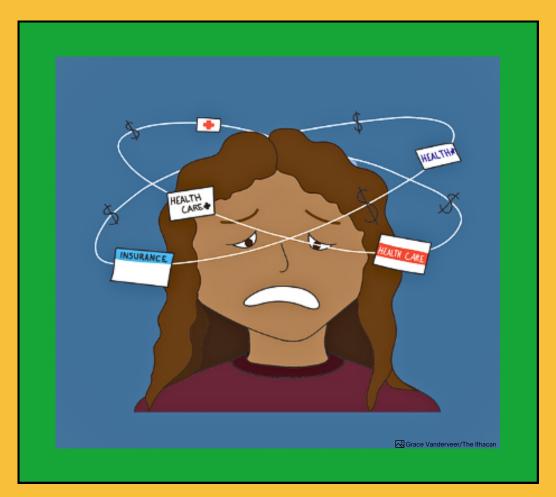
WHAT THE HEALTH?!



A FIRST INTRODUCTION TO AMERICAN HEALTH INSURANCE

ZINE BY TESSA DUNBAR, OTS

HOW DOES HEALTH INSURANCE HELP ME?





Intro To Your Options

PLAN TYPES

ТҮРЕ	BASIC INFO	PROS	CONS
Health Maintenance Organization HMO	In-network coverage; Primary Physician →Referral→Specialist	Affordable Option; typically ↓ premiums & deductibles	↓ choice who you see; only in-network except in emergencies; need referrals
Preferred Provider Organization PPO	In-network & out-of-network coverage	↑ choice who you see; no referrals = ↑ flexibility	↑ expensive than HMO
Exclusive Provider Organization EPO	In-network coverage	↓ expensive than PPO; ↑ choice than HMO; no referrals = ↑ flexibility	↑ expensive than HMO; only in-network except in emergencies
Health Savings Account HSA	Pre-tax savings account for medical expenses	May lower overall healthcare costs with tax benefits	High deductibles = expensive for some
Fee-for-service	In-network & out-of-network coverage; Reimbursed per service provided	Typically offers the widest network of providers = ↑ choice	Expensive; incentivizes excessive treatments for profit
Catastrophic	Essential & emergency services for young adults ↓30yrs	↓ monthly premiums; low cost when not using services regularly; worst-case scenario protection	Very high deductibles; not good for chronic conditions
Medicaid	Public assistance, based on financial need/eligibility	Free or low-cost health insurance; mandatory benefits vary by state	Coverage limitations =↓ flexibility; limited provider choice; treatment discrimination due to ↓ reimbursement rates

Your Options Continued

What is the Health Insurance Marketplace?



IT IS WHERE CONSUMERS CAN COMPARE AND PURCHASE PLANS THAT FOLLOW FEDERAL & STATE COVERAGE GUIDELINES

- INDIVIDUALS & FAMILIES CAN RECEIVE DISCOUNTS MAKING HEALTHCARE MORE AFFORDABLE; EXCLUDES CATASTROPHIC PLANS
- YOU DO NOT NEED TO PURCHASE YOUR PLAN THROUGH THE MARKETPLACE BUT YOU WILL NOT BE ELIGIBLE FOR DISCOUNTS IF YOU DON'T

COMPARE MARKETPLACE CATEGORIES					
Category	Monthly Payments	Insurance Pay vs. You Pay	Out-of-pocket Cost	Value for Needs	
CATASTROPHIC	Lowest monthly premium	0% vs. 100% until deductible met	Highest cost for care; highest deductible	Protection from worst-case medical scenarios	
BRONZE	Low monthly premium	60% vs. 40%	High cost for care; high deductibles	Better value vs. catastrophic if used > 3x/yr	
SILVER	Moderate monthly premium	70% vs. 30%	Moderate cost for care; lower deductibles vs. Bronze	More routine care covered vs. Bronze	
GOLD	High monthly premium	80% vs. 20%	Low cost for care; low deductibles	For frequent care	
PLATINUM	Highest monthly premium	90% vs. 10%	Lowest cost for care; very low deductibles	For frequent care with a lot of coverage provided	

