

Beyond 
the Basics

Introduction to Plan Selection Tools for 2024

July 26, 2023

Upcoming Webinars

Summer Series Part II: Under the Hood: Building Your Own Plan Selection Tools for 2024

August 16th, 2pm ET (11am PT)

- Registration on the Beyond the Basics website: <https://www.healthreformbeyondthebasics.org/upcoming-webinars/>

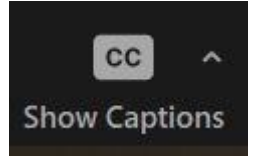
Open Enrollment Series – Save the Dates

All webinars take place at 2pm ET (11am PT)

- Households and income: Tuesday, September 12
- The premium tax credit: Thursday, September 14
- Immigrant eligibility Part I: Tuesday, September 19
- Preventing and resolving data matching issues: Thursday, September 28
- Plan design: Tuesday, October 3
- Plan selection strategies, October 10
- Auto-renewal process on HealthCare.gov: Thursday, October 12
- Immigrant eligibility Part 2: Tuesday, October 17
- Tying it all together: Thursday, October 24
- Helping people who speak Spanish enroll in coverage (delivered in Spanish): Thursday, October 26

Webinar Logistics

- After the webinar, we'll circulate the slides, a video recording of this presentation, and other resources. We'll also post everything to the Beyond the Basics website.
- Automated captions have been enabled for this webinar. To view them, click on the Show Captions icon in the meeting controls toolbar at the bottom of your screen.
- All participants are muted and in listen-only mode. If you'd like to ask a question:
 - Click on the Q&A icon at the bottom of your webinar screen and type your question into the box.
 - We will be monitoring questions and will pause for Q&A during the presentation.
 - We may not be able to answer every question asked, but we will have a record of all your questions and will use them as a guide for future resources and presentations.
 - You can also email your questions during and after the webinar to beyondthebasics@cbpp.org



Agenda

Today we'll discuss:

- Planning for Fall Open Enrollment
- Resource Building Review
 - Resources: Audience, Function, Focus
 - Building Network Overview Resources
- Using Easy Pricing Plans to Examine Specific Markets
 - Building Plan Comparison Resources

Planning for Fall Open Enrollment



2024 Open Enrollment Landscape



Record enrollment in 2023
Record number of people to renew for 2024



Medicaid renewals and terminations have resumed



New marketplace rules for 2024 affect plan design and comparison



Potential for new coverage opportunities for some immigrants

What to do right now



Outreach and simple messages for people affected by Medicaid redeterminations



Reminders for people who need to renew marketplace coverage during OE



Research changes in your state/local insurance market for 2024



Create tools to make plan comparison easier – for you and the people you serve!

Resource Building Review

- Audience, Function, Focus
- Network Overview Resources



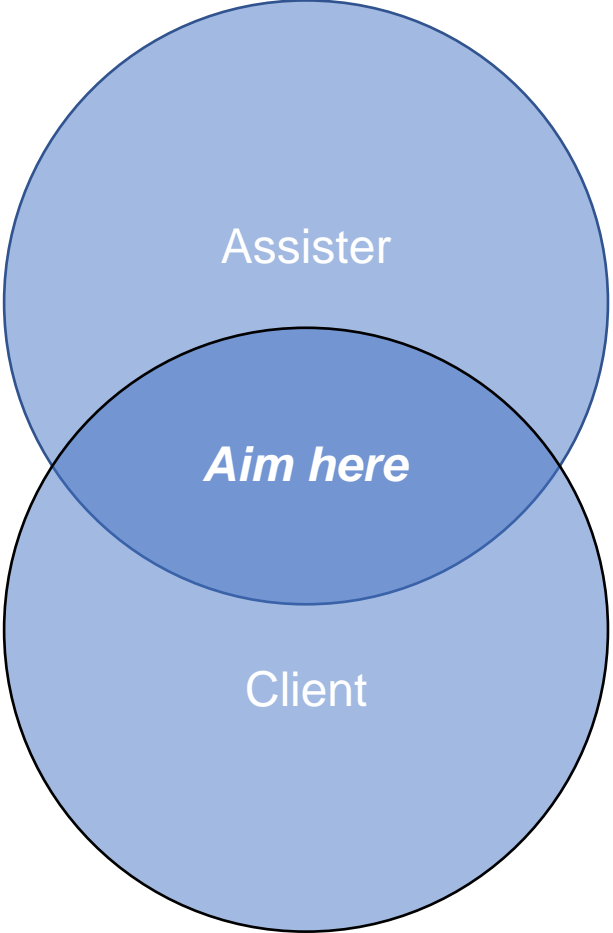
Resource-Building Recommendations

- **Audience:** both assister and client (double duty)
 - Cue assister to provide important coverage education
 - Reminders for issues, emergencies, and unusual situations
- **Function:** specific outcomes and/or end goals—
instructive, not just informative (double duty)
 - If instructive for client, informative for assister;
 - if informative for client; instructive for assister
- **Focus:** Eligibility, or Application, or Plan Selection
(stay on target!)
 - Network and Plan Selection Resources = most time-consuming to build and maintain, but most effective investment for clients and assisters

