COVERED CALIFORNIA

Certified Insurance Agent Webinar: Regional rate & Plan Information

September 29, 2014

Regional Rate and Plan Information

Helping Customers Better Understand Their Enrollment Options

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Helping Customers Better Understand Their Enrollment Options

As new and current Covered California enrollees engage in the fall 2014 enrollment process (for coverage effective in 2015), you will be receiving questions in a number of areas.

This document will help you address common questions so you can provide high levels of service as quickly and accurately as possible. This package include two sections:

1) Help in Making the Most of Your Coverage

This offers several helpful hints you should share with new or renewing enrollees to make using their chosen plan easier. It covers points on how to prepare for a visit, what ID to bring, and what general information to know about their plan and the benefits. A brief review of this narrative is important to share with all exchange enrollees. It will be available separately from this package to provide directly to enrollees.

2) Quick Fact Sheets – One Per Region

These quick reference guides are designed to provide you with rapid insight into the dynamics of each region including rates, subsidies, alternative plans and relative cost positions, and helpful regional observations. We encourage you to understand this regional information as you and the customer determine what may be best for their specific situation.

On pages 17 and 18 of this package is a sample Quick Fact Sheet that highlights key information available and how to explain it to the enrollee.

1) Help in Making the Most of Your Coverage*

Help in making the most of your Coverage

Being informed and educated about your benefits with some back-up supporting information will go a long way. When you are sick, one of the last things you want to have happen is confusion at the doctor's office about what you have to pay. The two most common areas for helping your visit go smoother are: 1) knowing the plan you are on; 2) confirming your provider is part of the plan you have chosen, and; 3) having a good understanding of your plans covered benefits.

Keep your Health Plan ID card with you at all times

As a minimum, when both making an appointment or when at the doctor seeking care, make sure you have your health plan benefit card with you and proper photo ID. This will help remind you of important coverage information when making an appointment, while at the provider's location, informing office staff of the plan you are on, and confirming for office staff you are the right person who should receive the insurance coverage benefits.

Verify the provider is available under your selected coverage

First, it is good practice to understand a bit about the provider network you have available with your coverage. This can help you and your doctor better know and ensure services you may need are covered at the appropriate benefit level. The provider network you have with your plan is identified on your health plan ID card. This is typically called out as an HMO, PPO, or EPO plan. Each of these corresponds to a list of providers offered by your health plan that are available to you as part of the benefits of your plan. Knowing this is something to learn about at the time you sign-up for your plan and can be of help when you need to make financial decisions about treatment.

Tip: If you see the doctor on the website but when you get to the doctor's office the doctor says he/she is not in the network, it is best to have office staff call the carrier while you are still at the doctor's office to verify what is actually correct.

Prior to making an appointment, go to your carrier's web site and look up your provider (doctor, hospital, etc.). Doing this can help provide you with verification at that point in time your provider participates in your chosen plan's provider network.

Understand your coverage benefits

It is important to review and understand the benefits of the plan you have selected. A good way to do this is to keep a copy of your benefits summary handy as you seek services. This information can be found online at coveredca.gov or from your health plan directly. This information will not only help determine the correct level of benefit for the most immediate services you seek, but in the event of continuing treatment, it can also work to help ensure the next steps for services are covered to the full extent of your plan. Having this information with you can help ensure you are only charged for what you should be. And making sure services are rendered fairly is important to both you and the provider.

Tip: Keeping a folded up copy of your plan benefits may not be entirely practical - although it is a good idea to keep a copy in your car glove box. This said, at least know the website address to access what your benefits are is on your plan ID card. While both CoveredCA and the health plans work to make information more quickly found, the truth is there is a very large amount of information on these websites. As such, it is a good idea for you to have gone into the website ahead of time and do a "test run" of its navigation so you can find information easier when needed.

All health insurance benefit plans now share some common characteristics. The Affordable Care Act requires that all health insurance plans offered to individuals must provide a comprehensive package of items and services, known as essential health benefits. These benefits fit into the following 10 categories:

- Ambulatory patient services
- Emergency services.
- Hospitalization.
- Maternity and newborn care.
- Mental health and substance use disorder services, including behavioral health treatment.
- Prescription drugs.
- Rehabilitative and habilitative services and devices.
- Laboratory services.
- Preventive and wellness services and chronic disease management.
- Pediatric services, including dental and vision care.

