

Beyond 
the Basics

Part VI: Plan Selection Strategies

October 5, 2021

Webinar Logistics

- All attendees are muted and in listen-only mode
- To ask a question:
 - Click on the Q&A icon in the control panel at the bottom of your webinar screen
 - Type your question into the box
- We will monitor questions and pause to answer a few during the presentation and once more at the end
- You can also email questions to beyondthebasics@cbpp.org
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Today's Agenda

PART 1: Using the Enrollment Process to Explain Exchange Plans

- An Order of Operations for Plan Education

PART 2: A Plan Comparison Strategy

- What Exchange Plans Have in Common
- Where Exchange Plans Differ: Cost and Network

PART 3: Plan Selection Tips and Tools for Assister

- Tools to Use
- Tools to Build

Acronyms & Terms

- **HealthCare.gov** = the application and website in states without a state-based marketplace
- **PTC** = Premium Tax Credit
- **CSR** = Cost Sharing Reduction
- **Assister** = Certified Application Counselor (CAC) or Navigator
- **Applicant** = patient, consumer, or client being assisted
- **Resource** = tool available to all assisters

Part I: Using the Enrollment Process to Explain Exchange Plans

An Order of Operations for Plan Education



Educating Consumers

- As assisters, our top priority is making health insurance accessible by educating consumers
- But for most people, learning about health insurance is, in and of itself, a deterrent
- No matter how well we explain all things ACA, marketplace, and insurance, clients will retain only some of that information
- We/they need tools and reference points, not complicated verbal explanations

The Marketplace Enrollment Checklist

1 Decide how much tax credit to use to lower your premium

Start

2 Report tobacco use

3 See if plans cover your doctors, hospitals & prescription drugs

Enter your doctors and hospitals to see if they're in the plan's network, and drugs to see which plans cover them.

4 Choose health plans

Shop, compare, and choose health plans.

5 Review dental enrollment

Choose who should enroll in a separate dental plan.

6 Confirm your plan choices & enroll

Check your choices one final time, sign the application, and finish your enrollment.

Optional: Get an estimate of your total yearly costs

See how premiums and other costs add up for each plan.

Start

Example Clients:

- Married couple, no kids
- 49-year-old husband
- 37-year-old wife
- Non-smokers
- 2021 annual income estimate \$27,000 (about 155% FPL)
- Zip code = 78752 (Austin, Texas)

Estimate of Total Yearly Costs

Estimate total yearly costs

When you compare plans, it's important to think about **all** costs for the year, not just your monthly premium. Your total costs include:

Yearly premiums

Your monthly premium payment × 12 months (reduced by the amount of premium tax credit you've decided to use)

+

Yearly deductible

The amount you pay each year before the plan pays anything. From \$0 to several thousand dollars, depending on the plan.

+

Copays & coinsurance

Charges (a set dollar amount or percentage) each time you visit a doctor, get care, or buy a prescription drug.

=

Total yearly costs

Pick the level of care you expect to use below. Later you'll see each plan's estimated total yearly costs for that amount of care.

Select the level of care Arianna Anaya expects to use this year.

Choose the level closest to what you expect. It's OK if you end up using more or less. This won't change your premiums or cost sharing, or limit how many services you can use.

☐ Expect low use

- Few doctor visits
- Occasional prescription drugs
- No hospital visit expected

☐ Expect medium use

- Regular doctor visits
- Regular prescription drugs
- Hospital visit unlikely

☒ Expect high use

- Frequent doctor visits
- Frequent prescription drugs
- At least one hospital visit likely

Monthly premium

\$5.72

Including a \$1,030.00 tax credit
Was \$1,035.72

Extra Savings

Friday Health Plans

[Friday Silver](#)

Silver | EPO | Plan ID: 54837TX0030005

Deductible ⓘ

\$2,000

Family Total

Out-of-pocket maximum ⓘ

\$5,700

Family Total

New plan - Not rated ⓘ

☐ Compare

Low Use

Estimated total yearly costs

\$438

Edit yearly cost

Monthly premium

\$5.72

Including a \$1,030.00 tax credit
Was \$1,035.72

Extra Savings

Friday Health Plans

[Friday Silver](#)

Silver | EPO | Plan ID: 54837TX0030005

Deductible ⓘ

\$2,000

Family Total

Out-of-pocket maximum ⓘ

\$5,700

Family Total

New plan - Not rated ⓘ

☐ Compare

High Use

Estimated total yearly costs

\$5,769

Edit yearly cost

High Use = Worst-Case Scenario
(for covered, in-network services)

Step 1 of 6: Choosing the Amount of PTC to Use

Use your tax credit to lower your monthly premium

You qualify for a premium tax credit of \$1,030 a month. You can decide how much of this amount you want to use to save on your monthly premium.

You can lower your monthly premium up to
\$1,030 per month

The amount is based on:



Expected yearly income



Where you live



Tax household size

If any of these things change over the year, the tax credit amount you qualify for can change. For example, if your income goes up during the year, you'll likely qualify for a lower tax credit. If you take more tax credit than you're eligible for, you may have to pay money back when you file your federal taxes at the end of the year.

If your income or household changes, it's very important to update your Marketplace application as soon as possible to avoid paying money back on your federal taxes.

If you choose not to use any of your tax credit, you'll claim the full amount on your federal taxes.

"You are eligible for a monthly tax credit. Most people need the whole amount to afford insurance. Would you like to use the whole amount you are eligible for?"

How much of your \$1,030 monthly tax credit do you want to use to lower your premium?



