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| This Policy’s Benefits Compared to Affordable Care Act-Compliant Plans |
| Provision | [Name of Product and company name] | ACA Plan |
| Maximum Benefit Limit | Benefits limited to [$X] per contract term plus renewals, per lifetime? | No annual or lifetime maximum on Essential Health Benefits |
| Pre-existing Conditions | Excluded, waiting periods, etc. | Covered |
| Medical Underwriting | Premiums vary based on medical conditions, referred to as medical underwriting. | Premiums can only vary based on age, smoker status, and geographic area.  |
| Policy term | [X] days (less than 365 days) | 365 days (one year) |
| Renewability | Renewable [X] times for a total coverage duration of no longer than 36 months.Underwriting for new health conditions will occur at renewal and could influence eligibility for coverage or premium rates. OR: Underwriting does not occur at renewal. | Guaranteed Renewable |
| Prescription Drugs | Not covered, only generics, etc. | Covered as an Essential Health Benefit |
| Preventive Care | If covered but subject to cost sharing, list covered preventive services and disclose cost sharing dollar amount. | Covered as an Essential Health Benefit at $0 cost sharing if provided in network |
| Maternity Care | Not covered, covered as a rider, etc. | Covered as an Essential Health Benefit |
| Mental Health and Substance Use Disorder Services | Not covered, only alcoholism, only outpatient/inpatient, etc. | Covered as an Essential Health Benefit |
| Rehabilitative and Habilitative Services | Not covered, covered with a treatment number limit, etc. | Covered as an Essential Health Benefit |
| Provider Network | No provider network – treatment at any provider, subject to balance billing (you pay excess costs above what we determine is the reasonable cost of the service). | Access to a network with no exposure to balance bills for in-network services. Nebraska network adequacy laws apply. |
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