Path to the perfect plan

American Rescue Plan Edition

Uninsured and looking for affordable health coverage? Enroll in Pennie™!

Pennie’s main goal is to help connect Pennsylvanians to quality, affordable health coverage. As a result of the American Rescue Plan, also known as the COVID-19 relief package, provisions specific to the Affordable Care Act are impacting the way health insurance is available in Pennsylvania.

These changes result in significant impacts, including huge savings, for many Pennsylvanians seeking individual market coverage through Pennie for 2021 and 2022. Under the American Rescue Plan, Pennsylvanians are eligible for savings to significantly lower the cost of coverage, regardless of income, if they otherwise qualify.

Things to think about when enrolling with Pennie:

How do you find which plan to enroll in?
Visit pennie.com to shop and compare health coverage plans. Pennie’s plan comparison tool allows you to answer questions about your health status, preferred providers, and even prescription drug needs. The tool will then display coverage options for you to see your total costs for care, including premium, deductible, and total out-of-pocket costs.

What steps do you need to take to enroll through Pennie?

1. Compare plans and get a quick quote
2. Apply for coverage.
3. Enroll in a plan. Pay your first month’s premium

Your eligibility will then be determined based on the American Rescue Plan requirements and applied prospectively to your premiums.

What kind of savings might be available as part of the American Rescue Plan through Pennie?

If you are curious to what your savings may look like, visit pennie.com and play around with the Savings Calculator to gauge an estimate on what your new premium payment may look like.

What if I qualified for unemployment compensation in 2021?

Taxpayers (tax filers or their spouses) receiving, or simply eligible for, unemployment compensation in 2021, will be eligible for the maximum level of financial assistance, including advance premium tax credits (APTC) and cost sharing reductions (CSR) to lower the cost of health coverage and care. This will provide the maximum financial assistance available to those customers during the 2021 plan year. If this applies to you, let Pennie know when you apply so you can enroll in plan with a no-cost monthly payment.

Note: You will not see these savings by using the Pennie Savings Calculator.

What if I am currently on a COBRA plan?
The American Rescue Plan provides more generous assistance to those who lost their jobs but want to remain on their employer health insurance plans through COBRA. Those on COBRA will pay no premiums for this coverage through September 2021. Following September, anyone on COBRA is encouraged to consider Pennie for low-cost premiums.

Preventive services that are 100% covered under Pennie:

- Tobacco Smoking Cessation
- Screenings for physical and mental health conditions such as high blood pressure and depression
- Immunizations, including the COVID-19 vaccine
- Age & gender appropriate medical testing services, ex: colonoscopy, mammogram

All commercial, comprehensive health insurance plans available in the Commonwealth, including plans purchased through Pennie, cover in full:

- The COVID-19 test and associated visit costs if patients are experiencing symptoms or has had an indication of exposure
- The cost of the COVID-19 vaccine

For further details, visit the Pennie COVID-19 webpage at pennie.com
What's the real cost of your healthcare?

When you're picking a health insurance plan, your monthly premium is only one thing to consider. Be sure to look at the cost of getting medical care. Check out these examples and estimates:

**Plan A**
- Monthly/Annual Premium: $200/$2,400*
- Annual Deductible: $6,500
- Has a lower monthly premium, but you have to pay for most of your health services (doctor visits, mental healthcare etc.) until you've reached the deductible

**Plan B**
- Monthly/Annual Premium: $250/$3,000
- Annual Deductible: $2,500
- Has a higher monthly bill, but you only pay a set amount for certain services, such as doctor’s visits and mental healthcare services, even before you've reached your deductible

*Plan A is $600/yr less than Plan B

So, what happens if you need medical care?

Here are two examples based on health coverage estimates:

**You fall and twist your ankle.**

**Plan A:**
- You go to the doctor: Plan A: $175 (You pay for the whole visit)
- You need an X-ray: Plan A: $75 (You pay for the X-rays)
- Your doctor sends you to a specialist: Plan A: $250 (You pay for the whole visit)

**Plan B:**
- You go to the doctor: Plan B: $30 (You just pay the copay)
- You need an X-ray: Plan B: $75 (You pay for the X-rays)
- Your doctor sends you to a specialist: Plan B: $70 (You just pay the copay)

**What you pay for a sprained ankle**

**Plan A:** $500
**Plan B:** $175

**Your total annual cost**

**Plan A:** $2,900 (Cost of sprained ankle + annual premium)
**Plan B:** $3,175 (Cost of sprained ankle + annual premium)

**You have diabetes.**

**Examples of yearly expenses for managing type 2 diabetes**

<table>
<thead>
<tr>
<th>Service</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prescriptions</td>
<td>$2,900</td>
</tr>
<tr>
<td>Medical equipment and supplies</td>
<td>$1,300</td>
</tr>
<tr>
<td>Office visits and procedures</td>
<td>$700</td>
</tr>
<tr>
<td>Education</td>
<td>$300</td>
</tr>
<tr>
<td>Lab tests</td>
<td>$100</td>
</tr>
<tr>
<td>Vaccines and other preventive care</td>
<td>$100</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$5,400</strong></td>
</tr>
</tbody>
</table>

**What you pay for diabetes care**

**Plan A:** $5,400 (You pay the entire cost because you haven't reached your deductible yet)

**Plan B:** $2,500 (This amount may even be lower because your health insurance will help you pay for some medical care before you reach your deductible)

**Your total annual cost**

**Plan A:** $7,800 (Cost of diabetes care + annual premium)
**Plan B:** $5,500 (Cost of diabetes care + annual premium)

As you can see, if you have no medical costs or only minor expenses, a plan with lower premiums like Plan A may be right for you, but if something more serious goes wrong, or you have a chronic condition, a plan with lower out-of-pocket costs like Plan B will save you more $$$ in the end. These are all things to consider when you pick your plan.