



What are the benefits of AccessWV?

Applicants are able to apply for either single or family coverage under AccessWV. Within single or family coverage, there are four different plans (A, B, C, or D). Deductibles and out-of-pocket maximums vary depending on the plan chosen.

All of these plans cover hospital, physician services, out-patient services, home care, prescription drugs, maternity care, rehabilitation, out-patient therapies, and other medical services.

Please see our "AccessWV Summary of Benefits" online at www.AccessWV.org or call 1-866-455-8491 for a more complete description of what is covered.



Dear Fellow West Virginians:

My administration is dedicated to developing innovative insurance solutions for the serious problems faced by those with chronic illnesses. Some of these individuals are unable to receive health insurance in the private market, and others have lost their group insurance due to the closing of their employers' businesses. For those without insurance through employers, finding health insurance is one of the most difficult issues individuals and families grapple with every day.

Through the creation of AccessWV, I believe that many West Virginians will find a new option for obtaining health insurance - an option that can positively impact the health and financial stability of working individuals, their families and our state.

AccessWV is another great example of what can be accomplished when dedicated people come together with the goal of finding new ways to solve complex problems. It is just one part of our state's overall commitment to make health insurance available for individuals who are in need.

Sincerely,

Joe Manchin III, Governor

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Offering individual health insurance coverage to West Virginians who have pre-existing, severe or chronic medical conditions.



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Provided by the State of West Virginia



Here's how AccessWV can help you!

In 2004, the West Virginia Legislature created the West Virginia Health Insurance Plan, now called AccessWV. AccessWV guarantees that all West Virginia residents who qualify can purchase health insurance through the plan, regardless of their current and past health circumstances. This plan is offered by the State of West Virginia.

To qualify, an applicant must be a West Virginia resident for at least 30 days and must have experienced one or more of the following:

- Been rejected, within the last six months, for health insurance by a carrier selling health insurance in West Virginia; or

- Can only get coverage at rates higher than AccessWV; or
- Have a recognized chronic or severe condition; or
- Be eligible under Health Insurance Portability and Accountability Act (HIPAA) or Health Care Tax Credit (HCTC). WV residency is required.

Residents who do not qualify for this plan include:

- Those eligible to receive coverage under a group insurance plan (offered either by their employer or their spouse's employer);
- Those eligible for medical coverage under a federal or state program including Medicare, Medicaid, or WVCHIP;
- Those who are residents of a public institution (i.e. federal or state correctional facility or a Veteran's home).



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What are the premiums associated with AccessWV?

Monthly premiums for AccessWV are based on age, gender, geographic area and single or family coverage. The current "AccessWV Premium Schedule" is located on the website www.AccessWV.org.

How do I obtain AccessWV coverage?

An application for coverage may be obtained by contacting AccessWV at 1-866-445-8491 or on our web site at www.AccessWV.org. Generally, policies become effective on the first of the month following approval of the application.