

MONTANA COMPREHENSIVE HEALTH ASSOCIATION
MONTANA AFFORDABLE CARE PLAN (MACP)
SCHEDULE OF PREMIUMS
PPO OPTION 2500
Deductible \$2,500
Coinsurance In-Network 70%
Coinsurance Out-of-Network 50%
Out-of-Pocket Limit \$5,950

EFFECTIVE JANUARY 1, 2012

Age	Monthly Premium	Age	Monthly Premium
0-17	\$186	41	\$343
18	\$228	42	\$355
19	\$229	43	\$367
20	\$230	44	\$380
21	\$231	45	\$394
22	\$232	46	\$408
23	\$233	47	\$423
24	\$235	48	\$438
25	\$238	49	\$455
26	\$240	50	\$471
27	\$242	51	\$488
28	\$246	52	\$506
29	\$252	53	\$523
30	\$257	54	\$542
31	\$263	55	\$560
32	\$268	56	\$578
33	\$275	57	\$598
34	\$281	58	\$621
35	\$288	59	\$645
36	\$295	60	\$668
37	\$302	61	\$695
38	\$311	62	\$721
39	\$321	63	\$730
40	\$332	64	\$739

Premiums for the single Policyholder are payable according to the above schedule. The age of the Policyholder determines the premiums payable. When your age changes (e.g., turn 50), your rates will be increased to the next band at the next rate renewal increase. Rates are subject to change each January.

To determine your premium, find the correct age band. Your age band is your age as of January 1, 2012.

Montana Affordable Care Plan (MAC Plan PPO Option 2500) Federal High Risk Pool



On March 23, 2010, President Obama signed the Patient Protection & Affordable Care Act (P.L. 111-148) into law. The Act contains a provision (Sec. 1101) for a new federal high risk health insurance pool program to be established within 90 days (the “Federal Pool”). In Montana, this plan is called the MAC Plan. The Montana Comprehensive Health Association (MCHA) will be offering this health benefit plan.

To qualify, an individual must be a **citizen or national** of the United States, or lawfully present, must be a **Montana resident**, must **have a preexisting medical condition** and **must have been uninsured for at least 6 months** before applying for the federal program.

Enrollment in the federal MAC Plan is limited and on a first-come basis.

The federal MAC Plan is funded by the premiums paid by insureds and funding authorized by the federal government. If the federal funding is exhausted, insureds may move to an MCHA traditional plan of the insured’s choice. The insured will need to pay the full MCHA premium for that coverage.

The MAC Plan has the following features:

Deductible: \$2,500; **Coinsurance:** 70/30 (In network) and 50/50 Out of network); **Maximum Annual Liability:** \$5,950*

*Prescription drug copayments WILL apply to the maximum annual liability amount (out-of-pocket maximum). Please review the list of common services which are covered in the MCHA brochure, as well as the list of items that are not covered for additional information about the benefits provided by this plan. An outline of coverage is also available for this plan.

How to Apply: Applicants must complete the MCHA Traditional Plan/Federal High Risk Pool Application. Applicants will need to

provide documentation of citizenship, Montana residency, and proof of a preexisting condition or one denial or offer of coverage which excludes benefits for a preexisting condition. Please see the application for the full requirements for making application.

One of these items is required as Citizenship Documentation:

- Birth Certificate
- American Indian Card
- Certificate of Citizenship
- Certificate of Naturalization
- Certificate of Report of Birth Abroad
- Consular Report of Birth Abroad of U.S. Citizen
- Final Adoption Decree
- U.S. Passport
- United States Citizen ID Card
- I-327 (Reentry Permit)
- I-551 (Permanent Resident Card)
- I-571 (Refugee Travel Document)

Copies of these documents are acceptable.

Please see the reverse side of this supplement for the premium rates.