ALL of the tax credit each month.

Good choice if you're pretty sure your final 2021 income will be about the same as your estimate.

Your monthly premium will be reduced by \$1,030

We'll apply all of your tax credit to your monthly premium. You'll receive none of your tax credit when you file federal taxes.



SOME of the tax credit each month.

Good choice if it's likely your final 2021 income will be higher than your estimate.



NONE of the tax credit each month.

Good choice if you don't want to risk having to pay money back on your federal taxes if anything changes.

Step 2 of 6: Reporting Tobacco Use

Report tobacco use

Within the past 6 months, has Arianna Anaya used tobacco regularly?

Select "yes" if Arianna Anaya has used tobacco 4 or more times per week on average during the past 6 months. Don't include ceremonial uses.

[Why are we collecting tobacco use?](#)



Yes

When was the last time Arianna Anaya used tobacco regularly?

Enter a date between March 28, 2021 and today.

Month Day Year

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
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No

Save & Continue

"Are you a tobacco user?"

"When was the last time you used tobacco?"

Legal definition of tobacco use = used within the past 6 months, 4 or more times per week (excluding religious or ceremonial uses)

- E-cigarettes/vapes without tobacco don't count as tobacco use
- Chewing tobacco does count

Step 3 of 6: Checking Network & Rx Coverage

See if your doctors, facilities & drugs are covered

Enter your doctors, facilities, and prescription drugs. You'll see if they're covered in the plan's network when you review plans and prices.

What do you want to search for?

☐

Doctors & facilities

☐

Prescription drugs

Can be helpful!

Less helpful

Continue

Skip

Step 3 of 6: Checking Network & Rx Coverage

Add your doctors & facilities

Begin typing to find & select your doctor or facility.

Showing results for DR. AFREEN KHAN D.O.

Dr. Afreen Khan D.o.

Family Medicine
family medicine
Austin, TX (3.63 mi away)

1 doctor or facility selected

Add your doctors & facilities

Begin typing to find & select your doctor or facility.

Showing results for ASCENSION SETON MEDICAL CENTER AUSTIN

Ascension Seton Medical Center Austin

General Acute Care Hospital
Austin, TX (3.50 mi away)

1 doctor or facility selected

Monthly premium

\$0.00

Including a \$436.00 tax credit
Was \$435.54

Extra Savings

Plan Details

Enroll

Friday Health Plans

Friday Silver

Silver | EPO | Plan ID: 54837TX0030005

Deductible ⓘ	Out-of-pocket maximum ⓘ
\$0	\$2,850
Individual total	Individual total

Copayments / Coinsurance

Emergency room care	Generic drugs	Primary
20% Coinsurance after deductible	No charge	No charge

Plan features

Medical providers in-network

✗ Dr. Afreen Khan D.O.

✗ Ascension Seton Medical Center Austin

Step 3 of 6: Checking Network & Rx Coverage

Begin typing to find & select the drug you use regularly.

Find

Showing results for Sertraline

Sertraline

sertraline 20 MG/ML Oral Solution

Remove

Sertraline

sertraline 50 MG Oral Tablet

Remove

Sertraline

sertraline 25 MG Oral Tablet

Add

Sertraline

sertraline 100 MG Oral Tablet

Remove

Zoloft

sertraline 20 MG/ML Oral Solution [Zoloft]

Add

Zoloft

sertraline 25 MG Oral Tablet [Zoloft]

Add

Zoloft

sertraline 50 MG Oral Tablet [Zoloft]

Add

Zoloft

sertraline 100 MG Oral Tablet [Zoloft]

Remove

Medical providers in-network

Drugs covered/not covered

✓ Sertraline

✓ Sertraline

✓ Sertraline

✗ Zoloft

Edit medical providers

Edit prescription drugs

Step 4 of 6: Choosing a Health Plan

Health plan groups for your household

Based on your application, we put your household members into the groups below. You can choose one plan for everyone, a separate plan for each person, or some other grouping.

[Why change groups?](#)

- To get started with current groups: select **View plans** for a group to get started.
- To change groups: select **Change groups**, make the changes, then **View plans** for the new groups.

You'll select a plan for each group one at a time.

Group: 1

Arianna Anaya (Age 37)
Jason Momoa Mamoa (Age 49)

View Plans

Change Groups

Select "Change Groups" to break household members into different groups

Select "View Plans" to view plans with members grouped together

Arianna Anaya

Group 1

Jason Momoa Mamoa

Group 1

Save & Continue

Cancel

Group: 1

Arianna Anaya (Age 37)
Jason Momoa Mamoa (Age 49)



Arianna Anaya

Group 1

Jason Momoa Mamoa

Group 2

Save & Continue

Cancel

Group: 1

Arianna Anaya (Age 37)

Group: 2

Jason Momoa Mamoa (Age 49)

Grouping Rules & Reminders



More than one person in a group?

- At plan selection, plans will show “family deductible” and “family out of pocket max”
- Open “Plan Details” to view the plan’s individual deductible and out of pocket max (and remember, except for plans with an aggregate family deductible, the individual’s deductible/out of pocket should be half of the family amount).

Non-married adults cannot be “grouped” on the same plan together.

- They can, of course, each select the same plan, but separately.
- If you aren’t seeing the number of plans you usually do, it might be because you have grouped members of the household together that those missing insurance companies do not allow.
 - Example: Married couple and children under the age of 26 may all be grouped on one plan. The wife’s married, elderly parents, who are her tax dependents, must be grouped together separately.
 - Example: Without at least one parent enrolling, many insurances will not allow two siblings to be on the same plan together.

