



# Healthcare Reform:

*It's about the*

# Benefits

## Do You Understand Your Health Insurance Plan?

**There are so many health insurance plans from which to choose.** Bronze, Silver, Gold, Platinum, HSA, Non-HSA, on the marketplace, off the market place, not to mention the many insurance carriers.

**Open enrollment is closed, but do you understand what you purchased?** Details can be tricky. Here are a few tips:

- 1. Many plans are gatekeeper plans.** That means referrals must be obtained from the primary care physician before a specialist can be seen.
- 2. Check your network.** Many plans have limited providers. For instance, you may be covered for services at one hospital but not another. Choice of physicians may also be limited.
- 3. Annual preventive care visits are provided at no charge on all plans,** in keeping with the Affordable Care Act requirements.
- 4. In some plans you will only pay a modest co-payment for primary care visits.** But the number of allowable visits may be limited, after which you will pay out of pocket until your deductible is met.
- 5. In the least expensive plans, you may find that specialist visits are subject to the plan deductible.** That means paying out of pocket until the deductible is met.
- 6. Are prescription drugs subject to your deductible?**
- 7. There may be a limit on what, if anything is covered out of network.** What will your plan cover if you go out of network for services?

**8. Each plan has a maximum out of pocket expense for covered services.**

That amount is calculated by including any deductibles, copayments and coinsurance amounts you pay for services.

**Don't have any surprises with your plan's coverage. We are available to help you understand how your plan works.**

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**For Your Benefit**

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