

THE UNTOLD TRUTH ABOUT
THE 10 COMMON

**HEALTH
INSURANCE**

MISTAKES & HOW TO AVOID THEM

Who is Brandon Rapose?

Hello! My name is Brandon and I am entrepreneur who helps individuals, families, and small businesses find affordable health coverage solutions, saving them thousands on premiums by navigating the complex insurance landscape. My mission is to make quality coverage accessible and empower people to make informed healthcare decisions.



-Brandon Rapose

Introduction

Choosing the right health insurance plan can be overwhelming, and making the wrong decision can cost you thousands of dollars. Many people unknowingly make costly mistakes that leave them underinsured, overpaying, or struggling with unexpected expenses. This guide will help you avoid these common pitfalls and ensure you make informed choices about your healthcare coverage.



#1. Choosing the Cheapest Plan Without Considering Coverage

It's tempting to go for the lowest premium, but cheaper plans often have high deductibles and limited coverage. Always compare deductibles, co-pays, out-of-pocket maximums, and coverage details before deciding.

Lowest premium plan



BlueChoice HMO Young Adult \$9,200 - HMO

● CATASTROPHIC ★★★★★☆

Monthly premium

\$134.30

Deductible (Health + Rx)

\$9,200

Drug deductible

Out-of-pocket max

Doctor visits

Specialist visit

Generic drugs

#2. Ignoring Out-of-Pocket Maximums

Many people focus on monthly premiums but forget to check the out-of-pocket maximum. This is the most you'll pay for covered services in a year. Understanding this number helps you plan for worst-case scenarios.

Choice HMO Young Adult \$9,200 - HMO

PROPHIC 

Deductible (Health + Rx)

\$9,200

Drug deductible

N/A

Out-of-pocket max

\$9,200

Doctor visits

first 3 visit(s) \$0
after deductible

Specialist visit

No charge after

#3. Not Checking If Your Doctors Are In-Network

Going out-of-network can result in significantly higher costs. Always verify if your preferred doctors, specialists, and hospitals are included in the plan's network.



#4. Overlooking Prescription Drug Coverage

Not all plans cover all medications. If you take prescriptions regularly, check the plan's formulary (list of covered drugs) to ensure your medications are included and affordable.



#5. Missing Enrollment Deadlines

If you miss open enrollment or special enrollment periods, you could be stuck without coverage or face penalties. Mark your calendar with important enrollment dates.

The typical Open Enrollment Period (OEP) for health insurance depends on the type of coverage:

- **Marketplace (ACA) Plans:**
 - Runs from November 1 to January 15 in most states.
 - To have coverage start on January 1, you usually need to enroll by December 15.
- **Medicare (For Ages 65+):**
 - October 15 to December 7 each year.
 - Changes take effect on January 1 of the following year.
- **Employer-Sponsored Plans:**
 - Varies by employer but often occurs in the fall (October–December).
- **Special Enrollment Period (SEP):**
 - Available year-round if you experience a qualifying life event (e.g., losing coverage, moving, marriage, birth of a child).

#6. Not Understanding Deductibles, Co-Pays, and Coinsurance

These terms can be confusing but are essential to understanding your true healthcare costs. A lower premium often means a higher deductible, meaning you'll pay more out-of-pocket before insurance kicks in.



