

Health Coverage Decision Kit

For individuals, families and Medicare beneficiaries in Louisiana and Mississippi.

Start with what matters to you

Use this kit to gather your priorities, compare up to three options and prepare useful questions. It is a planning worksheet, not a plan recommendation or an enrollment form.

- ☐ Write down your preferred doctors, hospitals and pharmacy for your own records.
- ☐ List prescriptions, doses and refill frequency privately. Verify each exact drug against the plan formulary.
- ☐ Decide when you need coverage and ask which enrollment period applies.
- ☐ Compare costs and access to care before weighing extra benefits.
- ☐ Use current documents for the correct plan year and your location.

Choose your worksheet

Individual / family coverage: use page 2. Medicare: use page 3. Everyone: complete the review checklist on page 4.

My top priority:

Coverage needed by:

My biggest question:

Keep completed worksheets private. Do not post Medicare numbers, medical records, financial information or prescription lists in Instagram comments or DMs.

Compare the whole picture

Complete this with current plan documents. Use the same assumptions for each option.

Check	Option A	Option B	Option C
Plan / year / network			
Monthly premium after any confirmed savings			
Medical / prescription deductibles			
Primary care / specialist costs			
Hospital / emergency care costs			
In-network out-of-pocket maximum			
Doctors / hospital confirmed?			
Prescriptions / pharmacy checked?			
Referrals / prior authorization			
Coverage start / enrollment eligibility			

Compare a realistic year

Estimated annual cost = 12 monthly premiums + expected spending for covered care and prescriptions. Also review the out-of-pocket maximum and what does not count toward it. This estimate is not a guarantee or a complete worst-case limit.

For Marketplace coverage, confirm household and income information through the official application. Metal categories describe cost sharing, not quality of care. Check the Summary of Benefits and Coverage, provider directory and formulary.

MEDICARE

Choose a coverage path

Understand the structure first. Then verify the exact plan, year and service area.

Original Medicare	Medicare Advantage (Part C)
Part A and Part B. You can generally use providers nationwide that accept Medicare.	A Medicare-approved private plan providing Part A and Part B benefits. You must have both to join.
A separate Part D plan can provide drug coverage. Medigap may help with some Original Medicare costs.	Most plans include Part D. Provider networks and plan rules can affect how you receive care.
Review premiums, cost sharing and any supplemental coverage together.	Review premiums, medical cost sharing, drug coverage and the medical out-of-pocket limit.

Compare exact options

Verify	Option A	Option B
Plan name / ID / year		
Doctors / hospital / pharmacy		
Premiums / deductible / medical limit		
Drug coverage and estimated costs		
Referral / authorization requirements		
Extra benefits and restrictions		

Check enrollment eligibility and how a change affects any employer, union, Medicaid or other coverage before enrolling. Medigap is used with Original Medicare, not to pay Medicare Advantage cost sharing.

Your final review checklist

Use this page during a conversation with a licensed insurance professional.

- ☐ I verified the plan year, plan identifier and availability for my address.
- ☐ I checked each doctor and facility with the plan and provider for the specific network.
- ☐ I checked prescription coverage, pharmacy pricing and any coverage restrictions.
- ☐ I understand premiums, deductibles, copays, coinsurance and applicable limits.
- ☐ I reviewed exclusions, referrals, prior authorization and any extra-benefit restrictions.
- ☐ I confirmed my enrollment opportunity and effective date before changing coverage.

Prepare for help

Have your preferred coverage type, ZIP code, coverage timing and questions ready. Keep sensitive details for an appropriate private intake process. For a personal Medicare plan discussion, Health Advisor will arrange the required Scope of Appointment first.

Choose your online or email review route

Individual / family: get online quotes

Medicare: request a review by email

General questions: kyle@healthcareproducer.com

Keep sensitive information out of Instagram and ordinary email. Email replies: Monday-Friday, 8 a.m.-4 p.m. Central.

Official reference material

Coverage paths - [Medicare.gov](https://www.medicare.gov)

Choosing coverage - [HealthCare.gov](https://www.healthcareproducer.com)

Routing updated October 11, 2026. Educational material from Health Advisor, an independent insurance agency; not affiliated with or endorsed by the U.S. government or the federal Medicare program. Coverage and eligibility must be verified for your situation.