

Services Not Covered

While most health care services are covered some others are excluded and will **not** be paid for by the plan. Excluded services include:

- Allergy testing and treatment
- Dental Services
- Emergency and non-emergency transportation
- Nursing home care
- Physical, speech or occupational therapy
- Transplants
- Hospice
- Hearing or vision testing and treatment

Some benefits covered by Insure Oklahoma/O-EPIC Individual Plan may have limits. There is an annual maximum benefit of \$15,000 for durable medical equipment and an overall lifetime benefit of \$1 million for total plan services. Office visits and prescriptions also have monthly limits (see member handbook).

NOTE: This is not a complete listing. Please refer to the member handbook or call 1-888-365-3742 with questions.

How To Enroll

Applications are available at
www.insureoklahoma.org
or call 1-888-365-3742

to have the forms mailed to you.



Individual Plan

Subsidizing Health Coverage

The Individual Plan is a health insurance option for qualified Oklahomans.

Oklahoma Employer/employee Partnership for Insurance Coverage
Revised 10/22/2007

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Insure Oklahoma/ O-EPIC Individual Plan

The Individual Plan is available to Oklahomans not otherwise eligible to participate in an Insure Oklahoma/O-EPIC employer-sponsored Qualified Health Plan.

To be eligible, individuals must be in one of the following groups:

Eligibility group one: Working adults who are not eligible for an employer-sponsored Qualified Health Plan, and work for an Oklahoma business with 50 or fewer employees. (self employed)

Eligibility group two: Temporarily unemployed adults who are eligible to receive unemployment benefits through the Oklahoma Employment Security Commission (OESC).

Eligibility group three: Working adults with a disability who work for any size employer and have a ticket to work.

Toll-Free: 1-888-365-3742

TDD: 1-405-416-6848

Web site: www.insureoklahoma.org

Qualifications

In addition to being in one of the groups the person wishing to apply for the Insure Oklahoma/O-EPIC Individual Plan must:

- Be in one of the three eligibility groups
- Be an Oklahoma resident
- Be between the ages of 19 and 64
- Not be currently enrolled in Medicaid or Medicare
- Provide proof of U.S. Citizenship (or qualified alien)
- Provide Social Security numbers for all household members
- Have an annual **GROSS** household income within the eligibility guidelines

**Fill out an application
online or call to see
if you qualify!**

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Premiums

The monthly premium is based on a sliding scale of income.

\$0-51.39 for an individual

\$0-68.91 for a couple

Covered Services and Co-payments

Below are some of the covered services with co-payment amounts:

Office Visit: \$10

Pharmacy Generic: \$5

Pharmacy Brand: \$10

Emergency Visit: \$30 (waived if admitted)

Hospital Inpatient Stay: \$50

Hospital Outpatient Services: \$25

All services must be medically necessary and referred by their Primary Care Provider (PCP). Some services require an additional prior authorization.

It is the member's responsibility to make the co-payment at the time of service.

Please see the member handbook for complete information.

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