Step 4 of 6: Choosing a Health Plan

HealthCare.gov

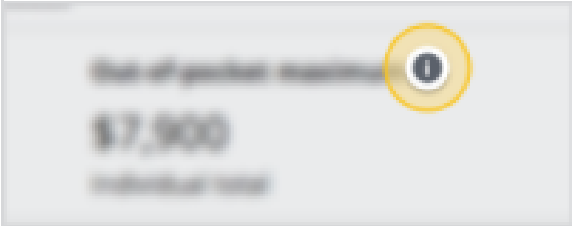
Arianna

Menu

Help comparing plans

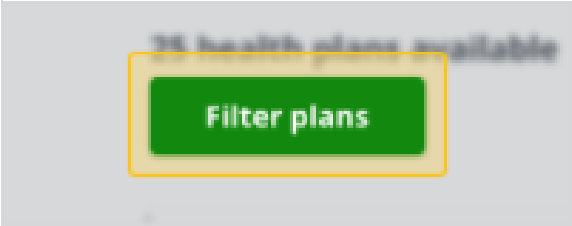
[Close](#)

Get quick definitions



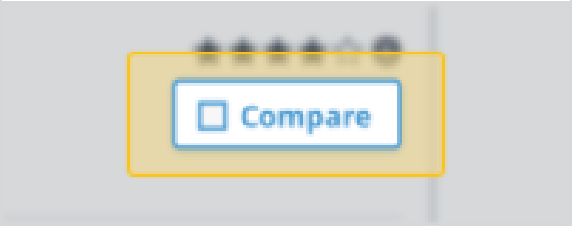
Mouse over these icons for pop-up definitions.

Filter plans by feature



Narrow down the list of plans by category, cost, company, and more.

Select plans to compare



Check these boxes to select up to 3 plans to compare side-by-side.

Next

You qualify for extra savings on out-of-pocket costs.

See Silver plans

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the Basics

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Step 4 of 6: Choosing a Health Plan

Pick a health plan

Viewing plans for this group

- Arianna Anaya (Age 37)
- Jason Momoa Mamoa (Age 49)

with an estimated effective date of 10/01/2021

Sort by

Lowest premium

Lowest deductible

Estimated yearly cost

Filters

Silver (Extra Savings) 3

Add more filters

31 plans available

Monthly premium

\$0.00

Including a \$1,030.00 tax credit
Was \$1,016.03

Extra Savings

Monthly premium

Your monthly premium range is

Select an Insurance company

Ambetter from Superior HealthPlan (34)

Blue Cross and Blue Shield of Texas (8)

Friday Health Plans (5)

Oscar Insurance Company (12)

Scott and White Health Plan (8)

Sendero Health Plans, Local Nonprofit (4)

Select an Insurance company

Maximum yearly deductible

Your yearly deductible range is

\$0-\$8,550

\$

to \$

Apply range

Health plan types

☐ Exclusive Provider Organization (51)

☐ Health Maintenance Organization (20)

Medical management program

Select any program

Health Savings Account Eligibility (HSA)

☐ Eligible for an HSA

Medical providers

Add providers

Prescription drugs

Add drugs

Cancel

Clear Filters

Apply Filters

Explain the plans...

USING the plans

"You have 71 different plan options available from 6 different companies.

The plans are in order of monthly cost.

The biggest difference between your options is where you can go and what you pay for the insurance, but also what you pay for care"

Teaching Health Insurance Terms

Health insurance educators must be **DEFT**

- **Define** what it is
- **Explain** how it works
- **Frame** to a sample marketplace plan
- **Take** questions

Step 4 of 6: Choosing a Health Plan

Monthly premium
\$13.10
Including a \$1,030.00 tax credit
Was \$1,043.10
Extra Savings

Plan Details

Enroll

Scott and White Health Plan

New plan - Not rated

[BSW Prime Silver HMO 003 - CSR 87% AV \(\\$0 Preventive Care and Preventive Rx Drugs\)](#)

☐ Compare

Silver | HMO | Plan ID: 40788TX0460003

Deductible	Out-of-pocket maximum	Estimated total yearly costs
\$1,000	\$5,700	\$3,168
Family Total	Family Total	

Edit yearly cost

Copayments / Coinsurance

Emergency room care \$500 Copayment with deductible/20% Coinsurance after deductible	Generic drugs \$10	Primary doctor \$10	Specialist doctor \$20
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Plan features

✖ Adult Dental

✖ Child Dental

Add medical providers

Add your medical providers and we'll show you which plans cover them

Add prescription drugs

Add your prescription drugs and we'll show you which plans cover them

Explaining the monthly premium:

“The monthly premium is what you are responsible for paying every month, whether or not you use your health insurance, like your car insurance bill or your cell phone bill.

With this plan, your premium would be \$13.10 per month for both you and your husband.”

Step 4 of 6: Choosing a Health Plan

Monthly premium

\$13.10

Including a \$1,030.00 tax credit
Was \$1,043.10

Extra Savings

Scott and White Health Plan

[BSW Prime Silver HMO 003 - CSR 87% AV \(\\$0 Preventive Care and Preventive Rx Drugs\)](#)

Silver | HMO | Plan ID: 40788TX0460003

Deductible ⓘ	Out-of-pocket maximum ⓘ	Estim costs
\$1,000	\$5,700	\$3,
Family Total	Family Total	

[Edit](#)

Copayments / Coinsurance ⓘ

Emergency room care	Generic drugs	Primary doctor
\$500 Copayment with deductible/20% Coinsurance after deductible	\$10	\$10

Plan features

- ✗ Adult Dental
- ✗ Child Dental

[Add medical providers](#)

Add your medical providers and we'll show you which plans cover them

[Add your medical providers](#)

Add your medical providers and we'll show you which plans cover them

Plan Details

Enroll

Explaining the deductible:

“With many plans, you are responsible for paying many of the costs of your care before the insurance company starts paying for your care. This is called the deductible.

