



## Helping Consumers Choose the Right Plan

A key part of your role as an agent or broker is educating and informing your consumers on all aspects of a Marketplace plan so consumers choose the health insurance coverage that is right for them. This resource provides agents and brokers with tips to help consumers make the right plan choices.

### Remember Aspects of Marketplace Plans

When working with consumers, you should consider all plan information, such as premiums, deductibles, and potential out-of-pocket costs. Important factors to consider include but are not limited to:

- **Premiums:** Many Marketplace consumers will have access to a range of plans with little-to-no monthly premiums because of Advance Payments of the Premium Tax Credit (APTC), one type of financial assistance consumers may receive through the Marketplace. .
- **Deductibles:** Help consumers understand that there are multiple types of deductibles (e.g., medical and prescription deductibles, and depending on whether the service is in or out of the plan's provider network). Be sure to discuss which services are covered before the deductible goes is met..
- **Out-of-Pocket Costs:** Looking at out-of-pocket costs can be a great place to start when comparing many available plans. Explain to consumers that their past and current healthcare utilization can help estimate annual out-of-pocket costs and ultimately inform the best plan choice. Consumers who expect to use their coverage more, such as consumers who are likely to require more prescriptions and doctor visits, may benefit from selecting a plan that will cover more of their care, even if it may mean a higher monthly premium. Many Marketplaces have an out-of-pocket cost calculator that can help consumers evaluate total cost under various assumptions. Some Marketplace enrollees can get another kind of help: Cost-sharing Reductions (CSRs), which are generally only available by enrolling in a silver plan. Help consumers consider total costs beyond premiums. Although \$0 monthly premiums might look attractive, consumers need to understand how deductibles and out-of-pocket costs affect what they will pay for when using coverage throughout the year

### Present the Metal Level That Best Suits Consumers' Needs

Another key factor in the plan selection process is helping consumers choose metal level plans that best fit their individual needs. Each metal level has different key attributes that should be thoroughly explained to consumers for their consideration. Below are reminders and key differences between each of the metal level plans:

- **Bronze:** Bronze plans generally have the lowest monthly premiums but have the highest costs associated with coverage. These plans may be a good option for consumers who want a low-

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cost way to protect themselves from worst-case medical scenarios. You can review the cost of things such as emergency surgeries, serious sickness or disease, or injuries that may require Hospitalization, such as broken bones, with your clients to ensure they understand the potential out-of-pocket costs they may face. It is important to note that the monthly premium for a Bronze plan will be low, but they have higher out-of-pocket costs so consumers will **pay for most routine care themselves, which could cost them more during the year** than plans in other metal levels.

- **Silver:** Silver plans generally have **moderate monthly premiums** and out-of-pocket costs, but have unique savings opportunities for consumers eligible for **CSRs**. Silver plans are usually a good option for consumers who are willing to pay a slightly higher monthly premium to have more of their routine care covered. Since recent legislation has temporarily increased the amount of APTC available to certain individuals and families specifically those with incomes up to 150% FPL, silver plans are often available at the same net price to consumers as bronze plans. Silver plans are also the only way for most consumers who are eligible for CSRs to take advantage of these enhanced savings. CSRs reduce the costs of deductibles, copayments, and coinsurance for consumers with projected annual household incomes between 100% and 250% of the federal poverty level (FPL). Consumers with projected annual household income between 100% and 200% FPL get the most help, with silver plan enrollment often covering more premium and out of pocket costs than gold plan or even in some cases platinum plans. CSR-eligible consumers who enroll in a silver plan may also have a low or \$0 premium after receipt of APTC. Many CSR-eligible consumers would benefit from enrolling in Silver plans.
- **Gold:** Gold plans generally have **high monthly premiums** and low costs when consumers need care. **Deductibles for Gold plans are typically low.** These plans may be a good option for consumers who are ineligible for CSRs and willing to pay more each month to cover costs – knowing that they will pay less when seeking treatment – and for those who intend to use care more frequently.
- **Platinum:** Platinum plans have the **highest monthly premiums** and lowest costs for healthcare use. Deductibles are very low, which means that the Platinum plan will start paying its share of healthcare costs earlier than other metal levels. Because of these factors, these plans may be a good option for consumers ineligible for CSRs who **use a considerable amount of care** and are willing to pay a high monthly premium, knowing nearly all other costs will be covered.

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## Take Advantage of Additional Savings

In addition to APTC, consumers with projected annual household incomes between 100% and 250% of the FPL will qualify for extra savings that lower the amount they will have to pay to meet deductibles, copayments, and coinsurance (CSRs). **If a consumer qualifies CSRs, the consumer generally must enroll in a Silver plan to get the extra savings** (e.g., reduced costs for hospitalizations, doctor office visits, prescription drugs). Consumers wishing to maximize their overall savings should be reminded that they are more likely to experience unexpected costs when they seek care if they have a Bronze plan compared to a plan at a higher metal level. Healthy consumers with incomes at the higher-end of CSR eligibility may not see the value in CSR out-of-pocket savings, due to their potential for lower utilization of coverage. Therefore, agents and brokers should help consumers understand how they would pay for a large, unexpected medical cost, like a hospitalization. Walking consumers through such a scenario would help CSR-eligible consumers see the overall value of enrolling in a Silver plan.

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