

5 things you can do to get ready to enroll

1. Visit HealthCare.gov

Learn more about the Health Insurance Marketplace, including Medicaid and the Children's Health Insurance Program (CHIP).

2. Ask your employer if it offers health insurance

If your employer doesn't offer health coverage, you can get coverage through the Marketplace or other sources.

3. Make a list of questions you have before it's time to choose your health plan

For example, "Can I stay with my current doctor?" or "Will this plan cover my health costs when I'm traveling?"

4. Gather basic information about your household income

You'll need income information, like the kind you get on your W-2, pay stubs, or tax return.

5. Set your budget

There are different types of health plans to meet a variety of needs and budgets. You'll need to figure out how much you're able to spend on premiums each month, and how much you want to pay out-of-pocket for prescriptions or medical services.

You have the right to get Marketplace information in an accessible format, like large print, Braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against. Visit [CMS.gov/about-cms/agency-information/aboutwebsite/cmsnondiscriminationnotice.html](https://www.cms.gov/about-cms/agency-information/aboutwebsite/cmsnondiscriminationnotice.html), or call the Marketplace Call Center at 1-800-318-2596 for more information. TTY users can call 1-855-889-4325.

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Health Insurance Marketplace

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The Health Insurance Marketplace

Health insurance options

The Marketplace is a way to find health coverage that fits your budget and meets your needs. When you apply for coverage, you can see all your options and enroll. You can apply for private insurance, Medicaid, or The Children's Health Insurance Program (CHIP).

Every health plan in the Marketplace offers the same set of essential health benefits, including doctor visits, preventive care, hospitalization, prescriptions, and more. You can compare plans based on price, benefits, and other features important to you before you make a choice.

Insurance plans run by private companies

Insurance plans offered through the Marketplace are run by private companies. You can compare your health coverage options in the Marketplace and see what your premium, deductibles, and out-of-pocket costs will be before you decide to enroll.

There are protections for you and your family. Insurance plans can't deny you coverage because of pre-existing or chronic conditions like cancer or diabetes, and they can't charge women and men different premiums.

Get help with costs

When you use the Marketplace you may be able to get a tax credit to lower your monthly premiums and out-of-pocket costs. When you apply, you'll find out how much you can save. Most people who apply qualify for some kind of savings.

Explore the Marketplace

Visit [HealthCare.gov](https://www.healthcare.gov) to get answers to your questions and sign up for e-mail updates about the Marketplace. You can also call the Health Insurance Marketplace Call Center at 1-800-318-2596. TTY users can call 1-855-889-4325.

When Open Enrollment starts, you can go to the Marketplace and apply for health coverage, compare all your options, and enroll in a plan.

If you qualify for a Special Enrollment Period because of a life change like getting married, having a baby, losing other coverage, or moving, you may apply for coverage outside of Open Enrollment. You also can apply for Medicaid and CHIP any time of the year, using the same application.