

HealthCare.gov: Your Connection to Quality, Affordable Health Insurance

Because of the Affordable Care Act, New Jerseyans can enroll in quality, affordable health plans in the health insurance marketplace at HealthCare.gov. All plans offered on HealthCare.gov must cover a comprehensive set of benefits, and most people who enroll will be eligible for financial assistance to make coverage even more affordable.

Despite what you may have heard, the Affordable Care Act is the law of the land, and HealthCare.gov is open for business and ready for you to shop, compare, and enroll in a plan that meets your needs and budget. If you sign up for a plan on HealthCare.gov, you are guaranteed coverage through the end of 2018, as long as you continue paying your premiums.

Get ready to take action: this year's open enrollment period for 2018 coverage will begin on **November 1, 2017**, and end on **December 15, 2017**.

This page addresses some frequently asked questions about enrolling in coverage on HealthCare.gov. Local, in-person assistance may also be available. In addition, you may call the <u>Marketplace Call</u> <u>Center</u> at 1-800-318-2596, which is available 24 hours a day and seven days a week, except for Thanksgiving. New Jerseyans can also visit <u>CoverNJ.org</u> to find local enrollment assistance.

Open Enrollment 2018: The Basics

- When is this year's open enrollment period for HealthCare.gov?
- Are financial savings available?
- What kinds of services do plans offered on HealthCare.gov cover?
- <u>How do I enroll in a plan on HealthCare.gov?</u>
- <u>Can I get help enrolling in a plan?</u>
- If I enrolled in a plan last year, do I have to re-enroll for 2018?
- What if I do not enroll by the December 15th deadline?

Other FAQS

- What other insurance options are there?
- What are my options if I am an immigrant or come from a mixed-status family?
- Where can I learn more about health insurance and enrolling in a plan?



When is this year's open enrollment period for HealthCare.gov?

In New Jersey, the open enrollment period for 2018 coverage begins on **November 1, 2017**, and ends **December 15, 2017**. Unlike previous years, the open enrollment period will <u>not</u> extend into January.

Please note that HealthCare.gov will temporarily be down for maintenance overnight on November 1, 2017, and on Sundays from 12 a.m. to 12 p.m. ET, except for Sunday, December 10th. While you will not be able to enroll in a health insurance plan during those times, you will still be able to access many of the other resources on HealthCare.gov, including the "window shopping" tool that lets you browse plans and estimate your financial assistance without logging in or filling out an application.

If you do not enroll in a health insurance plan before the December 15th deadline, you may not be able to get coverage on HealthCare.gov until next year's open enrollment period, unless you are eligible for a <u>special enrollment period</u>. Examples of life events that would make you eligible for a special enrollment period include change in employment, having a baby, moving to a new area, and leaving incarceration.

Are financial savings available?

Yes, and most New Jerseyans who have enrolled in a plan on HealthCare.gov have been eligible for at least one of the two forms of financial assistance, depending on their household size and estimated household income.

Many New Jerseyans will be eligible for a <u>premium tax credit</u>, which lowers the "sticker price" of coverage. In fact, last year nearly 80 percent of New Jerseyans who selected a marketplace plan received an average tax credit of \$349 a month, lowering the average monthly premium to \$148. Many New Jerseyans can even find plans between \$50 and \$100. Families who earn up to 400 percent of the federal poverty level (\$48,240 for an individual and \$98,400 for a family of four) are eligible for a premium tax credit.

You may also be eligible for a <u>cost sharing reduction</u>, which lowers your out-of-pocket costs, like deductibles and co-pays. Last year, more than 50 percent of New Jerseyans who selected a marketplace plan received this financial assistance. Cost sharing reductions are only available if you enroll in a "<u>silver</u>" plan on HealthCare.gov. Families who earn up to 250 percent of the federal poverty level (\$30,150 for an individual and \$61,500 for a family of four) and who enroll in a silver plan on the marketplace are eligible for a cost sharing reduction.

To see if you may be eligible for one or more forms of financial assistance, you can use HealthCare.gov's "window shopping" tool, which lets you browse plans and estimate your financial assistance without logging in or filling out an application.

Please note that while the Administration has taken actions that may increase the "sticker price" of coverage in many areas, most people will still be able to enroll in an affordable plan because of the financial assistance offered on HealthCare.gov. Premium tax credits increase as the price of the premium increases, so eligible enrollees will not have to pay more for coverage. And if you qualify for a cost sharing reduction, insurance companies are still required to help you with your out-of-pocket costs. To determine what your specific costs on the marketplace will be, visit <u>HealthCare.gov</u>.



What kinds of services do plans offered on HealthCare.gov cover?

HealthCare.gov offers quality insurance plans that cover a range of benefits and can protect you and your family from medical debt.

Under the Affordable Care Act, most health insurance plans must cover a set of ten basic benefits, called <u>essential health benefits</u>. Every plan offered on HealthCare.gov must cover these essential health benefits, which include: emergency services; mental health and substance use disorder services; pregnancy, maternity, and newborn care; prescription drugs; preventive and wellness services; and pediatric services. And all plans offered on HealthCare.gov must cover <u>preventive services</u> at no cost, including screenings for blood pressure and cancer.

In addition, the Affordable Care Act prohibits insurance companies from denying you coverage or charging you more for your health care if you have a pre-existing condition.

How do I enroll in a plan on HealthCare.gov?

For many New Jerseyans, the fastest way to enroll in a health insurance plan on the marketplace will be to visit <u>HealthCare.gov</u> online, where you can shop around and compare plans. Spanish-speaking enrollees can visit <u>CuidadoDeSalud.gov</u>.

