



Volume 4, Issue 2 October 2017

Emerald Care & Diamond Care Updates

As we move toward January 1st and the launching of the Emerald Care & Diamond Care plans, we are continuing to develop the details of how the plans will function.

In our last newsletter we mentioned the possibility of providing help for our members to negotiate their • bills, but details were pending.

We have been communicating with our repricing team and they have offered that they can continue to serve us through the self-pay plans as well as the Traditional Plan. We have gratefully accepted their offer for several reasons. Following are some of the points that we considered.

- Many of our members find it very confusing and daunting (not to mention timeconsuming) to negotiate their medical bills.
- Our repricing team has a whole arsenal of tools at their disposal that

neither the average CHA member nor the office staff has access to, including databases of millions of settled bills that give them a good idea what providers accept as fair compensation in each area of the nation.

- Our repricing team includes a licensed coder who is able to review the bills for incorrectly coded items, double billings, items that should have been bundled as a single charge, etc. This allows them to catch errors that most members and CHA staff would not.
 - Providers are usually willing to give nice discounts on the member's responsibility, but may try to get everything they can when an organization is paying the bulk of the bill. This tends to leave CHA pretty much unprotected if the negotiating party does not have accurate knowledge of

current prices.

- Providers have been known to price gouge • when there are no safeguards in place. An example of this is a memwho recently ber checked on an outpatient procedure at a hospital close to home and was quoted \$105,000 for the procedure. Feeling this was out of reason, checked with another renowned facility who quoted him around \$25,000 for the same procedure. A phone call to a third facility who is well acquainted with CHA and has gone out of their way to give our members a fair deal told him they would perform the treatment for \$1,400. That's right—about 1% of what the first facility quoted!! Now supposing he had negotiated a 70% discount at the first facility, we would have said he did well, but the procedure would still have been
- outrageously overpriced.
- With the new, higher limits that the Emerald Care and Diamond Care plans offer, there are hundreds of thousands of dollars at stake. It quickly becomes evident that individuals who are properly equipped to negotiate fair prices will be a tremendous asset in keeping these plans financially viable.
- Some of our members have found it very difficult to procure the itemized bills necessary for us to process their self-pay bills. Our repricing team can facilitate this process for us when the member is unable to obtain them.

In consideration of these points, we have made some course corrections in how the Emerald Care and Diamond Care plans will function.

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- All bills will still be selfpay, meaning that the provider will bill the member directly and the member will issue the payment to the provider. What happens between receiving the bill and paying the bill will vary depending on the total cost of the incident. Remember that an incident is testing or treatment for a medical condition that may be comprised of multiple bills from various providers.
- All bills for incidents that total less than \$5.000 for Emerald Care members or less than \$500 for Diamond Care members will be the responsibility of the member to negotiate

- and settle directly with the medical providers.
- All bills for any incident that exceeds \$5,000 for **Emerald Care members** or \$500 for Diamond Care members should be assembled and sent to the office along with • the proper self-pay documentation. (We are still working on the forms that we will need you to fill out and will publish those as soon as possible.) Once CHA staff has determined the bills to be shareable, they will be forwarded to our repricing team, who will work out an appropriate settlement with the provider. CHA will deduct any member responsibility (AMR or IMR, depending on plan) and
- issue payment to the member. At this point, the member may negotiate their portion of the bill with the provider, if they so desire, and then issue payment to the provider.
- Regrettably, we have found it necessary to rescind the provision that would allow us to responsibility by the amount of the member's negotiated discount. Each member requesting sharing will be responsible for their full Annual or Incident Member Responsibility.
- For this system to work properly, it will be important that members do not pay their bills on the date of service un-

less they are absolutely confident that the entire incident will be their responsibility to pay. Otherwise, they may jeopardize the ability of our repricing team to negotiate the best terms for the bill.

We realize that these changes in terms will be met with a sense of relief reduce the member for some and a sense of disappointment for others. We appreciate your confidence as we continue to make the adjustments necessary for the good of the plans as a whole. If you feel that you have circumstances that merit consideration of a different method of handling your bills, feel free to give us a call and we will be alad to discuss it and see what we can do about it.

