

### Individual & Family Benefit Plans | Coverage Details

<i>Plan Type</i>	<i>Full benefit plan based on income</i>	<i>Full benefit plan</i>	<i>Limited benefit plan</i>	<i>Employer sponsored plan</i>	<i>Government programs</i>
<i>Pre-existing conditions covered</i>	Yes	Yes	No	Yes	Yes
<i>Preventive care</i>	Yes	Yes	Limited	Yes	Yes
<i>Complies with Affordable Care Act</i>	Yes	Yes	No	Yes	Varies
<i>Eligibility</i>	Anyone that does not have access to “affordable” benefits from an employer or a govt program	Anyone	Anyone	Those who meet the employment criteria	Those who meet criteria required by a program: military service, income, disability, etc
<i>Income criteria</i>	Less than 400% of Federal Poverty Level	No	No	No	Yes, for some programs
<i>Enrollment Period</i>	Open Enrollment Nov 1 thru Dec 15 or after a “qualifying” event	Open Enrollment Nov 1 thru Dec 15 or after a “qualifying” event	Anytime	After employer waiting period	Varies based on program
<i>Policy Duration</i>	Annual renewal	Annual renewal	Specified period	Employment based	Program criteria
<i>Nebraska insurance carriers for 2021</i>	Medica Bright Health	Medica Bright Health	United Healthcare BlueCross BlueShield Pivot Health Others	Various	N/A

This benefit table provides general information only. Benefit exceptions will occur. Consult with your ComPro agent before making a health insurance plan decision.