



The Pre-Existing Condition Insurance Plan

New Health Coverage Option for the Uninsured



Are you uninsured and having a hard time finding health coverage? Have you been turned down for health coverage because of a pre-existing condition?

If you answered yes, you may be eligible for a new Federal program—the Pre-Existing Condition Insurance Plan (PCIP). This program, created by the Affordable Care Act, provides health coverage for eligible children and adults with a pre-existing condition.

What is the Pre-Existing Condition Insurance Plan?

The Pre-Existing Condition Insurance Plan provides people with a pre-existing condition comprehensive health coverage at the same price that healthy people pay. You can receive benefits at any qualified provider of your choice.

This program, managed at the state level in 27 states and by the Federal government in 23 states and the District of Columbia, is designed as a bridge until 2014 when new insurance rules go into effect. Then all Americans—regardless of their health status—will have access to health insurance.

What benefits are included?

With the Pre-Existing Condition Insurance Plan, you still get all the insurance benefits, including treatment for a pre-existing condition. Under each of the plan options, you get standard covered benefits including:

- Primary and specialty care;
- Hospital care;
- Prescription drugs;
- Home health care and hospice care;
- Skilled nursing care; and
- Preventive health and maternity care.

Monthly premiums and cost-sharing vary by state.

www.pcip.gov

What additional features are offered?

These are additional features of the Pre-Existing Condition Insurance Plan:

- You will not be charged a higher premium because of a medical condition; and
- Eligibility is not based on income.

How do I know if I'm eligible?

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

- Be a citizen of the United States or reside here legally;
- Have been without health coverage for at least 6 months; AND
- Have a pre-existing condition or been denied health coverage because of your health.

Each state may use a different method to determine whether a person has a pre-existing condition or has been denied insurance coverage.

You may need to provide evidence that you have a pre-existing condition, such as a copy of a recent letter from an insurance company or health plan that turned you down for coverage, or an offer of individual insurance with a rider excluding coverage for your pre-existing condition.

Depending on what state you live in, your doctor may be able to provide proof of your pre-existing condition.

How do I get more information about the program?

For more information, including program benefits, eligibility and how to apply, visit www.pcip.gov.

There is also a Call Center for the Pre-Existing Condition Insurance Plan. **The Call Center is open Monday–Friday, from 8 am to 11 pm ET, dial 1-866-717-5826.** TTY users should call 1-866-561-1604.

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