

HEALTH INSURANCE FAQ

JEFFREY ROSNER ,BENEFITS CONSULTANT

Q. Who is this insurance for?

A. Typically our clients are self employed, a professional or a business owner.

Q. How Much does this insurance cost?

A. Monthly Rates are dependent on family status. For example are you a single, couple, parent and children or family? Also what is your age? Some of our plans have age banded rates. What state are you in?

Q. Why should I enroll in one of your plans?

A. Rates are typically 20-40% less than Marketplace or Group plans depending on various factors for equal or better coverage.

Q. How can the rates for the health plans you represent be so much less? Everything else I see is so much more expensive.

A. The plans we work on are not "Open Access" meaning anyone can enroll. Because they are large groups or associations they can legally and ethically say no to certain conditions which makes the plans less. Additionally certain very expensive medications are not covered (examples: Ozempic,Descovy,Humira)
Also the plans we work on are outside the ACA.
The ACA Plans require companies to spend 80% on health care leaving 20% for all expenses (rent,salaries,employee benefits,administration,profit etc). This creates a disincentive for companies to keep costs down. When costs increase, the government lets them raise rates. See separate article on this website.

Q. I'm on COBRA from my last job, can I get a better plan?

A. Yes, our plans are typically less cost than Cobra (Group) plans. Group plans are open access and large groups typically cost more money.

Q. Do you have Dental insurance?

A. Yes we have great dental insurance plans with no waiting period, you can go to any dentist and there is coverage for Orthodontia

Q. Vision Insurance?

A. Yes, vision coverage is available for exams, contact lenses, eyeglasses and frames.

Q. Why should I work with you?

A. If you work with me you get me before you enroll and after you enroll I am there for support.

Keep in mind that you are not expected to believe anything I tell you unless it can be shown to you in writing.

Q. Do you ask health questions? Do you exclude for pre-existing conditions?

A. Yes, we ask some health questions and exclude for some pre-existing conditions. Example would be Heart Attack or Stroke in the past 5 years or currently pregnant.

Q. Isn't it illegal to exclude for pre-existing conditions?

A. Yes, for the ACA (Government marketplace) plans. Our plans are not marketplace plans and are excluded from some of those restrictions.

Q. How can you do that?

A. The plans we work with are part of large groups or associations that allow us to bring new members. These types of plans (ERISA and Taft-Hartley) have been around for 50 years or more.

Q. Is that taking advantage of a loophole in the law?

A. No. These types of plans predate the ACA plans by many years. An example of a loophole in the law would be Health Sharing plans which are not insurance. Many of our clients have switched away from Health Sharing after their experience.

Q. What about Short Term Medical plans (STM)? STM plans have their place when you are in between jobs or are less than 1 year away from age 65 when you qualify for medicare.

A. STM is dangerous to keep because they are not guaranteed renewable. If someone with STM gets a serious illness and the term expires, that person can be left without insurance.

Q. Can I use my Tax Credits with you?

A. No. That is only the marketplace plans which we do not work with.

Q. When is Open Enrollment?

A. Our plans have open enrollment every month of the year. You can enroll for the 1st of the month before the 15th of the prior month. However, we have one carrier that allows you to enroll in the middle of the month.

Q. What is the network? Is my doctor in network?

A. We have plans with Cigna, Blue Cross, First Health Aetna, Multiplan. All our networks are national network and no referral is needed to see a specialist.

Q. Can I pay by premium for the whole year?

A. Not at this time. If you want to set aside a lump sum, you can deposit into a separate segregated account and draw the payments from that account.

- Q. Can I cancel at any time?
A. Yes, you can cancel any health plan at any time without penalty or exit fee. Cancellations must be in writing.
- Q. Do the plans offer Telemedicine?
A. Yes, all our plans have Telemedicine benefit which is a very advantageous benefit.
- Q. Are Fertility Treatments covered on these plans?
A. Typically visiting the provider is covered, but the fertility treatments themselves are not covered.
- Q. Do copays contribute to deductible?
A. No, but copays do contribute to the maximum out-of-pocket.
- Q. How do I get my card?
A. Cards are mailed to members.
Typically cards are also emailed. Additionally all the plans have a website where you download a copy of your card.
- Q. When are premiums drafted?
A. Typically on the 20th of the prior month.
- Q. Why should I enroll with you?
A. Experience, knowledge, access to great plans, dedication to clients.
If you have a question, I'm here for you both before and after you become my client.
- Q. What is it important for me to know about you?
A. Don't Believe Me and Don't Trust What I say unless it's proven to you in writing and verifiable.
- Q. How long have you been in this business?
A. Since 2003, 22 years.

Jeffrey Rosner
National Benefits Consultant
jrosner@lifeandhealthsolutions.net
www.lifeandhealthsolutions.net
Tel/Text: 954-466-3205
Tel/Text: 516-715-2297