



Affordable Care Act
Health Insurance Marketplace
Outreach and Enrollment Toolkit
for Elected Officials



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Overview of the Health Insurance Marketplace

When the Affordable Care Act was signed into law in 2010, it carried with it a promise of expanding access to quality, affordable health coverage for millions of American families and small businesses.

The law is already making health coverage stronger for the majority of Americans who already have it. More than eight out of ten Americans have already begun to experience the benefits of the Affordable Care Act with better coverage, including free wellness and prevention care like mammograms and cancer screenings. Three million kids who didn't have coverage before now can stay on their parents' plans until age 26. But for the nearly two in ten Americans without health insurance, there will be a new easy way to get affordable coverage.

Beginning October 1st, a new Health Insurance Marketplace will open in every state, giving Americans a whole new way to shop for health insurance.

For the first time in the history of the private insurance market, consumers in every state will be able to go online to one place to check out their coverage options, get accurate information in easy-to-understand language, and make apples-to-apples comparisons of plans before they make their decision.

The Health Insurance Marketplace will offer Americans lower costs on their monthly premiums—making more affordable coverage a new reality for many hard working Americans and their families.

All plans will be required to cover a comprehensive set of benefits, including physician visits, preventive care, hospital stays, and prescriptions. Discrimination based on gender or pre-existing conditions will be banned. And many families and small businesses will qualify for a break on their monthly premiums.

The Marketplace will be available on HealthCare.gov and CuidadoDeSalud.gov starting on October 1st. Right now, families and small business owners can visit these websites to start getting ready for open enrollment. A toll-free call center is also available to help answer questions 24 hours a day, seven days a week.

Whether consumers seek out help through the call center, through the website's live chat feature, or through trained professionals who will be working in their communities, they'll have access to support that is personal, unaffiliated with the insurance industry—and available to help in more than 150 languages.

The U.S. Department of Health and Human Services (HHS) and partners across the country have already taken important steps to start delivering on the promise of expanding access to quality, affordable health coverage for millions of Americans by ramping up pre-enrollment efforts and launching a new set of educational tools that will help Americans learn about their new options and get signed up for coverage.



Early data shows that the Marketplace will give many consumers greater choice. In a majority of states today, for example, a single insurer covers more than half of all individuals enrolled in the private market—but when the Marketplaces open up this fall, consumers will have an average of at least 15 qualified health plans to choose from.

Another study found that by making health insurance more affordable and ending discrimination against pre-existing conditions, the law will enable up to 1.5 million more Americans to go into business for themselves.

The promise of the Affordable Care Act is within our grasp. Over the summer, community health centers and other organizations will receive funding to help consumers navigate the new Marketplace, and leaders from across the country are stepping up to help Americans learn about their new options and get signed up for coverage.

Working together, we are on our way to a healthier America with better health insurance options and better health outcomes for the American people.

Sample Outreach and Enrollment Plan

Open enrollment in the Health Insurance Marketplace begins on October 1st and will run through March 31st. The number of people and small businesses that benefit from the Marketplace will ultimately be determined by each community's efforts to educate people and get them to sign up.

As trusted leaders in your communities, you are essential to the success of Marketplace enrollment efforts. By reaching out now to build coalitions and educate stakeholders, you will lay the groundwork for enrolling people in the Marketplace starting on October 1st.

Many of you are already engaged in conversations about the Affordable Care Act. Over the next few months, elected officials across the country can take these efforts to the next level. We are committed to working together and supporting your efforts, and want to hear what works best in your community.