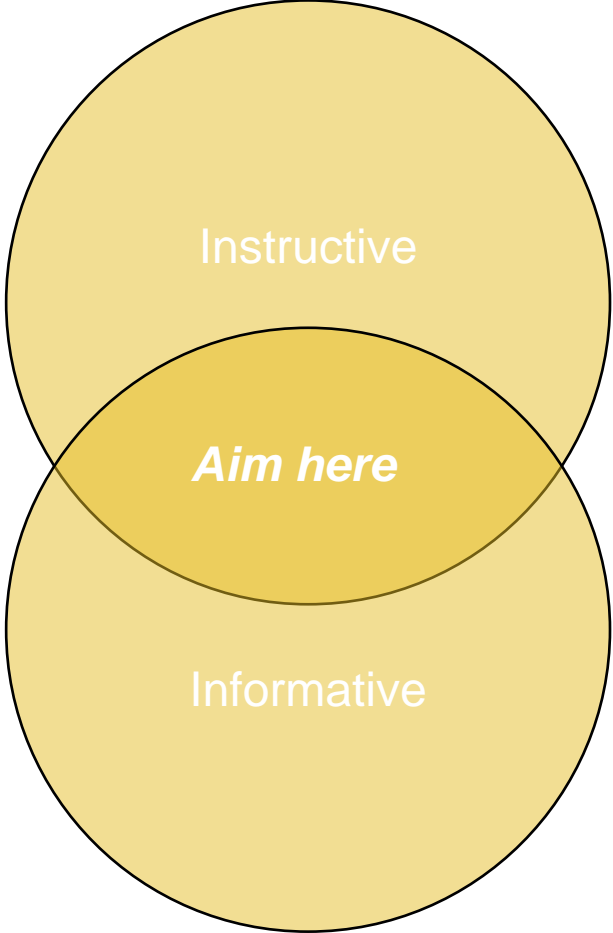
• **DISCLAIMERS!**

Resource-Building Recommendations

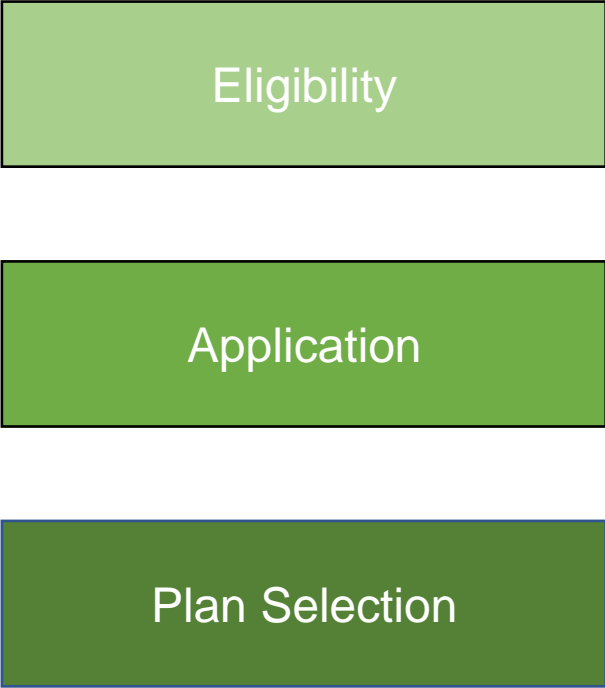
Audience



Function



Focus



The FPL Chart

Audience: **Assister**
 Function: **Informational**
 Focus: **Eligibility, Application & Plan Selection**

Number in Tax Household and Estimated Income for 2023

#	<100%	100%	150%	150+%	200%	200+%	250%	250+%	400.00%	#	401% +
1	Limited eligibility for PTC & CSR based on immigration status*	\$ 13,590	\$ 20,385	\$ 20,386	\$ 27,180	\$ 27,181	\$ 33,975	\$ 33,976	\$ 54,360	1	American Rescue Plan Act extended by the Inflation Reduction Act PTC to reduce premiums to no more than 8.5% of annual hh income (households above 400% & otherwise PTC eligible)
2		18,310	\$ 27,465	\$ 27,466	\$ 36,620	\$ 36,621	\$ 45,775	\$ 45,776	\$ 73,240	2	
3		23,030	\$ 34,545	\$ 34,546	\$ 46,060	\$ 46,061	\$ 57,575	\$ 57,576	\$ 92,120	3	
4		27,750	\$ 41,625	\$ 41,626	\$ 55,500	\$ 55,501	\$ 69,375	\$ 69,376	\$ 111,000	4	
5		32,470	\$ 48,705	\$ 48,706	\$ 64,940	\$ 64,941	\$ 81,175	\$ 81,176	\$ 129,880	5	
6		37,190	\$ 55,785	\$ 55,786	\$ 74,380	\$ 74,381	\$ 92,975	\$ 92,976	\$ 148,760	6	
7		41,910	\$ 62,865	\$ 62,866	\$ 83,820	\$ 83,821	\$ 104,775	\$ 104,776	\$ 167,640	7	
8		46,630	\$ 69,945	\$ 69,946	\$ 93,260	\$ 93,261	\$ 116,575	\$ 116,576	\$ 186,520	8	
	CSR 94% (06)	CSR 94% (06)		CSR 87% (05)		CSR 73% (04)		No CSR			No CSR
	Eligible for Premium Tax Credits (PTC) in Bronze, Silver, or Gold Eligible for Cost Sharing Reductions (CSR) if SILVER plan is selected						Eligible for Premium Tax Credits in Bronze, Silver, or Gold			Eligible for Premium Tax Credits in Bronze, Silver, or Gold	
	Some Gold Plan premiums will be lower than Silver for clients in these income brackets.										
	<100%	100%	150%	150+%	200%	200+%	250%	250+%	400.00%		401% +

* Ask an Enrollment Manager if you may be working with a client eligible under 100%.

