



# Five Questions to ask about your Health Insurance



- 1. What is the deductible?** The deductible is the dollar amount you are responsible for before the insurance pays anything. It is important to know what your deductible is and if it's an amount you're comfortable with. Depending on the plan, some benefits may be covered before the deductible is met, but for most things the deductible will need to be reached before the insurance kicks in. As a general rule, the higher the deductible, the lower the premium.
- 2. What is the out of pocket max?** It is equally important to know the out of pocket max for your plan, which is the absolute maximum dollar amount you are responsible for each year. Once you hit the out of pocket max, the plan pays 100% for the rest of the year. It is not always just the deductible, as some plans will have additional coinsurance.
- 3. Are there any limits to the coverage?** This is the "fine print" of an insurance policy. All insurance policies have some limitations and exclusions. Some exclusions and limitations are required among ALL insurance policies, while some depend on the specific plan and insurance carrier. Refer to the plan brochure or policy to make sure you understand the exclusions and limitations of the plan.
- 4. What doctors and hospitals are in network?** All plans will have a network of doctors and hospitals that accept the plan. It is important to know if the network meets your needs based on your location and what doctors you already see and want to continue going to. There are two common network types for health plans. HMO's, which have a limited network and are limited to a certain city or county, and PPO's, which give you greater flexibility for providers and are nationwide networks. If keeping your doctor is important to you, make sure you check to see if they are in network for the plan you are considering.
- 5. Is there out of network coverage?** For doctors and hospitals that are not in network, some plans will still have coverage while others will not. Plans that offer coverage for out of network services often do so at a penalty and/or by covering a less amount than if it were in network. Make sure you familiarize yourself with how out of network coverage works for the plan you are considering but know the network so you can stay in it when possible.

## About Free Market Health Plans

Free Market Health Plans is an insurance agency and consultant located in Mason, Ohio dedicated to educating the consumer on strategies for health insurance and risk management. We specialize in health insurance plans and alternatives to the ACA (Obamacare). Our goal is to provide clients better choices and better coverage for the healthcare and protection they need. The Right Plan, with Real Value

We offer plans in Florida, Georgia, Kentucky, Michigan, Missouri, North Carolina, Ohio, South Carolina, and Tennessee.

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