Ways You Can Get Involved

EDUCATE

1. Contact your HHS Regional Office to stay up to date on important information and announcements. A listing of the HHS Regional Directors is provided as part of this toolkit and available at <http://www.hhs.gov/iea/regional>. Many HHS Regional Offices can provide additional materials and support for outreach efforts.
2. Get the latest news and updates by signing up online at Healthcare.gov and CuidadoDeSalud.gov and feature links to Healthcare.gov and CuidadoDeSalud.gov on your local government website.
3. Refer constituents with questions about the new Marketplace to the 24/7 call center available now at 1-800-318-2596 with trained customer service representatives who can answer questions about the Marketplace in 150 languages.
4. Distribute educational materials available at marketplace.cms.gov (and in the sample materials section) to your constituents:
 - Include Marketplace information in your emails, newsletters, bulletins, and more to ensure your constituents have the most up-to-date information on enrollment.
 - Hang posters in your office and make educational materials available.
 - Bring brochures, fact sheets, and other materials to events in the community, including speaking engagements, parades, field days, fairs, library events, new business openings, etc.
5. Train officials and staff in your office to be ready to assist residents with enrollment, starting October 1.
 - Sign up for Marketplace 101 webinars to learn more at: marketplace.cms.gov/NewsEvents/Webinars/Spring-Summer-2013-Health-Insurance-Marketplace-Training-Schedule.pdf.

ENGAGE

1. Host conversations with community stakeholders to ensure uninsured people in your area are aware of the new Marketplace and know how to sign up for coverage.
 - Community stakeholders you can engage: other state and local elected officials, Chambers of Commerce, small and large business owners, educational institutions, community colleges, local libraries, recreational leagues, religious leaders, civic organizations, grassroots organizations, foundations, etc.
 - For example, Walgreens and CVS Caremark have made national commitments to provide information about Marketplace options in their stores and at health care fairs around the country.
 - You can find materials for these conversations at marketplace.cms.gov.
2. Use Facebook, Twitter, YouTube and other social media to share important information and announcements. You can record and send out a public service announcement about the Marketplace and share stories about constituents that are taking advantage of the Marketplace.
3. Host pre-enrollment information sessions in your community in August and September.
 - After participating in trainings, you can hold information sessions for your constituents using presentation materials provided here: <http://marketplace.cms.gov/training/get-training.html>.

ENROLL

1. Certify members of your office as a Certified Application Counselor (CAC) organization to assist consumers with enrollment.
 - Learn more about becoming a Certified Application Counselor (CAC) organization at: marketplace.cms.gov/help-us/cac.html.
 - Applications are now available for interested organizations to complete at: marketplace.cms.gov/help-us/cac-apply.html
2. Starting in October, provide computer stations at your office that constituents can use to enroll in the new Marketplace. Ask other community leaders to provide computers and space for additional enrollment events and activities.
3. In October, host an enrollment kickoff media event. A kickoff media event allows the press to help spread the word to those who can benefit from the Marketplace.
4. Between October and March, host enrollment sessions for your constituents.
 - There will be people in your community who are trained and certified to help people apply and enroll – Navigators, Certified Application Counselors, and In-Person Assistors. For more information on these assistance programs, please visit <http://www.cms.gov/CCIIO/Resources/Files/Downloads/marketplace-ways-to-help.pdf>. These individuals and organizations can participate in enrollment sessions to provide information and assist consumers with enrollment on site.

Additional Outreach Resources

Where can I find more information?

Consumer Websites: HealthCare.gov / CuidadoDeSalud.gov

Call Center: 1-800-318-2596

Partner/Stakeholder Website: Marketplace.cms.gov

Facebook: <http://www.Facebook.com/HealthCare.gov>

Twitter: [@HealthCareGov](https://twitter.com/HealthCareGov)

Where can I get materials to distribute?

Resources for talking to your community including sample talking points, customizable flyers, brochures, widgets and logos to use in materials and more are available online at <http://marketplace.cms.gov/getofficialresources/get-official-resources.html> and in the sample materials section of this toolkit.

Where can I get information on companies and organizations doing outreach?

