

# Christian Health Aid Newsletter



Volume 4, Issue 1  
August 2017

## NEW PLAN CHOICES for 2018

In response to the input received from our members, we have decided to offer three plan choices for 2018.

**#1—Traditional CHA plan:** This is the plan that we have been offering, with only slight changes. There will be a slight increase in shares to keep up with inflation. Additionally, Continuous Glucose Monitors (CGM) have been added to the list of shareable expenses, effective July 1, 2017. This plan will continue to have a maximum shareable amount of \$35,000 per year, and the board of directors will continue to consider each case that exceeds this maximum and offer additional assistance where needed through the Brother-to-Brother Fund.

**#2—The Emerald Care plan:** This plan has been designed for those who prefer to handle their own health care costs for the most part, but would like to have some help in place for the eventuality of a major health care expense. The monthly sharing amount will be \$45 per unit with a maximum sharing amount of 3 units per household regardless of the number of family members who are enrolled. Members of this plan will have an Incident Member Responsibility

(IMR) of \$5,000 per incident, which means they will be personally responsible for the first \$5,000 of each incident before they are eligible to ask for sharing from other members through the plan. Because the bills will be handled on a "per incident" basis, all bills will be negotiated and self-paid by the member. Negotiating help may be available through CHA, but details of this still need to be worked out. Discounts obtained by the member will be applied to their IMR, so it is to the member's benefit to negotiate any available discount. Once a bill has been determined to be shareable, CHA will pay 100% after the member's IMR has been satisfied, up to an annual limit of \$100,000 per person. There will be a lifetime sharing limit of \$125,000 per illness. Because of the lower cost of this plan, not all medical expenses will be eligible for sharing. A comparison list is included in this newsletter.

**#3—The Diamond Care plan:** This plan is for those who are willing to contribute a bit more on a monthly basis and consequently are able to submit more items for sharing from the plan. Shares for this plan will be \$150 per unit per month, with a maximum of 3

units per household. This plan choice has an Annual Member Responsibility (AMR) of \$500 per person. Incidents must exceed \$500 to be eligible for sharing, even after the AMR has been satisfied. As with the Emerald plan, all bills will be negotiated and self-paid by the member, and then be submitted to the office for sharing. Discounts obtained by the member will be applied to their AMR. Bills will be shared at 100% on this plan and there will be an annual limit of \$200,000 per person and a lifetime limit of \$125,000 per illness.



Because of the higher limits of sharing in the new plans, members of the Emerald Care and Diamond Care plans will not be eligible for further donations from the Brother-to-Brother Fund.

Both the Emerald Care and Diamond Care plans will be offered with an optional com-

panion plan called ExtenCare, which offers an additional \$100,000 sharing per illness per year. The cost of this plan will be \$20 per unit per month in addition to the normal shares mentioned above.

Following is an explanation of some of the terms used in new plans:

**Unit**—The head of the household is one unit; a spouse is one unit; all children comprise one unit.

**Incident**—Testing and/or treatment for a medical condition. An incident ends when one of the following takes place: 1) The patient is pronounced cured, 2) The patient stabilizes to a routine maintenance level, or 3) The patient goes 90 days without further testing or treatment for that particular condition.

**Illness**: A diagnosis of a particular medical condition, injury, or illness.

For a more detailed comparison of the plans, please see the charts on pages 4-6 of this newsletter.

Launching these new plans is a leap of faith. Since they are structured so differently from the traditional plan, it is difficult to make financial projections. We trust that our members will be patient with us as adjustments need to be made.

## BROTHER-TO-BROTHER PAGE

\$37,500 remained on a bill for a heart procedure after CHA paid their maximum for a member.

After a lengthy hospital stay, a member who has limited earning power was left with a \$19,000 balance at the hospital to pay.

Chronic illness over the course of many years led one of our members to consider a non-standard treatment, which is not covered under CHA. After consulting their brethren, they proceeded, with good results. Initial costs for this treatment were close to \$5,000. More treatment may follow.