**REFERENCE
CHART**

Yearly Guidelines & Thresholds | Coverage Year 2023

For more information, see the *Health Reform: Beyond the Basics* [Yearly Income Guidelines and Thresholds](#)

2022 Federal Poverty Guidelines (Coverage Year 2023)

# in Household	100% FPL	138% FPL	150% FPL	200% FPL	250% FPL	300% FPL	400% FPL
1	\$13,590	\$18,754	\$20,385	\$27,180	\$33,975	\$40,770	\$54,360
2	\$18,310	\$25,268	\$27,465	\$36,620	\$45,775	\$54,930	\$73,240
3	\$23,030	\$31,781	\$34,545	\$46,060	\$57,575	\$69,090	\$92,120
4	\$27,750	\$38,295	\$41,625	\$55,500	\$69,375	\$83,250	\$111,000
5	\$32,470	\$44,809	\$48,705	\$64,940	\$81,175	\$97,410	\$129,880
6	\$37,190	\$51,322	\$55,785	\$74,380	\$92,975	\$111,570	\$148,760
7	\$41,910	\$57,836	\$62,865	\$83,820	\$104,775	\$125,730	\$167,640
8	\$46,630	\$64,349	\$69,945	\$93,260	\$116,575	\$139,890	\$186,520

For households with more than 8, add \$4,720 for each additional person. Source (plus Hawai'i and Alaska guidelines): aspe.hhs.gov/poverty-guidelines
Eligibility for premium tax credits in coverage year 2023 is based on 2022 poverty guidelines. FPL = federal poverty line.

Expected Premium Contribution (Coverage Year 2023)

Annual Household Income (% of FPL)	Up to 150% FPL	200% FPL	250% FPL	300% FPL	400% FPL & Above
Expected Premium Contribution (% of Income)	0%	2%	4%	6%	8.5%

Source: American Rescue Plan Act Public Law No: 117-2; Inflation Reduction Act Public Law No: 117-169

Employer-Sponsored Insurance Affordability Threshold (Coverage Year 2023)

Eligibility for Premium Tax Credits If Offer of Employer-Sponsored Insurance is Considered Unaffordable	
Considered unaffordable if ESI offer exceeds:	Affordability of family coverage determined by:
9.12%	Cost of family coverage

Source: irs.gov/irb/2022-33_IRB#REV-PROC-2022-34

Out-Of-Pocket Maximum (Coverage Year 2023)

Plan Type	Income Level	Out-of-Pocket Maximum	
		Individual	Family
All plans ¹	All income levels	\$9,100	\$18,200
CSR Silver Plan 73% AV ²	Between 201%-250% FPL	\$7,250	\$14,500
CSR Silver Plan 87% AV ²	Between 151%-200% FPL	\$3,000	\$6,000
CSR Silver Plan 94% AV ²	Up to 150% FPL	\$3,000	\$6,000

Audience:
Function:
Focus:

Assister
Informational
Eligibility, Application, & Plan Selection

Resource Focus: Application

For more information, see the *Health Reform: Beyond the Basics* [Troubleshooting Failed Identity Verification](#)

Guide

Troubleshooting Failed Identity Verification

When creating a new account on HealthCare.gov, individuals are required to verify their identity by answering a series of questions based on information in their credit report, such as former addresses, the bank where they have a mortgage or auto loan, or the year they signed up for a specific credit card. HealthCare.gov allows two attempts to verify identity, if the individual fails both attempts they will not be allowed to submit their application until their identity can be verified.

Follow these steps to troubleshoot a failed identity verification.

Identity questions

Answer these questions to see how well you know your identity.

1. What type of mortgage or auto loan do you have? (Select one)

HOME EQUITY
 30 YEAR
 15 YEAR
 ARMORABLE
 NONE OF THE ABOVE (DO NOT SELECT)

2. How long have you had the credit card you provided?

1 YEAR
 2-5 YEARS
 6-10 YEARS
 MORE THAN 10 YEARS
 NONE OF THE ABOVE (DO NOT SELECT)

3. Which of the following is a previous address (number or street) where a bill has been mailed to you? (Select one)

875 WASHINGTON
 1234 MAIN ST
 56789 101
 10100 101
 NONE OF THE ABOVE (DO NOT SELECT)

1 Step 1

After two failed attempts to answer the identity verification questions, you will see this screen, which will allow you to upload documents that verify your identity immediately, such as a license or green card.

If the individual didn't bring identity verification documents to the appointment and needs to come back with their documents, you can upload the documents later by logging into their account, clicking on "My Profile," and then clicking on "Verify Now."

Your identity wasn't verified.

You need to submit documents to prove your identity. You won't be able to submit your application for health coverage until your identity is verified. Once you upload your documents, they'll be reviewed. The results of your identity verification will be emailed to you.

[UPLOAD DOCUMENTS](#)

My Profile

All fields are required unless they're marked optional. Don't enter any letters with special characters. See [identity verification](#) for more info.

Your profile contains your basic information. You can make changes here.

Name: Jane Doe
Identity wasn't verified. See below.

2 Step 2

Click "Upload Documents" and then select the type of identity verification document you intend to submit from the dropdown list. Upload the document and then click "Finish."

3 Step 3

Click "Return to My Profile." On this screen, you'll see a message that says "Identity verification pending." Next, select "My Applications & Coverage."

Submit documents that prove your identity.

What type of document do you want to upload?

Audience: Double Duty Assister is target audience, but potentially useful for tech-savvy client

Function: Instructive How to/Step by step

Focus: Application

Resource Focus: Enrollment

For more information, see the *Health Reform: Beyond the Basics* [Plan Comparison Worksheet \(Available in 8 Languages\)](#)

Audience: Double Duty
Function: Double Duty
Focus: Enrollment+

Marketplace Plan Comparison Worksheet

Annual Projected Income		Premium Tax Credit (monthly)	
Household Size		Premium Tax Credit (annual)	
		CSR Eligible?	Yes No

Main Information

	Option 1	Option 2	Option 3	Option 4
Insurance Company				
Insurance Plan Name				
Metal Tier (bronze, silver, gold)				
Plan Type (PPO, HMO, etc.)				
Monthly Premium (after tax credit)				
Annual Premium (after tax credit)				

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				
Out-of-Pocket Maximum				
Physician Visit				
Specialist Visit				
Generic Drugs				
Emergency Room Visit				
Inpatient Hospital Stay				
Other:				
Other:				

