

How to Keep Your Marketplace Health Insurance



About
this guide

After you buy health insurance through the marketplace, there are several important things you will need to do to keep it.

Pay Your Premium Every Month

The premium is the amount of money you pay to your health insurance company each month. You have to pay your first premium by a certain date in order for your coverage to start, and you have to pay your premium every month by a certain date in order to keep your health plan. Your insurance company will tell you what these dates are.

When it comes to paying your premium, you have options—talk to your insurance company.

- You may want to send a paper check or money order to your insurance company each month when your bill comes.
- You can also arrange automatic payments from your bank account.
- You may need to pay separate premiums for your dental plan (if you bought one) or if people in your family are enrolled in more than one plan.

If You Do Not Pay Your Premium, Your Health Insurance Company Can Cancel Your Plan

Before your insurer cancels your plan, you will be given a chance to pay any premiums you missed.

- If you don't pay any missed premiums by the insurer's deadline, in addition to losing your health insurance, you may also have to pay the full cost for any health care you received during the month(s) you did not pay your premium.

- If you *are* receiving financial assistance to help pay for your health plan (a tax credit to lower your premiums), you will have three months (90 days) to pay any missed premiums before your health insurance company cancels your health plan.
- If you *are not* receiving financial assistance, you will have one month (30 days) to pay any missed premiums before your health insurance company cancels your health plan.

Tell the Marketplace and Your Health Plan about Any Changes in Your Contact Information

Tell the marketplace and your health plan if any of this information changes:

- Your mailing address
- Your phone number
- Your email address
- Your preference for receiving information by mail or email
- The language or format in which you prefer to receive information

To tell the marketplace:

- Go online to your marketplace account (create an account if you don't have one), call your marketplace call center, or get help from a local enrollment assister.

To tell your health plan:

- Call your health plan directly. You can find the customer service number on your health insurance card and on documents from your health plan.

Tell the Marketplace When You Have a Life Change

If you are receiving financial assistance to help pay for your health plan, reporting life changes will ensure that you are getting the right amount of financial assistance. Some life changes might also mean you can start receiving financial assistance if you didn't qualify when you first bought your health plan.

- Your eligibility for financial assistance is based on the number of people in your household, your household income, and whether you are able to get other affordable health insurance.
- Life events that affect your household size, income, and access to health insurance can change the amount of financial assistance you can receive.
- Some life changes will also give you a chance to make changes to your health plan.

Report these changes within 60 days for yourself and anyone else you included on your health insurance application:

- Getting married or divorced
- Having a child, adopting a child, or placing a child for adoption
- Experiencing an increase or decrease in income
- Getting health coverage through a job or a program like Medicare or Medicaid
- Permanently moving to a new area of the state or country that offers different health plan options
- Becoming disabled
- Planning to change how you (or they) file taxes (for example, claiming a new person as a dependent on your federal tax return, or no longer claiming a dependent)
- Planning to change your (or their) tax filing status (for example, filing as single or head of household instead of married after a divorce)
- Experiencing a change in immigration status
- Going to jail or being released from jail

To report any of these life changes, go online to your [healthcare.gov](https://www.healthcare.gov) account (create an account if you don't have one), call the marketplace call center, or get help from a local enrollment assister.

Respond to Notices You Receive from the Marketplace

During the year, you will get notices from the marketplace with important information and questions. These may be sent to your online marketplace account (with a notification sent by email or text), or they may be sent to you by mail, depending on how you chose to receive notices when you applied. Notices are the way that the marketplace tells you about changes and gets the information it needs to continue your insurance. Follow the instructions in the notices.

- The information in the notice may be time-sensitive, so respond right away.
- You can change how you receive notices by calling the marketplace call center.

Renew Your Coverage Each Year

Each year, you will receive a notice from the marketplace about renewing your health insurance. The notice will ask if your information has changed, and it will tell you that you can switch to a new health plan between November 1, 2016, and January 31, 2017.

- If any information in the notice is incorrect, call the marketplace call center right away.
- If the information is correct, continue paying your monthly premium, and you will not need to do anything else. (But if your renewal notice says that you must sign and return the notice even if all of the information in it is correct, you should do so.)
- If the marketplace does not renew your insurance, or if it gives you a different amount of financial assistance and you think the marketplace made a mistake, you will have a limited amount of time to appeal. You will be able to keep your insurance while your appeal is processed.

The complete *What You Need to Know about Health Insurance* series:

Applying for Health Insurance

Answering Questions about Your Family When Applying for Health Insurance

Answering Questions about Your Family's Income When Applying for Health Insurance

Applying for a Marketplace Plan if You Can Get Health Insurance through Your Job

What to Do if You Are Uninsured after Open Enrollment

Getting Financial Assistance

Getting Financial Assistance to Pay for Health Insurance

Deciding How Much Financial Assistance to Use to Lower Your Monthly Premiums

Will I Be Able to Get Financial Help to Pay for Health Insurance?

How Getting Financial Assistance to Pay for Health Insurance Affects Your Taxes

Getting Extra Financial Assistance to Help Pay Health Care Costs

Choosing a Health Plan

Choosing the Health Plan that's Right for You

Choosing a Health Plan You Can Afford

Understanding the Differences between Platinum, Gold, Silver, and Bronze Plans

Understanding Catastrophic Health Insurance

Buying Children's Dental Coverage through the Marketplace

Keeping and Using Health Insurance

How to Use Your Health Insurance

How to Keep Your Marketplace Health Insurance

What to Do after You Buy Health Insurance in the Marketplace

Understanding the Requirement to Have Health Insurance

Understanding the Requirement to Have Health Insurance

Understanding Minimum Essential Coverage

Reference Charts and Graphics

Income Guidelines for Getting and Using Financial Assistance for Health Insurance

Income Guidelines for Getting Extra Financial Assistance to Pay for Health Care Costs

Types of Exemptions from the Requirement to Have Health Insurance

A complete list of Families USA publications is available online at www.FamiliesUSA.org/resources/publications.

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