

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 and adults	Children in moderate income families	Women	Pregnant women & children	Native American Indians	Seniors and Disabled
Program	<p><b>U.S. Uninsured Help Line</b> 800-234-1317</p> <p><b>Group Health</b> Arizona Association of Health Underwriters 480-292-7746 www.gpahu.org</p> <p><b>HCG</b> (Health Care Group of Arizona) 602-417-6755 802-247-2289</p>	<p><b>COBRA</b> And then</p> <p><b>HIPAA</b> Health Insurance Portability and Accountability Act 866-4-USA-DOL www.dol.gov</p> <p>And also...</p> <p><b>Conversion Policies</b></p>	<p><b>U.S. Uninsured Help Line</b> 800-234-1317</p> <p><b>Individual Plans</b> Arizona Association of Health Underwriters 480-292-7746 www.gpahu.org</p>	<p><b>MED Program</b> (Medical Expense Deduction Program) 800-352-8401 www.ahcccs.state.az.us</p>	<p><b>AHCCCS</b> Arizona Health Care Cost Containment System (Arizona's Medicaid Program) In State: 602-542-9935 Out Of State: 800-962-6690 www.ahcccs.state.az.us</p> <p><b>SOBRA</b> 800-352-8401 www.ahcccs.state.az.us</p>	<p><b>KidsCare</b> 877-764-5437 602-417-5437 www.kidscare.state.az.us</p>	<p><b>Breast and Cervical Cancer Treatment Program</b> (BCCTP) 888-257-8502</p>	<p><b>Baby Arizona</b> 800-833-4642 www.babyarizona.gov</p> <p><b>SOBRA for Children</b> 800-352-8401 www.ahcccs.state.az.us</p>	<p><b>Indian Health Services</b></p> <p><b>Navajo</b> 602-364-4123 http://www.ihs.gov/FacilitiesServices/AreaOffices/Navajo/</p> <p><b>Phoenix Area</b> 602-364-5179 http://www.ihs.gov/FacilitiesServices/AreaOffices/Phoenix/Index.cfm</p> <p><b>Tucson Area</b> 520-295-2405 http://www.ihs.gov/FacilitiesServices/AreaOffices/Tucson/index.asp</p>	<p><b>Medicare</b> (Age 65 and up) 800-952-5253 800-MEDICARE www.medicare.gov</p> <p><b>Medicare Prescription Drug Program</b> 800-633-4227</p>
Coverage	<p>All group health insurance carriers can impose a 6-month look-back/12-month exclusionary period for pre-existing conditions on enrollees that do not have prior creditable coverage</p> <p>Benefits will vary depending on the chosen plan</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p><b>Cobra Subsidy:</b> 9 months of partially subsidized COBRA premium</p> <p>COBRA coverage available for up to 36 months depending on qualifying events (20+ employees)</p> <p>COBRA benefits are the same as what you had in your group coverage</p> <p>After COBRA expires, HIPAA individual plan conversion benefits are based on the program selected, no expiration</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Usually up to \$5M, assorted deductibles depending on age and ZIP code</p> <p><i>Limits on pre-existing health conditions may apply</i></p>	<p>The Medical Expense Deduction (MED) program provides medical coverage for individuals who do not qualify for other AHCCCS programs because their income is too high; they may be eligible for MED if they have medical expenses in the month of application (or the previous month) that reduce their monthly income to 40% of the Federal Poverty Level (FPL)</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p><b>Both:</b> Offers health, dental, vision, and prescription coverage</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>A wide array of medical services including behavioral health services</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>BCCTP provides full AHCCCS health insurance coverage to uninsured women who have been screened by the Department of Health Services, Well Woman Healthcheck Program or one of the three Native American programs of the National Breast and Cervical Cancer Early Detection Program and have been diagnosed as needing active treatment for breast and/or cervical cancer or pre-cancerous cervical lesions</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p><b>Baby Arizona</b> is a simple, faster way for pregnant women to apply for AHCCCS medical coverage under the federal <b>SOBRA</b> program, a category of AHCCCS members</p> <p>Choose one of the doctors; Make an appointment for a prenatal (pregnancy) visit; at your first visit, the office staff will assist you in completing an application for AHCCCS medical coverage; you will be asked to take information with you to your first visit to show you are eligible for the Baby Arizona program</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Available programs vary depending on health center and may include primary and child care, prenatal and post delivery care, family planning (birth control), minor surgical and orthopedic care, pharmacy, dental and orthodontics, optometry, nursing, mental health, laboratory and radiology.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Medicare offers two standard plans, A: Hospital Insurance and B: Medical Insurance, as well as several supplemental and advantage plans</p> <p><i>Pre-Existing Health Conditions Covered</i></p>
