



Important Notice of Changes in the Individual Market
Effective January 1, 2017

The following companies will no longer offer coverage in S.C.:
Celtic Insurance Company | UnitedHealthcare Insurance Company
UnitedHealthcare Life Insurance Company

Aetna Health Inc. will no longer offer coverage in the following counties:
Anderson, Beaufort, Berkeley, Charleston, Colleton,
Dorchester, Greenville, Orangeburg, Pickens, and Richland

Individuals enrolled in a 2016 Plan that is being discontinued must shop and enroll in a new plan by December 15th to avoid a break in coverage.

2017 Open Enrollment Period: November 1, 2016 - January 31, 2017

****December 15th is the deadline to enroll in a 2017 Plan for coverage to start January 1st****

Reminder: You must pay your January premium in order to have coverage start Jan. 1st

Individual Market Coverage (Individuals, Families, and Self-Employed)									
<i>2017 Health Insurance Plans Approved for Sale in the Individual Market</i>									
Company Name	Plan Type(s)	Availability	Pediatric Dental Included?	Metal Level					Totals
				Catastrophic	Bronze	Silver	Gold	Platinum	
Aetna Health Inc.	HMO	Not Statewide†	Yes	-	-	2	-	-	2
BlueChoice HealthPlan	EPO	Statewide	No	1	5	14	-	-	20
BlueCross BlueShield of South Carolina	EPO	Statewide	No	1	5	14	4	-	24
Cigna Health and Life Insurance Company	PPO	Statewide	No	-	1	-	-	-	1
Freedom Life Insurance Company of America	PPO	Statewide	Yes	-	2	-	-	-	2
National Foundation Life Insurance Company	PPO	Statewide	Yes	-	1	-	-	-	1
Individual Market Totals				2	14	28	4	0	48

†Aetna Health Inc. will offer 2017 individual market coverage in the following counties: Calhoun, Chester, Chesterfield, Darlington, Fairfield, Florence, Kershaw, Lancaster, Lee, Marion, Marlboro, Newberry, Sumter, and York



Small Group Market Coverage (Small Businesses with Up to 50 Employees)									
<i>2017 Health Insurance Plans Approved for Sale in the Small Group Market</i>									
Company Name	Plan Type(s)	Availability	Pediatric Dental Included?	Metal Level					Totals
				Catastrophic	Bronze	Silver	Gold	Platinum	
Aetna Health Inc.	POS	Not Statewide*	Yes	n/a	6	54	14	-	74
Aetna Life Insurance Company	PPO, Indemnity	Statewide	Yes	n/a	2	12	6	-	20
BlueChoice HealthPlan	PPO	Statewide	No	n/a	11	20	18	-	49
BlueCross BlueShield of South Carolina	PPO	Statewide	No	n/a	9	23	11	-	43
Federated Mutual Insurance Company	PPOs	Statewide	No	n/a	4	14	10	3	31
UnitedHealthcare Insurance Company	EPO, PPO	Statewide	Yes	n/a	8	29	21	1	59
UnitedHealthcare Insurance Company of the River Valley	PPO	Statewide	Yes	n/a	5	16	10	1	32
Small Group Market Totals				n/a	45	168	90	5	308

*Aetna Health Inc. will offer 2017 small group market coverage in 31 counties

For More Information:
doi.sc.gov/ACA



Looking for Companies Writing 2017 Plans on Healthcare.gov?

The federal marketplace (Healthcare.gov) is in addition to the existing private health insurance market for individuals, families, and small businesses. The Department has published a separate list of plans that are available in through Healthcare.gov, which is available online at doi.sc.gov/ACA.

Definitions and Additional Information

Every 2017 Plan sold in the individual or small group market must cover 10 categories of coverage, which are called **Essential Health Benefits (EHBs)**. While pediatric dental coverage is one of these 10 EHBs, plans have the option of including this coverage in the major medical plan. If the major medical plan does not include pediatric dental, consumers have the option to purchase this coverage through a separate dental plan that is certified by the federal government as meeting the pediatric dental EHB coverage standards. For more information on Essential Health Benefits, click [here](#). For more information on dental coverage, click [here](#).

Plans are separated into categories, commonly referred to as the **Plan Metal Level**, based on the percentage the plan pays of the average overall cost of providing essential health benefits to members. The plan category you choose affects the total amount you'll likely spend for essential health benefits during the year. The percentages the plans will spend, on average, are listed in the chart below:

Plan Metal Level	Actuarial Value
Catastrophic	n/a
Bronze	60%
Silver	70%
Gold	80%
Platinum	90%

As an example, a Silver Plan with an actuarial value of 70% means that, on average, the consumer would pay 30% of the costs of all covered benefits through out of pocket cost sharing. Please note that this is an average of expected costs across a standard population, so any individual could be responsible for a higher or lower percentage of the total costs of covered services for the year, depending on their actual health care needs and the terms of their insurance policy.

Catastrophic Plans must meet all of the requirements applicable to the metal level plans, but coverage will be slightly less generous than the Bronze level plans. These plans are not required to cover benefits before the plan's deductible is met with one exception: they must cover three primary care visits per year regardless of whether or not the plan's deductible has been met. The monthly premium is generally lower than for the metal level plans, but the out-of-pocket costs for deductibles, copayments, and coinsurance are generally higher. Additionally, the federal government has limited enrollment in catastrophic plans. To qualify for a catastrophic plan, you must be under 30 years old OR get a "hardship exemption" from the Health Insurance Marketplace. Catastrophic plans are only available in the individual market.