

Guide to Finding Health Insurance Coverage

Delaware



Are you uninsured? You are not alone. Millions of Americans are without health insurance. Some lost their insurance when they lost their jobs. Others work hard, but their jobs don't provide health insurance benefits. Whatever the reason, finding health insurance can be difficult. If you are looking for coverage, this guide can help point the way.

The road to finding health insurance depends on your "starting point" (you may have more than one starting point).

Starting points:

1. Did you recently lose a job that provided health insurance?
2. Did you recently lose your job because of trade policy—for example, increased imports or jobs moving overseas?
3. Are you an early retiree who has lost your health coverage?
4. Are you unable to afford health insurance?
5. Do you have a serious medical condition or a disability?
6. Are you looking for health insurance but unable to get it through your job?
7. If you still can't find health insurance . . .

1 If you recently lost your job, had health insurance at that job, and . . .

. . . your former employer had at least 20 workers:

Under a federal law (called “COBRA”), if your former employer had at least 20 workers, you have the right to stay in the health plan you had at that job. However, you must pay the total premium yourself, which can be very expensive. And you must act quickly—you generally only have 60 days from the time you lose your job to sign up for COBRA. COBRA usually guarantees 18 months of coverage, but under special circumstances you can get 29 or 36 months of coverage. Some states provide assistance with COBRA premiums to people with disabilities or low incomes.

Your former employer (the human resources or personnel department) is required to tell you about your COBRA rights.

TO LEARN MORE about your rights to continue coverage, check out the U.S. Department of Labor’s “Frequently Asked Questions about COBRA Continuation Coverage” on the agency’s Web site at www.dol.gov/ebsa/faqs/faq_consumer_cobra.html or call toll free 1.866.275.7922 for a referral to the best place to answer your questions. You can also call the Delaware Insurance Department at 1.800.282.8611 or visit www.state.de.us/inscom.

2 If you recently lost your job because of trade policy—for example, increased imports or jobs moving overseas . . .

. . . a federal law called the Trade Adjustment Assistance Reform Act may pay 65% of the cost of your health insurance for up to 3 years. You might qualify for this help, for example, if your employer laid off workers because the company’s products are being replaced by products from other countries or because the company is using more workers in other countries.

TO LEARN MORE about this option, contact the Health Coverage Tax Credit (HCTC) Customer Contact Center: Call toll-free 1.866.628.HCTC or check out their Web site at www.irs.gov/pub/irs-utl/hctc_program_kit_07-05.pdf.

3 If you are an early retiree who has lost your health coverage . . .

. . . the same law that helps workers who lose their jobs because of trade policy may help you. If you are a retiree aged 55 or older, your former employer no longer provides your pension, and your pension benefit is paid by the federal Pension Benefits Guaranty Corporation, you can receive help with 65% of the cost of health insurance until you are eligible for Medicare.

TO LEARN MORE about this option, contact the Health Coverage Tax Credit (HCTC) Customer Contact Center: Call toll-free 1.866.628.HCTC or check out their Web site at www.irs.gov/pub/irs-utl/hctc_program_kit_07-05.pdf.

4 If you cannot afford health care or insurance . . .

. . . there are programs that provide health insurance coverage to people who cannot afford to buy it on their own. You or your family members may qualify, even if you work. However, these programs have income and asset limits. In Delaware, the main programs are Medicaid, the Diamond State Health Plan, and the Delaware Healthy Children Program.

Generally, you and your family can get coverage if you are uninsured and meet the eligibility requirements. Children can often get coverage—even if their parents don't qualify—because the income limits are usually higher for children. In Delaware, children can generally get coverage if their family income is less than:

Size of Family	2	3	4
Income Level	\$27,380	\$34,340	\$41,300

If you are pregnant and meet the income limits shown below, you can get coverage during your pregnancy and for up to 60 days after your baby is born. Often, your baby will then have guaranteed coverage for at least one year.

Size of Family (including unborn baby)	2	3	4
Income Level	\$27,380	\$34,340	\$41,300

If you are not a U.S. citizen, you might be able to qualify, depending on your immigration status and how long you have lived in the U.S.