Eligibility	<p><b>GUARANTEED COVERAGE</b></p> <p>Company size 2-50 employees (or self-employed)</p> <p>Two employees must work for at least 6 months out of the year, and work 20 hours per week for coverage</p> <p>Owner can count as an employee</p> <p>Owner name on business license must draw wages from the company</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>Cobra Subsidy:</b> If you were involuntarily terminated between Sept 1, 2008 and Dec 31, 2009, you are eligible for a COBRA subsidy from the Federal Government. If you become eligible for other insurance, you will no longer be eligible for the subsidy. If you turned down COBRA from Sept 1, 2008 to Feb 17, 2009, you are eligible for the subsidy. Must have an income at or below \$125,000 for individuals or \$250,000 for couples.</p> <p>All coverage terminated within the last 60 days (COBRA), or 63 days (HIPAA) for reasons other than gross misconduct or fraud</p> <p>For HIPAA, recently covered by a group program or a COBRA plan for 18 continuous months (COBRA option must have been selected if available and exhausted)</p> <p>Church organizations may be excluded</p> <p>Live in Arizona</p>	<p>Eligibility is subject to medical underwriting</p> <p>If you are denied coverage for a medical condition, you may be eligible for MED program, see other columns</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Must not be eligible for other AHCCCS programs</p> <p>Monthly income can not exceed \$707 for a family of four, after deducting medical expenses. Other deductions include childcare and each person employed</p> <p>Resources can not exceed \$100K. (Only \$5K may be liquid assets: cash, bank accounts, stocks, bonds, etc.) Home equity is counted toward the resource limit, but one vehicle is not counted</p> <p>Arizona resident</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>AHCCCS:</b> Income up to 100% FPL</p> <p><b>SOBRA:</b> Ages 0-5 up to 133% FPL</p> <p>Ages 6-19 and childless adults up to 100% FPL</p> <p>Pregnant women up to 150% FPL</p> <p>Arizona residents</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Children under age 19</p> <p>At or below 200% FPL</p> <p>Must be ineligible for no-cost Medicaid or employer-based coverage</p> <p>No health insurance for the last three months at time of application</p> <p>No limit on resources</p> <p>Arizona residents</p> <p>Parents also qualify with a income of 200% of the FPL</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>At or below 250% FPL</p> <p>No limit on resources</p> <p>Arizona resident and qualified resident</p> <p>No access to other health insurance including Medicare</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>Both:</b> provides medical coverage to pregnant women, and children up to the age of 19 years.</p> <p>Pregnant women - 150% FPL</p> <p>Children &lt; age 1: 140% FPL</p> <p>Ages 1-6: 133% FPL</p> <p>Ages 6 and older: 100% FPL</p> <p>No limit on resources or property that may be owned</p>	<p><b>GUARANTEED COVERAGE</b></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 taxexempt 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><b>GUARANTEED COVERAGE</b></p> <p>Disabled or age 65 and older or people under age 65 with certain disabilities, and people of all ages with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant).</p>
Monthly Cost	<p>Costs depend on employer contribution or health condition of self-employed and ± 60% of the insurance company's index rate</p>	<p><b>Cobra Subsidy:</b> 35% of monthly premium</p> <p>Costs depend on previous employer contribution plus a 2% administrative fee; HIPAA could be higher</p> <p>Individual coverage is also available and may be less expensive, see next column</p>	<p>Costs for individual coverage varies</p>	<p><b>\$0</b> or share-of-cost</p>	<p><b>Both: \$0</b> or minimal share-of-cost</p>	<p><b>\$10 to \$25</b> a month for one child or \$15-\$35 a month for two or more children</p>	<p><b>\$0</b> or minimal share-of-cost</p>	<p><b>\$0</b> or share-of-cost</p>	<p><b>\$0</b> or minimal share-of-cost</p>	<p><b>\$0</b> and share of cost for certain services; deductibles for certain plans</p>

