

Under 65 years of age: Health Care & related Options

It is not practical to keep rates, deductibles and other information concerning health insurance on our webpage any more. To get the latest information please contact an independent agent to help you with your concerns. One such contact appears at the end of our 2009 website piece below.

2009 Information

The following content is for informational purposes only, and nothing is intended to be, nor should be construed to be medical, insurance, legal, or financial advice.

(The information presented is related to the State of North Carolina. Other states will have similar guidelines & programs, so residents of states other than North Carolina should check with their state governments or an independent health care insurance agent for similar information.)

This information is based on Legal residents of North Carolina (for at least 6 months). The preliminary sample rates shown are “Preferred Non-tobacco” samples only, as actual rates will vary based on Carrier, Gender, Health History, Date of Birth, Tobacco Usage, Geographic locations, & other variables.

If tax, investment, medical, insurance, or legal advice is required, seek the services of a licensed professional.

PLAN TYPES:

Short term: Typically 30 to 365 days. Used during temporary situations. Usually limited in scope & coverage.

CoInsurance/CoPay: Similar structure to Group Plan offerings.

Deductable Only: 100% insurance after deductible.

Mini or Limited: These are not recommended except for special cases.

UNDERWRITING GUIDELINES: Rates will vary based on Carrier, Gender, Health History, Date of Birth, Tobacco Usage, Geographic locations, & other variables.

- Be prepared to provide a detailed health history for up to 10 years, sometimes for your full lifetime.
- Carriers may “Rate up” (increase rates) for specific health details, or may write an exclusion rider. Rate up examples may be ‘Smoker – 30%’; Risky hobbies – 10%. An exclusion rider may require an individual be clear of specific cancer for 2 to 8 years before coverage.
- In some cases, Rates can be guaranteed for up to 3 years.

SAMPLE RATES: HIGH DEDUCTIBLE HEALTH PLAN

- HEALTH SAVINGS ACCOUNT ELIGIBLE

COMPANY A

		50 YEARS	55 YEARS	60 YEARS	63 YEARS
DEDUCTIBLE-FAMILY: \$5700					
CO-INSURANCE: 100%					
HEALTH SAVINGS ACCT ELIGIBLE	MALE	\$202.31	\$251.04	\$293.38	\$314.54
RATE GUARANTEE: 12 MONTHS	FEMALE	\$232.34	\$272.70	\$302.24	\$323.89

PROVISIONAL RATES

PREFERRED NON-TOBACCO

		50 YEARS	55 YEARS	60 YEARS	63 YEARS
DEDUCTIBLE - INDIVIDUAL: \$2850					
CO-INSURANCE: 100%					
HEALTH SAVINGS ACCT ELIGIBLE	MALE	\$288.96	\$354.82	\$417.59	\$446.20
RATE GUARANTEE: 24 MONTHS	FEMALE	\$329.45	\$388.98	\$429.47	\$458.62
	Age 20	Male: \$125.91	Female: 124.83		

COMPANY B

		50 YEARS	55 YEARS	60 YEARS	64 YEARS
DEDUCTIBLE- FAMILY: \$5000					
CO-INSURANCE: 100%					
HEALTH SAVINGS ACCT ELIGIBLE	MALE	\$272.25	\$355.01	\$466.09	\$588.06
RATE GUARANTEE: 12 MONTHS	FEMALE	\$276.61	\$314.72	\$359.37	\$404.02
	Age 20	\$91.48			

SAMPLE RATES: LOWER DEDUCTIBLE HEALTH PLAN

**PROVISIONAL RATES
PREFERRED NON-TOBACCO**

		50 YEARS	55 YEARS	60 YEARS	64 YEARS
<u>COMPANY C</u>					
DEDUCTIBLE \$1000					
PCP/SP: \$20/\$35	MALE	\$361.00	\$440.00	\$562.00	\$655.00
CO-INSURANCE: 80%	FEMALE	\$443.00	\$492.00	\$553.00	\$607.00
DRUG: \$250 BRAND DEDUCTIBLE					
\$10/35/60	AGE 20	\$162.00/MALE	\$214.00/FEMALE		

		50 YEARS	55 YEARS	60 YEARS	64 YEARS
<u>COMPANY D</u>					
DEDUCTIBLE \$1000					
PCP/SP: \$15/\$30	MALE	\$332.50	\$401.23	\$471.11	\$592.26
CO-INSURANCE: 80%	FEMALE	\$428.15	\$464.24	\$512.35	\$579.08
DRUG: \$10/35/50/25%					
	AGE 20	\$191.02/MALE	\$264.05/FEMALE		

COMPANY E

<u>SHORT TERM MEDICAL</u>	(Typically available for 30 to 365 days duration.)				
DEDUCTIBLE-FAMILY: \$2500	COUPLE	\$198.92	\$256.93	\$303.12	\$303.12
CO-INSURANCE: 80/20%					
COVERAGE DURATION: 3 MONTHS	AGE 22	\$46.05			

- The preliminary sample rates above vary based on Carrier, Gender, Health History, Date of Birth, Tobacco Usage, Geographic locations, & other variables. The rates shown above are for Preferred Non-smoker.
- All applicants are underwritten individually by their chosen carrier and Final Rates are provided by the Underwriting Department of the each carrier.
- Assumed to be Legal residents of North Carolina for at least 6 months.

