



Losing Coverage: The Guide

A practical, no-pressure guide to reviewing your next health coverage move when your current plan is ending or no longer feels affordable.

Who this is for

Turning 26, losing job-based coverage, dealing with expensive COBRA, self-employed, or simply trying to compare traditional plans and alternatives more intelligently.

What you'll get

A clearer decision framework and a better way to compare what may actually fit.

What this guide is not

Not a legal brief or a push toward one answer. It is a practical review tool.

Best next move

Use the checklist, then book a short review if you want help comparing what may fit.

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Start Here: What Kind of Coverage Problem Are You Solving?

Most people who land in this situation are not really asking, “What is the best plan?” They are asking a much more practical question: **What is the smartest next move for my situation right now?**

These are the most common situations worth separating before you compare anything else:

Turning 26

You are aging off a parent’s plan and need to understand what people commonly compare next before the current coverage ends.

Losing Job-Based Coverage

An employer plan is ending, and you want to compare next steps before defaulting into a rushed decision.

COBRA Feels Too Expensive

COBRA may preserve familiar coverage, but the premium can be much higher than what you were paying while employed.

Self-Employed

You need to compare cost, doctor access, prescriptions, and structure more carefully than most people expect.

Time-sensitive note

If you lose qualifying health coverage, the Marketplace generally offers a Special Enrollment Period **60 days before or 60 days after** coverage ends. If you are aging off a parent’s Marketplace plan, Healthcare.gov says you can generally stay on that plan through **December 31 of the year you turn 26**. If employer coverage is ending, COBRA election timelines are separate and can preserve continuity, but it often costs more because you may pay the full premium plus an administrative charge.

That is why waiting until after the end date is rarely ideal. Even when you do not want to enroll immediately, you usually want your comparison work done before the deadline pressure starts.

Why this matters: Healthcare.gov says loss of qualifying coverage can trigger a Special Enrollment Period 60 days before or after coverage ends, and DOL says COBRA election rights generally last 60 days after employer coverage ends; COBRA can cost more because employers may require the full premium plus 2%.

What People Commonly Compare

Most bad coverage decisions happen because someone compares only one path. The better approach is to understand which bucket each option falls into and what tradeoffs come with it.

Option	Best when...	Watch for
Traditional ACA / individual plan	You want a standard insurance structure and need to compare premium, deductible, network, and subsidy eligibility.	Premiums can still feel high if subsidy help is limited or network priorities are narrow.
COBRA	You want to keep the same employer plan for continuity and are comfortable evaluating the cost.	It is often expensive because the employer contribution usually goes away.
Spouse or family plan	A household plan is available and the timing works well.	Cost and network fit can still vary more than people assume.
Medicaid / CHIP	Income and household circumstances may qualify you for low-cost or no-cost coverage.	Eligibility is state-specific and timing can matter.
Health sharing / alternatives	You are cost-conscious, open to alternatives, and want to review something beyond a standard plan structure.	You need to understand the structure clearly before deciding whether it fits.
HSA-compatible strategy	You want to think carefully about monthly cost, deductibles, and the role of tax-advantaged savings.	The right structure depends on how you actually use healthcare, not just on premium alone.

Marketplace plans can qualify for premium tax credits depending on household circumstances, and Healthcare.gov notes that age, location, tobacco use, plan category, and whether dependents are covered can affect premiums.

How to Compare Intelligently

Do not start with “What is the cheapest thing I can buy?” Start with the tradeoffs that will actually affect whether you keep the plan, use it correctly, and stay out of trouble later.

Monthly cost vs. total exposure

A lower premium is not automatically cheaper if the deductible, out-of-pocket exposure, or structure does not fit how you actually use care.

Doctors and prescriptions

If specific providers, medications, or specialist routines matter, those should be weighed early—not after you enroll.

Risk tolerance

Some people want predictability above all. Others are willing to accept more responsibility for lower monthly cost.

Timing

Coverage end dates, SEP windows, and COBRA notices create real deadlines. The closer you get to them, the worse your decision-making usually gets.

Tax and household context

Subsidy eligibility, HSA strategy, and household setup can change what “best fit” even means.

Simple rule: compare the option that feels “obvious” with at least one serious alternative. The goal is not to be clever. The goal is to avoid paying too much for the wrong structure out of momentum or panic.

What to have ready before a coverage review

- Your current coverage end date (or the notice showing it).
- State of residence and household size.
- Whether specific doctors, facilities, or prescriptions matter a lot.
- A rough monthly budget you are trying to stay near.
- Whether continuity matters more than savings—or vice versa.

Your 72-Hour Action Plan

Timeframe	What to do
In the next 24 hours	Confirm when your current coverage actually ends. Save the notice. Do not rely on memory.
Within 48 hours	List the 2–3 paths that are worth comparing in your case. Avoid defaulting to only one.
Within 72 hours	Gather doctors, prescriptions, and budget range so the comparison is real instead of theoretical.
Before you enroll	Compare fit, not just price. Ask whether the structure makes sense for how you use healthcare.

Need help reviewing your next move?

If you want help sorting through traditional plans, COBRA alternatives, health sharing, or other cost-conscious paths, start with a short review instead of guessing alone.

Contact Tupac Manzanarez	Call or text 561-247-3970	Email tupac@losingcoverage.com
Website losingcoverage.com	Book a call calendly.com/tupac-mympb/15-minute-meeting	Best starting point Complete the website review form so your situation is captured before the call.

Reference notes for this draft: Healthcare.gov states that loss of qualifying coverage can trigger a Special Enrollment Period 60 days before or after the loss, and the Department of Labor explains that COBRA generally applies to employer plans with 20 or more employees, often allows a 60-day election window, and may require the full premium plus a 2% administrative charge.