It’s important to have health insurance at all times, but especially during a global health crisis. Health insurance helps pay for testing and care related to the COVID-19 pandemic. And it can pay for other health care you and your family may need. Unfortunately, some people will not be able to get insurance right now, but they may be eligible to get other help with COVID-19 expenses.
Seven Options for Finding Health Insurance

Healthcare.gov is the federal government website that can connect you to many types of health insurance. You may be able to get health insurance through one or more of these options:

1. Medicaid
Medicaid provides health insurance to people with low and modest incomes and their families. People with Medicaid can get care for free or at a low cost. Your state will look at your current monthly income to see if you are eligible.

» There are two places to go online to apply and see if you can get Medicaid.

» Go to healthcare.gov to learn if you are eligible and apply, (if your state runs its own marketplace, you will be redirected after you input your address), OR

Go to the website for your state’s Medicaid agency, which may be the fastest way to get covered

Even if you have a low income, you may not be able to get Medicaid if your state does not provide it to working-age adults. Also, some lawfully-present immigrants have to wait 5 years after getting green cards (permanent residency) before they can get full Medicaid. These immigrants may be able to buy insurance through a marketplace plan meanwhile.

Keep in mind that even if you cannot get full-scope Medicaid, in many states, Medicaid can still cover testing and emergency treatment for COVID-19 if you have a low income.
2. **Children’s Health Insurance Program (CHIP)**

If your income is modest but too high for Medicaid for yourself, you may still be able to get health insurance for your children through CHIP. Go to the **CHIP page on Healthcare.gov** for information about how to apply.

3. **Insurance Through a Marketplace Plan**

If your income is too high for Medicaid, your next best option may be to buy insurance through your state’s health insurance marketplace. Depending on your income, you may be able to get financial help with your premium and out-of-pocket costs.

Enrollment is open to people who lost coverage since January 1, 2020 during this COVID-19 emergency. If you did not lose coverage this year, but faced another life change or hardship, check “**see if I can enroll**” on healthcare.gov and the special exceptions listed here to find out if you can enroll in a marketplace plan now or if you might qualify for Medicaid or CHIP. If you cannot enroll now, be sure to check back in November during open enrollment season.

Plans purchased on the marketplace all cover COVID-19 care and testing. Beware that if you instead shop off of the marketplace and buy a short-term plan or enroll in a health sharing ministry, those plans may have significant gaps — many short-term plans do not cover long hospital stays, or prescription drugs, or other important services.

4. **Insurance Through a Parent, Spouse, or Partner**

If you recently lost your own job-based insurance but there is another adult in your family who has insurance through their job, you might be able to join their insurance. You have a **limited time** during this COVID-19 crisis to do so. Your family member can contact his or her employer for information about how to add you to the plan.

5. **Extending Your Job-Based Insurance Through COBRA**

If you have lost your job or had your hours reduced and you no longer get insurance, you may be able to **continue the insurance** you had through your job. But this option is often expensive. Your former employer is required to tell you about this option and should give you a notice with the details.

6. **Medicare**

If you are 65 or older and delayed enrolling in Medicare while you were working, you have a **special enrollment period** when you first leave your job. Generally, you must enroll within 8 months to avoid penalties, and you will want to enroll faster. If you were not able to enroll due to COVID-19 (for example, because Social Security offices were closed), you may have more time. A local State Health Insurance Assistance Program (SHIP) can help you apply.
7. Medicaid With Medicare
If you are 65 or older and have a low income and limited savings, you may be able to get full Medicaid in addition to Medicare. These benefits are also available to some people with disabilities. Medicaid can pay for your Medicare coinsurance and premiums and may cover additional services such as long-term care and supports. Or you may be able to enroll in one of the Medicare Savings Programs that help with Medicare costs. Apply through your state Medicaid program. A local State Health Insurance Assistance Program (SHIP) can help you apply.

Getting Help Paying for COVID-19 Testing
If you do not have insurance, free testing is available in some locations. Many testing sites get federal emergency funds so they can provide testing for free. But this is not true for all sites or health care providers. Some health care providers can bill you their full charge.

To find out about testing costs, contact the specific testing site you want to use. Your state or local health department’s website might provide information about available free testing sites.

Keep In Mind
Testing is not yet available in all communities. And in some places, the testing sites that are free are not easy to get to, especially for people without cars.

» Testing in some sites is available only to people with COVID-19 symptoms, health care workers, and people in high-risk groups. Check with your local testing centers to see who they test.

» If you are using a free testing site, bring your social security number, or a drivers’ license, or a state-issued ID if you have one. If you do not have these documents, providers can still test you and get reimbursed through federal funds by attesting that they saw you.

» If you have insurance through your job, the marketplace, a spouse or partner’s job, Medicare, or Medicaid, and you get tested by a health care provider that accepts your insurance, you cannot be charged coinsurance, copayment or deductibles for the testing.

Getting Help Paying for COVID-19 Hospital Care
If you do not have insurance, hospitals must still provide stabilizing treatment in an emergency, including treatment for COVID-19. But they may charge you afterwards. And you may have a hard time getting further treatment once your condition is stable.

The hospital, doctors, and other health care providers who treat you for COVID-19 may be able to use money from the new CARES Act Claims Reimbursement Fund.
A: If you are an immigrant, Medicaid must pay for emergency services if you are financially eligible, regardless of your immigration status.

Q: Does the hospital have a financial assistance program for low-income patients? Many hospitals provide financial assistance. (Nonprofit hospitals are required to have financial assistance programs, but for-profit hospitals are not.)

A: Check your hospital’s website for information on financial assistance programs and the income guidelines for this help. Or talk to the billing office or a hospital social worker to see if you might qualify and about how to apply. Also ask if the hospital can bill the CARES Act Claims Reimbursement fund for care while you were diagnosed with COVID-19.

Lastly, if you have insurance, many health plans will not charge you out of pocket for COVID-19 treatment, and some states have made this a requirement.

Speak Out!

As you seek help paying for COVID-19 testing and care, we’d like to hear about what worked for you and what did not work. By sharing your story, you speak up for people who may be facing issues just like yours, and you help inform our work. Share your story.

There are several options for paying for care:

Ask these questions

» Q: Does the hospital think you can get Medicaid? Can they help you apply, including for coverage to pay your hospital bill?
How to Close Gaps in Coverage and Care

Families USA, together with other organizations, has issued several sets of recommendations to federal policymakers to close gaps in coverage and care for COVID-19. In particular, we want insurance to be affordable and open to new enrollees throughout this crisis; testing and treatment to be widely available and equitably distributed; and we want low-income uninsured patients to be able to access testing and treatment, have clear rights, and not be burdened by medical debt.

To learn more about our recommendations, see these materials:

Health Equity Task Force Letter to Capitol Hill on COVID-19

Over 400 Organizations Call on Congress to Prioritize Families’ Health in Next COVID-19 Relief Package

Responding to COVID-19: Using the CARES Act’s Hospital Fund to Help the Uninsured, Achieve Other Goals (co-authored blog in Health Affairs)

https://familiesusa.org/
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