



Frequently Asked Questions

When will Cover Florida plans be available? Cover Florida policies will be available to Floridians by January 5, 2009.

Who is eligible for Cover Florida? Cover Florida plans are available to all applicants age 19 to 64 who have been without health insurance for at least six months, and are not eligible for a public health insurance program such as Medicaid or Medicare.

Are there exceptions to the six-month exclusion? Yes. If you have had health insurance in the past six months, you can still participate in Cover Florida if you lost coverage due to any of the following reasons:

Loss of a job that provided an employer-sponsored health benefit plan.

Death of, or divorce from, a spouse who was provided an employer-sponsored health benefit plan.

Exhaustion of coverage that was continued under COBRA or continuation-of-coverage requirements under s. 627.6692, Florida Statutes.

Will I be denied coverage for a pre-existing condition? No, Florida applicants with pre-existing health conditions will not be denied enrollment in a Cover Florida plan. However, Cover Florida plans can exclude payment for treatment of a specific pre-existing condition for one year. After one year, the plan must cover for treatment of pre-existing conditions. During the one-year period, however, you are covered for services that are not related to your pre-existing condition.

How do I enroll in Cover Florida plans? After Cover Florida plans become available for purchase on January 5, 2009, applicants can purchase plans directly through one of the six authorized Cover Florida providers.

At least two carriers are available in every county. See the “Available Plans” section of the www.CoverFloridaHealthCare.com Web site to learn which plans are available in your area. Interested individuals and employers can learn more by contacting each company directly. The State of Florida will not be involved in the purchasing process. Each insurance company will have a Web page and a toll-free telephone number where you can learn about available Cover Florida plan benefit options.

What are the rates for Cover Florida plans? Cover Florida plans can be purchased for as low as \$23.70 per month. However, the rates for Cover Florida plans vary depending on the applicant’s age, gender and chosen benefit options. Typically, preventive plans do not cover hospitalization; however, have lower monthly premiums than catastrophic hospitalization benefit plans. See the plan details in the “Available Plans” section of the www.CoverFloridaHealthCare.com Web site to see examples of rates.

Will Cover Florida plans include all of Florida’s mandated benefits? No, Cover Florida plans will not be required to include all of Florida’s mandated benefits, nor will they be “bare-bones.” Instead of limiting the types of benefits offered, Cover Florida plans contain costs through the quantity of services, such as number of office visits or number of days in the hospital that policyholders may use each year.

All approved insurance plans offer consumers at least two plans, one with catastrophic and hospital coverage, and one without. All Cover Florida plans benefit options include – at a minimum – coverage for preventive services, screenings, office visits, as well as office surgery, urgent care, hospital coverage, emergency care, prescription drugs, durable medical equipment, and diabetic supplies.

Can I see my own doctor? Once plans begin enrolling consumers, you will need to contact the Cover Florida plan for which you wish to enroll to see if your current physician is included in their network.

Is there prescription coverage? Every plan offers at least one of the following: prescription drug benefit coverage, use of a prescription drug manager, or a discount drug card. Each plan will vary.

Are Cover Florida plans portable? Yes. Cover Florida consumers can take their coverage with them if they change jobs or become unemployed. This portability is possible because Cover Florida plans are designed to cover the individual, regardless of employment status or employer participation.