

# Myths About Health Insurance

## Myth #1: Health Insurance Covers Everything

Sorry to burst your bubble, but no plan will cover all your health care costs. The key to avoiding surprise bills and high costs is understanding what's included (and not included) in the plan. Most health insurance plans cover essential medical expenses, like doctor visits, hospital stays, and prescription medications.



## Myth #2: The Most Affordable Plan Is Always the One with the Lowest Premiums

Many individuals and businesses mistakenly choose health insurance based solely on cost. A lower premium may seem like a smart choice, but it often comes with higher deductibles and copays. Remember, insurance companies are businesses, and those savings upfront could lead to bigger expenses later.



## Myth #3: Health Insurance Covers Dental and Vision Expenses

It's easy to assume health insurance covers the whole body from head to toe—literally—but it doesn't. The eyes and mouth are two important parts of the body that health insurance doesn't cover. However, under the Affordable Care Act, some plans do include pediatric dental and vision coverage as essential health benefits.



## Myth #4: You Can Only Enroll During Open Enrollment

Sort of. For nearly all employees, open enrollment is your one chance each year to get health insurance—miss it, and you're locked out. Who gets an exception? The "lucky" few. The Affordable Care Act (ACA) specifies that events such as marriage, the birth or adoption of a child, or loss of previous coverage can trigger a special enrollment period during which employees can change their health plan.



## Myth #5: Only Older Individuals With Health Conditions Need Health Insurance

Thinking of opting out of health insurance to fatten your paycheck? Sure, it seems smart—until an unexpected accident, like getting hit by a drunk driver, leaves you with a mountain of medical bills. The cost of surgeries, hospital stays, and physical therapy will far exceed what you saved on premiums. Even for the young and healthy, insurance is a crucial safety net, protecting you from life's unpredictable moments.



## Myth #6: Health Insurance Plans Are All the Same

Nothing could be further from the truth. Health insurance benefits vary widely based on the provider, plan type, and state regulations. The coverage you need most might not even be included in the plan you're considering. While the Affordable Care Act sets nationwide standards, many rules differ by state. Take time to compare plans and understand your options before making a decision.



## Myth #7: Pre-existing Conditions Aren't Covered

Throwing in the towel on insurance because you have a pre-diagnosed condition is a mistake. Yes, in the past, insurance companies could deny coverage for treatment if a condition pre-existed. But under the Affordable Care Act, that is no longer the case. If you have a chronic or pre-existing medical condition, insurance companies must cover treatments according to the coverage described in their plan.