Some national organizations that have announced plans for education efforts include:

- Walgreens – www.walgreens.com/topic/reform-insurance/guidelines.jsp
- CVS – www.cvs.com/promo/promoLandingTemplate.jsp?promoLandingId=affordable-care-act
- American Library Association – www.ala.org/tools/affordable-care-act

How can my office/staff learn more about the Marketplace?

You and your staff can find informational videos on marketplace.cms.gov or sign up for one of the upcoming webinars at: <http://marketplace.cms.gov/NewsEvents/Webinars/Spring-Summer-2013-Health-Insurance-Marketplace-Training-Schedule.pdf>.

- Learn more about becoming a Certified Application Counselor (CAC) organization at <http://marketplace.cms.gov/help-us/cac.html>.
- Applications are now available for interested organizations to complete at <http://marketplace.cms.gov/help-us/cac-apply.html>

Where can I find more information about the Affordable Care Act?

For a state-by-state analysis of the immediate benefits of the Affordable Care Act please visit: <http://www.hhs.gov/healthcare/facts/bystate/statebystate.html>.



Sample Materials

There are a number of official resources available on marketplace.cms.gov to help you inform your community about the Marketplace. Included are resources that you can use for public speaking events, to include in newsletters and to use on social media or on local materials. Check out the online resources page for more resources including online widgets and downloadable graphics, posters and brochures. Limited free copies of materials are available to order at <http://productordering.cms.hhs.gov/>.

Sample Materials - Discussion Points

- When the Affordable Care Act was signed into law in 2010, it carried with it a promise of expanding access to quality, affordable health coverage for millions of American families and small businesses.
- We have already taken important steps in our efforts to start delivering on the promise of expanding access to quality, affordable health coverage for millions of Americans as we ramp up enrollment efforts and launch a new set of educational tools that will help Americans learn about their new options and get signed up for coverage.
- Beginning October 1st, a new Marketplace will open in every state, giving Americans a whole new way to shop for health insurance.
- For the first time in the history of the private insurance market, consumers will be able to go to one place to check out their coverage options, get accurate information in easy-to-understand language, and make apples-to-apples comparisons of plans before they make their decision.
- All plans will be required to cover a comprehensive set of benefits, including physician visits, preventive care, hospital stays, and prescriptions. Discrimination based on gender or pre-existing conditions will be banned. And many families and small businesses will qualify for a break on their monthly premiums.
- And only by shopping at the Marketplace will Americans be able to get lower costs on their monthly premiums – making more affordable coverage a new reality for many hard working Americans and their families.
- First, we've launched the new and improved HealthCare.gov, which will be the Marketplace's online home starting in October. For Spanish speaking consumers, CuidadoDeSalud.gov has also been updated in preparation for the Marketplace.

- Right now, families and small business owners can visit HealthCare.gov to start getting ready for open enrollment on October 1st. And over the summer, the site will continue to add new functions that will allow consumers to shop for qualified health plans that fit their budget with less hassle.
- We've also opened a consumer call center that will be open 24 hours a day, seven days a week.
- This toll-free service will help answer questions, and starting October 1st it will provide personalized assistance for callers who are filling out their application or selecting a plan.
- Whether consumers seek out help through the call center, through the website's live chat feature, or through trained professionals who will be working in their communities, they'll have access to support that is personal, unaffiliated with the insurance industry—and available to help in more than 150 languages.
- As we head into summer, we'll kick our enrollment efforts into high gear. We'll be distributing funds to community health centers and other organizations that have signed on to help consumers navigate the new Marketplace. And we'll be working closely with additional partners across the country to help American families and businesses get ready for the fall.
- With the Marketplace taking shape, we're already seeing some early indicators of how Americans could benefit.
- We've heard promising news about rates that will be offered in a number of states, including Vermont, Rhode Island, Washington, Oregon, and California.
- And early data also shows that the Marketplace will give many consumers greater choice. In a majority of states today, for example, a single insurer covers more than half of all individuals enrolled in the private market—but when the Marketplaces open up this fall, consumers will have an average of at least 15 qualified plans to choose from.
- Another study found that by making health insurance more affordable and ending discrimination against pre-existing conditions, the law will enable up to 1.5 million more Americans to go into business for themselves.
- The promise of the Affordable Care Act is within our grasp. We are way to better health insurance options for the American people.



