KNOW BEFORE YOU CHOOSE

Gather this important information for each plan you are considering. Check the Glossary of Common Health Insurance Terms for help with definitions. Compare health insurance plans using the Plan Comparison Checklist.

GET READY

Before you begin, have this information at hand

- Names of your doctors, CF care center, and the laboratories and pharmacies you use
- Current prescriptions, including dosages and usual costs
- Health services you get now or may need in the coming year (e.g., home health care, durable medical equipment, supplies, transplant, other)

GET ANSWERS

Provider network

- Are your doctors, laboratory, care center, and pharmacies in the plan’s network?
- What are the plan’s policies for using a provider outside the network?

Drug formulary

- Are all of your medications on the plan’s formulary?
- Does the plan have any coverage restrictions, such as prior authorization, quantity limits, limited distribution, or step therapy?
- If the plan does not cover a medication, does it cover another acceptable drug, such as a generic option, that will work?

Type of plan

- What type of plan is it: Health Maintenance Organization (HMO), Preferred Provider Organization (PPO), Point of Service (POS), or Exclusive Provider Organization (EPO)?
- Does the plan require a referral to see a specialist?

Will you need coverage for...

- Mental health services?
- CF-related diabetes?
- Home health care?
- Transplant evaluation?
- Durable medical equipment?
- Surgery?
- Medical supplies?
- Hospitalizations?
- Prenatal and maternity care?
- Emergency services?

Benefits

- Do you have a copy of the plan’s summary of benefits and coverage (SBC)?
- What benefits does the plan include?
- Does the plan cover the services you currently use or might need in the coming year?
- What services are not covered?

Costs

- What is the monthly premium?
- How much is the annual deductible?
- Is there a separate deductible for prescription medications? If so, how much?
- What is the annual maximum you can pay out of pocket?
- What is the copay/coinsurance for:
  - PCP office visit?
  - Outpatient facility fee?
  - Diagnostic testing?
  - Mental health services?
  - Hospitalizations?
  - Durable medical equipment?
  - Specialist office visit?
  - Other?
- What is the copay/coinsurance for each of your medications?
- Does the plan allow copay assistance amounts to be applied to the deductible and out-of-pocket maximums?
- How much will you have to pay if you use an out-of-network provider?

CONNECT WITH COMPASS

CF Foundation Compass case managers can help you choose a health insurance plan that works for you. Call 844-COMPASS (844-266-7277) or email compass@cff.org.