

The Broker Bulletin

Community Health Choice Broker Newsletter – Your Partnership Resource



WELCOME TO THE FIRST EDITION OF THE COMMUNITY HEALTH CHOICE BROKER NEWSLETTER!

As your trusted partner, Community Health Choice offers a variety of high-quality health insurance options, both on and off the Marketplace.

This newsletter offers ongoing support and essential tools to help you serve your clients. Our inaugural issue focuses on broker training and education. It covers special enrollment periods (SEPs), eligibility, and compliance. We will detail the differences between Marketplace and off-exchange plans.

Also, don't forget to check out the Broker portal—your one-stop resource for tools, forms, and support.

Explore our plan offerings and familiarize yourself with client options. **Questions? Contact our Broker Relations Team at 713.295.6760.**

Thank you for your continued partnership and dedication to our community.

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Health Insurance Marketplace vs. Off-Exchange Plans - A Broker's Guide



Helping your clients choose the right health insurance means understanding the difference between plans sold on the Health Insurance Marketplace (also called the Exchange) and those sold directly by insurance companies (off-exchange). Both types of plans offer important health coverage, but they have key differences, especially when it comes to saving money. This article will help you clearly explain these differences and empower your clients to make informed decisions about their healthcare coverage.

The Health Insurance Marketplace: Your Client's Path to Lower Costs

Established under the Affordable Care Act (ACA), the Health Insurance Marketplace is a centralized platform where individuals and families can compare and enroll in qualified health plans. A primary advantage of the Marketplace is the availability of **premium tax credits** and **cost-sharing reductions (CSRs)**. These financial aids are designed to make coverage more affordable for eligible individuals and families based on their income and household size.

- **Premium Tax Credits:** These credits function as advance payments or refundable tax credits that help lower monthly premium costs. Eligibility for premium tax credits is generally based on having a household income between 100% and 400% of the federal poverty level (FPL) and not having access to affordable coverage through an employer, Medicare, or Medicaid. You can find the latest FPL guidelines on the [Department of Health & Human Services \(HHS\)](#) website.
- **Cost-Sharing Reductions (CSRs):** These subsidies are available to individuals and families with household incomes between 100% and 250% of the FPL who

enroll in a Silver-level Marketplace plan. CSRs reduce out-of-pocket costs such as deductibles, copayments, and coinsurance, making healthcare services more accessible and affordable.

Key Characteristics of Marketplace Plans:

- **Eligibility Requirements:** Enrollment in Marketplace plans with subsidies is contingent upon meeting specific income and eligibility criteria.
- **Open Enrollment Period:** Generally, individuals can only enroll in or change Marketplace plans during the annual open enrollment period, which typically runs from November 1st to January 15th. Special Enrollment Periods (SEPs) are available for qualifying life events such as loss of other coverage, marriage, birth of a child, or a permanent move. Information on qualifying life events can be found at [HealthCare.gov's SEPs page](#).
- **Standardized Benefit Levels:** Marketplace plans are categorized into metal tiers (Bronze, Silver, Gold, Platinum) that offer varying levels of coverage and cost-sharing. This standardization allows for easier comparison between plans. You can learn more about the metal tiers on [Healthcare.gov's plan comparison page](#).
- **Guaranteed Issue:** Insurance companies participating in the Marketplace must offer coverage to all applicants, regardless of pre-existing health conditions.
- **Essential Health Benefits (EHBs):** All Marketplace plans must cover a comprehensive set of essential health benefits, including doctor visits, hospital stays, prescription drugs, mental health services, and more. A detailed list of EHBs can be found on the [Healthcare.gov](#) website.

Health Insurance Marketplace vs. Off-Exchange Plans - A Broker's Guide *Continued***Off-Exchange Plans: More Choices, But No Government Savings**

Off-exchange plans, as the name suggests, are health insurance plans sold directly by insurance companies outside of the Health Insurance Marketplace. While they offer the same essential health benefits and are subject to many of the same ACA regulations as Marketplace plans, however they do not qualify for federal subsidies.

Key Characteristics of Off-Exchange Plans:

- **Year-Round Enrollment:** Unlike Marketplace plans which have defined open enrollment periods, off-exchange plans can generally be purchased year-round. This flexibility can benefit individuals who miss the open enrollment period and do not qualify for a Special Enrollment Period.
- **Potentially Broader Network Options:** In some cases, off-exchange plans may offer access to broader provider networks compared to some Marketplace plans. This can be a significant factor for clients with specific healthcare needs or preferences for certain doctors and hospitals.
- **Variety of Plan Designs:** While still adhering to ACA requirements for essential health benefits, off-exchange plans might offer a wider array of plan designs and benefit structures that may not be available on the Marketplace.
- **No Federal Subsidies:** Individuals and families enrolled in off-exchange plans are not eligible for premium tax credits or cost-sharing reductions, regardless of their income.

Guiding Your Clients: Which Path to Choose?

Here's a framework to help you understand each client's unique circumstances to guide them toward the most suitable option:

- **Income and Eligibility for Subsidies:** This is often the most critical factor. For clients who are likely eligible for premium tax credits or cost-sharing reductions (generally those with incomes between 100% and 400% of the federal poverty level (FPL)), the **Health Insurance Marketplace is typically the best option**. Enrolling through the Marketplace ensures they can access these valuable subsidies which can significantly lower their monthly premiums and out-of-pocket costs.
- **Enrollment Timing:** If a client misses the Marketplace open enrollment period and does not have a qualifying life event for a Special Enrollment Period, an **off-exchange plan might be their only option for immediate coverage**.
- **Network Preferences:** For clients with specific doctors or hospital systems they prefer, it's crucial to compare the provider networks of both Marketplace and off-exchange plans available in their area. Sometimes, an off-exchange plan might offer access to a broader or preferred network.
- **Plan Design Preferences:** While Marketplace plans offer standardized metal tiers, off-exchange plans might provide more diverse plan designs, including different cost-sharing structures or additional benefits that could better align with a client's specific healthcare needs and risk tolerance.

Mastering Marketplace Special Enrollment Periods (SEPs)

Successfully enrolling clients during Special Enrollment Periods (SEPs) requires understanding of eligibility and compliance guidelines. SEPs allow enrollment outside the annual Open Enrollment Period due to qualifying life events (e.g., job loss, marriage, birth).

To ensure valid enrollments:

- **Verify Qualifying Events:** Confirm client situations meet SEP criteria.
- **Prompt Documentation:** Obtain proof of qualifying events within 30 days.
- **Careful Eligibility Review:** Each SEP has specific requirements.
- **Accurate Applications:** Avoid delays or terminations with complete, accurate information.
- **Stay Updated:** Regularly check CMS and your Broker portal for rule changes.

Following these best practices maintains program integrity and ensures clients receive uninterrupted coverage. Access SEP tools and resources via your Broker Portal account.



TOOLS & RESOURCES

Streamline your workflow with the Broker portal!

Access to helpful



tools



forms



marketing materials



the latest resources

in one convenient location.

The portal provides everything you need to support your clients—



enrollment materials



plan information



essential documents

Log in regularly for updates and new features.



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