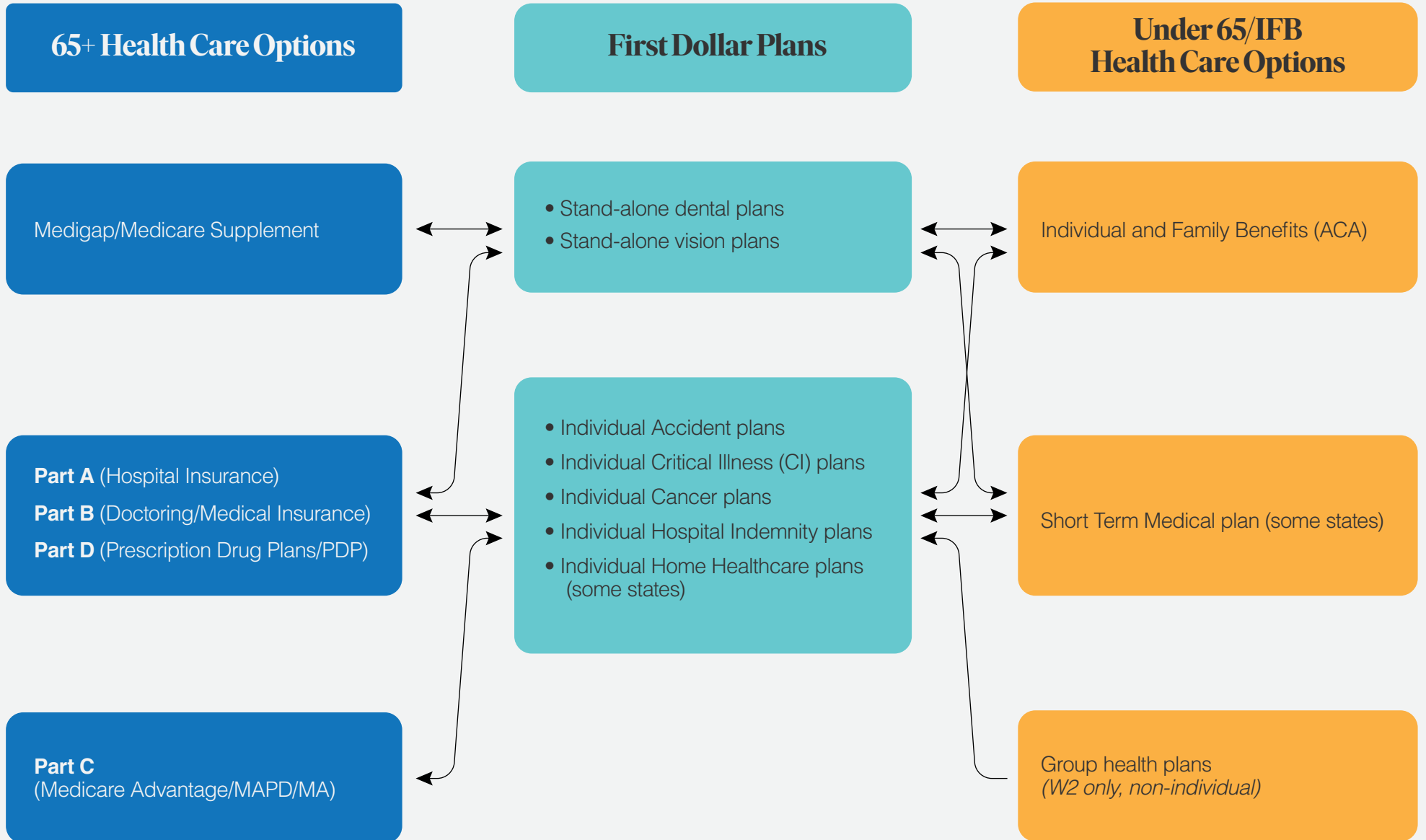


First Dollar Pairing



LeClair

First Dollar Pairing Definitions



65+ Health Care Options

Primary health care plans formulated for people over 65 or under 65 if disabled and meet time length criteria for being on DI, or have a chronic disease such as end stage renal disease or ALS (Lou Gerhrigs disease).

Medigap/Medicare Supplement:

A standardized set of plans that works alongside to help cover costs of Original Medicare, A/B deductibles, and the uncapped 20% Part B coinsurance.

Part A: Primarily covers hospital stays/services and a small amount of skilled nursing facilities/home health care.

Part B: Primarily covers medical care received in clinic and some medical equipment if medically necessary.

Part C: Can replace Original Medicare. Typically has copays, coinsurances, and deductibles. Comes with "extra benefits" Dental/Vision/Hearing etc.

Part D: The part of Medicare dedicated to prescription drug coverage.

First Dollar Plans

Ancillary stand-alone plans, can pair with other health insurance to help offset costs like deductibles or copays.

Stand-alone Dental/Vision Plans:

Individual or family dental/vision plans separate from an employer group plan. Can be paired with existing group plans.

Individual Accident/Critical Illness/Cancer Plans:

Reimburses clients when a claimable accident, sickness, or diagnoses occurs. Benefit amounts can be used for non-accident, non-illness, and non-cancer purposes. May be used multiple times for different events or purposes.

Individual Hospital Indemnity Plans:

Reimburses clients when a hospital stay meets plan requirements. Benefit amounts can be used for non-hospital purposes.

Individual Home Health Care Plans:

Reimburses clients for claimable home health care events or services.

Under 65/IFB Health Care Options

Individual and Family Benefits:

ACA-style major medical plans for individuals or families. Variable plan availability per state; can be obtained directly from a carrier or through a state or federal exchange. Must use the Marketplace to be eligible for subsidies.

Short Term Medical Plans: Available in some states; usually a pared-down major medical style plan with limited benefits that lasts for a handful of months. STM plans are not ACA compliant.

Group Health Plans: Major medical plans obtained through an employer. Does not include QSEHRA or ICHRA plans.