Tip: If there is a question about services while you are at the doctor's office, have the office staff call your insurance carrier right then and there to both verify the provider participation in the plan you have and to verify service coverage level. Doing this may take more time while at the office and for your appointment, but remember even the doctors and hospitals are adjusting to the new rules under the ACA. So there may just be an honest misunderstanding.

Another big advantage of keeping a summary of benefits handy is to better understand services available when you aren't sick. This is because you can better be in position to make use of services such as preventative check-ups that have no added cost to you and more importantly, can help you stay healthy.

As we move into coverage requirements that are part of the ACA, many people still do not know about what is covered under their plan. Additional information about the essential health benefits, including preventive services, can be found on the CoveredCalifornia web site at: https://www.coveredca.com/coverage-basics/

Some comments about planning ahead for your coverage renewal

In choosing a plan it's important to consider how often and what types of health care needs you may have. It's also worthwhile to consider if you have an on-going relationship with a provider and how important (or not) it may be for you to maintain the doctor as being available. Knowing more about how you actually utilized the coverage in the previous year can help you decide if plan changes make sense. Generally speaking, a person who utilizes their benefits a lot may find it advantageous to pay more in monthly premium for plans that come with higher benefit levels. While the monthly premium payments may be higher, costs for services may be lower than with other benefit plans and thus over the course of a year will be the most cost effective.

** Available as separate handout for distribution to enrollees*

2) Quick Fact Sheets - Index

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Quick Fact Sheet: California Statewide

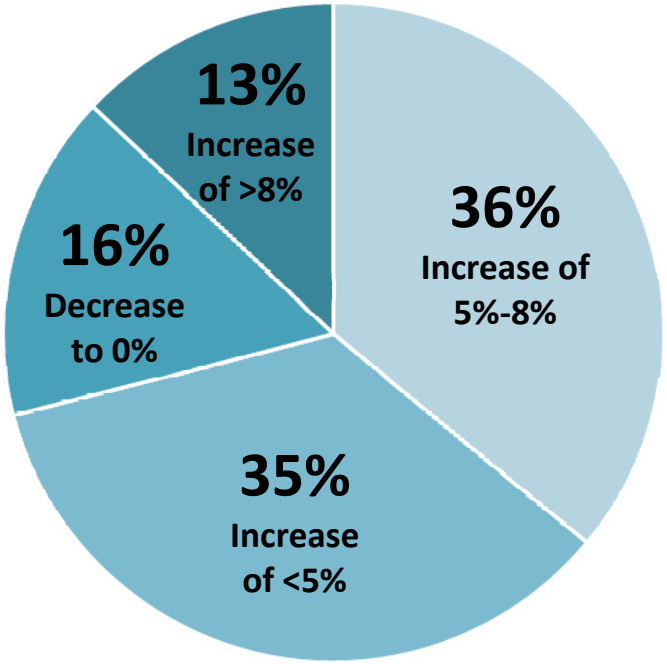
Statewide Generalizations (Regional and individual circumstance will vary)

Rate Change Across State *	Change in APTC Subsidy Amount	Post-Subsidy Cost to Enrollee	Percent of Enrollees Receiving APTC Subsidy	Additional Consideration: Rates go up each year based on age. In general, rates will go up by the following amounts:
↑ 4.2%	↑ Slightly	↔ Unchanged	88%	People under 40: $5-10/month People over 40: $10-25/month

Rate Change For Consumers Who Stay With Current Plan

Carriers (All plans are not available in all areas)	Average Rate Change Before Subsidy *	Range of % Rate Change from 2014
Anthem Blue Cross of California	4.6%	-3.3% to 19.2%
Blue Shield of California	6.0%	6.0%
Chinese Community Health Plan	8.9%	8.5% to 9.8%
Health Net	5.0%	-0.2% to 9.6%
Kaiser Permanente	-1.5%	-13.7% to 2.2%
L.A. Care Health Plan	11.4%	3.7% to 15.6%
Molina Healthcare	2.9%	-2.0% to 4.0%
Sharp Health Plan	4.4%	2.7% to 7.2%
Valley Health Plan	0.4%	-0.3% to 3.4%
Western Health Advantage	1.1%	-7.0% to 4.1%

Percent of All Enrollees and their Rate Change



* Averages are weighted based on enrollment.