Cancer is devastating, physically, emotionally,

and financially. One of our members who is battling cancer was left with a \$70,000 bill from the initial diagnosis and treatment.

After surgery due to an accident, a member was left with bills of \$9,400.

An older member, after having open heart surgery was left to pay over \$35,000 of the bills.

Another cancer patient was left with bills of over \$18,000 to settle.

*Remember that this is only a sampling of your brothers and sisters needing help. God bless you for your unselfish giving!*

---

***Your donation to the Brother-to-Brother fund can make a difference for members who are struggling with needs that are not met by the normal sharing program.***

*We appreciate you giving your confidence to the Board of Directors to decide how to disburse the donations received for the various needs published on this page. Please do not specify a particular need on your donation check as we may not be able to honor the request depending on the response received. Please make your donation check payable to*  
***CHA Brother to Brother Fund and mail it to PO Box 336, Montezuma, KS 67867***



## CONTINUOUS GLUCOSE MONITORS ARE NOW SHAREABLE!

Only those who deal with sugar diabetes can fully appreciate the advances in technology in this area over the last decade. One of those advances is the CGM which tests blood sugar every few minutes to detect trends and changes in the blood sugar level. This allows for much more accurate insulin dosing, and consequently better control of blood sugar levels. As of July 1, these devices are now shareable under CHA, whether they are built into an insulin pump, or as a standalone unit. Infusion sets, sensors, and other supplies are only shareable as part of the diabetic supplies sharing program.

# Thank You Notes

Printed with permission

Thank you for the check received to help us on our hospital expense. It is very much appreciated!  
Jerry & Kayla Isaac

Good afternoon. Just dropping you a note to say how much we appreciate the help CHA has been to us in the past years! :) We thank God for His goodness shown through the brotherhood. This morning while going through some paper work I noticed a statement from CHA stating that they had paid off a fairly large bill. This was from some time ago, and I had set it aside, wanting to write a thank you note then, but had failed to get it done. This large amount was not the first time that this had happened but rather the second time at the least. As we continue to face uncertainty with the future and bills like these continuing to come without predictability, it is a comfort to feel the uplift of the brotherhood!

Cameron & Marcie Unruh

Your thoughtfulness is greatly appreciated. We are deeply thankful for the help we received in behalf of my Germany surgery. May the Lord bless you for your kindness.

With love, Les & Jan Dirks

After the Aid Plan Board gave us a donation to pay off the medical bill, I used payoff power to get a 35% reduction from the hospitals and I am returning that to help some one else.

Thanks so much,

Nelson & Pam Koehn

Dear CHA,  
Thank you so much for the extra payment you made—on our hospital bill—up and above your normal limit. We deeply appreciate it! Thanks again.  
Love, Ron and Carol Becker

You went above and beyond in a big, big way! and for that, you deserve a big, big thanks! Thank you all so very much for helping us to pay off Mike's huge pharmacy bill! We truly appreciate it! May God Bless You all!

Love, Thanks, and Prayers,  
Mike & Jan Cummings

A belated thank you for the generous contribution we received from the Brother to Brother fund! It is humbling to know we are the benefactors of our brethren's kindness! We trust God has blessed each one who shared of their monies.

With gratitude,  
Danielle, Peter,  
Ezekiel, & Naomi  
Zimmerman

We would like to thank you for helping lighten our load of medical expenses. May God richly bless each and everyone who has given of their time and money.  
Steve and Susan Kahn

On May 23rd, 2015 our son Alex had a roller blade accident, resulting in a critical head injury. As we waited during surgery, not knowing what the outcome would be, we were comforted by God's Word, as well as by the people who were with us. Thankfully, the surgery went well and Alex has since recovered fully and has nothing to remind us of the incident except a scar. Although at a time like that one does not consider the cost of medical care, the primary concern being the welfare of the injured one, later the reality sets in that this will be a burden. We are very grateful that the hospital chose to write off a large amount of the outstanding bill, even before we asked for any discount. But the real purpose of this letter is to thank you as a board for the help we were given to help cover the cost after the regular CHA payout. We have been able to pay the outstanding balance, and move on with life. May God bless you all for your generosity!

