Overview of NON ACA Options

How do NON-ACA options generally compare to/work with typical ACA plans?

INSURANCE CARRIER Guaranteed Issue during OEP or if SEP qualified None. All	OPTION 1: Medi-Share (Non-Insurance) GI if of Christian Faith and Lifestyle. No Tobacco, drugs, etc.	OPTION 2: Sedera (Non-Insurance) GI, but no faith component. Sold as Individual or Group. Healthy	OPTION 3: PSM GigCare/Majo r Medical ERISA Plan For 'Healthy Working	OPTION 4: PSM MaxGuard / Limited Med ERISA Plan For 'Healthy Working Owners'	OPTION 5: STM/Tri Term UHO	OPTION 6: Hospital Indemnity UHO/Man Life Underwritten,
during OEP or if SEP qualified	Faith <i>and</i> Lifestyle. No Tobacco, drugs,	component. Sold as Individual or	Working	•		
None. All		Lifestyle.	Owners'		Simplified Issue Can be "Rated"	can be "Rated"
conditions covered upon effective date.	Yes – 36 Mo then, limited benefit for specific condition	Yes. Pre-Ex phases out over time. Pays full after 36 months	None.	None.	Yes for STM. Tri Term Pre-Ex covered after 12 months	Yes, PALIC and Man Life Covered after 12.
Yes - \$0 cost	No	Limited: Mam / Immunization/Flu	Yes – ACA guidelines	Yes – ACA guidelines	No. Limited benefit - Tri Term	Very Limited if any
Yes - all 10 ACA Essential Benefits	Unlimited for "Med Necessary" care In/Out Hospital. RX limit Limited Maternity	Unlimited for "Med Necessary" care In/Out Hospital. RX limit. Limited Maternity	Yes - all 10 ACA Essential Benefits. No Specialty RX	No. Can pay up to \$1m per claim per year. Limits # of visits/days &	\$1 -2 m "Major Med." No Maternity, etc.	No – "Fee Schedule" with limited OP/RX and Chemo. No Maternity
Yes	Yes – after AHP & \$35 copay. \$0 TeleDoc.	Yes, after IUA. \$0 Teladoc, Specialist, Urgent	Yes, with or without copay	\$50 Dr, Specialist and Urgent Care	SI – Optional copays & \$0 Teladoc	Yes – Limited. usually has Telemedicine
Yes	Yes	Yes	Yes	Yes w limits	Yes	Yes – Limited
Yes – has a formulary. Unlimited.	Limited. Pays for new diagnosis / "Treatment" RX 6 mo. No Maintenance RX	Limited. Pays for new diagnosis / "Treatment" RX 6 mo. No Maintenance RX	Yes – has a formulary and copay options, unlimited. No Specialty RX	No. Generic, PAP and other discount programs apply	Yes, after deductible/co, if not pre-ex	No. Some limited RX coverage
Ye Ye Ye Ye	es - all 10 ACA esential Benefits es - has a ormulary.	specific condition fective date. es - \$0 cost No Ses - all 10 ACA Sesential Benefits Wed Necessary" care In/Out Hospital. RX limit Limited Maternity Yes - after AHP & \$35 copay. \$0 TeleDoc. Yes Ses - has a Formulary. Inlimited. Treatment" RX 6 mo. No	specific condition Fays full after 36 months Immunization/Flu Limited: Mam / Immunization/Flu Unlimited for Seential Benefits Seential Benefi	specific condition fective date. Ses - \$0 cost No Limited: Mam / Immunization/Flu Ses - all 10 ACA Sesential Benefits Ses - all 10 ACA Sesential Benefits. No Specialty RX Specialty RX Limited Maternity Ses - after AHP & Yes, after IUA. Specialist, Urgent Ses - has a S	powered upon a specific condition and fective date. Pays full after 36 months Limited: Mam / Jes – ACA guidelines guidelines Pays full after 36 months Limited: Mam / Jes – ACA guidelines guidelines Pays full after 36 months Ves – ACA guidelines Pays full after 36 months Ves – ACA guidelines Pays full after 36 months Ves – ACA guidelines Ves – all 10 ACA guidelines Ves – all 10 ACA Essential Benefits. No per year. Limits # of visits/days & RX, etc. Pays – after AHP & Specialty RX Sp	specific condition fective date. No Limited: Mam / Immunization/Flu guidelines guidelines guidelines ses - \$0 cost No Unlimited for Sesential Benefits ses - all 10 ACA Sesential Sesential Benefits. No Sesential Benefits. No Specialty RX Sesential Benefits. No Specialty RX Sesential Benefits. No Specialty RX Ses - after AHP & Yes, after IUA. Yes, with or Without copay Ses Ses - all As a Ses - has a