Note: Provider and hospital availability may vary by carrier and carrier plan type. It is advised to confirm provider and hospital availability with carrier prior to enrollment selection. For more detailed network information, please contact carrier or visit the carrier website.

Quick Fact Sheet: California Statewide

Pricing Regions

1 Northern counties
2 North Bay counties
3 Greater Sacramento
4 San Francisco County
5 Contra Costa County
6 Alameda County
7 Santa Clara County
8 San Mateo County
9 Central Coast
10 Central Valley
11 Central Valley
12 Central Coast
13 Eastern Region
14 Central Valley
15 Los Angeles (partial)
16 Los Angeles (partial)
17 Inland Empire
18 Orange County
19 San Diego County

2015 STANDARD BENEFIT DESIGNS BY METAL TIER

Coverage Category	Bronze	Silver	Gold	Platinum
	Covers **60%** average annual cost	Covers **70%** average annual cost	Covers **80%** average annual cost	Covers **90%** average annual cost
Preventive Care Copay*	No cost	No cost	No cost	No cost
Primary Care Visit Copay	$60 for 3 visits	$45	$30	$20
Specialty Care Visit Copay	$70	$65	$50	$40
Urgent Care Visit Copay	$120	$90	$60	$40
Emergency Room Copay	$300	$250	$250	$150
Lab Testing Copay	30%	$45	$30	$20
X-Ray Copay	30%	$65	$50	$40
Generic Medicine Copay	$15 or less	$15 or less	$15 or less	$5 or less
Annual Out-of-Pocket Maximum Individual and Family	$6,250 individual and $12,500 family	$6,250 individual and $12,500 family	$6,250 individual and $12,500 family	$4,000 individual and $8,000 family

FEDERAL POVERTY LEVELS

Size of Household	138%	150%	200%	250%	300%	400%
1	$16,105	$17,505	$23,340	$29,175	$35,010	$46,680
2	$21,707	$23,595	$31,460	$39,325	$47,190	$62,920
3	$27,310	$29,685	$39,580	$49,475	$59,370	$79,160
4	$32,913	$35,775	$47,700	$59,625	$71,550	$95,400
5	$38,516	$41,865	$55,820	$69,775	$83,730	$111,640

Quick Fact Sheet: Region 3 – Sacramento, El Dorado, Placer, Yolo

Region Generalizations (Individual circumstance will vary)

Rate Change in Region	Change in Subsidy Amount	Post-Subsidy Cost to Enrollee	Percent of Enrollees Receiving Subsidy	High Enrollment Plans with Above Average Increases
↑ 3.7 %	↑	↓	90%	Bronze – Anthem Coin PPO: 5% Silver – Blue Shield Coin PPO: 6%

Rate Change For Consumers Who Stay With Current Plan

Carriers	% of Enrollment in Region	Weighted Average Rate Increase Before Subsidy	Range of % Rate Change from 2014
Anthem PPO	35.8%	4.3%	4% to 7%
Anthem* HMO	0.1%	16.7%	15% to 19%
Blue Shield * PPO	25.1%	6.0%	6%
Kaiser Permanente * HMO	36.9%	1.7%	-4% to 2%
Western Health Advantage* HMO	2.1%	-1.8%	0.7% to 4%

* Plan not available in all areas.

Sample of Contracted Hospitals **	Anthem PPO	Anthem HMO	Blue Shield PPO	Western Health Advantage
Mercy General Hospital	X	X	X	X
Mercy Hospital of Folsom	X	X	X	X
Mercy San Juan Medical Center	X	X	X	X
Methodist Hospital of Sacramento	X	X	X	X
Sutter Medical Center Sacramento – Sutter Memorial			X	X
Sutter Roseville Medical Center			X	
UC Davis Medical Center	X	X		X
Woodland Healthcare	X		X	

** Hospital availability may vary by carrier plan type. It is advised to confirm availability with carrier prior to selection. Kaiser Permanente hospitals are not listed. For more detailed network information such as medical group or individual physician availability, please contact carrier or visit the carrier website.