The deductible is the part you pay before the insurance company will share those costs.

This plan has a family deductible of \$1,000, or an individual deductible of \$500.”

Step 4 of 6: Choosing a Health Plan

Monthly premium

\$13.10

Including a \$1,030.00 tax credit
Was \$1,043.10

Extra Savings

Scott and White Health Plan

[BSW Prime Silver HMO 003 - CSR 87% AV \(\\$0 Preventive Care and Preventive Rx Drugs\)](#)

Silver | HMO | Plan ID: 40788TX0460003

New plan - rated

☐ Compare

Deductible ⓘ	Out-of-pocket maximum ⓘ	Estimated total yearly costs
\$1,000	\$5,700	\$3,168
Family Total	Family Total	

[Edit yearly cost](#)

Copayments / Coinsurance ⓘ

Emergency room care	Generic drugs	Primary doctor	Specialist doctor
\$500 Copayment with deductible/20% Coinsurance after deductible	\$10	\$10	\$20

Explaining copayments:

“Copayments are another way insurance plans share the costs of your care with you.

With this plan, generic medications and primary care visits are covered with a \$10 copayment. Specialist visits are covered with a \$20 copayment.

For those things, you don’t first pay the deductible. You just pay your copayment.”

Step 4 of 6: Choosing a Health Plan

Monthly premium
\$13.10
Including a \$1,030.00 tax credit
Was \$1,043.10

Extra Savings

Scott and White Health Plan

[BSW Prime Silver HMO 003 - CSR 87% AV \(\\$0 Preventive Care and Preventive Rx Drugs\)](#)

Silver | HMO | Plan ID: 40788TX0460003

New plan - rated

☐ Compare

Deductible	\$500 Individual total \$1,000 Family Total
Out-of-pocket maximum	\$2,850 Individual total \$5,700 Family Total

Copayments / Coinsurance ⓘ

Emergency room care \$500 Copayment with deductible/20% Coinsurance after deductible	Generic drugs \$10	Primary doctor \$10	Specialist doctor \$20
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Explaining copayments & deductible:

"If you need care that is subject to the deductible, such as an ER visit, you would pay the first \$500 of that ER visit's cost (your deductible), a \$500 ER copay and then a 20% coinsurance, specific to that care need."

If ER visit = \$20,000, you pay the first \$500 (deductible) + \$500 (ER copay)

Then you pay 20% of the remaining balance of \$19,000, or \$3,800.

So, your part of the ER bill would be \$1,000 (deductible+ copay) + \$3,800 (20% coinsurance), for a total of **\$4,800, except that...**

Step 4 of 6: Choosing a Health Plan

Monthly premium

\$13.10

Including a \$1,030.00 tax credit

Was \$1,043.10

Extra Savings

Scott and White Health Plan

[BSW Prime Silver HMO 003 - CSR 87% AV \(\\$0 Preventive Care and Preventive Rx Drugs\)](#)

Silver | HMO | Plan ID: 40788TX0460003

New plan -
rated

☐ Compare

Deductible ⓘ

\$1,000

Deductible

Out-of-pocket maximum ⓘ

\$5,700

Estimated total yearly costs

\$500 Individual total
\$1,000 Family Total

Out-of-pocket maximum

\$2,850 Individual total
\$5,700 Family Total

care
\$500 Copayment with
deductible/20%
Coinsurance after
deductible

\$10

\$10

\$20

Explaining the out-of-pocket maximum:

“At this point, you have met your \$500 deductible, which also contributes to your plan’s out-of-pocket maximum of \$2,850, which is your worst-case scenario number for the year, has also been met.

This means your TOTAL bill for the ER visit is **\$2,850** and the rest of the year’s care must be covered 100% by the plan (for covered, in-network services).”

Your covered, in-network contributions to your plan’s deductible, co-pays, and co-insurance all count towards the Out of Pocket Maximum.

Once your total in-network care costs have reached the OOPM, all your in-network care costs will be covered by insurance company, except for monthly premium, which you still have to pay, even if you hit your plan’s out of pocket maximum!

Plan Details

Plan Documents

- Summary of Benefits
- Provider Directory
- List of Covered Drugs

Costs for Medical Care

- Individual & Family Deductible & OOP Max
- Primary & Specialist Visits
- Imaging & Labs

Prescription Drug Coverage

- Costs of Medication Based On Tier
- List of covered Drugs

Star rating

Plan documents

Costs for medical care

Prescription drug coverage

Access to doctors and hospitals

Hospital services

Cost & coverage examples

Adult dental coverage

Child dental coverage

Medical management programs

Other services

Part II: A Plan Comparison Strategy

What Exchange Plans Have in Common &
Where Exchange Plans Differ: Cost & Network



Talking About Cost & Network

After plan education, talk about plans in comparison to other plans, specifically comparing the cost & network.