Ornan & Sheila Weaver & Family



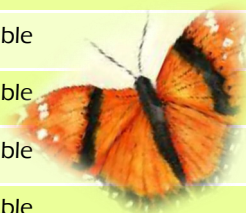
## 2018 CHA PLANS OVERVIEW



	<i>Traditional CHA Plan</i>	<i>Emerald Care Plan (New)</i>	<i>Diamond Care Plan (New)</i>
Share Pricing	Varies from \$61 to \$266 per person per month based on member's age	\$45 per unit per month with a maximum of 3 units or \$135 per household	\$150 per unit per month with a maximum of 3 units or \$450 per household
Member Responsibility	Annual Member Responsibility (AMR) of \$1,000 per person with maximum of \$2,000 per household per year	Incident Member Responsibility (IMR) of \$5,000 per incident	Annual Member Responsibility (AMR) of \$500 per person
Incident threshold to qualify for sharing	All approved bills are applied to AMR or shared as per CHA Guidelines	Incident must exceed \$5,000 to be eligible for sharing	Incident must exceed \$500 to be eligible for sharing even if AMR has already been satisfied
Handling of discounts	Discounts obtained by member or by CHA are taken off total amount billed before anything is applied to AMR or shared by CHA	Discounts obtained by member will be applied to IMR if it has not already been satisfied. If the discounts equal or exceed \$5,000, the member pays nothing.	Discounts obtained by member will be applied to AMR if it has not already been satisfied. If discounts equal or exceed \$500, the member pays nothing.
Sharing percentage	80% after AMR is satisfied (Exception when secondary to Medicare or other insurance where remaining bill may be shared at 100%)	100% after IMR is satisfied	100% after AMR is satisfied
Annual sharing limit	\$35,000 per person	\$100,000 per person*	\$200,000 per person*
Illness sharing limit	No lifetime limit or illness limit	Lifetime limit of \$125,000 per illness*	Lifetime limit of \$125,000 per illness*
Help beyond the plan limits	Bills that exceed the \$35,000 limit are eligible for board review and further donations	*An additional \$100,000 per illness per year is available by participating in the ExtenCare companion program at an additional cost of \$20 per unit per month. To receive help from ExtenCare for a medical incident, you must be enrolled before the incident begins.	
Pre-existing clauses	No pre-existing clauses or waiting periods	Incidents for which you are receiving treatment (other than routine medication) when you join the plan will not be shareable. New incidents which begin after becoming a member but involving the same illness will be shareable.	
Other provisions	This plan is secondary to all other insurance or medical aid with the exception of state aid who is always the payer of last resort.	These plans are secondary to all other types of coverage or financial assistance. All other sources must be exhausted before bills may be shared by CHA. If funds that are shared for the payment of medical bills are not used for this purpose, membership in the plan will be terminated.	

## COMPARISON of SHAREABLE ITEMS

	Traditional CHA Plan	Emerald Care Plan	Diamond Care Plan
Ambulance	Shareable	Not shareable	Shareable up to \$5,000
Anesthesia	Shareable	Shareable	Shareable
Assistant Surgeon	Shareable	Shareable	Shareable
Chemotherapy	Shareable	Not shareable	Shareable
Chiropractic Manipulative Treatment	Shareable up to 12 per year	Not shareable	Not shareable
Consultations	Shareable	Shareable	Shareable
Critical Care Unit	Shareable	Shareable	Shareable
Delivery Room	Shareable	Shareable	Shareable
Dental Accidents	Shareable	Shareable	Shareable
Diagnostic Testing	Shareable	Shareable	Shareable
Durable Medical Equipment	Limited sharing	Not shareable	Limited sharing
Emergency Room	Shareable	Shareable	Shareable
Home Health	Up to 24 licensed personnel visits per year shareable	Not shareable	Up to 24 licensed personnel visits per year shareable
Hospice	Shareable	Not shareable	Shareable
Hospital Room & Board	Shareable	Shareable	Shareable
Intensive Care Unit	Shareable	Shareable	Shareable
Maternity Care & Delivery	Shareable	Inpatient charges shareable—(pre-existing pregnancies excluded)	Shareable—(pre-existing pregnancies excluded)
Mental Health Treatment	Shareable	Shareable	Shareable
Nursery & Neo-natal Nursery	Shareable	Shareable	Shareable
Office & Out-patient Surgery	Shareable	Shareable	Shareable
Office Visits	Shareable	Shareable	Shareable
Operating Room	Shareable	Shareable	Shareable
Out-patient IV	Shareable	Not Shareable	Shareable
Physician Charges for Inpatient Care	Shareable	Shareable	Shareable
Plastic Surgery for Reconstruction	Limited Sharing	Not Shareable	Limited Sharing
Prescriptions & Injections	Very Limited Sharing	Not Shareable	Shareable



