New York State Attorney General Letitia James

Dear New Yorkers:

November 1, 2019 is the opening day for the New York State of Health Marketplace – the only official health insurance marketplace for New York, established under the Patient Protection and Affordable Care Act ("ACA"). Take advantage of this opportunity to explore all available options for health insurance coverage, on and off the Marketplace, before enrolling or re-enrolling in a health plan.



Keep in mind that even if you have been happy with your coverage, plan terms can change, and it is best to ensure that your health plan is not changing in ways that will impact you – including which providers are participating, your co-pay and co-insurance obligations, and your monthly premiums.

While New Yorkers only have a limited timeframe to enroll in most health plans, enrollment in Medicaid, Child Health Plus, and the Essential Plan is open year-round. The Essential Plan is a great option for lower-income individuals who do not qualify for Medicaid or Child Health Plus.

This brochure lays out some factors to consider when evaluating health plans, as well as some helpful hints to ensure you enroll in a plan that meets your needs.

Sincerely,





New York State Attorney General The State Capitol Albany, New York 12224 1-800-771-7755 www.ag.ny.gov

Key Dates for Marketplace Open Enrollment for 2020

November 1, 2019: Open enrollment begins for the New York State of Health Marketplace.

December 15, 2019: Deadline to enroll through the Marketplace for coverage starting on January 1, 2020.

January 31, 2020: 2020 Open Enrollment ends. Enrollments or changes between January 16 and January 31 take effect March 1, 2020.

Additional Tips

- ☐ Certain events may qualify you for a Special Enrollment Period. For example, changes like losing a work related plan or gaining a new member of the family, could allow you to enroll in a health plan outside of the annual Open Enrollment period.
- ☐ Eligible individuals can enroll in Medicaid, Child Health Plus, or the Essential Plan at any time. The Essential Plan offers low-cost coverage for lower-income people who do not qualify for Medicaid or Child Health Plus.
- ☐ Retain copies of all enrollment confirmations and premium payments.
- ☐ If you enroll by December 15, 2019, but do not receive proof of insurance coverage, such as a member identification card, by January 1, 2020, contact your plan to confirm coverage.

Resources

New York State of Health

The only official health plan Marketplace for New York State https://nystateofhealth.ny.gov

1-855-355-5777

Office of the Attorney General

www.ag.ny.gov Health Care Bureau 800-428-9071

Shopping for Health Insurance

Helpful Tips for Open Enrollment

2020



NEW YORK STATE OFFICE

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ATTORNEY GENERAL

Health Care Bureau

SHOPPING FOR HEALTH INSURANCE

Enroll In, Keep or Change Your Plan

Each November, New York State of Health Marketplace opens up for new enrollments and changes in current plans.

If you were already enrolled in a health plan in 2019, you will still need to review your plan, update information and either re-enroll or change your plan. Be sure to update your personal information, even if you plan to keep your existing plan. If you are eligible for a premium subsidy, a change in income or household could affect how much you save on the plan and whether you will owe additional money when you file your tax return.

Identify Your Health Needs

First, consider what benefits will be necessary for you and your family in the upcoming year. Some items may include:

	Prescri	ption	drugs;
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☐ Physical therapy;

Seeing out-of-network providers;

☐ Mental or behavioral health services;

☐ Maternity care and childbirth;

☐ Inpatient or outpatient surgery.

Budget

Consider how much of your income can be allocated to monthly health insurance premium payments.

☐ If you are healthy and have a limited budget, you may want to consider a plan that has lower monthly premiums but higher deductibles and/or co-payment and co-insurance. If you have a chronic illness, it may be worth it to pay higher premiums to cover more of your health needs.

Your monthly premium payments will be reduced if you are eligible for a premium tax credit (commonly called a subsidy) for your health coverage through the New York State of Health Marketplace. If you qualify, you must enroll in a plan directly through the Marketplace to use the subsidy.

Compare Plans

Once you identify your health needs and your budget, evaluate how the different plans available during open enrollment meet those needs.

Don't automatically re-enroll in your plan. Even if you were happy with the coverage, your needs or the plan's coverage may have changed – including the premiums and participating providers.

When evaluating plans, consider:

- ☐ The monthly premium;
- ☐ The deductible you will have to meet before the plan contributes toward the cost of care;
- ☐ Co-payments and co-insurance for benefits you expect to use, including for medications;
- The prescription drug "formulary" (the list of drugs covered by your plan) and mail-order requirements;
- ☐ Any limits on benefits you may need;
- ☐ Whether your providers participate in the plan's doctor and hospital network.

Be Sure Your Providers Are In Network Before Enrolling

If there are particular health care facilities, doctors, or other providers you want to see during the year, be sure they participate in the plan you are considering.

☐ CONFIRM WITH THE PLAN:

- Check the list of providers participating in the plans you are considering (list is often available online).
- Next, if your providers are listed, call the insurance company to confirm that the providers participate.

NOTE: Make sure you specify the name of the plan(s) you are interested in – health insurance companies often offer many different plans that may have different participating provider networks.

☐ CHECK WITH YOUR PROVIDER:

Even if the insurance company confirms the provider's participation, call your providers so they can confirm as well.

□ DOCUMENT EVERYTHING:

Save documentation from the plan showing that the provider participates, and take detailed notes of all conversations with the plan and providers.

NOTE on "In Network": When a health care provider "participates" in your health insurance "network," it agrees to accept the insurance company's payment, along with your co-pay. If the provider says it "accepts" your insurance, it may mean it will interact with the insurance company, but you may be responsible for the difference (which may be substantial) between what the provider charges and the insurance company pays.