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## **Next Step in Affordable Care Act Rollout May Mean Different Things for Consumers**

(AUSTIN, TEXAS – January 29, 2014) With the deadline for January enrollment of the Affordable Care Act now having passed, many consumers are considering the next steps in the rollout of the landmark health care legislation. For those who have not yet purchased a health plan, the next step will be selecting their coverage prior to the March 31 deadline, when the enrollment period for the year officially ends. For many who have purchased coverage, the next steps may involve addressing doctor or prescription issues with their new health plan. In some instances, those steps may involve considering how to rescind the health plan selection they have made.

“As countless Americans have discovered over the past few weeks, making the selection of the best coverage for their circumstances is a complex and sometimes overwhelming decision. Many Texans will face coverage options for the first time without realizing the impact of their decisions,” said Mark Bellman, president of the Texas Association of Health Underwriters.

Bellman continued, “In the past, individuals have relied on their employer or insurance professionals to offer options for coverage. Now, as many consumers attempt to tackle this decision on their own, they are discovering an array of considerations that many do not fully understand.”

While consumers are attempting to understand the details of co-pays, coinsurance and deductibles, many are learning the plan they purchased may not include the doctor they have seen for years. Some have also learned that medications they take regularly may not be covered. The out-of-pocket cost of those drugs or treatment from an out-of-network doctor can create a financial burden greater than the savings or other advantages of the new plan.

Bellman stated, “It may not be a bad thing if someone hasn’t made a decision. It’s not too late to enroll, and it’s not too late to enlist a professional benefits adviser to help you make the right choices.”

“Seeking the assistance of a nearby professional will not cost the consumer and will not add to the cost of a policy. It’s essentially a free service to the purchaser,” Bellman advised.

Individuals who have not purchased a health plan have until March 31, 2014, to make their selection for coverage this year. After the deadline passes, individuals will only be able to enroll for coverage if they experience a life-changing situation, called a “qualifying event.” Qualifying events

include a change in marital status, a change in family size, a move to another state, and certain changes in income.

Many individuals who are discovering that their doctor or critical prescriptions are not covered are attempting to find out what they can do to avoid increased out-of-pocket costs they now face. While the federal government is asking insurance companies to help minimize disruption by working with consumers on these types of complications, any agreements to do so are voluntary and likely short-term solutions.

Those unhappy with their plans may choose to cancel their coverage, but they would be wise to contact a professional benefits adviser before doing anything to end their policy without securing additional coverage.

Many individuals who have already purchased a primary health plan are also interested in purchasing additional insurance products such as dental, vision, long-term care and disability coverage. Since these products are not part of the essential health benefits included in coverage for adults, they will need to be purchased as stand-alone policies. Professional benefit advisers can provide guidance on additional coverage available for interested consumers.

“There are a lot of moving parts to the new law, and those purchasing coverage will be well-served to ensure they have the full picture of their options and the consequences of their decisions. Their choices could determine their ability to afford the care needed to remain healthy, manage an unexpected injury or deal with a life-altering illness,” added Bellman.

“They don’t have to make these decisions in the dark. There’s help nearby.”

Consumers can [click here](#) to locate a professional benefit adviser in their community who can assist with questions about the Affordable Care Act.

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***Texas Association of Health Underwriters (TAHU) is a state trade association representing licensed health insurance agents, brokers, consultants and benefit professionals who serve the health insurance needs of employers seeking health insurance coverage. TAHU is a state chapter of the National Association of Health Underwriters.***