Reminder that all marketplace plans:

- Must offer a “minimum standard” of coverage
- Cannot exclude or charge more for pre-existing conditions
- Cover the 10 Essential Health Benefits

Note: Some plans (for example, short-term plans and grandfathered plans) do not have to meet these requirements

10 Essential Health Benefits



Preventive & wellness services
& chronic disease management



Emergency services



Ambulatory services
(outpatient medical care)



Maternity & newborn care



Hospitalization



Mental health & substance use
disorder services, including
behavioral health treatment



Laboratory services



Rehabilitative & habilitative
services & devices



Prescription drugs



Pediatric services

Talking About Cost & Network

Given these guarantees, clients can shop and compare plans based on:

- what using the plan costs (**cost**)
the monthly premium + the costs of care
- where you can use the plan (**network**)

Comparing Plans Based on Cost

Compare plans



Scott and White Health Plan BSW Prime Silver HMO 008 - CSR 87% AV (\$10 PCP visit, \$0 Preventive Care and Preventive Rx Drugs) Enroll	Scott and White Health Plan BSW Prime Silver HMO 003 - CSR 87% AV (\$0 Preventive Care and Preventive Rx Drugs) Enroll	Scott and White Health Plan BSW Prime Silver HMO 005 - CSR 87% AV (\$0 deductible copay only, \$0 Preventive Care and Preventive Rx Drugs) Enroll
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Highlights

Monthly premium	\$0.00 Including a \$1,030.00 tax credit <i>Was \$1,016.03</i>	\$13.10 Including a \$1,030.00 tax credit <i>Was \$1,043.10</i>	\$81.97 Including a \$1,030.00 tax credit <i>Was \$1,111.97</i>
Deductible	\$1,800 Individual total \$3,600 Family Total	\$500 Individual total \$1,000 Family Total	\$0 Individual total \$0 Family Total
Out-of-pocket maximum	\$1,800 Individual total \$3,600 Family Total	\$2,850 Individual total \$5,700 Family Total	\$2,400 Individual total \$4,800 Family Total
Estimated total yearly costs	\$3,600	\$5,857	\$5,784

Comparing Plans Based on Cost

Deductible	\$1,800 Individual total \$3,600 Family Total	\$500 Individual total \$1,000 Family Total	\$0 Individual total \$0 Family Total
Out-of-pocket maximum	\$1,800 Individual total \$3,600 Family Total	\$2,850 Individual total \$5,700 Family Total	\$2,400 Individual total \$4,800 Family Total
Primary care doctor visit	In Network: \$10 Out of Network: Benefit not covered View limits and exclusions	In Network: \$10 Out of Network: Benefit not covered View limits and exclusions	In Network: \$15 Out of Network: Benefit not covered View limits and exclusions
Specialist visit	In Network: \$30 Out of Network: Benefit not covered	In Network: \$20 Out of Network: Benefit not covered	In Network: \$30 Out of Network: Benefit not covered
X-rays and diagnostic imaging	In Network: No charge after deductible Out of Network: Benefit not covered View limits and exclusions	In Network: 20% Coinsurance after deductible Out of Network: Benefit not covered View limits and exclusions	In Network: \$50 Out of Network: Benefit not covered View limits and exclusions
Laboratory outpatient and professional services	In Network: No charge after deductible Out of Network: Benefit not covered View limits and exclusions	In Network: 20% Coinsurance after deductible Out of Network: Benefit not covered View limits and exclusions	In Network: \$50 Out of Network: Benefit not covered View limits and exclusions
Outpatient facility	In Network: No charge after deductible	In Network: \$300 Copayment with deductible/20%	In Network: \$500 Out of Network: Benefit not

Comparing Plans Based on Cost

When an insurer offers more than one plan option of the same plan type and at the same metal level, it's a matter of personal preference, cost-wise.

- Some clients are okay paying a little more to have a copay for care from day one versus paying less per month but more upfront
- How soon your insurance kicks in and what you have to pay for upfront, due to the plan's deductible.
- There is no difference in services covered.
- For some clients, the lower the deductible, the better
- For others, the lower the out-of-pocket maximum, the better

Answering Questions About Cost

“What about having a baby? Or, what if I break the third toe on my left foot? What if I need an MRI?”

1. Pay monthly premiums
2. Pay copays (if applicable)
3. Meet your plan deductible
4. Pay your coinsurance (if applicable)
5. Meet your out-of-pocket max

Insurance pays 100% of all in-network, covered services

Worst-Case Scenario

Worst-case financial scenario for 2022 = (premium x 12) + out-of-pocket max

Scott and White Health Plan BSW Prime Silver HMO 008 - CSR 87% AV (\$10 PCP visit, \$0 Preventive Care and Preventive Rx Drugs) Enroll	Scott and White Health Plan BSW Prime Silver HMO 003 - CSR 87% AV (\$0 Preventive Care and Preventive Rx Drugs) Enroll	Scott and White Health Plan BSW Prime Silver HMO 005 - CSR 87% AV (\$0 deductible copay only, \$0 Preventive Care and Preventive Rx Drugs) Enroll
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Highlights

Monthly premium	\$0.00 Including a \$1,030.00 tax credit <i>Was \$1,016.03</i>	\$13.10 Including a \$1,030.00 tax credit <i>Was \$1,043.10</i>	\$81.97 Including a \$1,030.00 tax credit <i>Was \$1,111.97</i>
Deductible	\$1,800 Individual total \$3,600 Family Total	\$500 Individual total \$1,000 Family Total	\$0 Individual total \$0 Family Total
Out-of-pocket maximum	\$1,800 Individual total \$3,600 Family Total	\$2,850 Individual total \$5,700 Family Total	\$2,400 Individual total \$4,800 Family Total
Estimated total yearly costs	\$3,600	\$5,857	\$5,784