Provider Network & Formulary

Name(s)	Option 1	Option 2	Option 3	Option 4
Physician(s) In-Network	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Specialist(s) In-Network	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Hospital In-Network	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Prescription on Formulary	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other:				

Health Reform: Beyond the Basics  1

Definitions of Health Insurance Terms (see HealthCare.gov/glossary for more information)

Key Terms	Definition
Premium	The amount you pay for your health insurance plan every month. If you don't pay your premium, your insurance plan might be cancelled.
Deductible	An annual dollar amount that you need to pay out-of-pocket for health care services before your plan starts to pay for services. Some health insurance plans pay for certain services before the deductible is met. Preventive services, such as annual check-ups and immunizations, are covered by your plan before the deductible is met.
Out-of-Pocket Maximum	A limit on the amount you pay for health care services in a year. Once the amount you've paid reaches the annual maximum, your insurance plan pays for 100% of covered services.
Copay	A set dollar amount you pay for a covered health care service after you've paid your deductible. Copays vary for different services. For example, you might have a \$10 copay for a medication but a \$50 copay to see a specialist.
Coinsurance	The portion you pay for covered services, after you've paid your deductible. For example, if your plan has 20% coinsurance, you pay 20% of the cost of a service and your plan pays 80%.
Provider Network	A list of doctors and hospitals your insurance company has contracts with, known as in-network providers. Doctors not on this list are out-of-network. Going to an in-network provider generally costs less, and some plans don't pay for out-of-network providers at all.
Prescription Drug Formulary	A list of medications your insurance plan will cover. These are often grouped in tiers, with some drugs costing more than others.


Cost-sharing example: Insurance plan with \$1,000 deductible, 30% coinsurance, and \$5,000 out-of-pocket maximum. If you get a \$20,000 surgery, you would pay the first \$1,000 (deductible) plus 30% of the remaining costs (coinsurance), but your total cost would be no more than \$5,000 (because of the out-of-pocket maximum). The insurance plan pays the remaining \$15,000.

Tips

- To avoid scams and junk plans, always go to HealthCare.gov to shop for health insurance.
- When picking a plan, look at the annual costs (deductible, co-pays, etc.), not just the monthly premium.
- Consider the amount of health care services you use every year and the medications you take in order to figure out the annual cost of each plan.
- Plans with low premiums will sometimes have high deductibles, while plans with high premiums will often have low deductibles.
- Check the network and formulary of each of the plans you're considering to make sure your doctors are in-network and your medications are covered.
- If you're getting a tax credit to help you pay for your health insurance, remember to report any changes in your income to the marketplace during the year or you may be required to pay back the tax credit.

Marketplace Login Information

	Notes
Username	
Password	
Application ID #	

Health Reform: Beyond the Basics  2

Evolution of a Network Overview Resource 2021



Austin-Area Primary and Specialty Providers						
	SCOTT & WHITE	FRIDAY	AMBETTER	OSCAR	SENDERO	BLUE CROSS BLUE SHIELD
Austin Diagnostic Clinic	NOT In-Network	IN-NETWORK	NOT In-Network	IN-NETWORK (Check Doctor)	IN-NETWORK	NOT In-Network
Austin Regional Clinic	NOT In-Network	NOT In-Network	IN-NETWORK	IN-NETWORK	IN-NETWORK	IN-NETWORK
CommUnityCare	NOT In-Network	NOT In-Network	IN-NETWORK	IN-NETWORK	IN-NETWORK	IN-NETWORK
Lonestar Circle of Care	NOT In-Network	(In Progress)	IN-NETWORK	IN-NETWORK	IN-NETWORK	IN-NETWORK
People's Community Clinic	NOT In-Network	(In Progress)	IN-NETWORK	NOT In-Network	IN-NETWORK	IN-NETWORK
Red River Family Practice	NOT In-Network	(In Progress)	NOT In-Network	IN-NETWORK	NOT In-Network	NOT In-Network
UT Health Austin	NOT In-Network	NOT In-Network	IN-NETWORK	IN-NETWORK	IN-NETWORK	IN-NETWORK
Austin-Area Oncology Providers						
	SCOTT & WHITE	FRIDAY	AMBETTER	OSCAR	SENDERO	BLUE CROSS BLUE SHIELD
Austin Cancer Centers	NOT In-Network	(In Progress)	IN-NETWORK	IN-NETWORK	IN-NETWORK	IN-NETWORK
Texas Oncology	NOT In-Network	IN-NETWORK	IN-NETWORK	IN-NETWORK	IN-NETWORK	IN-NETWORK (Select Doctors)

