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HOME	INSURANCE GUIDE VIEW PLANS ENROLL NOW CONTACT US
ENROLL NOW! It's simple, easy, and FREE!	FIRST NAME: ZIP CODE: STATE: EMAIL: LAST NAME: MM: DD: YYYY: PHONE: Privacy Policy Terms & Conditions
 Expert Interview Series Dr. Marlene Mahea of TeleMental Health Institute Expert Interview Series Sean Parnell of Selfpa Patient Why Obamacare Has Increased Demand for Short-Term Health Insurance Does Obamacare Really Make Health Insurance More Affordable? How Health Insurance Premiums & Deductibles Are Relate What's Your Out of Pocket Maximum? 	 It can be hard to understand health insurance. Fees for medical care such as doctor visits, surgery, diagnostic tests, emergency room services, and prescription drugs can vary from plan to plan. In addition, some plans only cover health services administered through a specific network of providers. This network usually includes a limited number of doctors, hospitals, and facilities in a designated geographic area. The most confusing aspects of choosing health insurance can involve determining how much health care you might need, how much that care will cost, and how much you can afford to spend. Don't worry, though. There are two types of trained professionals who regularly help consumers and businesses pick and enroll in health plans: agents and brokers. Agents and brokers have the education and experience needed to understand the health insurance industry. To get the necessary educational background and state license, each of these pros must take training courses and an exam.
 Your 5 Best Health Insurance Policies The Best Healthcare Option – Preventive Care How Wearable Technology Is Transforming Healthcare 	 After getting a state license, agents and brokers get experience by working with insurance companies to provide a variety of health plan options to people just like you. You may be wondering if you can pick a plan from a health insurance company or Health Insurance Marketplace yourself. The answer is yes. But, if you pick an insurance policy that you don't fully understand, you could end up without enough coverage for your health care needs. The result could be big medical bills. Admittedly, agents and brokers are paid commissions by insurance companies for
 How Do I Know What Health Insurance Is Right for Me? Why Are Health 	enrolling consumers in health plans. This is a standard practice, though. Ultimately, agents and brokers can help you do three important things: compare different types of health plans, understand the variety of fees in those plans, and enroll in a suitable plan.

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Many health plans are categorized as managed care plans. MedlinePlus, a health Website from the National Institutes of Health, says that each of these plans is comprised of a network of providers and medical facilities and is designed to reduce the cost of medical care. $_{2}$

Obamacare Exchanges Are Collapsing – What Can You Do?

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- Confused About Copays, Co-Insurance and Deductibles?
- Obamacare Meltdown What Does It Mean?
- Why Go to a Doctor When You Feel Fine?
- What Are the Odds You'll Go to the Hospital?
- Accidents Happen. Are You Prepared?
- Preventive Care vs. **Diagnostic Care – What** You Need to Know
- More Questions to Ask When Buying Healthcare Insurance
- Top 5 Questions to Ask When Buying Healthcare Insurance
- What They Didn't Teach You About Health Insurance in College
- What It Costs to be Hospitalized
- What Could One Month Without Healthcare Coverage Cost?
- Expert Interview Series: **Dennis Jay of The Coalition Against Insurance Fraud**
- 8 Very Real Risks of **Going Without** Healthcare Insurance
- 5 Things You Can Do to Make Your Healthcare **Coverage More** Affordable
- Two Reasons You May Lose Your Employer's Healthcare Coverage
- 5 Things That Can Save You Money When **Buying Health** Insurance

The American Academy of Pediatrics (<u>AAP</u>), an organization founded by doctors, lists some of the managed care plans as Health Maintenance Organizations (HMOs), Preferred Provider Organizations (PPOs), and Point of Service (POS) plans. 3

This organization adds that when using an HMO, you must use doctors and health care facilities that are part of a network in order to have your health care expenses covered.

AARP, an organization for retired people, says that POS plans combine elements of HMOs and PPOs and allow members to use out-of-network doctors for certain fees. 4

According to the insurance company, UnitedHealthcare, PPOs offer flexibility by allowing members to refer themselves to doctors outside the plan. 5 However, the company does note that members have to meet a deductible and pay coinsurance when going out-of-network.

Of course, it's not always easy to determine if you should choose an HMO, POS, or PPO plan. But health insurance agents and brokers are well-equipped to help you compare the different types of managed care plans.

These pros get access to tools that can make shopping for insurance easier. For example, the health insurance company, Cigna, provides <u>CignaforBrokers</u>, a custom Web portal where participating agents and brokers can get custom health plan quotes by entering criteria that match an individual's needs. $_{6}$

The insurance company, Assurant Health, also gives agents access to a <u>Web portal</u> where health insurance quotes can be generated and applications can be submitted for consumers. 7

Another insurance company — UnitedHealthcare — has a portal known as UnitedHealth Producers. The company describes this portal as a Website where agents and brokers can get the certification training that is required to sell UnitedHealthcare's health plans. 8 The site can also be used for enrolling people in those plans.

Now that Obamacare is available, you might be considering picking and enrolling in a health plan on HealthCare.gov, the Federally-facilitated Marketplace. But, ask yourself if you truly understand the different types of fees from the plans offered there and how those fees vary with the types of medical care that you might need.

