



**CONSORTIUM FOR CITIZENS
WITH DISABILITIES**

It's Time To Check On Your Health Insurance!

This is an important time to take a close look at your health care needs and options.

**2019 Open Enrollment:
November 1, 2018**
Open enrollment begins

December 15, 2018
Open enrollment ends

January 1, 2019
Coverage begins

If you're uninsured or looking for more affordable health insurance, the "open enrollment" period is the time to visit healthcare.gov or your state's marketplace or health insurance exchange. During "open enrollment" you can review private health insurance options and purchase coverage. People with low and moderate incomes may be able to get financial help to pay for health insurance coverage. This includes help with the cost of premiums and possibly also reduced cost sharing, depending on your income. If you get health insurance through your employer, Medicaid, or Medicare, you are not eligible for this assistance.

For many people, open enrollment is the only time to change insurance plans or buy new coverage during the year. However, you can sign up for insurance outside of open enrollment if you lose your job, get married, divorced, have a baby, or experience another major life event. You may also enroll in Medicaid or the Children's Health Insurance Program (CHIP) year-round.

Do all states have the same open enrollment dates?

Most states have enrollment periods from November 1 to December 15, but some states have longer enrollment periods. States with extended open enrollments periods are:

California: Oct. 15, 2018 - Jan. 15, 2019
Colorado: Nov. 1, 2018 – Jan. 15, 2019
Washington, DC: Nov. 1, 2018 — Jan. 31, 2019
Massachusetts: Nov. 1, 2018 – Jan. 23, 2019

Minnesota: Nov. 1, 2018 – Jan. 13, 2019
New York: Nov. 1, 2018 — Jan. 31, 2019
Rhode Island: Nov. 1, 2018 – Dec. 31, 2018

If you have a disability or a health condition, plan details and any annual changes matter. Be sure to ask before you select a plan:

- Are a broad range of health care providers included in the health plan's provider network?
- Are there enough medical specialists in the network to meet your specific needs?
- Are the medications you need included in the plan's list of covered drugs? Has the cost sharing changed? Are there other requirements like prior authorization?

- Is there adequate access to non-clinical, disability-specific services and supports?
- Does the plan have service limits, such as caps or limits on the number of office visits, the amount of therapy services, or exclusions for medical devices?
- Are mental health services covered to the same extent as other “physical” health benefits?

This year, there will be plans for sale in some states that are NOT required to provide all of the benefits mandated by the Affordable Care Act. These plans may be able to charge you more if you have a pre-existing condition and may not offer adequate coverage for your needs or if you get sick. It is more important than ever to thoroughly review what benefits a plan offers and not only look at plans with low premiums.

I already have health insurance through the Marketplace. Do I need to do something?

- It is important to update your income and household information in the Marketplace to make sure you get all the assistance available to you.
- This is also a good time to check your health insurance coverage and see if it still meets your healthcare needs.
- If a new plan does not cover your providers or services, investigate your right to change plans.
- You should carefully read all health insurance notices and updates.
- If your income has increased, updating your information with the Marketplace will help avoid payment penalties later.

I and/or my family members are uninsured. Can we sign up?

Most individuals can get health insurance coverage regardless of pre-existing health conditions or prior denial of coverage. Just go to healthcare.gov, enter your information, and review insurance options. Each plan should provide information on monthly premiums, deductibles, provider networks, hospitals, and covered medications. Only individuals who live in the United States and are U.S. citizens, nationals, or non-citizens who are lawfully present, and are also not currently incarcerated, may apply. If you were uninsured during the prior year, you may be subject to a state fee for not having coverage.

Where can I go to get help?

Purchasing health insurance can be complicated. If you or your family member needs assistance with understanding the options, healthcare.gov can help. Each state has health insurance “navigators” to help people enroll in health insurance plans. Individual health plan information should be available in late October 2018 on the [website](http://healthcare.gov). If you would like more information on specific topics, the [National Disability Navigator Resource Collaborative](http://www.nationaldisabilitynavigator.org/) (<http://www.nationaldisabilitynavigator.org/>) has a comprehensive set of materials available on disability issues and the Affordable Care Act.

Website: www.healthcare.gov

Phone: 1-800-318-2596 (Available 24/7 with access to 150 languages)

TTY: 1-855-889-4325

In-Person Assistance Resources: localhelp.healthcare.gov