Evolution of a Network Overview Resource

Austin, TX, 2022

Hospitals*			Urgent Care Centers† ‡	Imaging† ‡	Labs† ‡	Pharmacies† ‡
Ascension Seton	St. David's	Baylor, Scott & White	† This list does not identify every in-network option, but identifies those with multiple Austin-area locations			
‡ Urgent care, imaging, labs and meds accessed via in network providers should be in network; always double check						
*Ascension Seton includes: Ascension Seton Infusion Center, Cedar Park Regional Medical Center, Dell Children's, and Dell Seton Medical Center at UT						
*St. David's includes: Heart Hospital of Austin						
	St. David's		Concentra, CVS Minute Clinic	Austin Radiological Association	Clinical Pathology Laboratories, LABCORP, Quest Diagnostics	Costco, CVS, HEB, Randalls, Walgreens, Walmart,
Ascension Seton	St. David's		Concentra, CVS Minute Clinic, NextCare, St. David's Care Now Urgent Care	Austin Radiological Association, Preferred Imaging LLC	Clinical Pathology Laboratories, LABCORP, Quest Diagnostics	Costco, CVS, HEB, Randalls, Walmart
	St. David's		St. David's Care Now Urgent Care	Austin Radiological Association	Clinical Pathology Laboratories, LABCORP, Quest Diagnostics	HEB, Randalls, Walgreen, Walmart
Ascension Seton	St. David's		Concentra, CVS Minute Clinic, NextCare, St. David's Care Now Urgent Care	Austin Radiological Association, Preferred Imaging LLC	Clinical Pathology Laboratories, LABCORP, Quest Diagnostics	HEB, Randalls, Walgreen, Walmart
Ascension Seton	St. David's	Baylor, Scott & White	CareNow, Concentra, CVS Minute Clinic, Fast Med, Lewis Urgent Care	Austin Radiological Association, Preferred Imaging LLC, South Austin Health Imaging, Touchstone Imaging	Clinical Pathology Laboratories, LABCORP, Quest Diagnostics	HEB, Randalls, Walgreens, Walmart
	St. David's		Concentra	Central Park Imaging	Clinical Pathology Laboratories, LABCORP, Quest Diagnostics	CVS, HEB, Walgreens, Walmart
	St. David's		CVS Minute Clinic, NextCare	Interventional Partners LLC,	LABCORP, Quest Diagnostics	CVS, HEB, Walgreens, Walmart
	St. David's		Concentra, CVS Minute Clinic, NextCare, Lewis Urgent Care	Preferred Imaging, LLC	Clinical Pathology Laboratories, LABCORP	Costco, CVS, HEB, Randalls, Walgreens, Walmart
	St. David's		TBD--Additional Information pending!			Costco, CVS, HEB, Walgreens, Walmart
Ascension Seton	St. David's		CareNow, Concentra, Lewis Urgent Care, NextCare	Austin Radiological Association, Longhorn Imaging Center	LABCORP, Quest Diagnostics	Costco, CVS, HEB, Randalls, Walmart
		Baylor, Scott & White	Concentra, NextCare, Premier Urgent Care Plus	Touchstone Imaging	Clinical Pathology Laboratories, Quest Diagnostics	Costco, CVS, HEB, Randalls, Walgreens, Walmart
Ascension Seton	St. David's		Concentra, FastMed Urgent Care, Lewis Urgent Care, NextCare	Austin Radiological Association, Preferred Imaging LLC, Touchstone Imaging	Clinical Pathology Laboratories, LABCORP, Quest Diagnostics	Costco, CVS, HEB, Randalls, Walgreens, Walmart

Austin Area Hos

David's | Baylor,

David's

David's

David's

David's

David's | Baylor,

David's

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David's

David's

Baylor,

David's

Marketplace Plan Network Overview

Note: The following Marketplace Companies are organized in order of cost for Silver plans

Insurance Company Name (& Plan Name, if more than one)						
Plan Type						
Referral for Specialist Visits?						
Counties Served						
Emergency Room Coverage Outside state?	<p>ALL MARKETPLACE 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.</p>					
NON-EMERGENCY In Person Care						

[Blank Template Versions for Network Overview Resource \(Simple\)](#)

			Primary and Specialty Care Providers								
Insurance Company Name (& Plan Name, if more than one)	Plan Type	Need for Special	Insurance Company Name (& Plan Name, if more than one)	Provider	Provider	Provider	Provider	Provider	Provider	Provider	Provider
	HMO	Require network									
	EPO	No requirement for network									

Page 1

[Blank Template Versions for Network Overview Resource \(>6 plans\)](#)

Using 2023 Easy Pricing Plans to Build Quick & Easy Network Overview Resources



Standardized Plans

- What is a standardized plan?
 - Standard Actuarial Value, maximum out-of-pocket (MOOP), deductibles, and cost-sharing for a given metal level of coverage
- Why require standardized plans on the marketplace?
 - Can make it easier for shoppers to compare choices based on premiums, provider networks, and quality ratings
 - Response to growing number of plan choices in HealthCare.gov states / “choice overwhelm”
 - Average in 2022: >100 plans, >45 Silver plans
- What’s required in 2023?
 - Issuers must offer standardized plans at every product network type, at every metal level, and throughout every service area that they offer non-standardized options
 - Plans labeled as “Easy Pricing” and included as separate filter
 - Immediate result: more net plans (but possibly easier comparisons between standardized plans)

**U.S. Department
of Health and
Human Services
(HHS)
Standardization
Parameters for
2023 Easy
Pricing Plans**

TABLE 12: 2023 Final Standardized Plan Options Set One (For All FFE and SBE-FP Issuers, Excluding Issuers in Delaware, Louisiana, and Oregon)

	Bronze	Expanded Bronze	Standard Silver	Silver 73 CSR	Silver 87 CSR	Silver 94 CSR	Gold	Platinum
Actuarial Value	59.86%	64.18%	70.06%	73.11%	87.05%	94.02%	78.00%	88.00%
Deductible	\$9,100	\$7,500	\$5,800	\$5,700	\$800	\$0	\$2,000	\$0
Annual Limitation on Cost Sharing	\$9,100	\$9,000	\$8,900	\$7,200	\$3,000	\$1,700	\$8,700	\$3,000
Emergency Room Services	No charge after deductible	50%	40%	40%	30%	25%*	25%	\$100*
Inpatient Hospital Services (Including Mental Health and Substance Use Disorder)	No charge after deductible	50%	40%	40%	30%	25%*	25%	\$350*
Primary Care Visit	No charge after deductible	\$50*	\$40*	\$30*	\$20*	\$0*	\$30*	\$10*
Urgent Care	No charge after deductible	\$75*	\$60*	\$45*	\$30*	\$5*	\$45*	\$15*
Specialist Visit	No charge after deductible	\$100*	\$80*	\$60*	\$40*	\$10*	\$60*	\$20*
Mental Health and Substance Use Disorder Outpatient Office Visit	No charge after deductible	\$50*	\$40*	\$30*	\$20*	\$0*	\$30*	\$10*
Imaging (CT/PET Scans, MRIs)	No charge after deductible	50%	40%	40%	30%	25%*	25%	\$100*