Quick Fact Sheet: Region 3 – Sacramento, El Dorado, Placer, Yolo

Relative Carrier Rate Positions

Metal Level	Lowest	2nd	3rd	4th	5th
Bronze	Anthem Coin PPO	Kaiser HMO	Western Health Advantage HMO	Blue Shield Coin PPO	
Silver	Anthem Coin PPO	Kaiser HMO	Blue Shield Coin PPO	Western Health Advantage HMO	Anthem Copay HMO
Gold	Blue Shield Coin PPO	Anthem Coin PPO	Kaiser Copay HMO	Western Health Advantage HMO	Anthem Copay HMO
Platinum	Kaiser HMO	Blue Shield Coin PPO	Western Health Advantage HMO	Anthem Coin PPO	Anthem Copay HMO

Rate and Plan Observations

- The majority of enrollees will experience a 2-6% rate increase. Opportunity to shop is somewhat limited given premiums for the plans most of the enrollment is in are relatively close in cost.

Additional Rate Observations for those receiving subsidies

- Subsidy amounts are increased compared to 2014.
- Those in Anthem PPO, Kaiser, or with Western Health Advantage will generally see their post subsidy costs go down.

Quick Fact Sheet: Region 15 - Los Angeles (partial)

Region Generalizations (Individual circumstance will vary)

Rate Change in Region	Change in Subsidy Amount	Post-Subsidy Cost to Enrollee	Percent of Enrollees Receiving Subsidy	High Enrollment Plans with Above Average Increases
↑ 4.4%	No Change ↔	↑	89%	Bronze – L.A. Care Coin HMO: 12% Bronze – Anthem Coin EPO: 8% Silver – Blue Shield Coin PPO: 6% Bronze – Blue Shield Coin PPO:6%

Rate Change For Consumers Who Stay With Current Plan

Carriers	% of Enrollment in Region	Weighted Average Rate Increase Before Subsidy	Range of % Rate Change from 2014
Anthem* EPO	7.9%	8.0%	7% to 11%
Anthem* HMO	3.8%	0.3%	0% to 3%
Blue Shield PPO	37.6%	6.0%	6%
Health Net HMO	32.7%	2.8%	2% to 3%
Health Net EPO	1.6%	7.9%	7% to 9%
Kaiser Permanente* HMO	8.9%	-3.4%	-9% to -3%
L.A. Care HMO	7.2%	11.0%	4% to 15%
Molina Health Care* HMO	0.3%	2.7%	-1% to 4%
*Plan not available in all areas.			

Quick Fact Sheet: Region 15 – Los Angeles (partial)

Relative Carrier Rate Positions

Metal Level	Lowest	2nd	3rd	4th	5th	6th	7th
Bronze	L.A. Care Coin HMO	Molina Coin HMO	Kaiser Copay HMO	Blue Shield Coin PPO	Anthem Coin EPO	Health Net Coin EPO	
Silver	Health Net Copay HMO	Anthem Copay HMO	Molina Coin HMO	L.A. Care Copay HMO	Blue Shield Coin PPO	Kaiser Copay HMO	Anthem Coin EPO
Gold	Health Net Copay HMO	Molina Coin HMO	L.A. Care Copay HMO	Blue Shield Coin PPO	Anthem Copay HMO	Kaiser Copay HMO	Anthem Coin EPO
Platinum	Health Net Copay HMO	Molina Coin HMO	L.A. Care Copay HMO	Blue Shield Coin PPO	Kaiser Copay HMO	Anthem Copay HMO	Anthem Coin EPO

Rate and Plan Observations

- Most plan rates in this region have increased, however, Kaiser Permanente rates have decreased.
- Health Net and Blue Shield had the most enrollment in 2014. Most consumers in these plans will see a modest increase in monthly premium of less than $20.
- Health Net generally has the lowest rates, except in the Bronze Tier, where L.A. Care is lowest.
- Blue Shield offers the only PPO in this region. Blue Shield PPO consumers will see a rate increase, but may consider purchasing Anthem or Health Net HMOs to avoid the increase.
- Individuals who are currently enrolled in Health Net's PPO should note this plan has changed to an EPO plan in 2015. The EPO plan has limited to no out-of-network benefits.

