UNINSURED?

Buy your own health insurance? Have a pre-existing condition? On COBRA? Eligible for HCTC Benefits?

> InclusiveHealth.org 1-866-665-2117



North Carolina Health Insurance Risk Pool, Inc.

If you have pre-existing medical conditions, we can offer affordable health insurance coverage.

Other insurance companies said they allowed pre-existing conditions, but the premiums were astronomical. Inclusive Health saves inclusive Health over me \$1000 a month over my Previous carrier. - Wanda A.

> My husband retired, and when COBRA was about to run out, we started looking for health insurance. We having only one prescription insurance companies saw it! They looked for pre-existing none. I was so relieved when I called Inclusive Health and we were both immediately

> > -Carol O.

Call or visit us online today. InclusiveHealth.org 1-866-665-2117 NCCLUSIVE STATE OPTION

North Carolina Health Insurance Risk Pool, Inc.

STATE OPTION



Insuring individuals with medical conditions

InclusiveHealth.org 1-866-665-2117

North Carolina Health Insurance Risk Pool, Inc.

STATE OPTION

Inclusive Health provides affordable, individual health insurance for North Carolinians who buy their own health insurance and have a pre-existing medical condition, are exhausting COBRA or are eligible for Health Coverage Tax Credit (HCTC) benefits.

We offer a range of coverage options to best fit your needs. Our three PPO plans have the features you expect, including copays for office visits, drug coverage, preventive benefits and more. Our High-Deductible 5000 plan offers a Health Savings Account and covers you 100% after you meet your deductible.¹

Coverage Options

Choose the plan that best fits your budget. For more info, visit us online at *InclusiveHealth.org* or call 1-866-665-2117.

Coverage options and details	PPO 1000	PPO 2500	PPO 3500	High-Deductible 5000
Annual Deductible	\$1,000	\$2,500	\$3,500	\$5,000
Coinsurance	80% in-network 50% out-of-network	80% in-network 50% out-of-network	80% in-network 50% out-of-network	100% in-network 100% out-of-network
Annual out-of- pocket maximum	\$2,000 in-network \$4,000 out-of-network	\$4,000 in-network \$5,000 out-of-network	\$6,000 in-network \$7,000 out-of-network	\$5,000 in-network \$5,000 out-of-network
Lifetime benefit maximum	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000

¹ Please note: The copay only applies to the PPO1000, PPO2500 and PPO3500 plans. If you selected the HDHP 5000 High Deductible plan, prescriptions will not be reimbursed until you have satisfied your entire \$5,000 deductible. You will pay the Inclusive Health negotiated price for a prescription until you have reached the \$5,000 deductible, then all services are covered at 100%.

Premium rates are updated on an annual basis. Deductibles are calculated on a calendar - January-December. A new deductible will begin each year in January.

Am I eligible?

- You are eligible if you can answer YES to AT LEAST ONE of the following questions:
- □ Your medical condition makes you "uninsurable."
- □ You have been offered coverage by an insurer with a conditional rider limiting coverage.
- □ You have only been offered coverage at a premium rate that is higher than Inclusive Health's rate.
- □ You have one of the Inclusive Health **presumptive conditions** which allows automatic enrollment.
- □ You have had 18 months of continuous coverage and have exhausted COBRA coverage.
- You are eligible for the Health Coverage Tax Credit (HCTC) for trade displaced workers under the TAA, ATAA or PBGC programs.

InclusiveHealth.org 1-866-665-2117

AND

2 You can answer YES to ALL of the following questions:

- □ You are Not Medicare eligible.
- □ You are Not Medicaid eligible.
- □ You are a U.S. resident.
- □ You are a North Carolina resident.
- □ You or your spouse are not eligible for insurance at work.
- □ You are not covered as a dependent.

I'm eligible! How do I apply?

Visit *InclusiveHealth.org* for these options:

- Contact info to speak directly with an Agent
- Inclusive Health enrollment events in your area
- Apply online or download the application form

OR call our toll-free number: 1-866-665-2117

Presumptive Conditions

Conditions that allow for automatic approval for coverage if you answer YES TO ALL in question 2.

AIDS/HIV Kidney Disease requiring dialysis Alcohol Addiction Leukemia Alzheimer's Disease Lupus Erythematosus Disseminate Amyotrophic Lateral Sclerosis Major Organ Transplant (Lou Gehrig's Disease) Malignant Lymphoma Malignant Tumors Aneurysm Angina Pectoris Melanoma Angioplasty Morto/ Sensory Aphasia Ankylosing Spondylitis Multiple or Disseminated Sclerosis Muscular Dystrophy Anorexia or Bulimia Aplastic Anemia Mvasthenia Gravis Cancer (except skin) treated or Myocardial Infarction diagnosed in past 5 years Myotonia Open Heart Surgery Cardiomyopathy Cerebral Palsy Paget's Disease Chronic Obstructive Pulmonary Disease Paraplegia or Quadriplegia Chronic Renal Failure Parkinson's Disease **Chronic Pancreatitis** Polyarteritis (periarteritis nodosa) Cirrhosis of the Liver Polycystic kidney **Congestive Heart Failure** Primary Cardiomyopathy Coronary Insufficiency Progressive Systemic Sclerosis (Scleroderma) Coronary Occlusion Psoriatic Arthritis Crohn's Disease Psychotic Disease **Cystic Fibrosis** Psychotic Disorder Raynaud's Disease Dementia Diabetes - Type I or Type II Rheumatoid Arthritis Emphysema Schizophrenia Sickle Cell Friedreich's Ataxia Stroke(CVA) Hemochromatosis Hemophilia Suicide Attempt Hepatitis C Syringomyelia Hodgkin's Disease Tetralogy of Fallot Huntington's Chorea Ulcerative Colitis Wilson's Disease Hydrocephalus