**U.S. Department
of Health and
Human Services
(HHS)
Standardization
Parameters for
2023 Easy
Pricing Plans**

	Bronze	Expanded Bronze	Standard Silver	Silver 73 CSR	Silver 87 CSR	Silver 94 CSR	Gold	Platinum
Speech Therapy	No charge after deductible	\$50*	\$40*	\$30*	\$20*	\$0*	\$30*	\$10*
Occupational, Physical Therapy	No charge after deductible	\$50*	\$40*	\$30*	\$20*	\$0*	\$30*	\$10*
Laboratory Services	No charge after deductible	50%	40%	40%	30%	25%*	25%	\$30*
X-rays and Diagnostic Imaging	No charge after deductible	50%	40%	40%	30%	25%*	25%	\$30*
Skilled Nursing Facility	No charge after deductible	50%	40%	40%	30%	25%*	25%	\$150*
Outpatient Facility Fee (Ambulatory Surgery Center)	No charge after deductible	50%	40%	40%	30%	25%*	25%	\$150*
Outpatient Surgery Physician and Services	No charge after deductible	50%	40%	40%	30%	25%*	25%	\$150*
Generic Drugs	No charge after deductible	\$25*	\$20*	\$20*	\$10*	\$0*	\$15*	\$5*
Preferred Brand Drugs	No charge after deductible	\$50	\$40*	\$40*	\$20*	\$15*	\$30*	\$10*
Non-Preferred Brand Drugs	No charge after deductible	\$100	\$80	\$80	\$60	\$50*	\$60*	\$50*
Specialty Drugs	No charge after deductible	\$500	\$350	\$350	\$250	\$150*	\$250*	\$150*

*Benefit category not subject to the deductible

Easy Pricing Plans & Non-Standardized Silver Plan Comparison

Austin, Texas Zip, Female, 38 yrs old, \$25K income

Optional step: View health & dental plans [View steps](#)

View health & dental plans

Health plan categories

This is how health plans split costs with you.

◆ **Easy pricing** plans have the same out-of-pocket costs and care before deductibles for some services.

- Bronze (40)
- Silver (51) 💰 Extra savings
 - with easy pricing (12)
- Gold (35)

[Apply filters](#) [Clear filters](#) [Cancel](#)

[Edit](#)

[Estimate your total yearly costs](#)
[See if doctors, facilities, & drugs are covered](#)

Plan type

[Personalized Care No Deductible](#)

STX0090004

Out-of-pocket maximum ⓘ
\$9,100

Estimated total y costs
[Add yearly cost](#)

New plan rated

126 total plans

- 40 Bronze
- 51 Silver 💰 Extra savings
- 35 Gold

ck

Estimated monthly premium

\$20.08

Including a \$426 tax credit
Was \$446.08

Baylor Scott and White Health Plan

[BSW Prime Silver HMO 003 \(CMS Standardized Plan with \\$0 Pediatric PCP copay\)](#)

Extra savings | Easy pricing

Silver | HMO | Plan ID: 40788TX0460003

New plan - Not rated

Compare

Estimated monthly premium

\$60.25

Including a \$426 tax credit
Was \$486.25

Aetna CVS Health

[Silver S: Aetna network of doctors & hospitals + \\$0 Walk-in clinic + \\$0 Telehealth 24/7](#)

Extra savings | Easy pricing

Silver | HMO | Plan ID: 58840TX0110055

New plan - Not rated

Compare

Estimated monthly premium

\$67.38

Including a \$426 tax credit
Was \$493.38

US Health and Life

[Ascension Personalized Care Standard Silver](#)

Extra savings | Easy pricing

Silver | EPO | Plan ID: 57125TX0090009

New plan - Not rated

Compare

Estimated monthly premium

\$78.00

Including a \$426 tax credit
Was \$504.00

Moda Health, Inc.

[Moda Select Texas Standard Silver](#)

Extra savings | Easy pricing

Silver | EPO | Plan ID: 17933TX0010008

New plan - Not rated

Compare

Deductible

\$800

Individual total
(health & drug combined)

Out-of-pocket maximum

\$3,000

Individual total

Estimated total yearly costs

Copayments / Coinsurance

Emergency room care
30% Coinsurance after deductible

Generic drugs
\$10

Primary doctor
\$20

Specialist doctor
\$40

4 Least Expensive Silver Easy Pricing Plans

**Austin, Texas
38 yr old,
female,
\$25K income
*87% CSR**

Beyond
the Basics

Viewing plans for this group

- You (age 38)

Your total estimated tax credit: \$426

[Edit](#)

[Estimate your total](#)

(Least Expensive Silver EPPs)	Plan Type	Hospitals
Scott & White	HMO	Scott and White
Aetna	HMO	St. David's
Ascension	EPO	Ascension
Moda	EPO	St. David's

Filters

[Add more filters](#)

Plan type

Health Plans

Silver - with easy pricing

12 plans match your filters

Estimated monthly premium

\$20.08

Including a \$426 tax credit
Was \$446.08

Baylor Scott and White Health Plan

[BSW Prime Silver HMO 003 \(CMS Standardized Plan with \\$0 Pediatric PCP copay\)](#)

New plan - Not rated

Compare

Extra savings | Easy pricing

Silver | HMO | Plan ID: 40788TX0460003

Deductible

\$800

Individual total
(health & drug combined)

Out-of-pocket maximum

\$3,000

Individual total

Estimated total yearly costs

[Add yearly cost](#)