Sample Materials - Drop in article for newsletters, etc.

Are You Ready? The Health Insurance Marketplace is Coming

No doubt you've been starting to hear about the new Health Insurance Marketplace (Marketplace), a key part of the health care law that will be open for business on October 1. But you probably still have questions. Like what is the Marketplace, and can you really get health insurance? Well we've got answers.

The best place for the latest, most accurate, information on the Marketplace is the updated website, HealthCare.gov. At the site, you can learn what it is, who can apply for insurance, how to get insurance, how to lower your costs, and more. If you own a small business, there's information for you, too.

Starting this fall, the Marketplace will help you find health insurance that fits your budget and meets your needs, with less hassle. No matter where you live, you may buy insurance from private health plans that cover a comprehensive set of benefits, including doctor visits, hospital stays, preventive care, and prescriptions. And plans in the Marketplace must treat you fairly; they can't deny you coverage because of a pre-existing condition.

With a single application, you can also see if you qualify for Medicaid or the Children's Health Insurance Program, or savings you can use right away to lower your health insurance premiums.

Enrollment Starts October 1, 2013 Visit HealthCare.gov to Get Ready

HealthCare.gov is your best source of information about the Marketplace. You can read information that pertains to you, print checklists, and watch videos to help you get ready to apply and enroll.

You and your family can explore every qualified health plan in your area, and fill out an application when you're ready. You'll be able to take control with better information, including details about benefits and prices presented in clear language you can understand, so you'll know what your premiums, deductibles, and other costs will be before you make a choice.

Once you've decided on a plan, you don't need to go anywhere else. Starting in October, you'll be able to enroll in the Marketplace directly for coverage that begins as soon as January 1, 2014.

Want help or need more information?

As you explore your options on the Marketplace, you may want to get some help. You can participate in an online web chat on the website; or call a toll free number, **1-800-318-2596**, to speak with a trained customer service representative; and there will be people in your local communities who can give you personal help with your choices.

Visit HealthCare.gov now to get all the information you need about the Marketplace. Come back October 1, fill out an application and enroll. It's that easy.

Sample Materials - Marketplace Multipurpose Messages

(Short multi-purpose messages used for social media posts, receipt messages, texts, etc.)

SUMMER (June – Sept)

The Health Insurance Marketplace will let you search your health coverage options in 1 place. Better options, better health - [HealthCare.gov](https://www.healthcare.gov).

In the Health Insurance Marketplace, you may be able to get lower costs on your monthly premium or out-of-pocket costs - [HealthCare.gov](https://www.healthcare.gov).

Need health coverage? The Health Insurance Marketplace will give you a clear picture of what you'll pay and what you'll get before you make a choice. [HealthCare.gov](https://www.healthcare.gov) to learn more.

OPEN ENROLLMENT (Oct-March)

Now there's an easier way to search for health coverage, with all your options in one place. Better options, better health - [HealthCare.gov](https://www.healthcare.gov).

Find out if you're eligible for lower costs on your monthly premium or out-of-pocket costs-The Health Insurance Marketplace @ [HealthCare.gov](https://www.healthcare.gov)

Need health coverage? Get a clear picture of what you'll pay and what you'll get before you make a choice. The Health Insurance Marketplace at [HealthCare.gov](https://www.healthcare.gov).

Community Resources

Starting October 1, 2013, consumers in all states will be able to apply for new affordable health coverage options through the Health Insurance Marketplace (Marketplace) for coverage beginning as soon as January 1, 2014. Some states are setting up a State-based Marketplace, other states will work with the federal government in a State Partnership Marketplace, and the remaining states will have a Federally-facilitated Marketplace. No matter what state they live in, consumers will be able to get live in-person help as they go through the process of applying for and choosing new coverage options in the Marketplace.

