



## Health Insurance Rate Hikes: eHealthInsurance Answers Questions From Consumers Facing Premium Increases

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MOUNTAIN VIEW, CA, Mar 22, 2010 (MARKETWIRE via COMTEX) -- Individual health insurance rate hikes have recently come under intense scrutiny from lawmakers and many consumers may be wondering how they can maintain their health insurance while keeping their budget in check. eHealthInsurance (NASDAQ: EHTH), the leading online source of health insurance for individuals, families and small businesses, today released a list of frequently asked questions (FAQs) for consumers facing rate increases.

In addition to periodical rate hikes like those recently reported in the national media, policyholders may also see premiums increase as they age, based on moving from one age-band to another. For example, when consumers turn 30, 40, 45, 55 or 60 years old, they may find that their rates increase on or around their birthday because of the medical risks associated with their new age group.

The following are answers to frequently asked questions about unexpected rate increases from consumers calling in to eHealthInsurance's customer care center:

**Question:** It's frustrating to get rate increases when you're trying to live on a budget. Is there anything I can do to lock in a premium for a period of time?

**Answer:** In some cases, yes. Some insurance carriers may offer to lock-in your rate for the first one or two years after you purchase an individual or family health insurance policy. Work with a licensed broker that represents a large variety of health insurance carriers to find out which companies offer rate guarantees. Some carriers may automatically lock in your rates for the first year of your policy. Other carriers may offer to lock in your rate for a longer period of time in return for an additional fee each month.

For example, a carrier may include a rate guarantee for the first 12 months and then offer to extend the rate guarantee to a total of 24 months if you agree to pay an extra \$21 per month. Do the math to make sure you're saving money compared to a rate increase that might make your coverage unaffordable.

**Question:** Should I search for similar plans from other carriers in my state?

**Answer:** Absolutely, yes, shop 'til you drop. As with any product or service, it's a good idea to look around every few years to see if you're still getting a good deal. Individual health insurance customers sometimes assume they've got to stay with the same insurance company in order to have access to their same personal physician or local area hospital, but that's often not the case.

eHealthInsurance.com actually allows you to check and see if your doctor accepts insurance from multiple carriers. Sites like eHealthInsurance.com also make it easy to search for comparable plans in your state to see if you can find a plan with a lower premium and similar benefits.

If you do find a cheaper plan, be sure to wait for an approval before you make a switch. It's extremely important to keep in mind that when changing insurers, in most states, the insurance carrier will review your medical history before approving you for a new policy. So, if you have developed a medical condition while on your current individual plan, you may not qualify for a new policy with another carrier.

**Question:** In order to find affordable coverage, I'm looking at plans with higher deductibles and more restricted benefits. Are there dangers in cutting too much out of my plan?

**Answer:** Maybe. The important thing is to do your homework and make sure you know what you're getting. Be sure you understand how costs are shared under any new health insurance plan. Look at the deductible and make sure it's something you could afford if an unexpected medical expense arose. Look at the annual maximum out-of-pocket amount, too. That's the most you'll have to pay in a single year (including your deductible and other charges like copayments) before the insurance company takes over all other covered expenses.

There may be certain benefits you can safely do without. For instance, if you don't use prescription drugs, you may be able to save money on a plan that excludes prescription coverage (consider a prescription discount card accepted at your local pharmacy to help with Rx costs just in case). Some people may be happy to go without chiropractic care. And single men may not need a plan offering generous maternity benefits.

**Question:** If a pre-existing medical condition is preventing me from changing insurers, what should I do?

**Answer:** Look at other options from your current insurance company. Often, when informing you of a rate increase, your insurance company will also offer you an alternative coverage option. These options typically don't require a new application or a review of your recent medical history. The less expensive options may require greater cost-sharing (higher deductibles), but they'll allow you to maintain your coverage and access to discounted rates for medical care.

If your insurer did not offer you an alternative plan when notifying you of a rate increase, you still have the option to contact them and attempt to get yourself moved onto a policy with a lower monthly premium. Work through your licensed agent for help. Note that such a move will frequently require you to increase your deductible.

**Question:** Do I have to keep everyone in my family on the same health insurance policy?

**Answer:** No. If your family is on a shared policy that has increased its rates, it may be less expensive to put different family members on different plans, or even with different insurance companies, based on their needs.

For example, if one member of a three person family has a pre-existing condition, you may be able to keep that family member on the original plan and shop around for a different -- and potentially less expensive -- plan for the other members of the family.

However, insurers don't always allow you to change the number of family members on a policy, so make sure you don't cancel coverage until you've cleared the medical underwriting requirements for your new policy.

Question: What if I can no longer afford my premiums and I'm unable to qualify for a cheaper policy?

Answer: Don't go without some form of health insurance coverage.

Most people are unaware of all of the free or low cost public programs available to them. If private insurance is no longer an option for you, contact the non-profit Foundation for Health Coverage Education (FHCE) at [CoverageForAll.org](http://CoverageForAll.org) and find out what free or low-cost health care options are available to you in your area.

You may qualify for government-sponsored health insurance programs, but it may also take a while for you to get signed up. Don't assume you can wait until you get sick before you investigate the public programs in your area. If you can't qualify for government programs, FHCE may be able to direct you to community health clinics in your area that can provide you low-cost care.

Question: Health insurance can be complicated. Where can I turn for some free advice?

Answer: You can work with an online health insurance marketplace, like eHealthInsurance, which is licensed in all 50 states + DC, free of charge.

The broker fee for an insurance policy is actually built into the cost of every plan an insurance company sells. So, if you buy an insurance policy, you're paying for the services of a broker, whether you use that service or not. Due to government regulations, you will pay the same monthly premium for the same plan whether you buy it from a licensed agent or direct from the insurer. So, for no additional cost, shopping through a site like [eHealthInsurance.com](http://eHealthInsurance.com) can give you objective, unbiased help to find the right plan.

If you have questions that you can't answer on your own, take the time to talk to a licensed agent. To know that you're getting seasoned advice, make sure you work with a licensed agent that represents a large number of major health insurance carriers and offers a wide variety of products. eHealthInsurance has been in business for over 11 years, helped over 2 million people find quality health insurance and has health insurance agents that are licensed in all 50 states plus the District of Columbia. They can be reached toll free at 1-800-977-8860.

About eHealth eHealth, Inc. (NASDAQ: EHTH) is the parent company of eHealthInsurance, the nation's leading online source of health insurance for individuals, families and small businesses. Information and resources are available on various health plans, ranging from individual and family, short-term medical, and Medicare insurance. Consumers can get quotes from leading health insurance carriers, compare plans side by side, and apply for and purchase health insurance. eHealthInsurance is an online marketplace licensed to sell health insurance in all 50 states and the District of Columbia. eHealthInsurance and eHealth are registered trademarks of eHealthInsurance Services, Inc. For more information, see [www.ehealthinsurance.com](http://www.ehealthinsurance.com).

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