

Frequently Asked Questions

Who are Ideal Candidates for Start Health?

Start Health is ideal for those who don't qualify for significant subsidies through the marketplace and want to lower costs without compromising coverage.

What is a Reimbursement Model?

When visiting a provider, Start Health members pay upfront using their Start Card or another payment method. After receiving care, they submit an itemized receipt to their member portal and the Start Reimbursement Amount is applied to their deductible. Once the deductible is met, 100% of the Start Reimbursement Amount is credited directly to the policy holder.

Does Start Health Cover Alternative Healthcare Modalities?

Yes, Start Health has set reimbursement rates for alternative modalities like Chiropractic Procedures, Osteopathic Manipulative Treatment, Physical Therapy, Allergy Testing, and more.

How are Start Health Plans HSA Qualified?

Start Health plans meet all requirements for High Deductible Health Plans (HDHPs). Plans cover preventive care pre-deductible. Start Health Plans don't have a maximum out-of-pocket limit, but there's also no cap on reimbursements during the policy period, ensuring members are protected from significant healthcare expenses. This structure qualifies Start Health plans as comprehensive coverage and HSA-compatible.

Does Start Health Cover Preventive Care?

Yes, members receive 100% of Start's reimbursement for preventive care pre-deductible.

Does Start Health Cover Prescription Medications?

Yes, Start Health has set reimbursements for prescription medications. Reimbursements are based on generic drug prices. While brand name medications can still qualify for reimbursement, they will be reimbursed at generic rates.

What Could Disqualify Someone From a Start Health Plan?

Any affirmative response ("Yes") to the following questions will result in the applicant being deemed ineligible for qualification.

Any tobacco use in the past 12 months?

Are you currently pregnant or have reason to suspect you might be pregnant?

In the past 24 months, have you been recommended to have, or been scheduled for, diagnostic testing, treatment, or surgery that has not been completed?

Within the past 24 months, have you had a health related condition for which you have not sought medical advice or treatment?

Within the past five years, have you received any abnormal test results, medical or surgical treatment, healthcare professional consultation, or prescribed medication for any of the following conditions?

Please indicate ALL that apply:

- Arthritis, Rheumatologic disorder or any disease or disorder of the joints, bones, muscles or back. (Indicate if any condition that has lasted more than one month or that you have been prescribed anything other than over the counter pain relievers.)
- AIDS or tested positive for HIV
- Asthma, Emphysema, COPD, TB, or any other disease or disorder of the respiratory system
- Cardiovascular disease or disorder of the heart, arteries, blood vessels, or blood. (Indicate for any condition for which you were treated with any procedure or prescribed a medication other than statins.)
- Cancer or tumor
- Chemical dependency, drug or alcohol abuse, or any other mental health disease or disorder
- Crohn's disease, ulcerative colitis, hepatitis, or any other disorder of the liver, stomach, colon, or intestines. (Indicate for any condition for which you received a treatment or prescribed a medication other than over the counter medications.)
- Diabetes or any other pancreas disorder
- Immune system disease or disorder
- Kidney disease or disorder
- Brain or nervous/neurological system disorder
- Stroke



The best health coverage for individuals. Period.

How Does Start Health Determine Reimbursement Rates?

Start Health reimbursement rates are based on Medicare rates. Generally speaking, Start Health reimburses 110-130% of what Medicare covers depending on the procedure or medication.

Does Start Health Cover Expenses Associated With Pregnancy and Birth?

Yes, Start Health provides set reimbursements for pregnancy and birth-related care. However, if a member is pregnant at the time of renewal, they won't be eligible to renew their plan, as pregnancy is considered a disqualifying condition. Members due to deliver after their Start Health coverage expires can switch to an ACA plan or another alternative.

What Happens If I Don't Have Enough Money to Pay Up Front?

Each Start Health Benefit Card is loaded with a \$2,000 daily credit to cover basic procedure/medical charges. If a larger covered procedure is being considered, members can call Start Health to pre-approve a higher amount to their card on a case-by-case basis.

How Do I Self-Pay at the Doctor's Office?

Providers often offer a lower rate for services when they are not billed through insurance. This greatly reduces their administrative costs and efforts. So, when visiting the doctor's office, simply state you are self-paying, or 'paying cash' and use your Start Benefit Card to pay for the service. Ask them their cash-price for the services. Don't forget to ask for an itemized receipt!

When Will I Be Reimbursed?

Start will apply 100% of the reimbursement rate to your deductible before it is met. Once you have met your deductible, 100% of the Start Benefit Amount will be credited to you and you will be responsible for the remainder if the amount billed exceeds Start's Benefit Amount. If you are able to obtain services at a lower rate than the reimbursable amount, you keep the difference. Reimbursements are typically sent out 2-3 days after an itemized bill is submitted to the portal.

How Do I Use My Start Health Benefit Card?

When you see a provider you will pay for the services with your Start Benefit Card. The Start Card can draw money from your Start HSA or a preferred checking account (set by your Account Ordering preferences). After you swipe, an expense will be drawn from your preferred account to cover the transaction. You must upload an itemized receipt for any services received to be reimbursed. Whatever payment method you use, simply upload your itemized receipt in your Start Health Member Portal to request reimbursement.

Can Reimbursements Go Directly Back Into My HSA?

Start HSAs are uniquely built as a 'dual-purse' account; meaning, the Start Benefit Card is connected to your HSA AND a regular debit account. All reimbursements must go to the debit account so they aren't considered an HSA contribution. Start Health members can choose to use those funds to contribute to their HSA if they haven't met their annual contribution limit.

What Happens if a Start Member is in an Expensive Accident or Balance-Billed?

Start Health does not impose caps on how much the plan reimburses during a policy period, protecting members from unexpected, large expenses. If a healthcare provider's charge is much higher than Start's reimbursement amount, Start can negotiate with providers on the member's behalf. Start Health's member support team is available to guide members through managing large bills, including balance billing disputes or negotiating payment plans.

[Learn More at StartHealth.com](https://www.starthealth.com)