Coverage (Cont.)	INSURANCE CARRIER (ACA)	OPTION 1: Medi-Share	OPTION 2: Sedera	OPTION 3: PSM Gig/Major Med	OPTION 4: PSM MaxGuard/ Limited Med	OPTION 5: STM	OPTION 6: Hospital Indemnity
CANCER/Chemo	Yes	Yes	Yes. Tobacco 50+ limits Cancer coverage to \$50k.	Yes. Caution re "specialty RX"	Yes, but limited to # of visits.	Yes to policy max	Hospital/Surg. only. Chemo/Rad LIMITED O/P. MUST add plan
CANCER or CI PLAN	Optional - ML	Optional - ML	Optional –Yes if Tobacco (limits)!	Optional - ML	Must be added	Optional - ML	Must be added ML
GAP	Recommended ML	Recommended ML	Recommended ML	Recommended ML	Recommended ML	Recommended ML	Yes, but not w same Ins. Co.
DVH DRUG/ ALCOHOL REHAB	Recommended Yes, covered to ACA guidelines	Recommended Not covered	Recommended \$3000 Max	Recommended Covered to ACA guidelines	Recommended No	Recommended Not covered	Recommended Not covered or very limited
ANNUAL/ INCIDENT & LIFETIME MAX	None. There is a max out of pocket exposure for member	None except on Maternity, RX and Pre-ex conditions	None except on Maternity, RX Pre- ex conditions Smokers 50+	None. There is a max out of pocket exposure for member	\$1 Million per year/\$5 Million Lifetime.	Yes, \$1 - \$2 m on SI plan.	Yes. Only Pays the Fee/Schedule amount
NETWORK	Narrow, No coverage OUT of network (ER)	Large – w IN & Out of network coverage. PHCS	None – Karis repricing. Pays any provider.	Multiple PPO / EPO's and RPB option	First Health	Large – w IN & Out coverage	Optional – Pays any provider, usually has PPO
SIZE/ EXPERIENCE	DOI approval. Large block.	400k+ members since 1993	10 years – 35k	Approx. 100k 6 years	Approx. 100k 6 years	Large - strong	Large. Likely a few million
TYPICAL COSTS – FAMILY/IND.	High without subsidy	Low - Moderate	Low - Moderate	Moderate - High Competitive for 45+	Low – Moderate – all ages	Moderate	Low - Moderate. High for "benefit to premium" ratio
HSA OPTION	Yes	No	No	Yes	No	No	No
PRE -TAX	ICHRA	Consult CPA	Consult CPA	Consult CPA	Consult CPA	Consult CPA	Consult CPA
GROUP	Yes, w ICHRA	No	Yes, 3+ w excellent rates	Yes, "WellGuard"	No	No	No
ACA Compliant/QHP	Yes	No	No	No	No	No	No

Note: This is not a detailed summary of Non-ACA Benefits. The AGENT is responsible to read membership/plan benefits and understand them in detail. This is document is NOT intended for client use. It's only a quick glance, generalized summary.

^{*}STM UHO's TRI TERM/Allstate up to 36 months renewable in some states. Check your state/plan. Caution: There are competing STM plans that are Fixed Indemnity and are very limited, very dangerous.

** Leading "Hospital Indemnity/Limited Medical" plans are: US Health/Freedom, Philadelphia American, Reserve National/Kemper, United Health One, Allstate and Manhattan Life. Plans sold emphasizing Rates, No Deductible & Any Provider. Clients don't know it's an HI plan with scarce Chemo/Treatment, RX, Hosp/Surgical limitations! ... even if you tell them. Best used as "Gap" coverage.