

SB 32: Kansas Farm Bureau[®] Health Plans

Frequently Asked Questions

For more than 100 years Kansas Farm Bureau has existed to strengthen agriculture and the lives of Kansans through advocacy, education and service.

Today, addressing the unsustainable cost of health coverage to ensure access to affordable care is critical to the future of agriculture and rural Kansas. **Answering that call, Kansas Farm Bureau is working on Senate Bill 32 which allows for a competitive and innovative option for our members who do not qualify for ACA subsidies and have no other options for affordable coverage.**

There is a lot of misinformation being shared about what is and isn't included in SB 32. Here are some of the most frequently asked questions. If you have one that's not answered, please [contact us](#). For the most up-to-date information visit www.kfb.org/kshealthplans.

Q: Is Senate Bill 32 insurance?

A: No. Senate Bill 32 would allow Kansas Farm Bureau to offer its members health benefit plans. Because plans are not insurance KFB will be able to understand the health situation of each individual and develop plans to suit their individual needs.

Q: Why does Kansas Farm Bureau want to offer this benefit to members?

A: Because Farm Bureau members of Kansas have asked for relief from onerous health care costs. Affordable Care Act premiums from 2010 to 2018 increased by 176 percent for individual coverage and 216 percent for family coverage. Deductibles also have increased to the point that some farm families can spend 30 to 40 percent of their annual income before receiving any benefit from their coverage.

Q: Will this plan deny coverage to people with preexisting conditions?

A: Each applicant will be individually rated based on their medical history, which will allow Kansas Farm Bureau to offer coverage for significantly less than similar coverage under the Affordable Care Act (ACA). To achieve those savings, some applicants may not receive health benefit coverage although the goal will be to cover as many as possible. Others may have waiting periods for conditions diagnosed prior to obtaining coverage under a health care benefit plan. In the event of someone not qualifying for the health benefit coverage applied for other plans may be offered and plans offered through the ACA are still available to them. This is another option provided to cover more lives in Kansas.

Q: What happens if a member gets sick? Will I lose coverage if I get sick?

A: Once members are accepted, and they continue to pay their KFB membership and premiums they will not be denied coverage. Plans will have no annual or lifetime limits.

Q: What would a health benefit plan cover?

A: KFB, through a third-party administrator, will offer coverage that may include office visits, hospitalization, preventative care services, emergency room services, maternity care, prescription drug benefits, mental health and substance abuse, and dental and vision coverage. Members can decide what level of coverage they're comfortable with. Individual deductibles may range from \$1,500 to \$3,000. Deductibles for family plans will range from \$3,000 to \$5,000.

Q: What if there's a dispute? Who do I contact with a complaint or appeal?

A: Plans will be subject to the Kansas Consumer Protection Act via the Attorney General; third party administrators licensed in Kansas would fall under the jurisdiction of the Insurance Commissioner. Plans will voluntarily follow the ACA-mandated structure for appeals in denial of coverages, including both internal and external review options before appeals are exhausted. Kansas Farm Bureau has gone beyond the current law to assure public confidence.

Q: Who will benefit from Kansas Farm Bureau's benefit plans?

A: Those who stand to gain the most are Kansans who don't have access to a group insurance plan and making at or above 300 percent of the federal poverty level. These individuals don't qualify for any subsidies under the ACA. Typically, these Kansans are buying their own individual coverage or are uninsured. It is projected KFB's member health care benefit coverage could reach 42,000 lives, or less than 2 percent of the total lives in Kansas.