COMMUNITY HEALTH CENTERS

In July 2013, Health and Human Services Secretary Kathleen Sebelius announced \$150 million in grant awards to **1,159 health centers** across the nation to enroll uninsured Americans in new health coverage options made available by the Affordable Care Act.

Health centers in all 50 states received these awards. The purpose of this funding is to help consumers understand their coverage options through the new Marketplace, Medicaid and the Children's Health Insurance Program; determine their eligibility and what financial help they can get; and enroll in new affordable health coverage options beginning October 1.

For a list of health centers receiving this funding in your state please visit:
www.hrsa.gov/about/news/2013tables/outreachandenrollment/.

NAVIGATORS

Each Marketplace must establish a grant program to fund entities or individuals called "Navigators" that will provide consumer assistance. Navigators will help consumers understand new health insurance options available through the Marketplace and will help consumers select a health plan.

Navigators will have a vital role in helping consumers prepare electronic and paper applications to establish eligibility and enroll in coverage through the Marketplace. This includes steps to help consumers find out if they qualify for insurance affordability programs (including a premium tax credit, cost sharing reductions, Medicaid and the Children's Health Insurance Program) and, if eligible, to get enrolled. Navigators will also provide outreach and education to consumers to raise awareness about the Marketplace, and will refer consumers to ombudsmen and other consumer assistance programs when necessary.

Those who are approved to be Navigators in Federally Facilitated and State Partnership Marketplaces will be notified of their grant approval on or around **August 15**.

In a Federally-facilitated or State Partnership Marketplace, you will be able to locate Navigators and other assisters by calling the National Health Insurance Marketplace Call Center or on HealthCare.gov under “Find Someone Local (in October).”

A State-based Marketplace will have its own in-person assistance training requirements. You will have to check the state’s call center or website (which will be linked from HealthCare.gov).

To learn more about the Marketplace in your state, please visit: <https://www.healthcare.gov/what-is-the-marketplace-in-my-state/> or check out the chart below:

Federally Facilitated Marketplace	Conditionally Approved State Partnership Marketplace	Conditionally Approved State Based Marketplace
Alabama	Arkansas	California
Alaska	Delaware	Colorado
Arizona	Illinois	Connecticut
Florida	Iowa	DC
Georgia	Michigan	Hawaii
Indiana	New Hampshire	Idaho
Kansas	West Virginia	Kentucky
Louisiana		Maryland
Maine		Massachusetts
Mississippi		Minnesota
Missouri		Nevada
Montana		New Mexico
Nebraska		New York
New Jersey		Oregon
North Carolina		Rhode Island
North Dakota		Utah*
Ohio		Vermont
Oklahoma		Washington
Pennsylvania		
South Carolina		
South Dakota		
Tennessee		
Texas		
Virginia		
Wisconsin		
Wyoming		

*Utah is operating a Small Business Health Options Program (SHOP), while the Marketplace will operate as a Federally-facilitated Marketplace (FFM).

Frequently Asked Questions

Starting this fall, consumers will be able to visit HealthCare.gov to get all the information they need about the Health Insurance Marketplace (Marketplace). Whether you're uninsured, or just want to explore new options, the Marketplace will give you more selection and control over your health insurance choices.

Health Insurance Marketplace – General Information for Consumers

Q: WHAT IS THE HEALTH INSURANCE MARKETPLACE?

A: The Marketplace is a competitive marketplace where people and small businesses can shop for and buy private health insurance. With one application, you can find out if you qualify for health plans in the marketplace, and other programs like Medicaid and the Children's Health Insurance Program (CHIP), tax credits, and cost-sharing reductions.