Additional Rate Observations for those receiving subsidies

- APTC subsidy amounts have generally remained the same. Post-subsidy costs to consumers have increased.
- With 7 plans to choose from, consumers may benefit from shopping around. They may be able to find a better deal and see minimal cost increases, depending on their personal circumstances.

Quick Fact Sheet: Region 15 – Los Angeles (partial)

Sample of Contracted Hospitals **	Anthem EPO	Anthem HMO	Blue Shield PPO	Health Net EPO	Health Net HMO	L.A. Care HMO	Molina HMO
Antelope Valley Hospital	X	X	X	X		X	
Beverly Hospital			X	X	X	X	X
Citrus Valley Medical Center – Queen of the Valley Campus	X	X	X		X	X	X
Community Hospital of Long Beach	X	X	X				
Foothill Presbyterian Hospital	X	X	X	X	X	X	
Garfield Medical Center	X	X	X	X	X	X	X
Glendale Adventist Medical Center	X	X	X	X			
Glendale Memorial Hospital and Health Center	X	X	X	X	X		
Huntington Memorial Hospital	X	X	X	X			
Long Beach Memorial Center	X	X	X	X			X
Methodist Hospital of Southern California	X	X	X	X	X	X	X
Miller Children's Hospital	X	X	X	X			
Pomona Valley Hospital Medical Center	X	X	X	X			X
Presbyterian Intercommunity Hospital	X	X					
Providence Saint Joseph Medical Center	X	X		X	X	X	
St. Mary Medical Center – Long Beach	X	X	X	X	X		

** Hospital availability may vary by carrier plan type. It is advised to confirm availability with carrier prior to selection. Kaiser Permanente hospitals are not listed. For more detailed network information such as medical group or individual physician availability, please contact carrier or visit the carrier website.

Quick Fact Sheet: Region 15 – Los Angeles (partial)

Region 15 Service Area Zip Codes*										
90601	90670	90746	90835	91023	91115	91208	91706	91750	91792	93560
90602	90671	90747	90840	91024	91116	91209	91709	91754	91793	93563
90603	90701	90748	90842	91025	91117	91210	91710	91755	91795	93584
90604	90702	90749	90844	91030	91118	91214	91711	91756	91801	93586
90605	90703	90755	90846	91031	91121	91221	91714	91759	91802	93590
90606	90704	90801	90847	91040	91123	91222	91715	91765	91803	93591
90607	90706	90802	90848	91041	91124	91224	91716	91766	91804	93599
90608	90707	90803	90853	91042	91125	91225	91722	91767	91896	
90609	90710	90804	90895	91043	91126	91226	91723	91768	91899	
90610	90711	90805	90899	91046	91129	91501	91724	91769	93063	
90623	90712	90806	91001	91066	91182	91502	91731	91770	93243	
90630	90713	90807	91003	91077	91184	91503	91732	91771	93510	
90631	90714	90808	91006	91101	91185	91504	91733	91772	93532	
90637	90715	90809	91007	91102	91188	91505	91734	91773	93534	
90638	90716	90810	91008	91103	91189	91506	91735	91775	93535	
90639	90717	90813	91009	91104	91199	91507	91740	91776	93536	
90640	90723	90814	91010	91105	91201	91508	91741	91778	93539	
90650	90731	90815	91011	91106	91202	91510	91744	91780	93543	
90651	90732	90822	91012	91107	91203	91521	91745	91786	93544	
90652	90733	90831	91016	91108	91204	91522	91746	91788	93550	
90660	90734	90832	91017	91109	91205	91523	91747	91789	93551	
90661	90744	90833	91020	91110	91206	91526	91748	91790	93552	
90662	90745	90834	91021	91114	91207	91702	91749	91791	93553	

*Certain products may not be available in every zip code.