Comparing Plans Based on Network

	<div>Scott and White Health Plan</div> <div>BSW Prime Silver HMO 008 - CSR 87% AV (\$10 PCP visit, \$0 Preventive Care and Preventive Rx Drugs)</div> <div>Enroll</div>	<div>Friday Health Plans</div> <div>Friday Silver</div> <div>Enroll</div>	<div>Ambetter from Superior HealthPlan</div> <div>Ambetter Balanced Care 29 (2021)</div> <div>Enroll</div>
Estimated total yearly costs	\$3,600 Edit yearly cost	\$5,769 Edit yearly cost	\$6,514 Edit yearly cost
Plan metal level	Silver	Silver	Silver
Plan type	HMO	EPO	EPO
Plan ID	40788TX0460008	54837TX0030005	29418TX0140072
Medical providers in-network	<div><div>✗</div> Austin Regional Clinic, Pa Family Medicine</div> <div><div>✗</div> St. David's Medical Center General Acute Care Hospital - Children</div> <div>Edit medical providers</div>	<div><div>✗</div> Austin Regional Clinic, Pa Family Medicine</div> <div><div>✗</div> St. David's Medical Center General Acute Care Hospital - Children</div> <div>Edit medical providers</div>	<div><div>✓</div> Austin Regional Clinic, Pa Family Medicine In-network locations</div> <div><div>✗</div> St. David's Medical Center General Acute Care Hospital - Children</div> <div>Edit medical providers</div>

Comparing Plans Based on Network

Do not go off of the marketplace network tool only; always double check providers and facilities in the health plan's provider directory.

Or build yourself (and your assister team) a network cheat sheet tool.

	<div>Scott and White Health Plan</div> <div>BSW Prime Silver HMO 008 - CSR 87% AV (\$10 PCP visit, \$0 Preventive Care and Preventive Rx Drugs)</div> <div>Enroll</div>	<div>Friday Health Plans</div> <div>Friday Silver</div> <div>Enroll</div>	<div>Ambetter from Superior HealthPlan</div> <div>Ambetter Balanced Care 29 (2021)</div> <div>Enroll</div>
Estimated total yearly costs	\$3,600 Edit yearly cost	\$5,769 Edit yearly cost	\$6,514 Edit yearly cost
Plan metal level	Silver	Silver	Silver
Plan type	HMO	EPO	EPO
Plan ID	40788TX0460008	54837TX0030005	29418TX0140072
Medical providers in-network	<div><div>✗</div> Austin Regional Clinic, Pa Family Medicine</div> <div><div>✗</div> St. David's Medical Center General Acute Care Hospital - Children</div> <div>Edit medical providers</div>	<div><div>✗</div> Austin Regional Clinic, Pa Family Medicine</div> <div><div>✗</div> St. David's Medical Center General Acute Care Hospital - Children</div> <div>Edit medical providers</div>	<div><div>✓</div> Austin Regional Clinic, Pa Family Medicine In-network locations</div> <div><div>✗</div> St. David's Medical Center General Acute Care Hospital - Children</div> <div>Edit medical providers</div>

The hospital information is not accurate in this example. Both of these plans are in-network with St. David's Hospital.

Network Cheat Sheet

2021 Central Texas Marketplace Plans Network Overview

Note:

The following 2021 Central Texas Marketplace Companies are organized in order of cost for Silver plans

	SCOTT & WHITE	FRIDAY	AMBETTER	OSCAR	SENDERO	BLUE CROSS BLUE SHIELD
Plan Type	HMO	EPO	EPO	EPO	HMO	HMO
Referral for Specialist Visits?	Referral Required from in- network Primary Care Provider	No referral required for in-network speciality visit	No referral required for in-network speciality visit	No referral required for in-network speciality visit	Referral Required from in-network Primary Care Provider	Referral Required from in-network Primary Care Provider
Counties Served	Bell, Brazos, Burnet, Collin, Coryell, Dallas, Ellis, Lampasas, Llano, McLennan, Milam, Rockwall, San Saba, Travis, Washington, Williamson	Bexar, El Paso, Lubbock, Travis, Dallas, Harris, Tarrant	Click here for Complete List	Collin, Dallas, Denton, Rockwall, Tarrant, Fort Bend, Galveston, Harris, Montgomery, Travis, Williamson, Hays, Bexar, Comal, El Paso	Bastrop, Burnet, Caldwell, Fayette, Hays, Lee, Travis, Williamson	ALL Texas Counties
Emergency Room Coverage Outside Texas?	ALL MARKPETLACE PLANS MUST "HOLD THE MEMBER HARMLESS" FOR LIFE THREATENING EMERGENCY TREATED IN AN OUT OF NETWORK HOSPITAL. Clients should contact our program ASAP for help navigating costs and coverage for an out of network emergency event.					
NON-EMERGENCY Care Outside Texas?	No Non-Emergency Out of Network Care Access	No Non-Emergency Out of Network Care Access	Limited Nationwide Urgent Care Access	Limited Nationwide Urgent Care Access	No Non-Emergency Out of Network Care Access	Limited Nationwide Urgent Care Access
Telemedicine or Virtual Visits?	Telemedicine Available	Telemedicine covered in full	FREE Telemedicine	FREE Oscar Virtual Care	FREE Telemedicine	Virtual Visits Available

Note: For 2021, the insurers offering QHPs in Central Texas each only offered ONE plan type, with the same network options. This is not always the case.