Other programs & resources
<p><b>Health Coverage Tax Credit</b> 866-628-HCTC www.irs.gov (key word HCTC)</p> <p><b>Women-Infant-Children (WIC)</b> 800-252-5942 http://www.azwic.gov</p> <p><b>Family Planning</b> 800-352-8401 www.ahcccs.state.az.us</p> <p><b>Federal Emergency Services (FES)</b> (for people who cannot verify Citizenship or immigration) 800-352-8401 www.ahcccs.state.az.us</p> <p><b>Partnership for Prescription Assistance</b> 888-4PPA-NOW (888-477-2669) www.pparx.org</p> <p><b>VA Medical Benefits Package</b> 877-222-8387 www.va.gov</p>

**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	\$226	\$451	\$677	\$731	\$903	\$1,200	\$1,579	\$1,805	\$2,256	\$2,708
2	\$304	\$607	\$911	\$983	\$1,214	\$1,615	\$2,125	\$2,428	\$3,035	\$3,643
3	\$381	\$763	\$1,144	\$1,236	\$1,526	\$2,029	\$2,670	\$3,052	\$3,815	\$4,578
4	\$459	\$919	\$1,378	\$1,488	\$1,838	\$2,444	\$3,216	\$3,675	\$4,594	\$5,513
5	\$537	\$1,075	\$1,612	\$1,741	\$2,149	\$2,858	\$3,761	\$4,298	\$5,373	\$6,448
6	\$615	\$1,230	\$1,846	\$1,993	\$2,461	\$3,273	\$4,306	\$4,922	\$6,152	\$7,383
7	\$693	\$1,386	\$2,079	\$2,246	\$2,773	\$3,687	\$4,852	\$5,545	\$6,931	\$8,318
8	\$771	\$1,542	\$2,313	\$2,498	\$3,084	\$4,102	\$5,397	\$6,168	\$7,710	\$9,253

- A pregnant woman counts as two for the purpose of this chart.
- Add \$311/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. 74, No. 14, January 23, 2009, pp. 4199-4201. 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](http://www.coverageforall.org).

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## Other sources of information

### Financial aid and free or low-cost benefits

**Government Benefits Finder**  
800-FED-INFO  
[www.benefits.gov](http://www.benefits.gov)

(Search tool for grants, loans and other benefits)

**Catalog of Federal Domestic Assistance**  
[www.cfda.gov](http://www.cfda.gov)

(Search tool for grants, loans and other benefits)

### Finding local health care options

**Bureau of Primary Health Care**  
888-ASK-HRSA  
[www.ask.hrsa.gov/pc](http://www.ask.hrsa.gov/pc)

(Search tool by zip code)

**Department of Health and Human Services**  
[www.hhs.gov](http://www.hhs.gov)

(Various health care search tools)

**Self Help Clearing House**  
[www.mentalhelp.net/selfhelp](http://www.mentalhelp.net/selfhelp)

(Search tool for people sharing information on hundreds of diseases, health conditions and other health care related situations)

**Arizona Department of Economic Security**  
<https://www.azdes.gov/aspnew/default.asp>

(State program information)

### Laws and regulations

**Arizona Department of Insurance**  
800-325-2548  
[www.id.state.az.us](http://www.id.state.az.us)

(General information on all types of insurance)

**Employee Benefits Security Administration**  
[www.dol.gov/ebsa](http://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

**Arizona Association of Health Underwriters**  
480-496-4010  
[www.aahu.net](http://www.aahu.net)

(State organization of insurance brokers)

## ARIZONA

# 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.