## COMPARISON OF SHAREABLE ITEMS (CONTINUED)

	Traditional CHA Plan	Emerald Care Plan	Diamond Care Plan
Prosthetic Implants and Breast and Eye Implants	Shareable	Not Shareable	Shareable
Pulmonary Procedures	Shareable	Shareable	Shareable
Recovery Room	Shareable	Shareable	Shareable
Skilled Nursing	Shareable	Shareable	Shareable
Supplies for Outpatient Burn, Accident, and Respiratory Needs	Shareable	Shareable	Shareable
Surgeons' Fees	Shareable	Shareable	Shareable
Surgical Implants	Shareable	Shareable	Shareable
Therapy, including Eye, Occupational, Physical, & Speech	Shareable	Not Shareable	Shareable up to 45 sessions (with limitations)

## Tips & Tidbits

### *Plan changes—including Dental or Vision*

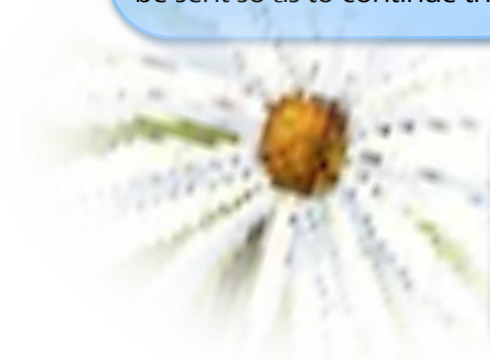
Renewal forms for 2018 will be going into the mail in October. If you wish to make any plan changes for next year, including adding or deleting the dental or vision plan, this needs to be done by December 1. Due to complications with member responsibilities, etc., we do not make plan changes mid-year.

### *School Board Tips*

Many schools pay for their teachers' CHA—a practice that we heartily endorse! As teachers come and go from various schools, it is challenging to keep the correct teachers enrolled and the billings sent to the right places. There are several things that make this easier for us at the office. When you call to enroll a new teacher, please make sure you have their correct name spelling, date of birth, Social Security number, and, if it is a single teacher, their parents' names. A school email address that is passed along from one treasurer to the next is very helpful in keeping communication with the office intact. If a teacher is not returning for the following year, please supply us with their home address where future billings can be sent so as to continue their membership without interruption.

### *Heartfelt Thanks—and God Bless You!*

The administration of the Christian Health Aid expresses our appreciation to all of you who support the plan by your participation and contributions. It is a real blessing to witness God's people at work in the financial sense, reaching out to help their brothers and sisters through CHA. May you never feel it is a dollar poorly spent, for it brings rich rewards in God's Kingdom.



# NAVIGATING THE SELF-PAY MAZE

Trends come and go in the medical world as they do in other areas of life. Currently we find that the practice of having patients self-pay their medical bills is on the rise. Providers become weary of hassling the "insurance" world, and many times they view CHA as insurance as well.

Before we go any further with this topic, let's clarify CHA's position on self-pay bills. Some years ago we had a policy that we did not accept self-paid bills unless the provider refused to bill CHA. That policy has been rescinded.