Narrowing Plan Selection

- Selecting a Metal Level = Cost
- Known Medical Needs = Cost & Network
- Selecting an Insurance Company = Network
- Selecting an Individual Plan* = Cost

*If an insurer has more than 1 plan of the same type,
in the same metal level

Connecting Metal Level to Cost

Metal level determines HOW the cost of care is covered, not WHAT is covered.

Is the client looking for something in the case of an emergency, or would they like a set rate for routine care?

Cost-Sharing & Metal Tiers

- Enrollees pay less out-of-pocket with higher AV plans
- Premiums are generally higher for high AV plans

QUALIFIED HEALTH PLAN (QHP) METAL LEVEL PLAN TIERS QHPs must provide plan designs consistent with actuarial values		
Costs covered by a plan	Platinum	90% actuarial value
	Gold	80% actuarial value
	Silver	70% actuarial value
	Bronze	60% actuarial value
	Catastrophic coverage	High deductible health plan available for individuals up to age 30 or those 30 and older who are granted a hardship exemption (PTC does not apply to these plans)
		Premiums paid by consumer

Part III: Plan Selection Tips & Tools for Assisters

Tools to Use & Tools to Build



Tools to Use & Tips to Build Your Own

- Proof Request Attestation
- Beyond the Basics Plan Comparison Tool
- Network Overview Cheat Sheet
 - General version
 - Detailed version



What if Documents Aren't Available?

- When proof of income isn't available, a signed statement can be accepted
- This statement should include household income information and an explanation for the income projection

Primary Household Contact:	Kala Mehta
Other Household Members:	None
Application ID:	#
State of Application:	Virginia
Phone Number:	xxx-xxx-xxxx
Today's Date:	12/15/2021
Projected Annual Income for 2021 as Stated on Application:	\$21,000
Explanation for income projection:	
I will be starting school in the fall and will be quitting my job in August. My current job pays \$15/hour and I work 40 hours a week. By the time I quit at the end of August, I should make around \$21,000. I expect to have no income from September through the end of the year.	

Plan Comparison Worksheet

- This worksheet lets you compare up to 4 plans side-by-side
- You can fill it out on your computer and then print it or email it the client
- Available in:
 - English
 - Spanish
 - Chinese
 - Vietnamese
 - Korean
 - Tagalog
 - Russian
 - Arabic

Marketplace Plan Comparison Worksheet				
Annual Projected Income	<input type="text"/>	Premium Tax Credit (monthly)	<input type="text"/>	
Household Size	<input type="text"/>	Premium Tax Credit (annual)	<input type="text"/>	
		CSR Eligible?	Yes	No
Main Information				
	Option 1	Option 2	Option 3	Option 4
Insurance Company	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Insurance Plan Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Metal Tier (bronze, silver, gold)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Plan Type (PPO, HMO, etc.)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Monthly Premium (after tax credit)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Annual Premium (after tax credit)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tip Since some plans may have similar names, make sure to include the full plan name in the worksheet				
Cost Sharing (your share of medical costs, in addition to the premium)				
	Option 1	Option 2	Option 3	Option 4
Deductible	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Out-of-Pocket Maximum	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Physician Visit	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Specialist Visit	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Generic Drugs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Emergency Room Visit	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inpatient Hospital Stay	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Provider Network & Formulary				
Name(s)	Option 1	Option 2	Option 3	Option 4
Physician(s) In-Network	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No
Specialist(s) In-Network	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No
Hospital In-Network	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No
Prescription on Formulary	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/> <input type="checkbox"/> Yes <input type="checkbox"/> No
Other:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
 				

A Network Overview Cheat Sheet

2021 Central Texas Marketplace Plans Network Overview

Note:

The following 2021 Central Texas Marketplace Companies are organized in order of cost for Silver plans

	SCOTT & WHITE	FRIDAY	AMBETTER	OSCAR	SENDERO	BLUE CROSS BLUE SHIELD
Plan Type	HMO	EPO	EPO	EPO	HMO	HMO
Referral for Specialist Visits?	Referral Required from in-network Primary Care Provider	No referral required for in-network speciality visit	No referral required for in-network speciality visit	No referral required for in-network speciality visit	Referral Required from in-network Primary Care Provider	Referral Required from in-network Primary Care Provider
Counties Served	Bell, Brazos, Burnet, Collin, Coryell, Dallas, Ellis, Lampasas, Llano, McLennan, Milam, Rockwall, San Saba, Travis, Washington, Williamson	Bexar, El Paso, Lubbock, Travis, Dallas, Harris, Tarrant	Click here for Complete List	Collin, Dallas, Denton, Rockwall, Tarrant, Fort Bend, Galveston, Harris, Montgomery, Travis, Williamson, Hays, Bexar, Comal, El Paso	Bastrop, Burnet, Caldwell, Fayette, Hays, Lee, Travis, Williamson	ALL Texas Counties
Emergency Room Coverage Outside Texas?	ALL MARKPETLACE PLANS MUST "HOLD THE MEMBER HARMLESS" FOR LIFE THREATENING EMERGENCY TREATED IN AN OUT OF NETWORK HOSPITAL. Clients should contact our program ASAP for help navigating costs and coverage for an out of network emergency event.					
NON-EMERGENCY Care Outside Texas?	No Non-Emergency Out of Network Care Access	No Non-Emergency Out of Network Care Access	Limited Nationwide Urgent Care Access	Limited Nationwide Urgent Care Access	No Non-Emergency Out of Network Care Access	Limited Nationwide Urgent Care Access
Telemedicine or Virtual Visits?	Telemedicine Available	Telemedicine covered in full	FREE Telemedicine	FREE Oscar Virtual Care	FREE Telemedicine	Virtual Visits Available

2022 Network Overview Cheat Sheet In Progress

- Use Excel to build
- Save as PDF to publish

2022 Network Overview.xlsx - Excel

File Home Insert Page Layout Formulas Data Review View Tell me what you want to do...

