NBP NATIONAL BENEFIT PLANS
For Health, for Life, for Peace of Mind

Healthcare Coverage Review Checklist

Should You Take a Closer Look at Your Health Insurance?

Health insurance should not stay on autopilot. Use this checklist to determine whether it may be time to review your current coverage, compare options, or speak with a licensed insurance professional.

1. Enrollment Timing

You should review your coverage if:

☐ Open enrollment is coming up
☐ Open enrollment has already started
☐ You are unsure of your enrollment deadline
☐ You renewed your plan last year without comparing options
☐ You usually choose the same plan because it feels easier
☐ You do not know when you are allowed to make changes

Why this matters:

Open enrollment is one of the best times to review your options, but many people treat it like a paperwork deadline instead of a coverage decision. This is your opportunity to make sure your plan still fits your needs, budget, doctors, prescriptions, and expected care.

2. Life Changes or Loss of Coverage

You should review your coverage if:

☐ You recently lost job-based health coverage
☐ You expect to lose coverage soon
☐ You changed jobs
☐ Your work hours were reduced
☐ You got married
☐ You got divorced or legally separated
☐ You had a baby
☐ You adopted a child
☐ You moved to a new area
☐ You are aging off a parent's plan
☐ You lost Medicaid or CHIP eligibility
☐ Your spouse or partner's coverage changed

Why this matters:

Certain life changes may qualify you for a Special Enrollment Period, but timing matters. Waiting too long can limit your options or create a gap in coverage.

3. Rising Costs

You should review your coverage if:

☐ Your monthly premium increased
☐ Your deductible increased
☐ Your copays increased
☐ Your coinsurance increased
☐ Your out-of-pocket maximum increased
☐ Your prescription costs increased
☐ Your employer is asking employees to pay more
☐ Your plan feels more expensive but less helpful
☐ You are avoiding care because of cost
☐ You are worried about affording a major medical event

Why this matters:

The monthly premium is only one part of the cost. A plan may appear affordable but become expensive when you actually need care. Reviewing the full cost picture can help you avoid unpleasant surprises.

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4. Benefit or Plan Changes

You should review your coverage if:

☐ Your employer changed insurance carriers
☐ Your employer changed plan options
☐ Your plan network changed
☐ Your prescription drug coverage changed
☐ Your deductible structure changed
☐ Your plan added new restrictions or requirements
☐ You were moved into a high-deductible health plan
☐ Your dependent coverage changed
☐ You received plan documents but did not fully understand them
☐ You are not sure what changed from last year

Why this matters:

Plans can look similar on the surface but work very differently in practice. Even small changes can affect your doctors, prescriptions, costs, and access to care.

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5. Doctors, Hospitals, and Provider Networks

You should review your coverage if:

☐ Your doctor is no longer in-network
☐ Your preferred hospital is no longer in-network
☐ You need to see a specialist
☐ You were surprised by an out-of-network bill
☐ You are unsure whether a provider is covered
☐ You moved or now use different healthcare providers
☐ You have difficulty finding in-network care
☐ Your plan has a narrow network
☐ You need care in more than one location
☐ You travel frequently and are unsure how coverage works away from home

Why this matters:

A plan is only useful if it gives you reasonable access to the care you need. Network changes are one of the most common sources of unexpected costs.

6. Claims, Denials, and Coverage Problems

You should review your coverage if:

☐ A claim was denied
☐ A prior authorization was denied or delayed
☐ A service you thought was covered was not paid for
☐ You received a bill you did not expect
☐ A prescription was denied or moved to a higher cost tier
☐ You had trouble getting an answer from your insurance company
☐ You did not know how to appeal a claim decision
☐ You are seeing repeated billing or claims issues
☐ You delayed care because you were unsure what was covered
☐ You feel your plan is harder to use than it should be

Why this matters:

A denied claim or surprise bill may be a one-time issue, but it can also reveal a deeper mismatch between your plan and your healthcare needs.

7. Prescription Coverage

You should review your coverage if:

☐ You take one or more regular prescriptions
☐ Your prescription costs have increased
☐ Your medication is no longer covered
☐ Your medication moved to a higher tier
☐ Your plan now requires prior authorization
☐ Your plan requires step therapy
☐ Your pharmacy is no longer preferred or in-network
☐ You started a new medication
☐ You expect new healthcare needs this year
☐ You have not checked your plan's formulary

Why this matters:

Prescription coverage can change from year to year. A plan that worked well last year may not be the best fit if your medication costs or coverage rules have changed.

8. Understanding Your Plan

You should review your coverage if you cannot confidently answer these questions:

☐ What is my monthly premium?
☐ What is my deductible?
☐ What happens after I meet my deductible?
☐ What is my out-of-pocket maximum?
☐ What are my copays for primary care, specialists, urgent care, and emergency care?
☐ What is my coinsurance responsibility?
☐ Are my doctors in-network?
☐ Are my prescriptions covered?
☐ Do I need referrals?
☐ Do I need prior authorization for certain services?
☐ What happens if I need care while traveling?
☐ What would I likely pay in a serious medical situation?

Why this matters:

If you do not understand your coverage, you may not know how protected you really are. Confusion is a good enough reason to ask for help.

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9. Small Business Employer Review

For small business owners, review your employee health coverage if:

☐ Your renewal premium increased
☐ Employees are asking more questions about benefits
☐ Employees seem confused by their options
☐ Employees are avoiding care because of cost
☐ Your current plan is hurting recruitment or retention
☐ You want to offer benefits for the first time
☐ You are unsure whether your current plan is competitive
☐ Your workforce has changed
☐ You have more employees with family coverage needs
☐ You are balancing cost control with employee support

Why this matters:

Health benefits affect more than compliance and cost. They influence employee confidence, retention, and how supported people feel by the business.

Final Question

Can you clearly explain what your health insurance covers, what it costs, and what would happen if you needed care tomorrow?

If the answer is no, that is your sign to review your coverage.