

AUTISM SPEAKS® WHAT TYPE OF HEALTH BENEFIT PLAN DO I HAVE?

I HAVE HEALTH INSURANCE COVERAGE THROUGH

AN EMPLOYER				MEDICAID	MARKETPLACE	BROKER	NONE
<p>FEDERAL EMPLOYEE HEALTH BENEFIT¹</p> <p>Click Here</p>	<p>STATE EMPLOYEE HEALTH BENEFIT²</p> <p>Click Here</p>	<p>MILITARY HEALTH BENEFIT³</p> <p>Click Here</p>	<p>OTHER EMPLOYER-SPONSORED HEALTH BENEFIT</p> <p><i>Is your plan self-funded⁴?</i></p> <p>Click Here</p> <p><i>Do you have a fully-insured plan⁵?</i></p> <p>Click Here</p> <p>No / Don't Know</p> <p>Contact Us</p>	<p>MEDICAID HEALTH BENEFIT</p> <p>Click Here</p>	<p>PURCHASED THROUGH THE HEALTH INSURANCE MARKETPLACE?</p> <p>Click Here</p>	<p>INDIVIDUAL PLAN PURCHASED FROM A HEALTH INSURANCE BROKER?</p> <p>Click Here</p>	<p><i>If you are not able to get health insurance through an employer, explore your eligibility under Medicaid.</i></p> <p>Click Here</p> <p><i>You may also consider purchasing an individual plan from a health insurance broker or through the Health Insurance Marketplace.</i></p> <p>Click Here</p>

1. FEDERAL EMPLOYEE HEALTH BENEFIT PLAN: offered to civilian federal employees and is administered by the U.S. Office of Personnel Management

2. STATE EMPLOYEE HEALTH BENEFIT PLAN: offered to state employees and is administered by a state agency

3. MILITARY HEALTH BENEFIT PLAN: Military Health Care Programs e.g., TRICARE, are provided to military personnel, retirees and their dependents and are administered by the Department of Defense

4. SELF-FUNDED HEALTH BENEFIT PLAN: the employer assumes the financial risk for providing health care benefits to plan participants. While any size company may provide a self-funded plan, it is much more common in companies with greater than 200 employees. Employers that self-fund their health benefit plans may administer the plan themselves, or more often will contract with a third party (e.g. XYZ Health Insurance Company) to administer the plan.

5. FULLY-INSURED HEALTH BENEFIT PLAN: the employer contracts with another organization (e.g. XYZ Health Insurance Company) to assume financial responsibility for plan participants' medical claims and for all incurred administrative costs. A challenge for consumers is that the insurance cards issued by XYZ Health Insurance Company may look identical for participants in both self-funded and fully insured plans. A few states require that insurance companies specify whether the plan is "self-funded" or "fully insured" on the insurance card itself. If this information is not printed on your insurance card, please contact the health benefits director in your employer's Human Resources Department. Ask them, "Is my health benefit plan self-funded or fully insured?"