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Marketplace vs Private Market

How to choose the right path for your situation

Same medical conditions, very different products. The right path depends on subsidies, health, and family plans.

WHAT IT IS

When you need under-65 health coverage outside an employer plan, you have two worlds to choose from: the ACA Marketplace (Healthcare.gov, ACA-compliant plans, subsidies for income 100-400% FPL) and the Private Market (Short-Term Medical, Fixed-Benefit, Indemnity, DPC + HDHP, Health Sharing Ministries). They behave differently. They cost differently. They suit different people. This is the decision framework.

ACA MARKETPLACE WINS WHEN

You qualify for a subsidy (APTC)
Income roughly 100-400% FPL

You have pre-existing conditions
ACA guarantees no underwriting

You need maternity / family planning
ACA EHB required coverage

You have ongoing Rx / mental health
Full ACA benefits, no exclusions

You want guaranteed-issue
No medical questions, no denials

PRIVATE MARKET WINS WHEN

No ACA subsidy eligibility
Healthy + income over 400% FPL

You're healthy, no chronic issues
Underwriting works in your favor

You want a wider PPO network
Often better than ACA HMO/EPO

You want plan flexibility
Build deductible/copay to fit you

You want multi-year stability
STM 3-year plans, no annual reapply

THE 3 THINGS PEOPLE GET WRONG

1. **"Marketplace is always the cheaper option."**
   Only if you qualify for a subsidy. For households over 400% FPL with no subsidy eligibility, Private Market plans (Short-Term Medical in particular) often cost 30-60% less per month than unsubsidized Marketplace coverage.

2. **"Private Market means low-quality coverage."**
   Misleading. Short-Term Medical at the right deductible covers major medical events through real PPO networks. Fixed-Benefit pays specified dollar amounts per service. They're not ACA-compliant but they're real coverage for the right person.

3. **"I have to pick one or the other."**
   Not necessarily. Combo strategies exist: STM for major medical + Fixed-Benefit for hospital-event protection + Dental/Vision riders. DPC + HDHP. Each layer covers a different risk.

THE QUICK DECISION FRAMEWORK

Three questions: (1) Do you qualify for a meaningful ACA subsidy? If yes, ACA almost always wins. (2) Do you have pre-existing conditions, ongoing prescriptions, or family-planning needs? If yes, ACA's required EHB coverage usually wins. (3) Are you healthy, income over 400% FPL, and want a wider network? Private Market often wins by a wide margin. If you answered yes to (1) or (2), go ACA. If you answered yes only to (3), Private Market. Mixed answers? That's where layering products often beats either single one.

Trying to figure out which world to shop in? Call or text Craig, I'll run actual quotes against your specific situation in 15 minutes.

Don't go underinsured when you can be Insured AF.