ACA vs Short-Term Medical Plans



This document is meant to inform the agent about the differences and similarities between ACA and Short-Term Medical Plans so they can pick the best option for their respective clients.

Key Components	Affordable Care Act (ACA)	Short-Term Medical
How to Qualify?	 Must live in the U.S. Must be a U.S. citizen, U.S. national, or lawfully present in the U.S. Cannot be incarcerated Cannot be covered by Medicaid or other qualifying health coverage (such as CHIP, job-based, etc.) Must file tax return, or a joint tax return if married. 	 Must be under 65 years old. Cannot weight over 300 lbs if male or 250 if female. Cannot have a major pre-existing health condition (Including Cancer, Heart Disease, previous stroke, AIDs or HIV, etc.)
Available Carriers¹	 Ambetter Molina Blue Cross Blue Shield United Healthcare Aetna CVS Oscar Cigna Other carriers available by state & zipcode 	 Pivot Health National General (Allstate Benefits) United Health One
Who Is It For?²	 Those who may have pre-existing health conditions. Anyone under the age of 65 whose income is between 100% and 400% of the Federal Poverty Income level. Those who plan to use their coverage from a moderate to high amount. Those not offered health coverage through their job. Lower income individuals who can qualify for a subsidy. 	 Healthier individuals looking for major medical coverage. Higher income individuals that do not qualify for subsidies from the marketplace. Those who do not want the health insurance offered through their job or those that are between jobs. Someone who wants the freedom to see any doctor. Those that may have missed the ACA open enrollment period and need coverage. Those waiting for their ACA or Medicaid coverage to start. Someone who has no major pre-existing conditions. Someone who is looking for coverage in the event of a major medical issue and tends to not go to the doctor often.

₁ Carriers may vary each year depending on policies, regulations, location and availability.

 $_{2}$ Carrier can update requirements of the policies each year. It is essential to keep an eye on product changes to offer the best guidance to customers.



Affordable Care Act (ACA)

- Covers Pre-Existing Conditions
- Offers Subsidies
- No Health Questions (Guaranteed Issue)
- Can Only Sign Up During The Open Enrollment Period (Or With A Special Enrollment Period Exception
 - No Policy Coverage Limits
 - Doctor Networks Apply (HMO or EPO)

- Both are Major Medical Plans
- Both have copay options for doctor visits

Short-Term Medical

- Does Not Cover Major Pre-Existing Conditions
- No Subsidies
- Simplified Health Questions (Underwriting)
- Can Sign Up At Any Time
- Lifetime Policy Coverage Limits
- May/May Not have doctor networks
 (PPO or Open Network)