If you can't afford health care, it is best to apply rather than trying to guess whether or not you are eligible, because the income rules are complicated.

TO LEARN MORE, contact the Delaware Medicaid program or the Diamond State Health Plan at 1.800.372.2022 or TTY 1.800.560.3372. If you do not speak English, you have a right to get help in languages other than English.

TO LEARN MORE about children's health coverage, call 1.877.KIDSNOW or visit www.insurekidsnow.gov.

There may also be other programs to help you pay for health insurance. Be sure to ask about other programs available when you contact the Delaware Medicaid program.

More Help Finding Your Way

You may want help finding out what programs exist, if you qualify, and how to work through the system. You may be able to get this help from the following:

- You can contact the Legal Services Corporation of Delaware, Inc. at 302.575.0408 or visit www.lscd.com to find the legal services office that is closest to where you live. You can also check www.lsc.gov.

5 If you have a serious medical condition or a disability . . .

. . . there are two main programs that may help you. Those programs are Medicare and Medicaid or the Diamond State Health Plan.

Medicare

You might qualify for Medicare, even if you are under age 65, if you have a disability that is expected to last at least a year or is expected to cause your death. In order to get Medicare because you are disabled, you have to apply for Social Security Disability Insurance (SSDI), and you must receive SSDI for 24 months before you can enroll in Medicare. Until that time, you will have to find another source of health insurance, like COBRA (see Section #1) or one of the other options discussed below.

TO LEARN MORE about SSDI, call the Social Security Administration's toll-free number at 1.800.772.1213 (TTY 1.800.325.0778). To learn more about Medicare, call 1.800.MEDICARE (633.4227) or go to www.medicare.gov.

Medicaid

If you are blind or have a disability and your income is low or you spend most of your income on health care, you may qualify for Medicaid. People who have a disability usually qualify for Medicaid because they get Supplemental Security Income (SSI), but you may be able to get Medicaid while you are waiting to find out if you are eligible for SSI. Even if you do not qualify for SSI, you may still be able to get health insurance through Medicaid.

TO LEARN MORE about the rules and how to apply, contact the Delaware Medicaid program toll-free line at 1.800.372.2022 (TTY 1.800.560.3372).

More Help Finding Your Way

Because these programs are so complicated, you may want help. For example, many people are turned down for Medicare or Medicaid coverage the first time they apply. You may need to appeal this decision more than once. The following may be able to help:

- You can call the Legal Services Corporation of Delaware, Inc. at 302.575.0408 or visit www.lscd.com to find the legal services office that is closest to where you live. You can also check www.lsc.gov.
- State Health Insurance Assistance Programs (SHIPs) provide information, counseling, and assistance to Medicare beneficiaries. Contact Delaware's SHIP program, ELDERInfo, at 1.800.336.9500.
- Protection and Advocacy ("P & A") programs provide legal representation and other advocacy services, under all federal and state laws, to all people with disabilities. In Delaware, contact the Community Legal Aid Society at 302.575.0660.

6 If you are looking for health insurance but can't get it through your job . . .

. . . you may have to look for an individual health insurance policy in the private market. Here are some tips to help you:

- Shop carefully before buying insurance on your own because coverage and costs vary from company to company. When shopping for insurance, keep the following terms in mind and ask questions like:
 - ? **Covered Services:** What medical services are covered?
 - ? **Deductible:** How much must I pay before the insurance starts to help pay for services?
 - ? **Copayments:** After I reach my deductible, how much do I pay for services, and how much does the insurance company pay?
 - ? **Pre-existing Conditions:** Does the plan cover health problems I already have? If it does not cover these problems right away, when would it begin covering them? (Also see "Your Rights under Federal Law" on page 6.)
 - ? **Provider Network:** Are the doctors I want to see covered in this policy? If not, would I have to pay extra to see any of my doctors because they are not "in the network"? Also, you may want to ask your doctor directly if he or she would accept this insurance for your care.
- Talk with a health insurance agent in your area to help you think about the right policy for the right price (agents are listed in the yellow pages phone book).
- Be careful about plans that don't offer insurance coverage but offer only discounts on the cost of health care services. Generally, these plans are not a good buy.
- Be sure to find out if the insurance company you are thinking about buying coverage from has been licensed in Delaware and if there have been complaints about the company. For this information, contact the Delaware Insurance Department at 1.800.282.8611.

