

Questions to Ask Before You Enroll

Learn what plans on **Pennie must cover by law** vs. what **short-term limited duration insurance (STLDI)** or other non-Affordable Care Act (ACA)-compliant plans might not cover.

How to Use This

- **Check each item** with the health plan representative or broker.
- If the “Plans Outside of Pennie” column shows  or  for items you need, the plan may not work for you.

**Catastrophic plans are available only to people under 30 or those with a hardship/affordability exemption.*

QUESTION TO ASK	PLANS ON PENNIE		PLANS OUTSIDE OF PENNIE Short-Term, Limited-Duration, or Other Non-ACA Plans
	BRONZE, SILVER, GOLD & PLATINUM	CATASTROPHIC (IF ELIGIBLE)	
Does it cover pre-existing conditions?	 Yes — from day one.		 Often no — may exclude or delay coverage.
Does it include the 10 essential benefits? (hospital, prescriptions, maternity, mental health, preventive care)	 Yes — required by law.	 Yes — required, but you pay more until deductible is met.	 Not required — many skip major benefits.
Are preventive services free? (checkups, vaccines, screenings)	 Yes — covered in full.		 Not guaranteed — you may pay full price.
Can I get financial help to lower my costs?	 Yes — if eligible for savings.	 No — not eligible for savings.	 No — you pay full price.
Is there a yearly limit on what I could pay out of pocket?	 Yes — capped at \$9,200 per person / \$18,400 per family (2025).	 Yes — capped, but only after meeting a high deductible.	 No limit — you could owe unlimited costs.
Can the plan cap how much it will pay over my lifetime?	 No — lifetime and annual limits banned.		 Often yes — may stop paying after a certain amount.
Are prescription drugs covered?	 Yes — required.	 Yes — after deductible.	 Not required — may cover some or none.
Is maternity and newborn care included?	 Yes — required.	 Yes — but deductible applies.	 Usually not covered.
Is mental health or substance-use treatment covered?	 Yes — required.		 Not required — may have limits or no coverage.
Can my plan end if I get sick?	 No — can’t drop you for using care.		 Sometimes — may cancel coverage if illness is found.
Can I sign up any time?	 Only during Open Enrollment or a qualifying life event.		 Usually yes — but no ACA protections.
Is it regulated by Pennsylvania’s Insurance Department?	 Yes — fully regulated for consumer protection, fairness, claims handling, and coverage rules.		 Not fully — limited oversight. Fewer protections if something goes wrong or a claim is denied.
Does the plan have enough doctors and hospitals?	 Yes — networks must meet access standards so you can actually find care when you need it.		 Not guaranteed — networks may be small or limited, making it harder to get care or find in-network doctors.
Is the plan prohibited from surprise billing?	 Yes — protected under federal law against most surprise bills.		 Often no — not required to follow surprise billing protections; may lead to large, unexpected bills.
Can it be renewed each year?	 Yes — guaranteed renewal.	 Yes — if you stay eligible.	 No — may end or refuse renewal.
Can I appeal if my claim is denied?	 Yes — internal and external appeal rights.		 No — external appeals not required.
Are preventive medications covered? (like statins, HIV PrEP)	 Yes — often free.	 Yes — but deductible may apply.	 No — may cost full price.