Copayments / Coinsurance

Emergency room care
30% Coinsurance after deductible

Generic drugs
\$10

Primary doctor
\$20

Specialist doctor
\$40

Plan features

- ✗ Adult Dental
- ✗ Child Dental

Medical providers in-network

- ✗ St. David's Cardiology, PLLC
- ✗ Ascension Seton Medical Center Austin
- ✓ Baylor Scott & White Medical Center - Austin

[Edit medical providers](#)

[Add prescription drugs](#)

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

[Plan details](#)

[Like this plan](#)

Optional step: View health & dental plans [View steps](#)

View health & dental plans

Easy Pricing Plans & Non-Standardized Silver Plan Comparison

Austin, Texas Zip, Female, 38 yrs old, \$25K income

Viewing plans for this group [Edit](#)

- You (age 38)

Your total estimated tax credit: **\$426**

[Estimate your total yearly costs](#)
[See if doctors, facilities, & drugs are covered](#)

Health plan categories

This is how health plans split costs with you.

👉 **Easy pricing plans** have the same out-of-pocket costs and care before deductibles for some services.

- Bronze (40)
- Silver (51) 💰 Extra savings
 - with easy pricing (12)
- Gold (35)

ck

126 total plans

- 40 Bronze
- 51 Silver 💰 Extra savings
- 35 Gold

Estimated total y costs

Add yearly cost

Scott & White Easy Pricing Plan Silver, & Non-Standardized Silver Plan Silver

Austin, Texas Zip, Female, 38 yrs old, \$25K income

Baylor Scott and White Health Plan New plan - Not rated [Compare](#)

BSW Prime Silver HMO 003 (CMS Standardized Plan with \$0 Pediatric PCP copay)

Extra savings | Easy pricing

Silver | HMO | Plan ID: 40788TX0460003

Deductible \$800 Individual total (health & drug combined)	Out-of-pocket maximum \$3,000 Individual total	Estimated total yearly costs Add yearly cost
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Copayments / Coinsurance

Emergency room care 30% Coinsurance after deductible	Generic drugs \$10	Primary doctor \$20	Specialist doctor \$40
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Baylor Scott and White Health Plan New plan - Not rated [Compare](#)

BSW Prime Silver HMO 008 (Two free PCP visits, \$0 Pediatric PCP visit)

Extra savings

Silver | HMO | Plan ID: 40788TX0460008

Deductible \$1,000 Individual total (health & drug combined)	Out-of-pocket maximum \$3,000 Individual total	Estimated total yearly costs Add yearly cost
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Copayments / Coinsurance

Emergency room care 35% Coinsurance after deductible	Generic drugs No Charge	Primary doctor \$5	Specialist doctor \$20
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Aetna Easy Pricing Plan Silver, & Non-Standardized Silver Plan

Austin, Texas Zip, Female, 38 yrs old, \$25K income

Estimated monthly premium
\$60.25
Including a \$426 tax credit
Was \$486.25

Aetna CVS Health
[Silver S: Aetna network of doctors & hospitals + \\$0 Walk-in clinic + \\$0 Telehealth 24/7](#)
New plan - Not rated
 Compare

Extra savings | Easy pricing
Silver | HMO | Plan ID: 58840TX0110055

Deductible \$800 Individual total (health & drug combined)	Out-of-pocket maximum \$3,000 Individual total	Estimated total yearly costs <input type="button" value="Add yearly cost"/>
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Copayments / Coinsurance

Emergency room care 30% Coinsurance after deductible	Generic drugs \$10	Primary doctor \$20	Specialist doctor \$40
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Estimated monthly premium
\$65.37
Including a \$426 tax credit
Was \$491.37

Aetna CVS Health
[Silver 2: Aetna network of doctors & hospitals + \\$0 Walk-in clinic + \\$0 Telehealth 24/7](#)
New plan - Not rated
 Compare

Extra savings
Silver | HMO | Plan ID: 58840TX0110013

Deductible \$1,000 Individual total (health & drug combined)	Out-of-pocket maximum \$2,800 Individual total	Estimated total yearly costs <input type="button" value="Add yearly cost"/>
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Copayments / Coinsurance

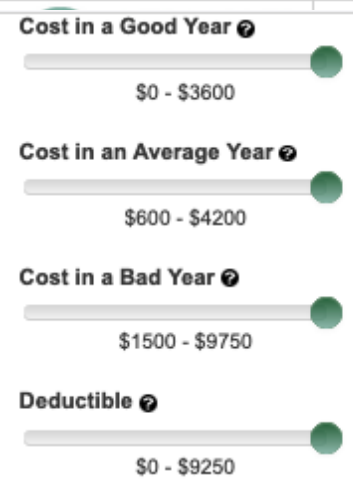
Emergency room care 30% Coinsurance after deductible	Generic drugs No Charge	Primary doctor \$20	Specialist doctor \$40
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Building Quick Network Overviews: Vermont Health Connect



SBMs that Require Standardized Plans

California	Only SPs are offered
Colorado	Introduced SPs for 2023 plan year, coupled with requirement to lower premiums annually and by 15% by 2025
Connecticut	Limits number of non-SPs; SPs labeled “standard”
Washington, D.C.	Only SPs are offered
Maine	Limits number of non-SPs; SPs are labeled “Clear Choice”
Maryland	SPs are labeled “Value Plans”
Massachusetts	Limits number of non-SPs and majority of plans offered are SPs; SPs are labeled “standard”
New Jersey	Only SPs are offered
New York	Limits number of non-SPs; SPs are labeled “ST”; minimizes deductible and applies to all benefits
Vermont	Only SPs are offered
Washington	Limits number of non-SPs; SPs are labeled “Cascade”



