Frequently Asked Questions about ICHRA by Employees

How do I decide on a plan?

Plan selections are personal decisions that are based on your needs. Here are a few things to consider:

1. Make sure your doctors are in-network, especially those you must have. (We always recommend calling the billing office for your doctor(s) and asking do they accept the carrier and plan name you are looking to take. You will need to have narrowed your selections down to do this though.)
2. What are your prescriptions and how are they covered by the plan?
3. Do you have a carrier preference?
4. Do you need an HSA eligible plan?
5. Consider any expected medical issues or events you will be addressed in the year ahead and what do you need your plan to cover or provide you to meet those needs.

You can always reach out to our team to help you narrow your options and guide you where you need support. To get assistance with plan selection, call 888-414-2432.

What does On-Exchange and Off-Exchange mean?

In the ezICHRA portal, you will see this identification on the top left side of any plan next to the plan name. This terminology is for broker use. This lets us know whether the plan can be enrolled directly with a carrier or must be done through a State exchange. On occasion, the cost of the policy may differ depending on this information; however, the plan details are identical. We enroll Off-Exchange whenever possible.

What is an HSA plan?

If you have selected a plan that has been deemed HSA eligible (this will be noted in the title or identified through the HSA filter in the portal), you can contribute to an account that you set up with a local bank or credit union. The funds that you put into the account are pre-tax and can only be used for qualified medical expenses.

What if I need a Summary of Benefits and I can't find it in the portal?

In some cases, the carrier has not provided this information to the provider who houses all the information. Therefore, you can reach out to our office, 888-414-2432; our team can pull a copy from either the carrier site or another broker access point and email it to you.

What do I do if my spouse or I is on Medicare but the other needs a health insurance plan?

You will go through the ezICHRA portal and put in your personal information and your spouse's information. Whomever has Medicare, you will be asked to complete the Medicare questions, and the other will be offered ACA plans to choose from. The doctor and prescription information entered in the ezICHRA portal should relate to the non-Medicare aged individual to narrow plan options for that person. With both of you in the portal, you will receive the employee plus spouse reimbursement (as long as your company offers that tier) and both of you will be covered.

I'm Medicare. How does this work for me?

Under the ICHRA guidelines, Medicare premiums are reimbursable by the employer. Therefore, you will provide us with the premium information in the portal on your Medicare tab(s). If you did not go through UROne Benefits to get your Medicare coverage, you will need to provide substantiation to our office or your HR personnel. Your HR department will then reimburse you monthly for your Medicare premiums, which you will continue to pay as you were prior to the implementation of the ICHRA.

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Why am I getting a bill, and do I have to pay it?

Since you are the policyholder, you will always receive a monthly bill from your carrier. We recommend checking to make sure everything looks good but then discard it. If something looks amiss, please give our ezICHRA team a call, 888-414-2432.

DO NOT PAY FOR YOUR INVOICE. The ezICHRA team will make payments on your behalf. The payment method is fully funded by your employer, and if possible, payments will be made recurring. Our team does a monthly audit to make sure all payments are processed by the carrier and cleared. On occasion there are technical issues, those are dealt with as soon as we are alerted. The carrier may send you a letter or email notification. Feel free to send them to our office or reach out, but we will research and handle those situations on your behalf.

What can I do if my doctor leaves my network?

Doctors can choose to leave a network at any time. Unfortunately, the guidelines do not allow you to change policies if your doctor should leave the network you have chosen. You will have to consider a new doctor or paying the doctor's office directly for your visits.

What if I want to change the policy I chose?

Once the plan has been enrolled, policy selections cannot be changed without a qualifying event or Open Enrollment.

What if I need to add a spouse/dependent or move after my policy is in place?

These events are considered qualify events. Qualifying Events (QLEs) are loss of health coverage, changes in household, and changes in residence. After Open Enrollment carriers require documentation at the time of the change to the policy. You will need to reach out to your employer to set your ezICHRA portal account up with a QLE, so you can make the changes necessary. You have 60 days from the date of the event to make your enrollment changes.

What happens if I leave this employer?

Once your HR notifies us of your termination, we will reach out to you. **This plan is yours and does not end with your employment if the premiums are paid**. Once your coverage under the ICHRA ends, you have three options: cancel, keep the policy and/or see if you qualify for a federal subsidy and make the payments to the carrier yourself, or take the COBRA option which adds a 2% administration to the full cost of the premium. Our team will discuss these options with you when they call.

IMPORTANT Note – If you do not respond to our outreach and do not call to cancel your policy, any outstanding balances may be sent to collections or should you return to this carrier in the future on the individual side, you may be required to pay the outstanding balance before your new policy can go into effect.

What do I do if I want to cancel my policy mid-year?

If you wish to cancel your policy, please let your HR person know. They will need to update your ezICHRA account indicating you want to cancel your policy. Once your employer acts, you will need to call the carrier directly using the Customer/Member Services number on the back of your card. Due to a new CMS Ruling in July of 2024, brokers are no longer permitted to submit a cancellation on behalf of an individual policy holder.