Quick Fact Sheet: Region 17 – San Bernardino and Riverside

Region Generalizations (Individual circumstance will vary)

Rate Change in Region	Change in Subsidy Amount	Post-Subsidy Cost to Enrollee	Percent of Enrollees Receiving Subsidy	High Enrollment Plans with Above Average Increases
↑ 4.5%	↓ Slightly	↑	89%	Bronze – Anthem Coin PPO: 8% Silver – Blue Shield Coin PPO: 6%

Rate Change For Consumers Who Stay With Current Plan

Carriers	% of Enrollment in Region	Weighted Average Rate Increase Before Subsidy	Range of % Rate Change from 2014
Anthem PPO	13.1%	8.0%	7% to 11%
Anthem HMO*	4.4%	5.3%	5% to 8%
Blue Shield PPO	31.1%	6.0%	6%
Health Net HMO	29.0%	4.8%	4% to 9%
Health Net EPO	0.8%	8.0%	7% to 9%
Kaiser Permanente HMO*	15.2%	-1.0%	-7% to -1%
Molina Healthcare HMO*	6.4%	3.1%	-1% to 4%

* Plan not available in all areas.

Quick Fact Sheet: Region 17 – San Bernardino and Riverside

Relative Carrier Rate Positions

Metal Level	Lowest	2nd	3rd	4th	5th	6th
Bronze	Molina Coin HMO	Kaiser Copay HMO	Blue Shield Coin PPO	Anthem Coin PPO	HealthNet Coin EPO	
Silver	Molina Coin HMO	HealthNet Copay HMO	Anthem Copay HMO	Blue Shield Coin PPO	Kaiser Copay HMO	Anthem Coin PPO
Gold	Molina Coin HMO	HealthNet Copay HMO	Blue Shield Coin PPO	Anthem Copay HMO	Kaiser Copay HMO	Anthem Coin PPO
Platinum	HealthNet Copay HMO	Molina Coin HMO	Blue Shield Coin PPO	Kaiser Copay HMO	Anthem Copay HMO	Anthem Coin PPO

Rate and Plan Observations

- Individuals who are currently enrolled in Health Net's PPO should note this plan has changed to an EPO plan in 2015. The EPO plan has limited to no out-of-network benefits.
- Blue Shield and Anthem enrollees who are considering cost options can maintain a rate similar to their 2014 rate by moving to Health Net.

Additional Rate Observations for those receiving APTC subsidies

- The majority of enrollees will see cost after subsidy increase.
- Post subsidy, Health Net will typically be the lowest cost option.

Quick Fact Sheet: Region 17 – San Bernardino and Riverside

Sample of Contracted Hospitals **	Anthem PPO	Anthem HMO	Blue Shield PPO	Health Net EPO	Health Net HMO	Molina
Arrowhead Regional Medical Center						X
Barstow Community Hospital	X	X	X	X		
Chino Valley Medical Center					X	X
Community Hospital of San Bernardino	X	X	X	X	X	
Corona Regional Medical Center	X	X	X	X	X	X
Desert Regional Medical Center	X	X	X	X		
Desert Valley Hospital	X	X	X	X	X	X
Eisenhower Medical Center	X	X		X		
Hemet Valley Medical Center	X	X	X	X	X	X
Hi-Desert Medical Center	X	X	X			
John F. Kennedy Memorial Hospital	X	X	X	X	X	
Loma Linda University Medical Center	X	X		X		
Loma Linda University Medical Center - Murrieta	X	X		X		
Menifee Valley Medical Center	X	X	X	X		X
Montclair Hospital Medical Center				X	X	
Palo Verde Hospital	X	X	X			
Parkview Community Hospital Medical Center	X	X	X	X	X	X
Redlands Community Hospital	X	X		X	X	
Riverside Community Hospital	X	X		X		
Riverside County Regional Medical Center						X
San Antonio Community Hospital	X	X	X	X	X	X
San Gorgonio Memorial Hospital	X	X	X	X	X	
Southwest Healthcare - Rancho Springs/Murrieta Campus	X	X	X	X	X	
Southwest Healthcare System - Inland Valley/Wildomar	X	X	X	X	X	
St. Bernardine Medical Center	X	X	X	X	X	
St. Mary Medical Center - Apple Valley	X	X	X	X	X	
Victor Valley Community Hospital	X	X			X	X

** Hospital availability may vary by carrier plan type. It is advised to confirm availability with carrier prior to selection. Kaiser Permanente hospitals are not listed. For more detailed network information such as medical group or individual physician availability, please contact carrier or visit the carrier website.