- Know your rights. Because you may run into problems shopping for an individual policy, you should be aware of your rights and protections under federal and state law. One resource to learn more about these federal and state protections can be found at www.healthinsuranceinfo.net. This Web site has a separate guide for each state.

Your Rights under Federal Law

HIPAA (the Health Insurance Portability and Accountability Act) is a federal law that may give you the right to buy coverage and prohibits insurance companies from refusing to cover a health problem you already have (“pre-existing condition”).

To be eligible for these protections, you must have:

1. had at least 18 months of group coverage (usually through a job),
2. used up any COBRA continuation coverage rights (see #1, above), and
3. had no gaps in coverage longer than 63 days, so you must act quickly.

If you qualify for HIPAA protection, in Delaware, all companies that sell individual insurance must offer you coverage.

Your Rights under Delaware Law

Your state also has laws that control whether an insurance company must offer you a policy, what conditions must be covered, and how high the premiums can be for a policy. Because these rules are complex, call the Delaware Insurance Department at 1.800.282.8611 to understand your rights to insurance coverage in the individual market.

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If you still can't find health insurance . . .

. . . you may be able to get some help from the following resources:

Low-Cost Primary Health Care

A local community health clinic may be able to help you get low-cost primary health care. These clinics offer health services for the entire community on a sliding-scale fee. You can check for a community health clinic near you at www.ask.hrsa.gov/pc/ or by calling the Mid-Atlantic Association of Community Health Centers at 301.577.0097 .

Help with Hospital Bills

If you are uninsured and have to go to the hospital to get care, you may be able to receive some help paying your hospital bills. Some nonprofit hospitals are required to provide help because of their mission and tax status. Some states have laws that require hospitals to provide care for free or at reduced prices to people who are eligible. Also, many hospitals have financial assistance programs. There are also some federal laws that can help you. If you receive a bill, it's important that you make an effort to pay. Ask to speak with a financial counselor or a patient advocate at the hospital. You may be able to negotiate a lower bill or a better bill payment plan.

State Pharmacy Assistance Programs

Delaware has two programs to help qualifying individuals with their prescription drug costs: the Delaware Prescription Drug Assistance Program and the Nemours Clinic. To qualify for help through the Delaware Prescription Drug Assistance Program, you need to be uninsured for prescription drug costs, be over 65 or disabled, and meet the program's income criteria. To qualify for the Nemours Health Clinic Pharmaceutical Assistance Program, you need to be over 65 and meet the program's income criteria. To find out more about the Delaware Prescription Drug Assistance Program, contact the Division of Social Services at 1.800.996.9969, extension 17. For additional information on the Nemours Health Clinic Pharmaceutical Assistance Program, you can call either the Wilmington office at 1.800.292.9538 or the Milford office at 1.800.763.9326.

You may also qualify for other programs that can help you with drug costs and health care or other expenses. The National Council on the Aging's Web site, www.benefitscheckup.org, has a questionnaire that you can fill out to learn about a variety of state-based services for which you might qualify. Although the site focuses on services used by those over 65, many of the programs are available to younger individuals as well.

Other Prescription Drug Discount Programs

You may be eligible for a free or discount prescription drug program through the company that makes the drugs you need. You can get more information about these programs at www.rxassist.org or www.needymeds.com.

Veterans' Assistance

If you are a veteran, you may be entitled to care and prescription drug coverage through a VA medical facility. You may be eligible for assistance if you served at least 180 days active duty and have an honorable or general discharge. Contact the VA Health Benefits Service Center toll free at 1.877.222.VETS.

*These state guides are available online at
www.familiesusa.org.*

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