

## Getting Covered

There are three main sources of health coverage. The first is your job. The second is a plan that you buy. The third is a government program for older, disabled or low-income people.

**Through your job.** Employers generally have to offer insurance to full-time workers. You also may be covered through your spouse's or parent's employer. If you are a college student, you may be covered through your school. Most often, you share the cost of your coverage with your employer. A premium is deducted from your paycheck. You may also have costs like deductibles, copays and coinsurance when you use your plan. (See Cost Sharing.)

**Buy your own.** You can buy coverage straight from an insurer. You can also buy it through exchanges (or marketplaces) set up through the Affordable Care Act (ACA). The marketplaces are open from November 1 to January 31 each year. You may be eligible to sign up at other times—for instance, if you lose your job. You generally pay a monthly premium for coverage. If you buy a plan through the marketplace, you might qualify for help paying your premium. You may also have costs like deductibles, copays and coinsurance.

To buy a marketplace plan, visit [www.healthcare.gov](http://www.healthcare.gov), or your state's marketplace site. You'll see the costs and benefits for all of the plans in your area. You can also find out whether you qualify for premium help. Call 800-318-2596 for help understanding the different plan choices. Or, visit [localhelp.healthcare.gov](http://localhelp.healthcare.gov) to find in-person help near you.

**Public programs.** Medicare gives low-cost health coverage to older adults and disabled people. Medicaid covers people who cannot pay for a plan. Does your family earn too much to get Medicaid? Your children may still qualify for low-cost coverage through the Children's Health Insurance Program (CHIP). Medicare is national, but eligibility rules and coverage for Medicaid and CHIP differ for each state. For questions about Medicare, visit [www.medicare.gov](http://www.medicare.gov). Visit [www.healthcare.gov](http://www.healthcare.gov) to see if you qualify for Medicaid or CHIP, and to join.

### Private and Public Sources of Health Coverage

Health insurance can help protect you and your family from unaffordable healthcare costs. And, under the Affordable Care Act, everyone must have health insurance or pay a penalty. Of course, this rule has some exceptions, which you can learn more about here. There are three main sources of coverage: your employer, individual plans and government programs (public insurance).

### Through Your Job or a Family Member's Job

Most people in the U.S. get health coverage through their jobs. In general, employers are required to offer insurance to full-time staff. You may also be covered through your spouse or parent if their employer provides family coverage, or, if you are a college student, through your school.

Your employer may run their own “self-administered” plan, or buy a plan through an insurance carrier that they then offer to you. Some employers just offer one plan, while others give you a range to choose from, all with different benefits and costs. You may have the option of covering yourself or your whole family, or choosing between different plan types like HMOs, PPOs or high-deductible plans. Generally, you pay a monthly premium that comes out of your paycheck automatically, and your employer pays a portion as well. You will also usually have some out-of-pocket costs when you use your coverage, like deductibles, co-payments and co-insurance.

If you work for a union that has agreements with more than one employer, you may be able to keep your coverage when you change jobs. If you just work for one employer, your coverage will end when you leave your job. You also may lose your insurance if you become a part-time employee. But, you may be eligible for COBRA continuation coverage, which allows you to stay in the plan for a time by paying the full cost of coverage yourself.

## **Buy Your Own**

If you aren't covered through your job or a family member's job, you can buy coverage directly from an insurance company, or through special marketplaces set up through the Affordable Care Act.

## **Marketplace Plans**

Your own state may have a marketplace website, or you can visit the national marketplace at [www.healthcare.gov](http://www.healthcare.gov). When you apply for coverage through the marketplace, you'll answer a series of questions about your income, family size, and other factors to find plans near you, and determine if you are eligible for a tax subsidy to help pay your premium. Then, you will need to decide whether you want single or family coverage, and choose from a range of plans with different benefits and costs. Besides the monthly premium, you will usually have some out-of-pocket costs when you use your coverage, like deductibles, co-payments and co-insurance. Anyone may enroll in a health plan through the marketplace from November 1 to January 31. Some people may be eligible to enroll during other times of the year. In some cases, you can also buy a plan at other times of the year, for instance, if you lose your coverage because you leave your job or your work hours are reduced.

The marketplace offers four levels of plans. Each level is priced differently and covers a different amount of the cost of your care. “Bronze” plans have the lowest monthly premiums, but you will pay higher co-pays and deductibles when you need care. “Platinum” plans have the highest monthly premiums, but have low co-pays and deductibles. If you have a chronic condition, or need care regularly, you may want to choose a platinum-level plan to control your out-of-pocket costs. Or, if you are young and generally healthy, the low premiums of a bronze plan may outweigh the higher costs you'll pay when you do occasionally visit the doctor. Some individuals, like young adults under 30 who are facing a financial or other hardship, may also be able to buy “catastrophic” plans. These plans have very low premiums, but the deductibles are extremely high. They are only meant to protect you in the case of a very serious accident or illness.

The chart below shows how much of the cost of your care you can expect to pay at each Marketplace plan level. This does not include your monthly premium. Keep in mind that this is an estimate of the total cost of your care over the year, not the amount for a specific service or treatment.

<b>Market Plan Level</b>	<b>Premium Cost</b>	<b>Your Plan Pays</b>	<b>You Pay(Co-pays, Co-insurance and deductibles)</b>
Bronze	Lowest	60%	40%
Silver		70%	30%
Gold		80%	20%
Platinum	Highest	90%	10%
Catastrophic(Not available to everyone)		Less than 60%	More than 60%
Source: <a href="https://www.healthcare.gov/choose-a-plan/plans-categories/">https://www.healthcare.gov/choose-a-plan/plans-categories/</a>			

Sorting through all this information can be difficult, so many community-based organizations have trained “health insurance navigators” to guide people through their plan choices and help them enroll. You can find a navigator to help you in person or over the phone by visiting <https://localhelp.healthcare.gov/>.