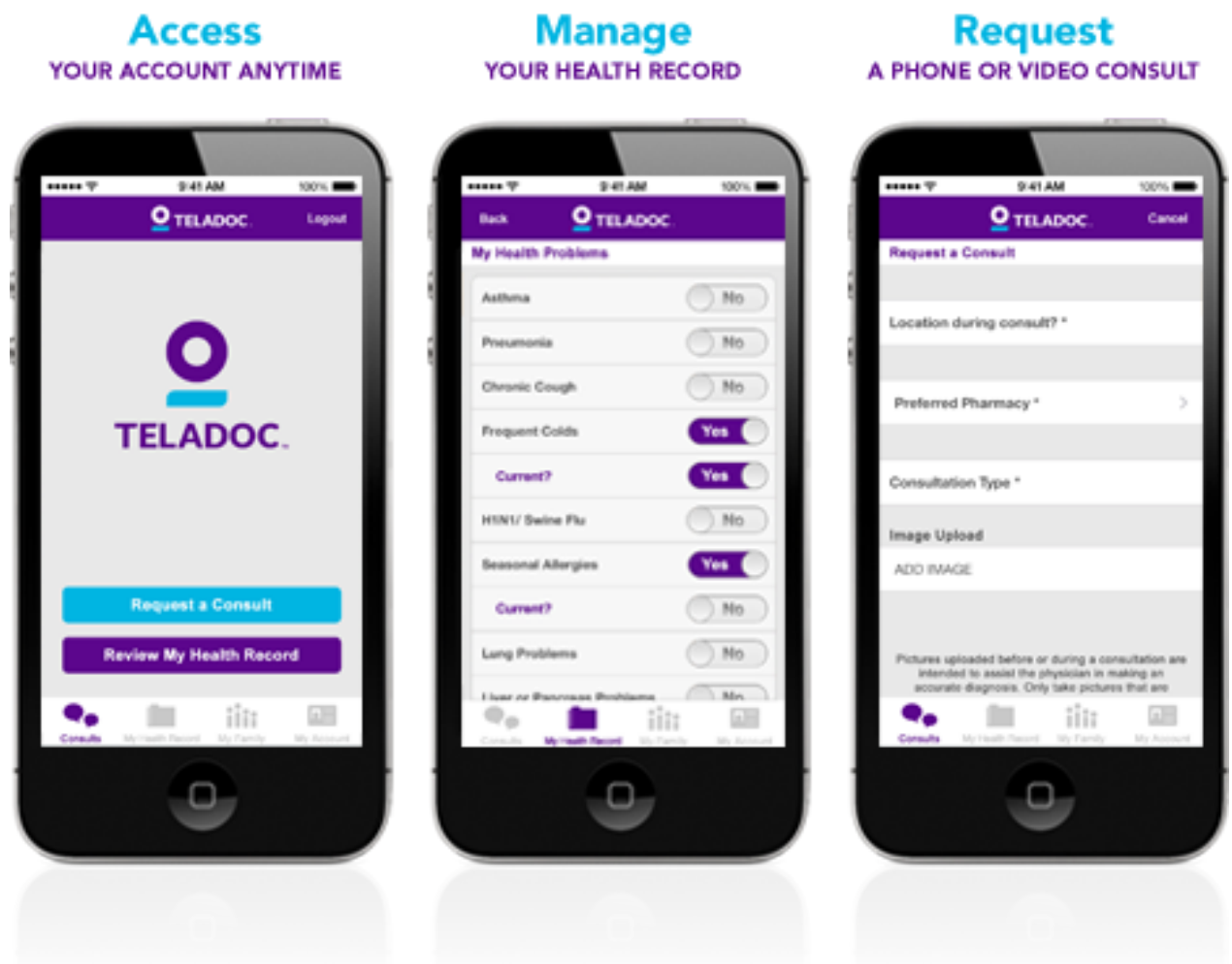
#7. Underestimating Your Healthcare Needs

Choosing a plan based solely on your current health may backfire if an unexpected medical issue arises. Consider potential medical needs, including specialist visits, diagnostics, and emergency care.



#8. Forgetting About Additional Benefits

Many health plans offer benefits like telehealth, wellness programs, or even gym memberships. Take advantage of these perks to maximize the value of your plan.



#9. Relying Solely on Employer-Provided Insurance

Employer plans may not always offer the best value or coverage for your needs. Comparing private health insurance options could save you money or provide better benefits.

Employer-sponsored health insurance may seem like the easiest option, it may not always provide the best coverage or value. Many people assume their employer's plan is the best or only choice, but private health insurance options might offer lower costs, better benefits, or more tailored coverage based on individual needs.

For example, some private plans may offer better provider networks, lower deductibles, or more comprehensive prescription drug coverage than an employer's plan. By comparing options, individuals may find a plan that better suits their budget and health

#10. Not Seeking Expert Advice

Health insurance is complex, and making the right choice requires expert knowledge. Working with a licensed health insurance advisor can help you find the best plan for your needs and budget.

 **COVERAGE WITH BRANDON**

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AWESOME! WHAT'S NEXT?

Get Expert Help Today! **FREE CONSULTATION**

Avoiding these mistakes can save you money and ensure you have the right coverage when you need it most. If you're unsure about your current plan or need help finding the best options, schedule a free consultation today!



The image shows a screenshot of a LinkedIn profile for Brandon Rapose. The profile header includes the name "BRANDON RAPOSE" and the title "INDEPENDENT HEALTH INSURANCE BROKER". Contact information listed includes a phone number "+1813 302 7393" and a social media handle "@coveragewithbrandon". A blue circular logo with a signature is also present. The profile lists specializations: "INDIVIDUALS", "FAMILIES", "SELF-EMPLOYED", and "SMALL BUSINESS". A large professional photo of Brandon Rapose is shown on the right, with an "Edit cover photo" button below it. The profile summary section shows "Brandon Rapose" with "4.8K followers · 4.1K following". Navigation buttons for "Professional dashboard", "Edit", and "Advertise" are visible at the bottom of the profile view.

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