2) Quick Fact Sheet: Sample Region

You will note the majority of enrollees in all regions receive a subsidy. Thus, considering post subsidy cost is usually important.

This can help indicate what plans may generate the most rate complaints.

Region Generalizations (Individual circumstance will vary)

Rate Change in Region	Change in Subsidy Amount	Post-Subsidy Cost to Enrollee	Percent of Enrollees Receiving Subsidy	High Enrollment Plans with Above Average Increases
↑ 3.8%	↑	↑	85%	Silver – Blue Shield Coin PPO: 6%

In this example, the rates and the subsidies increased with a net effect that the post subsidy cost is going up. Regions will vary on this dynamic. Knowing what is happening in general for a region can help set context for discussions/decisions.

Rate Change For Consumers Who Stay With Current Plan

Rate increases by carrier combined with percentage of enrollment the carrier has can help you know where most questions may come from and help indicate where to look for coverage options.

Carriers	% of Enrollment in Region	Weighted Average Rate Increase Before Subsidy	Range of % Rate Change from 2014
Carrier A PPO	7.6%	6.6%	6% to 9%
Carrier B PPO	38.8%	6.0%	6%
Carrier C EPO	2.0%	7.2%	6% to 9%

Look for carriers who have the largest enrollments in the region. This can help identify where you may receive the most questions.

Range will help indicate rate changes across all metal tiers.

Sample of Contracted Hospitals **	Carrier A PPO	Carrier B PPO	Carrier C EPO
Inland Medical Center	X	X	X
Jackson Medical Center	X	X	X
Doctors Medical Center	X	X	X
Area Medical Center		X	X

Designed to provide a quick overview of which carriers are associated with regional hospitals. A sample (not necessarily all) of hospitals in the region is provided with carrier network affiliation. The hospitals shown are generally selected based on those with the largest bed count and listed in alphabetical order. Note Kaiser hospitals are not listed as they are exclusive to Kaiser.

** Hospital availability may vary by carrier plan type. It is advised to confirm availability with carrier prior to selection. Kaiser Permanente hospitals are not listed. For more detailed network information such as medical group or individual physician availability, please contact carrier or visit the carrier website.

2) Quick Fact Sheet: Sample Region

This chart will show how carriers at each tier are priced in relation to each other. Some examples of what this can show you and your client are demonstrated below. Note these are examples and circumstances will change by region.

Shows, for the Silver tier, Carrier A is less expensive than Carrier C. This can help to highlight shopping options. Also, noted as the 2nd lowest cost silver, Carrier A is the base plan for determining subsidy amount.

Relative Carrier Rate Positions

Many people may be attracted to the lower monthly premium of a Bronze plan. Depending on needs, Bronze may or may not be the best option for them. Be sure to discuss the option of the Silver or other tiers to help best meet needs. This is especially true if the person is eligible for Enhanced Silver coverage.

Metal Level	Lowest	2nd	3rd
Bronze	Carrier A Copay PPO	Carrier B Coin PPO	Carrier C Coin EPO
Silver	Carrier B Coin PPO	Carrier A Copay PPO	Carrier C Coin EPO
Gold	Carrier B Coin PPO	Carrier A Copay PPO	Carrier C Coin EPO
Platinum	Carrier A Copay PPO	Carrier B Coin PPO	Carrier C Coin EPO

Carrier A's network is likely different than Carrier B's. Thus, customers may have to switch doctors if they switch carriers.

Be aware of the difference between an EPO and PPO plan – specifically for out-of-network benefits.

Rate and Plan Observations

- Enrollees in Carrier B EPO will now have access to Carrier B PPO network.
- Individuals who are currently enrolled in Carrier C should note this plan has changed to an EPO plan in 2015. The EPO plan has limited to no out-of-network benefits.
- Carrier D is no longer available in the Market Place. Enrollees previously in this plan will need to make a new selection.

In these two sections are noted any plan changes or pricing differences with suggestions for options to consider. It's important to note all usage of these comments should be considered in relation to the individual's circumstance.

Additional Rate Observations for those receiving subsidies

- Subsidies in 2015 will be about the same as 2014.
- Carrier A and Carrier B will generally be the lowest option after subsidies are applied.

Thank you!

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