage for the uninsured in 2014. What about those of us who need insurance now?
Answer: To learn about your current options for insurance, contact your State Health Insurance Assistance Program. SHIP counselors can answer your question about obtaining insurance in your state. You can find your area SHIP office at www.shiptalk.org.

Question: I heard that low-income people would get some help on their premiums starting this year. Is that true? I can no longer afford my premiums, which just rose $80/month after my income dropped drastically.
Answer: If you earn less than about $43,000 a year you will get tax credits or subsidies to help you pay your premiums for insurance you purchase through an exchange. However, this help won’t be available until the exchanges begin offering insurance in 2014.

Question: What are the choices for the present situation: age 55, partial casual employment, have no insurance, or pre-existing conditions? How can I get insurance at a reasonable rate now or near future under new plan?
Answer: To learn about your current options for insurance, contact your State Health Insurance Assistance Program. SHIP counselors can answer your question about obtaining insurance in your state. You can find your area SHIP office at www.shiptalk.org.

Question: I am unemployed and had COBRA which just ran out. I applied for private insurance but was denied due to pre-existing conditions. So was my 19 yr old son. Both of us are currently uninsured. What are my options for obtaining insurance coverage?
Answer: If you have a pre-existing condition and have been uninsured for at least six months you may be eligible for the Pre-existing Condition Insurance Plan in your state. In the meantime, to learn about your current options for insurance, contact your State Health Insurance Assistance Program. SHIP counselors can answer your question about obtaining insurance in your state. You can find your area SHIP office at www.shiptalk.org.