Q: WHAT IS THE DIFFERENCE BETWEEN THE MARKETPLACE AND THE TRADITIONAL INSURANCE MARKET?

A: The Marketplace will improve today's broken insurance markets for consumers and small businesses. It will achieve this by:

- **More Choice.** You will have a choice of health plans to fit your needs.
- **More Competition.** The Marketplace will make it easier for you to compare plans on the basis of price, quality and benefits. This gives insurance companies incentives to offer better products at lower prices than their competitors.
- **More Clout.** The Marketplace will give 25 million individuals and small businesses the same purchasing power as big businesses by bringing people and businesses together, lowering costs by spreading the cost of insurance across a larger group of people and allowing insurance companies to reduce prices.

Q: WHAT DOES THE MARKETPLACE MEAN FOR CONSUMERS?

A: The Marketplace is a single place where consumers can apply for and enroll in health insurance coverage that's right for them and their families. Consumers can compare health plans with similar coverage levels and learn if they qualify for help paying for health care costs through tax credits and cost-sharing reductions. The Marketplace makes it easier for consumers to keep their coverage, even if income and employment changes make them ineligible for other programs like employer-sponsored insurance, private insurance tax credits, Medicaid, or the Children's Health Insurance Program (CHIP).

Q: WHEN WILL I KNOW MY HEALTH INSURANCE OPTIONS?

A: Starting October 1st, consumers will be able to shop for plans on HealthCare.gov, enroll with in-person assisters, or call a toll-free call center.

Q: I’VE HEARD MY HEALTH INSURANCE PREMIUMS ARE GOING TO GO UP.

A: Critics of the law are arguing that premiums will rise by selectively looking only at one part of the law while ignoring critical provisions that lower costs and drive premiums downward. These claims do not take into consideration, for example, the tax credits and competition that will make private health insurance even more affordable for millions of Americans.

Q: WHAT IF I CAN’T AFFORD INSURANCE?

A: When you fill out a Marketplace health insurance application, you’ll find out if you can get lower costs on monthly premiums or out-of-pocket costs, or get free or low-cost coverage. Most people who apply will qualify for lower costs of some kind. You can save money in the Marketplace in three ways, depending on your income and family size:

1. You may be able to [lower costs on your monthly premiums](#) when you enroll in a private health insurance plan.
2. You may qualify for lower [out-of-pocket costs](#) for [copayments](#), [coinsurance](#), and [deductibles](#).
3. You or your child may get free or low-cost coverage through [Medicaid](#) or the [Children’s Health Insurance Program \(CHIP\)](#).

Q: WHAT IF I HAVE A PRE-EXISTING CONDITION?

A: Starting in 2014, being sick won’t keep you from getting health coverage. An insurance company can’t turn you down or charge you more because of your condition. You can apply for Marketplace insurance when open enrollment starts on October 1st, and coverage starts as soon as January 1, 2014.

Q: I’M YOUNG AND HEALTHY. CAN I BUY A “CATASTROPHIC” PLAN?

A: Yes; people under 30 and some people with limited incomes may buy a “catastrophic” health plan. A catastrophic plan generally requires you to pay all of your medical costs up to a certain amount, usually several thousand dollars. Costs for essential health benefits over that are generally paid by the insurance company. These policies usually have lower premiums than a comprehensive plan, but cover you only if you need a lot of care. In the Marketplace, catastrophic policies cover three primary care visits per year at no cost, and also cover free preventive benefits. If you have a catastrophic plan in the Marketplace, you can’t get lower costs on your monthly premiums or on out-of-pocket costs. When you fill out a Marketplace application, you’ll see catastrophic plans listed as options if you qualify for them.

Q: CAN I KEEP MY OWN DOCTOR?

A: Depending on the plan you choose in the Marketplace, you may be able to keep your current doctor. When comparing plans in the Marketplace, you will see a link to a list of providers in each plan’s network. If staying with your current doctors is important to you, check to see if they are included before choosing a plan.