Unfilter

Filter Results

Plan	Yearly Cost Estimates		
	Good Year <small>(18% chance)</small>	Average Year	Bad Year <small>(3% chance)</small>
<p>Blue Cross and Blue Shield of Vermont - EPO - Silver</p> <p>Monthly Premium: \$4.31 - after \$844.00 subsidy</p> <p>Deductible: Medical: \$1,200 / Drug: \$250</p> <p>Max Out-of-Pocket : \$2,400</p> <p>Quality Rating: ★★★★★</p>	\$52	\$812	\$2,452
<input type="checkbox"/> MVP VT Silver 3 MVP Health Care - HMO - Silver Monthly Premium: \$10.37 - after \$844.00 subsidy Deductible: Medical: \$1,200 / Drug: \$250 Max Out-of-Pocket : \$2,400 Quality Rating: ★★★★★	\$124	\$764	\$2,524
<input type="checkbox"/> MVP VT HDHP Silver 4 MVP Health Care - HMO - Silver Monthly Premium: \$23.56 - after \$844.00 subsidy Deductible: \$1,500 Max Out-of-Pocket : \$1,500 Quality Rating: ★★★★★	\$283	\$1,113	\$1,783
<input type="checkbox"/> MVP VT Plus HDHP Silver 2 MVP Health Care - HMO - Silver Monthly Premium: \$28.57 - after \$844.00 subsidy Deductible: \$1,500 Max Out-of-Pocket : \$1,500 Quality Rating: ★★★★★	\$343	\$1,173	\$1,843
<input type="checkbox"/> BCBSVT Silver CDHP Plan Blue Cross and Blue Shield of Vermont - EPO - Silver Monthly Premium: \$31.58 - after \$844.00 subsidy Deductible: \$1,500 Max Out-of-Pocket : \$1,500 Quality Rating: ★★★★★	\$379	\$1,209	\$1,879

2023 Silver 87 Plans		BCBSVT Silver Plan	BCBSVT Silver CDHP Plan (can pair with HSA)
		MVP VT Silver 3	MVP VT Silver 4 HDHP (can pair with HSA)
Deductible/Max. Out-of-Pocket		Individual / Family	Individual / Family
Deductible (Ded.)	Integrated Ded.?	N	Y-\$1,500/\$3,000
	Medical Ded.	\$1,200/\$2,400	See above
	Waived ¹ for: (see Services below)	Prev, OV, UC, Amb, Den1 ⁸ , Vision	Prev
	Prescription (Rx) Ded.	\$250/\$500	See above
	Waived for:	Rx Generic	Rx Wellness ⁷
Max. Out-of-Pocket (MOOP)	Integrated?	Y-\$2,400/\$4,800	Y-\$1,500/\$3,000
	Medical	See above	See above
	Prescription (Rx)	\$450/\$900	\$1,500/\$3,000

(Least Expensive Silver EPPs)	Deductible	Out of Pocket Maximum
BCBSVT Silver Plan	\$1,200	\$2,400
BCBSVT Silver CDHP Plan	\$1,500	\$1,500
MVP VT Silver 3	\$1,200	\$2,400
MVP VT Silver 4 HDHP	\$1,500	\$1,500

2023 Silver 87 Plans

		BCBSVT Silver Plan	BCBSVT Silver CDHP Plan (can pair with HSA)
		MVP VT Silver 3	MVP VT Silver 4 HDHP (can pair with HSA)
Service Category (Examples)		Co-insurance (%) / Co-pay (\$)	Co-insurance (%) / Co-pay (\$)
Preventive (Prev)		\$0	\$0
Office Visit (OV)	PCP or Mental Health (PCP/MH)	\$10*	Ded., then 0%
	Specialist ²	\$30	Ded., then 0%
Urgent Care (UC)		\$40	Ded., then 0%
Ambulance (Amb)		\$100	Ded., then 0%
Emergency Room (ER) ³		Ded., then \$250	Ded., then 0%
Hospital Services ⁴	Inpatient	Ded., then 40%	Ded., then 0%
	Outpatient	Ded., then 40%	Ded., then 0%

(Least Expensive Silver EPPs)	PCP/Mental Health Visit	Specialist Visit
BCBSVT Silver Plan	\$10	\$30
BCBSVT Silver CDHP Plan	Covered after deductible	Covered after deductible
MVP VT Silver 3	\$10	\$30
MVP VT Silver 4 HDHP	Covered after deductible	Covered after deductible

(Least Expensive Silver EPPs)	Urgent Care	Ambulance
BCBSVT Silver Plan	\$40	\$100
BCBSVT Silver CDHP Plan	Covered after deductible	Covered after deductible
MVP VT Silver 3	\$40	\$100
MVP VT Silver 4 HDHP	Covered after deductible	Covered after deductible

Q&A



Bio & Contact

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- Certified Application Counselor, Navigator, Community Health Worker and Program Manager (2014-2022 Foundation Communities, Austin, Texas)

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This is a project of the Center on Budget and Policy Priorities
www.cbpp.org

Upcoming Webinars

Summer Series Part II: Under the Hood: Building Your Own Plan Selection Tools for 2024

August 16th, 2pm ET (11am PT)

- Registration on the Beyond the Basics website: <https://www.healthreformbeyondthebasics.org/upcoming-webinars/>

Open Enrollment Series – Save the Dates

All webinars take place at 2pm ET (11am PT)

- Households and income: Tuesday, September 12
- The premium tax credit: Thursday, September 14
- Immigrant eligibility Part I: Tuesday, September 19
- Preventing and resolving data matching issues: Thursday, September 28
- Plan design: Tuesday, October 3
- Plan selection strategies, October 10
- Auto-renewal process on HealthCare.gov: Thursday, October 12
- Immigrant eligibility Part 2: Tuesday, October 17
- Tying it all together: Thursday, October 24
- Helping people who speak Spanish enroll in coverage (delivered in Spanish): Thursday, October 26