



## Pre-Existing Condition Insurance Plan

*New Health Coverage Option for the Uninsured*

### **The Pre-Existing Condition Insurance Plan**

Easier Eligibility Standards and Reduced Premiums

Delawareans who have had difficulty finding health coverage because of a pre-existing condition now can more easily get much more affordable coverage. The U.S. Department of Health and Human Services (HHS) today announced new steps to reduce premiums and make it easier for uninsured Delawareans to enroll in the Pre-Existing Condition Insurance Plan.

The Pre-Existing Condition Insurance Plan was created under the Affordable Care Act to help uninsured people with a pre-existing condition get high quality care at affordable prices and serves as a bridge to 2014 when insurers will no longer be allowed to deny coverage to people with any pre-existing condition, like cancer, diabetes, and asthma. This health coverage program is administered at the State level in 27 states and by the Federal government in 23 States and the District of Columbia. New eligibility standards and lower premiums will open this program to many more Delawareans.

**Reduced Premiums:** Premium prices for Delawareans enrolled in PCIP dropped 40%. Now a 50 year old in Delaware can get comprehensive health coverage for \$250 per month. For more information on premiums please visit [www.pcip.gov](http://www.pcip.gov).

**Simplifying Eligibility:** Starting on or after July 1, 2011, people applying for coverage can simply provide a letter from a doctor, physician assistant, or nurse practitioner dated within the past 12 months stating that they have or, at any time in the past, had a medical condition, disability, or illness. Applicants will no longer have to wait on an insurance company to send them a denial letter. Applicants will still need to meet other eligibility criteria including proving that they are U.S. citizens or residing in the U.S. legally and that they have been without health coverage for six months.

**Partnering with Agents and Brokers:** Beginning this fall, HHS will begin paying agents and brokers for successfully connecting eligible people with the PCIP program. This step will help reach those who are eligible but un-enrolled. Several States have experimented with such payments with good success. This is a part of continuing HHS outreach efforts with States, insurers, providers, and agents and brokers to reach more eligible people and let them know that coverage is available. HHS is also working with insurers to notify people about the PCIP option in their State when their application for health insurance is denied.

For more information, including eligibility, plan benefits and rates, and how to apply, visit [www.pcip.gov](http://www.pcip.gov) and click on "Find Your State." Then select Delaware from a map of the United State or from the drop-down menu. The PCIP Call Center is open from 8 a.m. to 11 p.m. Eastern Time. Call toll-free 1-866-717-5826 (TTY 1-866-561-1604).

[www.pcip.gov](http://www.pcip.gov)

**Toll Free Line: 1-866-717-5826 (TTY 1-866-561-1604)**



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## Quick Facts for Delaware:

Reduction in Premiums:

40%

Rates:

Delaware					
Plan/Age Band	00-18	19-34	35-44	45-54	55+
Standard	\$109	\$163	\$195	\$250	\$347
Extended	\$146	\$219	\$263	\$335	\$467
HSA	\$113	\$169	\$203	\$259	\$360

Potential Premium for a 50 year old:

\$250

Provider network:

- 3,193 physicians
- 189 pharmacies and
- 12 hospitals throughout the state