Q: WHAT DO AMERICAN INDIANS AND ALASKA NATIVES NEED TO KNOW ABOUT THE MARKETPLACE?

A: Members of a federally recognized tribe have certain protections in the Marketplace starting in 2014.

- You don't have to pay a fee if you don't have health coverage.
- You more easily qualify for lower out-of-pocket costs for deductibles, copayments, and coinsurance.
- You get monthly special enrollment periods allowing you to get insurance outside the yearly open enrollment period
- You have special cost and eligibility rules for Medicaid and the Children's Health Insurance Program (CHIP).

For more information, visit healthcare.gov/tribal.

Applying and Enrolling in Coverage

Q: HOW DO I APPLY FOR COVERAGE AND ENROLL IN A HEALTH PLAN THROUGH THE MARKETPLACE?

A: Starting October 1, 2013, you will be able to file a Marketplace application online, by phone (through a toll-free call center), by mail, or in person (with accommodations for people with disabilities). Coverage starts as soon as January 1, 2014. The Marketplace will automatically tell you if you qualify for discounts or qualify to participate in state programs based on your income. Then you can choose the health plan that's right for you through the online plan comparison tool.

Q: HOW DO I USE WWW.HEALTHCARE.GOV TO APPLY FOR MARKETPLACE COVERAGE?

A: You can enroll in health coverage in just four steps using www.HealthCare.gov.

1. **Set up an account.** You'll provide some basic information to get started, like your name, address, and e-mail address.
2. **Fill out the online application.** You'll provide information about you and your family, like household income, household size, current health coverage information, and more. This will help the Marketplace find options that meet your needs.
3. **Compare your options.** You'll be able to see all the options you qualify for, including private insurance plans and free and low-cost coverage through [Medicaid](#) and the [Children's Health Insurance Program \(CHIP\)](#). The Marketplace will tell you whether you qualify for lower costs on your monthly premiums and out-of-pocket costs on deductibles, copayments, and coinsurance. You'll see details on costs and benefits before you choose a plan.
4. **Enroll.** After you choose a plan, you can enroll online and decide how you pay your premiums to your insurance company. If you or a member of your family qualifies for Medicaid or CHIP, a representative will contact you to enroll.

Q: WHAT IF I DON'T HAVE ACCESS TO A COMPUTER SO THAT I CAN VISIT HEALTHCARE.GOV?

A: There will be people in local communities who can give you personal help with your choices. You can also call a toll-free number, **1-800-318-2596**, and talk to a trained customer service representative in 150 languages about the Marketplace.

Q: HOW DO I GET HELP ENROLLING IN THE MARKETPLACE?

A: The Marketplace will offer several kinds of assistance to help you apply for coverage and choose the plan that's right for you, including online questions and answers, online chat, a toll-free call center, as well as people in your community who are trained and certified to help you apply and enroll (starting October 1st).

Coverage for Employees, Self-Employers, and Small Businesses

Q: I HAVE INSURANCE THROUGH MY EMPLOYER. WHAT DOES THE HEALTH CARE LAW MEAN FOR ME?

A: If you have health insurance through your employer, nothing will change. However, if you're uninsured, purchase insurance on your own, or want to explore new options, the Marketplace will make it easier for you to shop for plans and see if you are eligible for savings that lower your monthly premiums.

Q: WHAT IF I'M LOSING JOB-BASED INSURANCE?

A: If you lose your job and with it your job-based health insurance coverage, you may buy an individual plan through the Marketplace. You may also have the option of keeping your health insurance for a limited time through a program called COBRA continuation coverage. [COBRA](#) is a federal law that may let you pay to keep you and your family on your employee health insurance for a limited time (usually 18 months) after your employment ends or you otherwise lose coverage.

Q: WHAT IF I'M SELF-EMPLOYED?