You can also apply by calling the <u>Marketplace Call Center</u> for free at 1-800-318-2596, where a representative can help you fill out your application. Help is available in many languages, and TTY callers can dial 1-855-880-4325.

<u>In-person help</u> may be available through assisters in your area, who are trained to help explain your options, fill out your application, and enroll.

Regardless of <u>how you enroll</u>, you will need to have <u>several items available</u>, including your Social Security Number and income information.

Can I get help enrolling in a plan?

Local assisters, agents, and brokers are trained to help you navigate the health insurance marketplace and enroll in an insurance plan. You can use HealthCare.gov's <u>local help tool</u> to find someone nearby to assist you.

CoverNJ.org has resources for New Jerseyans to find local assistance.

You can also call the <u>Marketplace Call Center</u> at 1-800-318-2596, which is available 24 hours a day and seven days a week to answer questions. Help is available in many languages, and TTY callers can dial 1-855-880-4325.



If I enrolled in a plan last year, do I have to re-enroll for 2018?

Plans change every year, and the open enrollment period is an opportunity to ensure that you are enrolled in the plan that best meets your needs. <u>Marketplace officials strongly encourage</u> enrollees to explore all available plan options and update their household size, income, and other relevant information. Shopping around and renewing your plan is easy and can take as little as a few minutes.

If you do not take action to enroll in a plan by the December 15th deadline, you <u>may</u> be <u>automatically</u> <u>enrolled</u> in your 2017 plan or a similar plan if that one is no longer offered. In addition, if your 2017 plan is discontinued and you are automatically enrolled in a similar plan, you may qualify for a <u>special</u> <u>enrollment period</u> where you will be able to enroll in a different plan for 2018.

By the time open enrollment begins on November 1st, you should have <u>received a letter</u> from your insurance company and a letter from the health insurance marketplace with information about some of your coverage options for 2018, including whether you will be automatically enrolled in a plan if you do not act by December 15th deadline. You may contact the <u>Marketplace Call Center</u> if you have not received the marketplace letter and your insurance company if you have not received their letter.

What if I do not enroll by the December 15th deadline?

If you miss the December 15th deadline to enroll in coverage, you will not be able to get coverage on HealthCare.gov until next year's open enrollment period, unless you are eligible for a <u>special</u> <u>enrollment period</u>. Examples of life events that would make you eligible for a special enrollment period include losing employer-sponsored coverage, having a baby, moving to a new area, and leaving incarceration.

In addition, you may have to pay a <u>fee</u> when you file your 2018 taxes if you did not have <u>minimum</u> <u>essential coverage</u> for all or part of the year.



What other insurance options are there?

You may qualify for insurance options outside of HealthCare.gov, including:

<u>Medicaid and CHIP</u>: If you earn under a certain household income, you and your family may qualify for Medicaid or the Children's Health Insurance Program, known as <u>NJ FamilyCare</u> in New Jersey. This program provides affordable, comprehensive coverage for eligible New Jerseyans. If your family is eligible for NJ FamilyCare, you can <u>apply</u> year-round.

<u>Medicare</u>: Most New Jerseyans who are 65 and older and many New Jerseyans with disabilities are covered by Medicare. HealthCare.gov does not impact your Medicare coverage, and unless you are only enrolled in Medicare Part B, you are not eligible to enroll in coverage sold on HealthCare.gov. If you are applying for Medicare for the first time or are looking to make changes to your Medicare plan, please note that <u>Medicare's open enrollment period</u> began on October 15, 2017, and concludes on December 7, 2017.

<u>Employer-sponsored coverage:</u> Your employer may also offer you affordable health coverage. If you would <u>still like to enroll</u> in a plan on HealthCare.gov, you may do so during the open enrollment period, but you may not be able to receive the financial assistance you would otherwise be eligible for.

<u>Small business options:</u> Certain small businesses can enroll in the <u>Small Business Health Options</u> <u>Program</u> (SHOP) at any time during the year. Eligible companies may also receive a tax credit for coverage purchased through the SHOP marketplace.

<u>Options for young adults and students:</u> Because of the Affordable Care Act, if you are a young adult under the age of 26, you may be covered under your parents' health insurance plan, in addition to being eligible for <u>one of the options</u> listed above and for financial assistance on HealthCare.gov, depending on your specific circumstances.

What are my options if I am an immigrant or come from a mixed-status family? <u>Lawfully present immigrants</u> are eligible to enroll in coverage through HealthCare.gov. Certain immigrants with "<u>qualified</u>" status may be eligible for Medicaid and CHIP in New Jersey as well.

Members of "<u>mixed-status</u>" families, or families whose members have different immigration and citizenship statuses, are often eligible for different kinds of health coverage, and some members of mixed-status families may not be eligible for certain coverage at all.

However, members of mixed-status families who are eligible for various health insurance options, including through HealthCare.gov, Medicaid, and CHIP, <u>can apply and are not required to provide information</u> about the immigration or citizenship status of any family member who is not applying for coverage.

Additionally, the information provided through the application cannot be used for immigration enforcement.



Where can I learn more about health insurance and enrolling in a plan?

The <u>Marketplace Call Center</u> (1-800-318-2596) is available 24 hours a day and seven days a week to answer questions.

HealthCare.gov's <u>local help tool</u> can help you find someone near you who can assist you in navigating the health insurance marketplace and enrolling in a plan.

New Jerseyans can also visit CoverNJ.org to find local enrollment assistance.

<u>HealthCare.gov</u> has resources online to address frequently asked questions.

Other organizations, like <u>the Robert Wood Johnson Foundation and the Center on Health Insurance</u> <u>Reforms</u> and the <u>Kaiser Family Foundation</u> have prepared their own frequently asked questions as well.