Clipboard: Paste, Cut, Copy, Format Painter

Font: Calibri, 20, Bold, Italic, Underline, Text Color, Background Color

Alignment: Wrap Text, Merge & Center

Number: General, Currency, Percentage, Decimals

Styles: Conditional Formatting, Format as Table, Cell Styles

Cells: Insert, Delete

Plan Type	Need referral for Specialist Visits?	Emergency Room Care Outside Texas?	Non-emergency options outside Texas? (Nurse's Line!)	In-Network Austin Area Hospitals*
AETNA				Ascension Seton, St. David's, Baylor, Scott & White
AMBETTER	EPO: No referral required for in-network speciality visit HMO: Referral Required from in-network PCP Virtual: Referral Required from in-network PCP		• Ltd Nationwide Urgent Care • Free Telemedicine	Ascension Seton, St. David's
BLUE CROSS BLUE SHIELD	HMO: Referral Required from in-network PCP		• Free Telemedicine	Ascension Seton, St. David's, Baylor, Scott & White
BRIGHT*				
CHRISTUS*				
FRIDAY	EPO: No referral required for in-network speciality visit		• Free Telemedicine	St. David's

ALL MARKPETLACE PLANS MUST "HOLD THE MEMBER HARMLESS" FOR LIFE THREATENING EMERGENCY TREATED IN AN OUT OF NETWORK

Generally NOT shared with clients; but add note "always double check provider info"

Building Network Overview Cheat Sheet

1. Use the plan preview tool (for HealthCare.gov: "See Plans & Prices")
2. Use the zip code of your site or the zip code where most of your clients live
3. The demographics of the client are not important, but note:
 - a) use a high income to see plans in order of their full priced cost (PTCs will mix up the full priced order if multiple plans are free)
 - b) To view catastrophic plans: use an age below 30 and high income
4. Once you can view the plans, **check the filters section**



Plan Overview Information from Plan Preview Tool

Filters

Silver

Monthly premium
Your monthly premium range is \$254-\$602
\$ to \$

Maximum yearly deductible
Your yearly deductible range is \$0-\$8,550
\$ to \$

Health Savings Account Eligibility (HSA)
☐ Eligible for an HSA

Medical providers

Prescription drugs

Health plan categories
☐ Bronze (17)
☒ Silver (26)
☐ Gold (9)

Health plan types
☐ Health Maintenance Organization (HMO) (48)
☐ Preferred Provider Organization (PPO) (4)

Search by plan ID (14 characters)
Example: 12345XX9876543

Insurance companies
Select an insurance company
Select an insurance company
Ambetter of Illinois (15)
Blue Cross and Blue Shield of Illinois (13)
Bright HealthCare (9)
Cigna Healthcare (15)

Medical management program
Select any program

New plan - Not rated

Number of plans & number of plans per metal level: Gold, Silver, & Bronze (no platinum available)

Health plan types available: HMO & PPOs

The 4 insurers serving this zip code: Ambetter, BCBS, Bright, & Cigna

Building Network Overview Cheat Sheet

	Plan Type	Need referral for Specialist Visits?	Emergency Room Care Outside Texas?	Non-emergency options outside Texas? (Nurse's Line!)	In-Network Austin Area Hospitals*		
					Ascension Seton	St. David's	Baylor, Scott & White
AETNA			ALL MARKETPLACE PLANS MUST "HOLD THE MEMBER HARMLESS" FOR LIFE THREATENING EMERGENCY TREATED IN AN OUT OF NETWORK				
AMBETTER	EPO	No referral required for in-network speciality visit		• Ltd Nationwide Urgent Care • Free Telemedicine	Ascension Seton	St. David's	
	HMO	Referral Required from in-network PCP				St. David's	
	Virtual	Referral Required from in-network PCP		• Free Telemedicine			
BLUE CROSS BLUE SHIELD	HMO	Referral Required from in-network PCP		• Ltd Nationwide Urgent Care • Telemedicine	Ascension Seton	St. David's	Baylor, Scott & White
BRIGHT*							
CHRISTUS*							
FRIDAY	EPO	No referral required for in-network speciality visit		• Free Telemedicine		St. David's	

The plan lookup tool can locate enough information to complete this cheat sheet.

Add a popular primary care facility by using the provider directories of each insurer.

It's also useful to build in overarching reminders for all your assisters.

Questions?



Upcoming Webinars

Part VII: Redetermination & Renewal Process

- Thursday, October 7 | 1 pm ET (10 am PT)

Part VIII: Tying It All Together

- Tuesday, October 12 | 1 pm ET (10 am PT)

Part IX: Best Practices for Assisting People with Disabilities

- Thursday, October 14 | 1 pm ET (10 am PT)

Register for upcoming webinars at

www.healthreformbeyondthebasics.org/events

Contact

Thank all of you for your time and attention, for all you do, and all you will do this next season!

Arianna Anaya

Arianna.Anaya@foundcom.org

Questions or interest in more detailed explanations?
Interested in getting help building a network cheat sheet?
Want the template of my excel network cheat sheet document?

This is a project of the Center on Budget and Policy Priorities
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