Understanding Health Plan Fees

Agents and brokers constantly assess the cost of a variety of health plans. So, these insurance pros are in a unique position to understand and accurately match an individual or business with an affordable plan that has the right balance of benefits and fees.

In a training course, the Centers for Medicare & Medicaid Services (CMS) lists the four basic types of health plan fees: the premium, copayment, deductible, and coinsurance. 9

A premium is a monthly rate that individuals must pay for a health plan.

CMS describes a copayment, or copay, as a fixed amount of money that consumers pay for seeing a doctor, filling a prescription, or going to an emergency room.9

A deductible is the amount of money a consumer must spend on health care services before an insurance company will begin covering those services.

Cigna defines coinsurance as the percentage that a consumer must pay for medical care after meeting a deductible. 10

- Busting the Pre-Existing **Condition Myth**
- What to Do When You Lose Health Insurance **Coverage Through Your** Job
- What Happened to Freedom of Choice in Healthcare?
- You CAN Get Affordable Head a second se
- The Two Reasons You **Need Health Insurance**
- Don't Kid Yourself. You **Need Healthcare** Coverage.
- Young, Single, **Uninsured? Short Term** Health Insurance May Be Right for You
- 6 Good Reasons to Get Short Term Health Coverage
- You Missed Open **Enrollment! Now What?**
- Thought Leader Series: Why Obamacare Is **Hurting Seniors**
- What Are The Best Short-Term Health **Insurance Options?**
- Flexibility of Short-Term Health Insurance for Individuals
- Short-Term Medical **Insurance** for Independent Contractors
- What Are Some Quality and Inexpensive Health **Insurance Options?**
- What to Do When You Can't Afford the Affordable Care Act
- How Can I Find the **Best Affordable Health** Insurance?
- Suddenly Uninsured? You Don't Have to Stay That Way!

Health insurance companies are now required to provide a document explaining health plan costs, benefits, and coverage limitations and exceptions to consumers, according to the Center for Consumer Information & Insurance Oversight, a government agency. 11

The agency refers to this document as a summary of benefits and coverage and says that it's required as part of the Affordable Care Act, the health care law that's often referred to as Obamacare.

However, this document only offers a general overview of what your health care might cost.

When you visit HealthCare.gov and view the summary of benefits and coverage for various types of government-approved health plans from different insurance companies, you'll find that these companies sometimes assign fees to medical services in different ways.

For example, in one type of plan, you might be required to pay a copayment for a medical service. In another type of plan from a different insurer, you might pay coinsurance for that same service.

So, determining the ongoing cost of your medical care can be confusing. That's why it's wise to hire a professional who regularly spends a lot of time comparing fees from different health plans. That professional is a health insurance agent or broker.

Enrolling in a Health Plan

An agent or broker can not only help you pick a health plan but can also help you apply for and enroll in that plan, too. Health insurance companies such as Assurant Health, Cigna, Humana, and UnitedHealthCare provide agents and brokers with online tools for health insurance applications and enrollment. 12-15

The <u>Centers for Medicare & Medicaid Services</u>, a division of the U.S. Department of Health & Human Services, says that agents and brokers can even take training courses for approval to sell health plans offered on a Health Insurance Marketplace, a type of health insurance market that was established through Obamacare. 1

You may also be able to save money by getting one of these government-approved plans. If you and your family meet certain income guidelines, you may be eligible to receive tax credits that pay for part of your monthly health premium. But, to apply for these credits, you must get a plan through a Health Insurance Marketplace.

The Center for Consumer Information & Insurance Oversight says that agents and brokers who are authorized to sell plans in a Marketplace can help consumers apply for these tax credits.₁₆

There's also help for small businesses that would like to benefit from Obamacare. According to <u>HealthCare.gov</u>, employers with fewer than twenty-five employees may qualify for tax credits when getting group health coverage through the Small Business Health Options Program (SHOP) Marketplace.17

The Centers for Medicare & Medicaid Services says that qualified health plans, also known as government-approved health plans, are offered through the SHOP Marketplace. 18

Regardless of whether you're a small business owner or a consumer, you might find it easier to shop for a health plan by hiring an agent or broker. Sometimes, it takes a trained professional to help you understand something as complex as health insurance.

Selective Healthcare

At Selective Healthcare, we understand the health insurance industry. Our licensed insurance agents and brokers can help you find a health plan that matches your budget and needs.

- Health Insurance for People in Transition
- Mississippi Health Insurance and the **ObamaCare Market:** Understanding **Consumer Healthcare Options for Mississippi** Residents (2015)
- Health Insurance for **Temporary Lifestyle** Changes
- Health Insurance for **Recent College** Graduates
- Affordable Health Insurance for the Unemployed
- Temporarily Bypassing **Obamacare**
- Will Texas Accept **Obamacare**?
- Can Florida Benefit From Obamacare?
- Choosing Critical Illness Insurance and Life Insurance
- How to Choose Dental Insurance
- How to Shop for Health Insurance
- The Benefits of Short-**Term Health Insurance**
- Is Short-Term Health **Insurance** More Affordable?
- How Health Insurance Agents and Brokers Can Help
- Understanding the Pros and Cons of Obamacare
- How to Use a Health **Insurance Marketplace**
- How to Understand the Affordable Care Act

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