



RESURGENS^{PC}
ORTHOPAEDICS

January 14, 2011

Dear Doctor,

I would like to take some time to forward information about a new program that could help some of your uninsured patients obtain coverage. As a result of the new federal healthcare law, many patients who have been denied healthcare coverage as a result of a pre-existing condition will be able to obtain private insurance coverage through a new Pre-Existing Condition Insurance Plan (PCIP). This program will continue until January 1, 2014, when new federal and/or state insurance options will become available to all uninsured Americans.

The Pre-Existing Condition Insurance Plan will cover an expansive range of health benefits, including primary and specialty care, hospital care, and prescription drugs. Additionally, preventative services will be covered with no member co-pays or deductibles. Monthly premiums vary depending on the state the patient lives in and the patient's age (and in some states, other factors also affect premium rates, such as the region in which the patient lives).

To be eligible for the programs, a patient must be a U.S. citizen or legal resident, must have been denied insurance from a commercial insurance company because of a pre-existing condition, and have been uninsured for at least six months.

The application process is easy. Patients can apply online at <https://www.pcip.gov/> or mail in an application. Once eligibility is verified, insurance coverage can be effective in less than one month.

A FAQ document targeted at patients is enclosed. I encourage you to pass it on to your patients that could benefit from this program.

Additional information about the program can also be found at www.pcip.gov.

Thank you for your continued support,

D. Kay Kirkpatrick, MD
Co-President, Resurgens

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Georgia
Pre-Existing Condition Insurance Plan (PCIP)
PATIENT FAQ

The New Federal Healthcare Law includes health coverage for any person who is currently uninsured due to a denial for a pre-existing medical condition. This new health insurance, called the Pre-Existing Condition Insurance Plan (PCIP), is available now and will remain in place until new health insurance options become available in January 2014.

What is the Pre-Existing Condition Insurance Plan?

The Pre-Existing Condition Insurance Plan was created as part of the nation's new health insurance law, the Affordable Care Act, to make health insurance available to people if they have had a problem getting health insurance due to a pre-existing condition.

How do I know if I am eligible for coverage through PCIP?*

Eligible individuals must:

- (1) Be a U.S. citizen or a legal resident
- (2) Have a pre-existing medical condition
- (3) Not have been covered under health coverage for the previous six months before applying for coverage (proof of denial from insurance company will be needed)

How do I enroll?

You can enroll for the Pre-Existing Condition Insurance Plan online at www.pcip.gov, or call the PCIP customer service department toll-free at (866) 717-5826 (TTY 1-866-561-1604) and ask for an application.

When will my PCIP coverage be effective?

A completed PCIP application received **on or before** the 15th of the month will go into effect on the first day of the next month. A completed application received **after** the 15th of the month will go into effect on the first day of the following month. For example: If the applicant enrolled between 8/1/2010-8/15/2010, they are effective 9/1/2010, and if they enroll between 8/16/2010 and 8/31/2010, they are effective 10/1/2010.

How much does the Pre-Existing Condition Insurance Plan cost me?***

Monthly Premium: Georgia

Age	Standard Option	Extended Option	HSA Option
0 to 18	\$174	\$234	\$181
19 to 34	\$261	\$351	\$271
35 to 44	\$313	\$422	\$325
45 to 54	\$400	\$539	\$416
55+	\$557	\$749	\$578

What benefits do I receive under PCIP?

Covered In-Network Services:

- \$1,000 - \$3,000 annual deductible (except for preventive services, which have no copay or deductible), varies by plan option
- Patient pays 20% of the cost of covered benefits
- Out-of-pocket costs capped at \$5,950 per year
- No lifetime maximum
- Preventive services include: periodic health evaluations (ie. annual physicals), screening services (ie. cancer screenings, cardiac screenings, and mammograms), well-child care, and child and adult immunizations.

*Persons currently covered by a health plan, including employer insurance plans, Medicare, Medicaid and existing high-risk pool programs, are not eligible for the Pre-Existing Condition Insurance Plan. PCIP coverage is only available to an eligible individual. There are no family plans or premium levels in PCIP.

**The following link provides complete detail on all covered services, including all preventive services and member out of pocket responsibilities <http://www.pciplan.com/forms/pdfs/brochure.pdf>; premiums may be subject to changes made by PCIP.