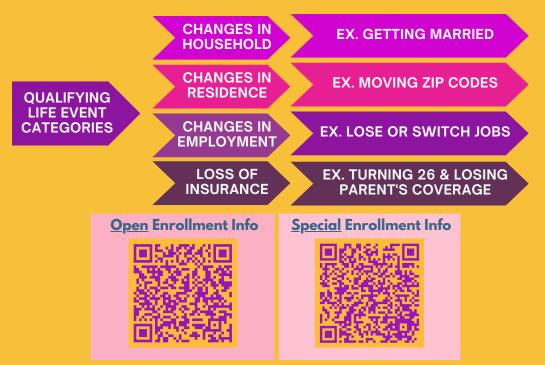
HOW TO ENROLL

<u>Most</u> states have Open Enrollment from Nov. 1st-January 15th each year; anyone can purchase or change their health insurance plan during this time.



Outside of the Open Enrollment period, you can ONLY purchase health insurance if you <u>qualify</u> for a Special Enrollment Period. Typically you will have 60 days before or after a <u>qualifying event</u> to purchase/change plans.

*You can enroll in Medicaid at anytime if you qualify



KNOW YOUR RIGHTS AFFORDABLE CARE ACT

WHILE SOME STATES HAVE THEIR OWN **RULES PROTECTING CONSUMERS. ALL INSURANCE PLANS PURCHASED** THROUGH THE MARKETPLACE MUST MEET THESE **REQUIREMENTS SET BY THE ACA:**

- YOU CANNOT BE DENIED COVERAGE EVEN IF YOU HAVE A PRE-EXISTING CONDITION
- YOU HAVE A RIGHT TO RECEIVE FREE PREVENTIVE CARE
- YOU HAVE A RIGHT TO STAY ON YOUR PARENT'S HEALTH PLAN IF YOU ARE \downarrow 26
- INSURANCE COMPANIES CAN'T LIMIT YEARLY OR LIFETIME COVERAGE OF **ESSENTIAL BENEFITS**
- YOU HAVE THE RIGHT TO RECEIVE EASY-**TO-UNDERSTAND INFORMATION ABOUT** YOUR HEALTH BENEFITS
- YOU ARE PROTECTED FROM UNREASONABLE INSURANCE RATE **INCREASES**
- YOU CAN'T BE DENIED COVERAGE BECAUSE YOU MADE A MISTAKE ON YOUR APPLICATION
- YOU HAVE THE RIGHT TO CHOOSE YOUR PRIMARY DOCTOR
- YOU HAVE THE RIGHT TO APPEAL A HEALTH INSURANCE COMPANY DECISION

PROTIP: REQUEST A SUMMARY OF **BENEFITS AND** COVERAGE (SBC)

FROM YOUR **INSURANCE FOR** EASY-TO-UNDERSTAND COVERAGE POLICY





(ACA) HEALTHCARE REFORMLAWS

TO PROTECT

UNDER ACA INSURANCE **COMPANIES MUST PROVIDE COVERAGE FOR** THESE SERVICES:

- OUTPATIENT CARE
- EMERGENCY SERVICES
- HOSPITALIZATION
- PREGNANCY, MATERNITY & NEWBORN CARE
- MENTAL HEALTH & SUBSTANCE ABUSE DISORDERS
- PRESCRIPTION DRUGS
- REHABILITATIVE CARE
- DISEASE & CHRONIC DISEASE MANAGEMENT
- LABORATORY SERVICES
- PREVENTATIVE CARE
- DENTAL & VISION CARE FOR CHILDREN UNDER 19 **(THESE SERVICES NOT** CONSIDERED ESSENTIAL AS AN ADULT)

A WARNING

PLANS PURCHASED OUTSIDE OF THE MARKETPLACE DO NOT NEED **TO FOLLOW ACA REQUIREMENTS**

This zine was created to provide basic health insurance information with access to additional resources to help guide you when you are ready for more information. What health insurance option is best depends on your situation and needs. Navigating options can feel overwhelming, but resources to help guide you are available! Remember to breathe during the process.



covered by it."



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CREATED

IN 2023.