



KANSAS HEALTH INSTITUTE

# Insurance Plans and Prices in the Kansas Marketplace

## Plan Costs Vary Up To 20% Across State

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TOPEKA, Kan. — Despite technical glitches and limited online functionality, the highly debated insurance marketplaces, a centerpiece of the Affordable Care Act (ACA), opened in Kansas and around the country today.

The Kansas Health Institute (KHI) has produced an [issue brief and regional map](#) which summarize the plans and the prices offered in the marketplace for individuals and families in the seven rating areas of Kansas.

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There are 72 plans available in the Kansas marketplace provided by four private insurance companies. 65 of the plans are available for individuals and families, and seven for small businesses. At least two health insurance companies offer coverage in each county, and the average number of plans available per county is 37.

According to the KHI brief, a “benchmark plan” (a middle-of-the-road plan in terms of covered benefits and cost), will be available to a typical family of four at a monthly premium ranging from \$651 to \$771. The same plan would cost a 28 year-old individual \$186 to \$221 per month, and a 63 year-old couple would pay \$1,013 to \$1,200 per month. These figures do not account for any financial assistance that low- and middle-income individuals and families may qualify for.

For that same benchmark plan, a family of four with annual income of \$25,000 living in Jackson County, (the median-priced county in the median-priced rating area), would pay \$42 per month after the premium tax credit, a 28 year-old individual making \$12,000 a year would pay \$20 per month, and a 63 year-old couple with income of \$17,000 would pay \$28 per month. KHI’s map of Monthly Premiums for Benchmark Plan by Rating Area further depicts the price variance across the state.

Figure 1. Plans Available in the Kansas Marketplace

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Individuals and Families	65 plans	Bronze	16
		Silver	24
		Gold	15
		Platinum	2
		Catastrophic	8
Small Businesses	7 plans	Bronze	2
		Silver	3
		Gold	2

Source: KHI analysis of data provided by the Kansas Insurance Department.

Both more and less expensive plans are also available in the marketplace, and prices vary by region as shown in the brief.

The brief also shows how Kansas and other states that opted not to expand Medicaid, as allowed by the ACA, have created a coverage gap for the poorest people in the state. A 28 year-old individual with annual income below the federal poverty level of \$11,490 would not be eligible to receive a premium tax credit and also would not be eligible for Medicaid. If they wanted insurance, they would have to pay the full premium price on their own. The same situation would apply to a 63 year-old couple with annual income below \$15,510, who would not qualify for a premium tax credit, nor for Medicaid.

“The opening of the Kansas marketplace is an important milestone for the health reform law,” said Robert F. St. Peter, M.D., an author of the brief and KHI president and CEO. “There has been a lot of discussion about whether the variety and prices of the plans offered in the marketplace will be enough to attract the large number of Kansans necessary to make it work efficiently. This first year of operation will be critical in determining that.”

The launch of the marketplaces around the country is expected to be bumpy as kinks and glitches in the system are worked out, and online functionality is improved. “People have time to see how the marketplace works,” said LeAnn Bell, an author of the KHI research brief, “as long as a plan is selected and payments are made before December 15, coverage can still begin as early as Jan. 1, 2014.”

*The Kansas Health Institute is an independent, nonprofit health policy and research organization based in Topeka, Kansas. Established in 1995 with a multi-year grant from the Kansas Health Foundation, the Kansas Health Institute conducts research and policy analysis on issues that affect the health of Kansans.*

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