Brother-to-Brother Page

A member's child who has severe asthma problems needs medications and treatments not normally shareable by CHA, costing several thousand dollars per year.

A member who had major surgery a year ago is facing another major surgery. They were left with over \$45,000 of bills from the first surgery to pay out of their own pocket.

Brain cancer claimed the life of a member, leaving

the spouse with outstanding medical bills to deal with in excess of \$150,000. What a burden!

A parent who was left to raise the children alone has experienced health problems, leaving an outstanding balance of around \$4,000 after CHA shared their portion.

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 Donations to this fund are tax-deductible.

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Some key points to consider as you choose your CHA plan for 2018

- Emerald Care has an annual sharing limit of \$100,000 unless you are a member of ExtenCare.
- Diamond Care has an annual sharing limit of \$200,000 unless you are a member of ExtenCare.
- Emerald Care and Diamond
 Care have a lifetime limit of
 \$125,000 per illness unless you
 are a member of ExtenCare.
- ExtenCare extends your basic sharing limit by \$100,000 per person per year.
- Traditional Plan has no 'lifetime' or 'per-illness' limits, but has an annual limit of \$35,000.
- Diabetic supply benefits are only available with the Traditional Plan.
- Vision and Dental sharing is only available with the Traditional Plan.
- ExtenCare is only available with Emerald Care or Diamond Care.
- With the Traditional Plan you have the option to self-pay your medical bills and submit them to CHA for sharing or have your provider direct bill them to CHA.
- With Emerald Care or Diamond Care all bills will be self-pay with negotiating assistance from

CHA's repricing team.

- Traditional Plan has an Annual

 Member Responsibility of
 \$1,000.
- Emerald Care has an Incident
 Member Responsibility of \$5,000.
- Diamond Care has an Annual Member Responsibility of \$500.
- With the Traditional Plan, you pay shares for all members of the family unless there are more than 7 family members.
- With Emerald Care and Diamond Care you pay a maximum of 3 shares per family.
- Traditional Plan shares 80% of your bills after your AMR is satisfied.
- Emerald Care and Diamond Care share 100% of your bills after your IMR or AMR is satisfied.
- Traditional Plan has no preexisting clauses, meaning that when you join, any ongoing illness is eligible for sharing, including pregnancy.
 - Emerald Care and Diamond
 Care both have pre-existing
 clauses which preclude sharing
 on incidents (including
 pregnancy) for which you are
 being treated when you join.

- Please note that there is an exception for 2018 for those who have been on the Traditional Plan.
- ♦ All shareable items under the Emerald Care and Diamond Care Plans are subject to being part of a qualifying incident that exceeds the dollar threshold for the plan you have chosen. (Please note that this includes prescriptions. Routine maintenance prescriptions and immunizations are not shareable.)
- All shareable items under the Traditional Plan are applied to your AMR and when it is satisfied, they are shared, regardless of the dollar amount of the incident.
- Diamond Care plans are structured so differently from the Traditional Plan in how bills are handled, we are sorry that we cannot allow membership in two plans for the same member at this time.
- For those who have Medicare, we recommend the Traditional Plan.
- For maternity, we recommend either the Traditional Plan or Diamond Care.

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

Donations to this fund are tax

deductible.



Programming updates and website underway

After 30 years of very faithful service, the programmer who has written and maintained our software for the aid plans has decided to scale back and phase out of some of his moonlighting projects. We are very thankful that in His own time and way, God has provided us with a small group of brethren who are programmers who have agreed to take over our programming needs. Along with helping our long-term programmer update the software, they are also developing a website for the aid plans. While the initial website will be primarily an informational site with downloadable forms, we hope to expand this to eventually allow online payments as well as form submission. We will keep you posted!



...sharing makes a difference...

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

For Aid Plan forms, please visit churchofgodinchristmennonite.info

Email & Fax Directory

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