



The Affordable Care Act — *What it Means for Those with Pre-Existing Conditions*

Are you uninsured and having a hard time finding health coverage?

Have you been turned down for insurance because of a pre-existing condition?

You May Be Eligible for the New

Pre-Existing Condition Insurance Plan

People with pre-existing conditions face daunting challenges—and high costs—when they go shopping for health insurance. In most states, private insurance companies can refuse to insure you if you have a pre-existing condition.

The Pre-Existing Condition Insurance Plan is a new program created by the Affordable Care Act to help provide coverage for uninsured people with pre-existing conditions until new insurance market rules go into effect in 2014.



www.HealthCare.gov



The Affordable Care Act helps knock down barriers to coverage for uninsured people with pre-existing conditions

The Affordable Care Act helps uninsured people with pre-existing conditions get high quality care, at affordable prices, and get some control back over their own health care.

It does so in two ways. Starting in 2014, discrimination based on a pre-existing condition by an insurer will be prohibited in every state, and you will have access to affordable private health insurance choices through a new organization called an Exchange, a competitive marketplace for health plans. Until then, the new law establishes a transitional program called the Pre-Existing Condition Insurance Plan (PCIP) to make health coverage available to you if you have faced barriers to private health insurance because of a pre-existing condition, and have gone without coverage for at least six months.



The Pre-Existing Condition Insurance Plan—an important new option for you

The Pre-Existing Condition Insurance Plan, which is administered by either your state or the U.S. Department of Health and Human Services, will provide a new health coverage option for you if you have been uninsured for at least six months, 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.





How will the Pre-Existing Condition Insurance Plans be set up?

The Affordable Care Act provides federal funding to support Pre-Existing Condition Insurance Plans in every state. The program may vary depending on which state you live in. Some states have requested that the U.S. Department of Health and Human Services run their Pre-Existing Condition Insurance Plan. Other states have requested that they run the program themselves. You can go to www.HealthCare.gov and find out how the Plan will work in your state.

As of July 1, 2010, downloadable applications will be available in the states where the U.S. Department of Health and Human Services is running the Pre-Existing Condition Insurance Plan. In those states, coverage will begin on August 1, 2010, if you apply by July 15, 2010.

For states running their own programs, application details and coverage dates will vary.

Please visit www.HealthCare.gov to find out when your program will begin and how to apply.

What does the new Pre-Existing Condition Insurance Plan cover?

Thanks to the new Pre-Existing Condition Insurance Plan, premiums won't cost you more just because of your medical condition.

The program:

- Will cover a broad range of health benefits, including primary and specialty care, hospital care, and prescription drugs.
- Will include all covered benefits, even to treat a pre-existing condition.
- Will not charge you a higher premium because of your medical condition.
- Will not base eligibility on income.





Who is eligible?

To be eligible for the Pre-Existing Condition Insurance Plan, applicants must:

- Be a citizen or national of the United States or lawfully present in the United States.
- Have been uninsured for at least the last six months.
- Have had a problem getting insurance due to a pre-existing condition.

Applicants in most States will need a recent copy of a denial letter from private insurance companies as evidence of having a pre-existing condition.

How do I apply?

Log on to www.HealthCare.gov to learn about the Pre-Existing Condition Insurance Plan in your state.

If you live in a state where the U.S. Department of Health and Human Services is running your Pre-Existing Condition Insurance Plan, you will be linked directly to our application page. Or you can call 1-866-717-5826 (TTY 1-866-561-1604) for more information.

In order to apply in the states where the U.S. Department of Health and Human Services is running the Pre-Existing Condition Insurance Plan, you will need, at a minimum:

- A completed and signed application form.
- A copy of a letter from an insurance company or health plan showing that you have been completely denied individual coverage because of a pre-existing condition, or you were offered individual coverage but were denied certain benefits (for example, by a rider to an insurance policy) because of a pre-existing condition.

If you live in a state that is running its own program, www.HealthCare.gov will help connect you to information about how and where to apply in your state.

Check out www.HealthCare.gov for more information on the Pre-Existing Condition Insurance Plan, and other important health care resources that may be available to you.