

New Year Health Care Review

Welcome to 2024! As time rolls on, things continue to change in our local health care market. In this article, I'd like to let you in on a few changes you may want to have on your radar.

First, if you have an individual plan, you may already be aware that over the past two years we've seen two different insurance carriers come and go from the Connect for Health marketplace – BrightHealth and Friday plans. This year, Select Health, a nonprofit health plan established in Utah, Idaho, and Nevada has entered Colorado. Their premiums appear lower than other carriers, which makes them appealing to many. If you'll be eligible to purchase a new individual health plan outside open enrollment season this year and you're considering Select Health, be warned that their plans do include a deductible for non-generic prescription drugs.

For those on Medicare, I hope the many TV advertisements bombarding the airwaves during enrollment season didn't influence you. If you did make a change to your Advantage plan because one of these companies told you they had a "better" plan for you and it isn't working out, just let us know before the end of March and we can help.

Does your doctor still accept your insurance plan? In our local market, important network participation changes have taken place for 2024, and your established provider may or may not still accept your health plan. I've been hearing lots of commentary about the many changes at our local medical facilities. Unfortunately, this results from a growing shortage of medical personnel, especial physicians. Why? Individual practices have been purchased by large corporations, and the owner-doctors who were used to running their own ship must now follow corporate guidelines. Many are retiring after their contracts run out. Personally, I'm already on my third primary care doctor in the past two years.

On the plus side, for those in the Medicare market, Most Medicare Advantage insurance carriers no longer require referrals to see specialists with their HMO products. As a reminder, the main difference between a HMO and PPO plan is HMO services are generally limited to your local network except in cases of emergency care. With a PPO plan, you are not restricted to a local service area, and in most cases, you can use your carrier's regional or national network. Additionally, you can go completely out-of-network and still receive some coverage albeit not as strong as in-network coverage.

And saving the best for last, not that I'm biased: my daughter, Devin Regalado, has officially joined our Evergreen Health Insurance team! Devin is a licensed broker and certified to sell both Medicare and individual plans in Colorado. She is now available to serve clients via phone and video appointments. I am excited to welcome Devin to the company and I'm looking forward to a great year with her on board. If you're becoming eligible for Medicare this year, please give us a call. Our services are always at no cost to you!