If tax, investment, or legal advice is required, seek the services of a licensed professional.

Key to Drug copays: Sample: \$10/35/50/25% for Generics/Brands-Preferred/Brands-NonPreferred/Injectables.

PRE-EXISTING CONDITIONS: Pre-existing conditions are typically not covered for the first 6 to 12 months. If existing insurance coverage is not broken (new signed up within 63 days of previous coverage termination), this period may be waived. This does not guarantee acceptance by a carrier.

You must have a "Letter of credible coverage" from your previous carrier.

GLOSSARY

COINSURANCE: A percentage of the contracted rate to an in-network health care professional or a percentage of the cost from an out-of-network health care professional that the individual is responsible for paying. (i.e. Hospital, Outpatient, MRI, etc.)

COPAYMENT (COPAY): A flat per service charge that individuals are responsible to pay for services such as doctor visits or prescription drugs.

DEDUCTIBLE: The dollar amount that individuals must pay each benefit period for eligible health expenses before the plan begins to pay for covered services. Benefits vary based on the deductible selected. (Usually starts at \$1,000.)

LIFETIME MAXIMUM: The maximum amount the insurance carrier will pay per member for covered services. (Typical caps between \$1M & \$3M.)

IN-NETWORK HEALTH CARE PROFESSIONAL: Any health care professional (physician, hospital, etc.) that participates in the network.

OUT-OF-NETWORK HEALTH CARE PROFESSIONAL: Any health care professional (physician, hospital, etc.) that does not participate in the network. (Higher out-of-pocket expenses.)

INPATIENT CARE: Care given to an individual admitted to a hospital, hospice, skilled nursing center, or rehabilitation center.

OUTPATIENT CARE: Any health care service provided to an individual who is not admitted to a healthcare center.

OUT-OF-POCKET COSTS: Copays, deductibles*, coinsurance, or fees paid out of pocket by an individual for covered health services. (*Some carriers include, some exclude – always check.)

OUT-OF-POCKET MAXIMUM/COINSURANCE MAX: The total dollar amount of coinsurance you are required to pay for covered services in a policy period. Once you reach the coinsurance maximum, you will not have to pay any more for the coinsurance for covered medical expenses for the remainder of the policy year. NOTE: Determine whether the Deductible amount is in addition to this stated coinsurance maximum.

OPEN ACCESS PLAN: Direct access to participating specialists – no need for referrals from your primary care doctor to see an in-network or out-of-network specialist.

PDL: Prescription Drug List with Tiers – Generic (Tier One), Formulary Brand (Tier Two), Non-Formulary (Tier Three). The tier determines the amount you pay when you fill a prescription. The amount is determined by your health plan. (List of Food and Drug Administration (FDA) approved brand name and generic medications.)

HEALTH SAVINGS ACCOUNT (HSA): A Tax-Advantaged savings account which provides you with a tax-free way to save and budget for healthcare expenses. You must be enrolled in an IRS-qualified High Deductible Health Plan (HDHP) to make the tax deductible contributions, with a combined medical/pharmacy deductible that applies to the out-of-pocket maximum. (Eligibility only up to age 65.)

For further information on HSAs, visit www.treas.gov/offices/public-affairs/hsa/

Key points:

- Max 2010 Individual annual contribution: \$3,050 (> 55 may make additional \$1,000 catch-up).
- Minimum 2010 Insurance Deductible: \$1,200.
- Max 2010 Out-of-pocket expense: \$5,950.
- Unused \$ roll over to following year (unlike FLEX plans).

- Carriers will charge an administration fee.
- Before age 65, withdrawals may be used for qualified medical expenses only (tax free). Any non-medical expense will be treated as taxable income with a 10% penalty.
- After age 65, withdrawals may be used for medical (tax free) or non-medical (as taxable income).

IRS Health Care Tax Credit (HCTC): For those people who are receiving their pension from the US Pension Benefit Guarantee Corporation (PBGC), a health care tax credit is a possibility. For guidelines on eligibility & other related information, please visit www.irs.gov/individuals/article/0,,id=187948,00.html .

North Carolina State Guaranteed Issue Insurance: When all else fails, the state of NC offers inclusive health coverage as part of their risk pool. Information can be obtained at www.inclusivehealth.org . There are three plans that range from:

- \$1,000 Deductable for \$1,258 per month.
- \$5,000 Deductable for \$654 per month.

Our thanks to Ann Swinson: While the NNRA has no connection (official or otherwise) with Ann Swinson or Legacy Health Strategies, we thank Ann Swinson for her assistance & information. She is an independent agent licensed in North Carolina for Individual Health Insurance, Medicare Supplemental insurance, and the NC risk pool. Her contact information is as follows:

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