How to prepare for going on the Exchange:

1. Make a list of the types of medical services you typically use, for example:
   - Doctor’s visits
   - Blood tests/urine tests
   - Hospitalizations
   - Medications
   - Medical equipment (such as wheelchairs or nebulizers)
   - Physical/Occupational Therapy

2. Make a list of the doctors or other healthcare professionals you already see and like, to make sure that they are covered by your insurance.

3. Think about whether you would rather pay more money monthly (premium) and have lower co-pays, or pay less monthly and have higher co-pays.

4. Think about whether you would rather pay more bills on your own before your insurance starts to pay (deductible) or whether you would rather pay more each month (premium).

5. Consider calling healthcare.gov (1-800-318-2598) and/or using a Navigator (see Definitions section)

6. Have financial information and social security numbers in front of you

For more information:
www.healthcare.gov
1-800-318-2596
If you have questions please call Susan Horky, (352) 273-8906

www.healthcare.gov

The Affordable Care Act (ACA), also known as Obamacare, was passed by Congress in 2010.

The intent of the ACA is to provide affordable health insurance coverage for all children and adults. The ACA is also expected to result in lower healthcare costs in our country, overall.

REMEMBER!!
Open Enrollment:
11/15/14-2/15/15

This brochure talks about how the Affordable Care Act in Florida may help you, your family or friends.

For more information:
www.healthcare.gov
1-800-318-2596
If you have questions please call Susan Horky, (352) 273-8906

General Information about the ACA:

The main points of the ACA are:

- People can get health insurance even if they have been sick before and have a “pre-existing condition”
- People who can’t get health insurance through a job can buy health insurance through an online site called an “exchange” that shows all the plans
- Many people will get help to pay the cost of health insurance purchased through the Exchange. (called subsidies or tax credits)
- Children may stay on their parents’ health insurance until age 26.
- Your insurance can’t stop paying or drop you just because it has paid a lot in a year or over a lifetime.
- All insurance policies must cover ten essential health benefits (see Definitions section).
- Usually, the more expensive the premium, the lower the deductible and the copays. (See Definitions section). Each insurance plan pays a different percentage (%) of healthcare services.

- The exchange is for people who earn over 133% of the poverty level ($31,721.00 for a family of four).
- If you earn over 133% of the poverty level, you will have to pay a fine if you don’t get health insurance either from an employer or through the exchange
- If you earn less than 133% of the poverty level you do not have to pay a fine if you don’t have health insurance

The ACA in Florida:

In Florida, health insurance you can buy health insurance by going to www.healthcare.gov. Choose Florida in the box that says “Select your state” and click on “Find coverage now.”

- You will be asked to enter the ages of family members, and your total family income. You will need your last year’s tax return
- You will then be given a list of possible insurance policies to choose from.
- You can sign up or wait
THE AFFORDABLE CARE ACT

In Florida, if you are an adult and live under 133% of the federal poverty level, it may be difficult to get health insurance unless you are on SSI or your job provides it.

Children can get coverage under their parents’ policy in the exchange. Children in Florida can also get coverage through Florida KidCare or one of its partners (CMS and Medicaid).

To learn more about health insurance for children go to: https://www.healthykids.org/

Definitions:

**Co-pay**—the part that you pay for doctor’s visits or other healthcare services.

**Deductible**—the amount you have to pay before insurance pays.

**Exchange**—A website where people can learn about their health coverage options; compare health insurance plans based on costs, benefits, and other important features; choose a plan; and enroll in coverage.

**Essential Health Benefits:** All insurance plans must cover certain types of care. These include doctor and emergency visits, hospitalizations, mental health, rehabilitation, medicines, lab costs, pregnancy and maternity costs and dental/vision care for children.

**In Network**—If a doctor is “in the network” this means the insurance will cover most of the cost of seeing the doctor.

**Navigator**—An unbiased individual whose job is to help people apply for health insurance exchange, at no cost. Go to www.healthcare.gov, scroll down and click on “get local help.” This will give you the names and locations of some Navigators near you.

**Open enrollment period:** The time period when you can sign up for insurance.

**Out of Network**—if a doctor is “out of network” the insurance will not pay for you to see him/her. Or, the insurance will pay only a little and you will have to pay more.

**Policy**—an insurance plan

**Premium**—the amount you pay each month for health insurance.

**Frequently Asked Questions:**

Q. I’ve heard that the costs of insurance on the exchange are very high, is this true?

A. The costs vary, depending on the policy you choose, but they can be expensive. Many people can get financial help (subsidies) for the cost of insurance.

Q. Where can I learn more about the Affordable Care Act and health insurance?

A. Some very useful websites are:

   - www.healthcare.gov
   - http://kff.org/health-reform/

Q. What kind of penalty will I have to pay if I don’t have health insurance?

A. In 2015, you will have to pay the higher of the following two numbers: 2% of your yearly household income or $325 per person for the year ($162.50 per child under 18).

Q. Who can help me apply for insurance?

A. There are people called Navigators who can help you apply. (See Definitions section)

Q. How is the Affordable Care Act going to save costs?

A. It is expected that as more people get health insurance they will see doctors before they are very sick. It costs less (to a person and the healthcare system) to get healthcare early, rather than waiting until you are very sick.

Q. What other ways does the ACA help patients and lower healthcare costs?

A. The ACA makes sure that insurance plans are fair. It makes sure that hospitals provide safe, high quality services (they get fined if they don’t). It provides rewards to hospitals and doctors if they provide good care at low cost and if they partner with patients.

Q. If I got insurance on the exchange last year, do I still need to go on?

A. Yes, you should still check to see if there are less expensive plans this year.