**All CHA members are now free to negotiate and self-pay their bills and submit them to CHA for reimbursement.**

This method of payment places more responsibility on the member to provide the information that is needed at the office in order to process their bill. From time to time we hear members grumble about the information we ask for. Please do not take this as a lack of trust—it is simply an organized way to handle business when we are tending to 70,000 bills per year. Even Jesus

established order to handle large crowds. Remember how He divided the 5,000 into groups of 50's and 100's before feeding them? When we see a credit card receipt for \$250 we don't know if it is for an x-ray, a supply of vitamins, or removal of a pre-cancerous lesion; therefore, we ask for a detailed bill.

We realize that obtaining a detailed bill can become a challenge at certain providers. It is perfectly OK to tell the provider that you wish to private pay, but that you are a member of a health care sharing ministry (which is not insurance) that will help you with your bill, and that for this purpose you need an itemized bill.

It can also be helpful to tell them that if they wish to print the information out on a health insurance claim form for you, that is perfectly acceptable and will contain all the information that we need to help you with your bill. There are 2 primary types of health insurance claim forms that are commonly used.

1) The UB-04 form that is used by hospitals

2) The CMS-1500 (or HCFA) form that is used by most other providers including doctors, clinics, labs, etc.

Reduced size sample copies of these are shown below for your reference.

Last, but not least, we need a CHA Self-pay Medical Bill Reimbursement Form filled out to accompany your bill. This form can be faxed or emailed to you from the office, and is also available for download on the internet at [www.churchofgodinchristmennonite.info](http://www.churchofgodinchristmennonite.info).

If you have questions regarding a self-pay bill submission, please call the office and we will be happy to assist you!





## SHARE ASSISTANCE FUND

For families who cannot afford their monthly shares to be a part of CHA -

There is help available!

Please visit with your local deacon about getting enrolled in the Share Assistance program to help you with your monthly shares.

*For those who have extra to share, your donation to the Share Assistance Fund can make a difference for members who are struggling to pay their monthly shares.*

*Please make your donation check payable to*

**CHA Share Assistance Fund**

*and mail it to*

**PO Box 336, Montezuma, KS 67867**

## A PEEP BEHIND THE SCENES

Medical bills come to us with alpha-numeric codes on them. ICD codes (International Classification of Diseases) tell us what illness the patient was treated for. There are 68,000 ICD codes in our software. CPT codes (Current Procedural Terminology) tell us what procedure was performed. There are 10,000 CPT codes in our software.

The average medical bill has 20 pieces of information that must be entered in our system in order to process the bill.

Our telephone rings 150 times on the average day.

CHA shares about \$325 per minute (during working days) for members' medical bills.

## The Aid Plans

*...sharing makes a difference...*

301 S Fry St  
PO Box 336  
Montezuma, KS 67867

Phone: 620-846-2286  
Fax: 620-846-2290  
E-mail: [aidplans@ucom.net](mailto:aidplans@ucom.net)

*Bear ye one another's burdens, and so fulfil the law of Christ. Galatians 6:2*

For Aid Plan forms, please visit  
[churchofgodinchristmennonite.info](http://churchofgodinchristmennonite.info)

### Email & Fax Directory

<u>Dept.</u>	<u>Email address</u>	<u>Fax</u>
<b>BAA</b>	<a href="mailto:baa@ucom.net">baa@ucom.net</a>	888-977-8823
<b>CHA Membership</b>	<a href="mailto:cha@ucom.net">cha@ucom.net</a>	888-977-8825
<b>CHA Medical Bills</b>	<a href="mailto:chabills@ucom.net">chabills@ucom.net</a>	888-977-8826
<b>CHA (physical fax)</b>		620-846-7751
<b>MUA</b>	<a href="mailto:mua@ucom.net">mua@ucom.net</a>	888-977-8819
<b>Office Manager</b>	<a href="mailto:aidplans@ucom.net">aidplans@ucom.net</a>	888-456-0671
<b>General (physical fax)</b>		620-846-2290