

KANSAS HEALTH INSURANCE ASSOCIATION

Health Insurance Policy Highlights and Comparisons

The following table is NOT a complete summary or explanation of policy benefits.

Please refer to your policy for complete details of benefits.

Benefits	Policy Type \$1,500	Policy Type \$2,500	Policy Type \$5,000	Policy Type \$10,000
		HSA COMPLIANT		
Deductible, per Calendar Year				
Single	\$1,500	\$2,500	\$5,000	\$10,000
In Network Co-insurance				
Single	70% of the next \$5,000; then benefits paid at 100%	70% of the next \$8,333; then benefits paid at 100%	70% of the next \$5,000; then benefits paid at 90%	70% of the next \$15,000; then benefits paid at 90%
Out of Network Co-insurance	(Out of network expenses do not apply toward the out of pocket maximum and are never paid at 100%)			
Single	50% up to Lifetime Maximum	50% up to Lifetime Maximum	50% up to Lifetime Maximum	50% up to Lifetime Maximum
Benefit percentage payable <small>After Deductible and Co-insurance</small>	100%	100%	90%	90%
Individual Lifetime Maximum	\$3,000,000	\$3,000,000	\$3,000,000	\$3,000,000
Prevention Services	\$25 Co-pay then benefits paid 100%	Benefits are payable on the same basis as any other sickness.	\$25 Co-pay then benefits paid 100%	\$25 Co-pay then benefits paid 100%
Inpatient Hospital Care	Benefits are payable on the same basis as any other sickness. Prior authorization is required; \$1,000 penalty for failure to obtain pre-authorization.			
Therapies: Physical, Speech & Occupational	Benefits are payable on the same basis as any other sickness.			
Oral Surgery	Benefits are payable on the same basis as any other sickness.			
Spinal Manipulation	Benefits are payable on the same basis as any other sickness; limited to 20 visits per calendar year.			
Maternity	Benefits are payable on the same basis as any other sickness benefit...			

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Benefits continued	Policy Type \$1,500	Policy Type \$2,500	Policy Type \$5,000	Policy Type \$10,000
Emergency Room	Benefits are payable on the same basis as any other sickness.			
Ambulance	Benefits are payable on the same basis as any other sickness, subject to policy limitations.			
Durable Medical Equipment	Benefits are payable on the same basis as any other sickness, rental/purchase over \$500 must be pre-authorized.			
Inpatient Mental Health/ Substance Abuse	Benefits are payable on the same basis as any other sickness, limited to the lesser of a combined maximum limit of 30 days or \$7,500 in a calendar year.			
Outpatient Mental Health/ Substance Abuse	<p>For Policies with \$1,500, \$5,000 and \$10,000 deductibles eligible expenses for the first visit are reimbursed at 100%, deductible waived; visits 2-20 are subject to a \$25 co-pay, deductible waived.</p> <p>For the \$2,500 deductible Policy outpatient mental health/substance abuse benefits are payable on the same basis as any other sickness and are not limited</p> <p>Calendar year maximum limit for the \$1,500, \$5,000 and \$10,000 deductible Policies: 20 visits for mental nervous and substance abuse combined.</p>			
Skilled Nursing Care	Benefits are payable on the same basis as any other sickness, limited to 120 days per calendar year.			
Home Health Care	Benefits are payable on the same basis as any other sickness, limited to 40 visits per calendar year. Prior authorization required.			
Prescriptions	<p>Coverage is only available through the Prescription Network Provider. The member pharmacy MUST file the prescription claim on Your behalf.</p> <p>Prescriptions are subject to the calendar year deductible, then paid at 50% until the out of pocket expense is met; thereafter, prescriptions will be paid at the benefit percentage payable of your policy up to the lifetime maximum of the policy.</p>			
<p>* On the \$2,500 deductible policy deductibles and co-insurance are subject to change according to IRS code section 220 in relation to the CPI. Consult your tax attorney, accountant, or other qualified advisor for information relating to the steps necessary to maintain a compliant individual HSA policy.</p>				