

Choosing an individual health insurance provider is a very big decision an individual can make. There are a number of things to consider, including how much an individual is able to spend on health insurance, what are the limitations on any pre-existing conditions, and what the current needs of the individual are in terms of coverage, such as maternity coverage and child coverage for families. As well, individuals need to look at all the available health plans and compare them all, including HMO plans, PPO plans, and POS plans. Here are some good tips to use.

It is always good to remember that health insurance plans and associated prices tend to vary by state. Individuals need to do research by looking up the prices of insurance companies in their state. A good website will list the health insurance companies available in the state and prices for coverage.

Make a list of all the priorities. If an individual has a doctor they like, find out what insurance companies cover that doctor's service. Write down the things that are important, including child coverage, low premiums, and even customer service. If a person has a list of what they want, it will be easier to narrow down the search for the best individual health insurance coverage.

Sometimes it is good to find assistance with a health insurance broker. They will do all the leg work and find the different health insurance companies and their plans that meet the needs of the individual. They will look for the best rates and ensure their client does not get swindled out of money. To locate a professional and reputable broker, individuals can check with the National Association of Insurance Commissioners and the National Association of Insurance Underwriters. When interviewing an insurance broker, do not forget to ask about their "book." This is a popular industry expression for the network of providers the broker works with. The more options the health insurance broker can provide the better deal an individual is likely to receive.

Numerous things these days have a trial period, including magazine subscriptions and gym memberships, but not many people know that some health insurance companies allow prospective customers to test-drive their insurance. Insurance companies call it a "free look" and individuals are able to get a refund of their money if they are not satisfied with the coverage by a certain date.

Once a health insurance plan is selected, it is not over yet. There are many bills an individual may get, including services not covered and prescription costs. Numerous insurance companies have a preferred pricing system for prescriptions, meaning if the prescription is not generic, it can cost a lot of money to fill. Make sure the doctor under that health insurance plan can provide generic prescriptions as well as longer supply, like a 90 day instead of 30 day. It is all about negotiation. The same can be said with co-pays. Negotiate with the doctor about the price of a single doctor visit; many are surprised that they will get a reduction in the co-pay.