TIPS: Federal Marketplace Enrollment

2018 Open Enrollment:
November 1 – December 15

Ways to enroll:

Need help?
Caring Voice Coalition has a health insurance counseling program. Case managers can help you understand your coverage options.

Getting started:
Give us a call: (888) 267-1440.

If you’ve already spoken with a case manager, return your Certified Application Counselor authorization form to Caring Voice Coalition to get started.

Via fax: 1-888-278-5065

Via mail: 6606 West Broad Street, Suite 403 Richmond, VA 23230

Learn more: caringvoice.org/health-insurance-counseling/

Applying online

Create an account on HealthCare.gov.

STEP 1
Keep your username and password accessible and safe.

Log in to complete the application.

STEP 2
Complete the application available after logging in.

Application includes:
• Privacy Policy.
• Demographic information.
• Family and household information.
• Special Enrollment Period eligibility questions.
• Review and sign (electronic signature).

Eligibility determination.

STEP 3
Receive and review your eligibility determination. This will appear on your account shortly after you submit your application. It will tell you several things, including whether you or anyone on your application may qualify for Medicaid and/or CHIP, advance premium tax credits, or cost-sharing reduction subsidies.

Explore coverage options.

STEP 4
• Explore your insurance coverage options.
• Find plans with your medications covered (check formulary).
• Look at plans that cover your doctors. (Doctors should be in-network.)
• Pick a plan and enroll.
**Subsidies**

**Premium tax credit**
- Households with incomes between 100-400 percent of the federal poverty level (FPL) based on family size may qualify for premium tax credits.
- You cannot be enrolled in or have an offer of job-based coverage that is affordable and meets the minimum value standards.
  - **Affordable** – A health plan is considered affordable if the employee’s share of the premium for the job-based coverage doesn’t exceed 9.56 percent of that employee’s annual household income for the lowest cost self-only policy available to the employee.
  - **Minimum value standards** – If a health plan is designed to pay at least 60 percent of the total cost of medical services for a standard population, it meets minimum value standards.
- If you are eligible for the credit, you can choose to:
  - **Get it now:** Have some or all of the estimated premium tax credit paid to your health insurer in advance to lower your monthly premium.
  - **Get it later:** Wait to get the credit after you file your federal income tax return.

**Cost-sharing reductions**
- Cost-sharing reductions lower the amount paid out of pocket for deductibles, coinsurance and copayments.
- You are eligible for cost-sharing reductions if:
  - You enroll in a Silver plan through the Marketplace.
  - Your income is 100-250 percent FPL.
  - You also qualify to receive advance payments of the premium tax credit.

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<th>Persons in Household</th>
<th>48 Contiguous States and D.C. Poverty Guidelines (Annual)</th>
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<tr>
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<tr>
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<tr>
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</table>

Add $4,320 for each person over 8

Please note that different income levels apply to residents of Alaska and Hawaii.

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