

How to Use the Marketplace to Buy Health Insurance

Health insurance Marketplaces (you may hear them called Exchanges) are state-based online marketplaces where people and small businesses can shop for and buy private health insurance. The Marketplace is a destination where consumers can easily compare insurance options based on price, benefits, quality and other factors to help them choose the insurance that best fits their needs. Below is information that can help you use the Marketplace to purchase health insurance.

How can I find the Marketplace for my state and when do I sign up?

- The federal website, [Healthcare.gov](https://www.healthcare.gov), will provide you access to your state Marketplace.
- For 2019, Open Enrollment is from November 1 – December 15, 2018. California, Colorado, DC, Massachusetts, Minnesota, New York, and Rhode Island have extended the deadline for open enrollment beyond December 15.ⁱ

I'm already enrolled in the Marketplace. Is there anything I should do?

- A lot has changed this year, so you should double check if your plan is still the best fit for you. Your plan may have changed their doctors and hospitals as well as the medications that are covered.
- Costs may be very different compared to last year. Because many states have changed how the subsidies are calculated, you may have better options to maximize your access to financial support.
- If you are satisfied that your current plan is still the best choice, you can allow your plan to automatically renew.

Who can help me with the process?

- Consumers can call 1-800-318-2596, 24 hours a day, 7 days a week and reach customer service representatives that are trained to help you complete your application.
- The call center is available in English and Spanish and has a language line to assist callers in over 150 additional languages.
- There is also web-support for non-English speakers. Para español, visite [CuidadoDeSalud.gov](https://www.CuidadoDeSalud.gov). You can also select other languages and find help on this [site](#).ⁱⁱ

Are there people in my area who can help me?

- For local help, you can work with a *Navigator*, a *Certified Application Counselor* (sometimes called an assister) or an *Insurance Broker*.
- *Navigators* and *Application Counselors* are trained to provide impartial education about the Marketplace, help applicants determine whether they qualify for subsidies or Medicaid, and assist them in the enrollment process. They cannot recommend one plan over another and your choice does not impact how they are paid.
 - Input your zip code into this independent [site](#)ⁱⁱⁱ for help finding a local Application Counselor.
- *Insurance Brokers* are insurance professionals who are certified by the Marketplaces to provide enrollment assistance. Unlike Navigators and Application Counselors, they can recommend a plan. Their services are generally free to the consumers. Some, but not all, brokers receive a commission from the health plans for whom they sell products.
- You should only access an Insurance Broker through your Marketplace – to ensure they are licensed and trained. This [link](#)^{iv} allows you to request help from a Marketplace-registered Broker.
- If you are using a Broker, here are a few questions to consider asking:
 - *Do you represent all plans on the Marketplace?* Ideally, a broker should represent all plans in your area, so you know they are looking at all your options
 - *How are you compensated?* If brokers make more commission from one plan than another, you want to know if that is influencing their recommendation.
 - *Ask the Broker “Why are you recommending this plan for my family?”*

What can I buy?

- Plans are put into 4 categories – bronze, silver, gold, platinum – which balance things including monthly premiums and out of pocket costs.
- There is also a category called catastrophic with low monthly premiums but very high deductibles. These are only available to people under 30 and those who qualify for a [hardship exemption](#).^v Catastrophic plans are not eligible for financial support so often a Bronze plan is a better deal.
- All five categories must offer the same set of essential health benefits and preventive services – including quit smoking programs.

How do I pick a health plan?

The Marketplace lets you compare based on your priorities. You should consider the trade-off between monthly premiums and the costs you will have to pay from your own pocket when you receive care. Also look to see if the doctors and places you go to get care are included in the plans you are considering. Finally, it is important to check to see if your medications are covered and how much you will have to pay for them. For additional help, see our checklists for [lung disease patients](#)^{vi} and [tobacco users](#).^{vii}

What if I'm worried about being able to afford insurance?

- This [calculator](#)^{viii} can help you determine if you may be eligible for financial help. In 2018, 83 percent of people who bought on the Marketplace qualified for help.
- Help may come in two forms. You may be eligible for:
 - A *premium subsidy* to help offset the cost of your monthly premiums. The premium subsidy can be used with any of the Platinum-Gold-Silver-Bronze plans.
 - *Cost sharing reductions (CSR)* lower the amount you pay when you receive care. All people eligible for CSR support are also eligible for premium subsidies but not vice versa.
 - Unlike the premium subsidies, CSR can only be used with a qualified Silver plan.

Do I still have to buy insurance?

- As of January 1, 2019, there is no federal financial penalty if you do not purchase health insurance.

I've heard there are ways to get less expensive insurance. Does the Marketplace sell those?

- You have the option to purchase a “short-term limited-duration” plan. They are less expensive because they have significant limitations. They can charge higher premiums based on health status, exclude coverage for preexisting conditions, and place caps on how much they will cover.
- By federal rules, short-term plans are allowed for up to 12 months and may be renewed for a maximum period of 36 months. Some states have shorter maximum periods, like six months.
- Because short-term products do not meet minimum coverage and quality standards, they are currently not allowed to be sold in the Marketplace.

ⁱ <https://www.kff.org/health-reform/fact-sheet/aca-open-enrollment-if-you-are-low-income/>

ⁱⁱ <https://localhelp.healthcare.gov/#/>

ⁱⁱⁱ <https://widget.getcoveredamerica.org/>

^{iv} <https://marketplace.helpondemand.com/lp/2117DCF4-7D7C-4985-A45B-29C431634561>

^v <https://www.healthcare.gov/health-coverage-exemptions/hardship-exemptions/>

^{vi} <http://www.lung.org/assets/documents/lung-health/choosing-plan-for-lung-disease-patients.pdf>

^{vii} <http://www.lung.org/assets/documents/lung-health/choosing-plan-for-tobacco-users.pdf>

^{viii} <https://www.kff.org/interactive/subsidy-calculator/>