



TIPS

from the Consumer Health Action Network

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Charter Oak Health Insurance *Is it right for you and your family?*

The state began offering the Charter Oak Health Insurance Plan to uninsured Connecticut residents on July 1st. There is a lot we still don't know about the plan, but it may be a good option for you if you need health insurance.

Charter Oak will cover:

- Hospital care
- Doctor and clinic visits
- X-rays and lab tests
- Prescriptions, within limits
- Some mental health & substance abuse services

All pre-existing conditions are covered. Monthly premiums and deductibles are based on household income and insurance provider.

Members of the Charter Oak Health Plan will choose among three private insurers: Aetna Better Health, AmeriChoice of Connecticut, and Community Health Network of Connecticut.

However, it may not be a good deal for everyone. Before signing up for the Charter Oak Health Plan, consider these questions carefully:

- **Do you currently have insurance?**
You are not supposed to be eligible for Charter Oak if you have had any health insurance in the last six months. Applicants can request an exception to this waiting period for cases involving job loss, financial hardship, or loss of HUSKY Plan eligibility due to age or income.
- **Do you have enough money saved to cover your remaining health costs?**
The Charter Oak program does not cover all bills completely. In addition to monthly premiums, members are responsible for an annual deductible ranging from \$150 - \$900 for an individual and \$300 - \$1750 for families. Furthermore, once members

have met their deductibles, they are still responsible for co-pays for office visits, hospital stays, and outpatient surgical procedures.

- **Do you have high prescription or medical costs?**
Charter Oak has an annual limit of \$7500 for prescription medications and a \$100,000 total maximum benefit for the year. After reaching those caps, members are responsible to cover their healthcare costs themselves.
- **Do you need to see a specific doctor?**
If you need to see a specific provider to continue your care, check first to see if he or she will take the Charter Oak insurer you are considering.
- **Do you need dental care, vision care, mental health services, or substance abuse treatment?**
Dental and vision care are not covered in the Charter Oak plan. Services to treat mental health or substance abuse problems are limited in Charter Oak.

According to the Charter Oak Health Plan website (www.charteroakhealthplan.com), the benefits package includes:

Primary care office visits: \$25 co-pay
Specialist office visits: \$35 co-pay
Preventive care office visits: 100% covered
Ambulance: 100% covered *in emergencies*
Emergency room visit: \$100 co-pay, waived if emergency
Prescription medication: 3-tiered co-pay, as low as \$10; \$7500 annual benefit limit
Durable medical equipment: no co-pay, \$4000 annual limit
Behavioral health services: \$35 co-pay
Outpatient rehabilitation (30 visits per year): \$35 co-pay
Maternity – pre- and post-natal care: 100% covered
Inpatient hospital: 90% covered after deductible
Outpatient surgical: 80% covered after deductible
Inpatient rehabilitation/skilled nursing (14 days per year): 80% covered after deductible

Lifetime maximum benefit: \$1 million

Annual maximum benefit: \$100,000

To learn more about whether Charter Oak can work for you,
call us toll-free at 888-873-4585.

To sign up for Charter Oak, call toll-free 800-656-6684.