



2019 Health Insurance Marketplace Frequently Asked Questions

What is the Marketplace?

The Affordable Care Act created the Health Insurance Marketplace, also known as the Exchange. The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. The Marketplace offers "one-stop shopping" to find and compare private health insurance options. You may also be eligible for a tax credit that lowers your monthly premium right away. Open Enrollment for health insurance coverage through the Marketplace runs from November 1 through December 15, 2018. You must sign up by December 15, 2018 to have coverage on January 1, 2019.

What kind of insurance can I buy on the Marketplace?

There will be two Marketplace plans offered in Indiana: CareSource Just4Me and MHS/Ambetter. Both plans will be accepted at IU Health facilities and physicians.

Who is “In-Network” versus “Out-of-Network”?

In most cases, “in-network” insurance products will cover medically necessary services at Indiana University Health. If an insurance product is considered “out-of-network” your services will likely not be covered at Indiana University Health. Individuals with an “out-of-network” product will either be asked to pay for their services in full ahead, or will be referred back to their insurance provider for additional coverage options.

In 2019, the two remaining Marketplace products are both in-network with IU Health.

| In-Network | Out-Of-Network |
|---|--|
| CareSource Just4Me All IU Health facilities and physicians | Anthem, IU Health Plans, and MDwise will not offer Marketplace products in Indiana in 2018 |
| MHS/Ambetter from MHS All IU Health facilities and physicians* | |
| * Behavioral Health Services are out-of-network with IU Health – out-of-network benefits may not apply. | |

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Where can I get more information or enroll?

Get one-on-one assistance with a certified Indiana navigator to help you:

- find out what financial help you may qualify for
- find out what plan is best for you
- fill out your actual health insurance application

To learn more about available plans and for application assistance, request an enrollment appointment with an IU Health Navigator at www.iuhealth.org/individual-solutions:

- Email: IndividualSolutions@iuhealth.org
- Phone: **1-888-531-3004**

Additional information is also available from the Health Insurance Marketplace at the following:

- www.HealthCare.gov
- **1-800-318-2596** (available 24/7) or TTY: 1-855-889-4325.

When can I enroll?

There are four key dates you'll want to mark on your calendar:

- **November 1, 2018:** Marketplace open enrollment begins
- **December 31, 2018:** Last day to make first premium payment for coverage to begin on January 1, 2019
- **December 15, 2018:** Open enrollment ends
- **January 1, 2019:** Health coverage can start

When will my coverage begin?

The last day to enroll in a health insurance plan on the Exchange for 2019 is December 15, 2018. The following chart shows when your coverage will begin based on when you pay your first premium:

| If you pay your premium by | Coverage takes effect: |
|--------------------------------|------------------------|
| On or before December 31, 2018 | January 1, 2019 |

Will I be able to afford it? Is there any assistance available?

Marketplace Insurance Affordability Programs can help to lower the amount some eligible consumers pay for premiums and/or co-payments/coinsurance. Premium Tax Credits (PTC) and Cost-Sharing Reductions (CSR) are the two Insurance Affordability programs. Affordability is achieved through advanced tax credits and reduced cost sharing.

A federal tax credit is available to help people purchase health insurance on the Marketplace. These “premium tax credits” are available immediately upon enrollment in an insurance plan so that families can receive help when they need it rather than having to wait until they file taxes. Payments of the premium tax credits can go directly to insurers to pay a share of the monthly health insurance premiums charged to individuals and families.

Some people receiving premium tax credits to help pay their premiums may also be eligible to receive cost-sharing reductions to help them pay their cost-sharing charges. These subsidies reduce the deductibles, copayments, and other out-of-pocket charges that people eligible for cost-sharing reductions pay when they use benefits covered by their health plan.

Do I have to use the Marketplace exchange to buy private health insurance?

No. Plans sold outside of the Marketplace exchange will need to meet the same new rules on minimum levels of benefits, and meet limits on how much more insurers can charge older customers. Insurance plans sold both on and off the exchange also can't discriminate against those with existing health problems and can't charge women more than men. Plans purchased outside of the Marketplace exchange are not eligible for the subsidy available for those that purchase Marketplace products.