

Overview of NON – ACA Options - How do NON-ACA options generally compare to/work with typical ACA plans?

	ACA	NON – ACA ALTERNATIVES						
COVERAGE	INSURANCE CARRIER	OPTION 1: Medi-Share	OPTION 2: Alieria	OPTION 3: Altrua	OPTION 4: New Sharable Health Program	OPTION 5: HBAT	OPTION 6: STM National General	OPTION 7: Hospital Indemnity
ISSUE-ABILITY	Guaranteed Issue during OEP or if SEP qualified	GI if of Christian Faith <i>and</i> Lifestyle. No Tobacco, drugs, etc.	GI - <u>Any</u> Faith. Tobacco accepted if quitting 1 yr.	SI, but <u>Any</u> Faith. UW like a Med Supp, No Tobacco, drugs, etc.	GI, but <u>Any</u> Faith. Indiv. or Group. Tobacco OK.	UW, 4 levels: Preferred, Std., Sub Std. and RFQ / Declined. 1099 only	SI, if healthy, is better/deeper coverage. Also, GI options*	Simplified Issue**
PRE – EX, all benefits are subject to the P/E if present	None, all conditions covered upon effective date.	Yes – 36 Mo then, limited coverage if clear of condition.	Yes – 24 Mo. <u>Won't</u> cover Cancer 12 mo. Some ben. have waiting period	Yes 24/24, no cancer for 12 mo. No surgery / 90 days unless life threat	Yes, for 36 months. It phases out over time.	None, Covered upon effective date 100%	Yes	Yes - 12 Mo
WELLNESS	Yes - \$0 cost	None (PPO Discount)	Yes – all 63 ACA Requirements, Physical @ 9mo	No (PPO Discount)	Limited (PPO Discount)	Yes – 100% by ACA guidelines	No	Limited
COMPREHENSIVE?	Yes - all 10 ACA Essential Benefits	“Major Med Model” w strong In/Out Patient benefits	No – uses a Hospital Surgical model Limited O/P, optional	“Major Medical Model” w strong In/Out Patient benefits	“Major Medical Model” w strong In/Out Patient benefits	Yes - all 10 Essential Benefits	SI is \$1 m “Major Med.” GI is a Limited Benefit HI	No - Hospital Indemnity – Fee Based with some limited OP
DOCTOR	Yes	Yes – after AHP & \$35 copay. \$0 Teledoc	Can upgrade to limited Dr. & OP copay	Yes, copays available by plan	Yes, no copay. \$0 Teledoc	Yes, with or without copay	SI - Yes - \$0 Teledoc & \$50 Urgent Care	Yes – Limited. Often has Telemedicine
OUTPATIENT	Yes	Yes	Surgery only. Optional O/P limited MEC	Yes (No, w Bronze & Copper)	Yes	Yes	Yes	Yes – Limited
DRUGS	Yes – has a formulary	Limited, new conditions, 6 Mo. Covers “Treatment” RX	No – Discounts only. No “Treatment” Rx coverage	No – Discounts. Treatment RX are covered	Limited, new covered 120 days. Covers “Treatment” meds	Yes – has a formulary	Yes, after deductible/co,	Limited RX coverage

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Coverage (Cont.)	INSURANCE CARRIER	OPTION 1: Medi-Share	OPTION 2: Alera	OPTION 3: Altrua	OPTION 4: New Sharable	OPTION 5: HBAT	OPTION 6: STM	OPTION 7: Hospital Indemnity
CANCER	Yes	Yes	Not OP, No chemo/rad. No "Treatment RX"	Yes	Yes	Yes	Yes	Hospital/Surg. only. Chemo LIMITED O/P
CANCER PLAN	Optional	Optional	Must be added	Optional	Optional	Optional	Optional - CUL	Must be added
GAP	Recommended	Recommended	Recommended	Recommended	Recommended	Recommended	Recommended	Yes, but not w same Ins. Co.
DVH	Recommended	Recommended	Recommended	Recommended	Recommended	Recommended	Recommended	Recommended
DRUG/ALCOHOL REHAB	Yes, covered	Not covered	Not covered	Not covered	Very Limited Coverage	Covered to ACA guidelines	Not covered	Not covered
ANNUAL/INCIDENT & LIFETIME MAX	None	None except on Maternity and Pre-ex conditions	Yes \$500k per occurrence. Optional \$1m life max	\$1 – 3 million, less on Copper / Bronze	No Annual or Lifetime max. Certain cond. have limits.	No Annual or Lifetime max. There is a max out of pocket.	Yes, \$1 m on SI plan. GI is a limited/indemnity plan	Pays by Fee/Schedule
NETWORK	Narrow, do Not go OUT	Large – w IN & Out of network coverage. PHCS	Large – w IN & Out coverage. PHCS	Large, w IN & Out of network coverage PHCS	PHCS for Doctor. Pays any hospital	PHCS for Doctor. Any Hospital	Large – w IN & Out coverage	Optional – Pays any provider, also KARIS/PPO
SIZE/EXPERIENCE	BCBS – A+ rated	400k members, 25 years, 1993	Moderate. "One Share"	1999, under 50k	5 years – 15k	Approx. 2 years	Large - strong	Moderate
TYPICAL COSTS – FAMILY/IND.	High without subsidy	Low - Moderate	Moderate - High	Low - Moderate	Low - Moderate	Moderate to high. Excellent value for 45+	Low - Moderate	Low - Moderate
HSA OPTION	Yes	No	No	No	No, option MEC	Optional MEC	No	No
PRE -TAX	No	No	No	No	No	CPA. Group, Yes	No	No
GROUP	Yes, a different appointment	No	No	No	Yes, 3+	Only in TN	No	No
ACA Compliant/No Penalty	Yes	Yes	No	Yes	No	TBA	No	No

*STM now up to 11/11 or 12/12 renewable in some states Check your state/plan. **Primary "Hospital Indemnity" (Option 7) plans: US Health, Philadelphia American, Reserve National/Kemper, United Health One, National General, and Manhattan/CUL. Plans sold emphasizing Rates, No Deductible & Any Provider. Clients don't know it's an HI plan w scarce Chemo/Treatment & RX!