A: If you're self-employed with no employees, you're not considered an employer. You can use the individual Marketplace to find coverage that meets your needs. You can compare important features of several plans side-by-side, all of them offering a full package of essential health benefits. You can see what your [premium](#), [deductibles](#), and [out-of-pocket costs](#) will be before you decide to enroll. If you currently have individual insurance—a plan you bought yourself, not the kind you get through an employer—you may be able to [change to a Marketplace plan](#).

Q: WHAT DO HEALTH INSURANCE MARKETPLACES MEAN FOR SMALL BUSINESSES?

A: Starting in 2014, a [Small Business Health Options Program \(SHOP\)](#) marketplace will be available in each state. SHOP will give small employers and their employees some of the advantages large employers have today, including choices among high quality health plans to



meet every budget. Employers who qualify for SHOP must have fewer than 100 employees (states may limit eligibility to employers with 50 or fewer employees for the first 2 years). Employers must also have an office within the service area of the SHOP, and prove that they're offering full-time employees SHOP coverage.

Q: DO I HAVE TO INSURE MY EMPLOYEES?

A: No employer has to offer coverage. Some large businesses that don't offer coverage meeting certain standards may have to make a shared responsibility payment in 2015.

- If you have **fewer than 50 full-time equivalent (FTE) employees**, you are **not** subject to the [Employer Shared Responsibility](#) parts of the law. You **may** use SHOP to offer coverage for your employees.
- If you have **50 or more FTEs**, you may have to make an [Employer Shared Responsibility Payment](#) if at least 1 of your full-time employees gets lower costs on their monthly premiums when buying insurance in the Marketplace.

Q: WILL MY BUSINESS GET TAX CREDITS?

A: You may qualify for employer health care tax credits if you have fewer than 25 full-time equivalent (FTE) employees making an average of about \$50,000 a year or less. To qualify for the Small Business Health Care Tax Credit, you must pay at least 50% of your full-time employee's premium costs. The credit is available only if you get coverage through the SHOP Marketplace. You don't have to wait until open enrollment to find out if you qualify for the Small Business Health Care Tax Credit. You can find out now by visiting IRS.gov. For more information and resources, visit www.HealthCare.gov.



US Department of Health and Human Services Regional Directors Contact Information

<http://www.hhs.gov/iea/regional/index.html>

Region 1 - Boston

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont

Regional Director: Christie Hager

R1-ORD@hhs.gov

John F. Kennedy Federal Building
Government Center - Room 2100
Boston, MA 02203
Office: (617) 565-1500
Fax: (617) 565-1491

Region 2 – New York City

New Jersey, New York, Puerto Rico, US Virgin Islands

Regional Director: Jaime Torres

Jaime.Torres@HHS.gov

Jacob K. Javits Federal Building
26 Federal Plaza - Room 3835
New York, NY 10278
Office: (212) 264-4600
Fax: (212) 264-3620

Region 3 – Philadelphia

Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia

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Region 4 - Atlanta

Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee

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Region 5 – Chicago

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Region 6 – Dallas

Arkansas, Louisiana, New Mexico, Oklahoma, Texas

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Region 7 – Kansas City

Iowa, Kansas, Missouri, Nebraska

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Region 8 - Denver

Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming

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Region 9 – San Francisco

Arizona, California, Hawaii, Nevada, American Samoa, Commonwealth of the Northern Mariana Islands, Federated States of Micronesia, Guam, Marshall Islands, Republic of Palau

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Region 10 – Seattle

Alaska, Idaho, Oregon, Washington

Regional Director: Susan Johnson

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U.S. Department of Health and Human Services (HHS) Regional Offices

The HHS Office of Intergovernmental and External Affairs hosts ten Regional Offices that directly serve state and local organizations. Each Regional Office is led by a President-appointed Regional Director. The Secretary's Regional Directors ensure the Department maintains close contact with state, local and tribal partners and addresses the needs of communities and individuals served through HHS programs and policies.

