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## The Affordable Care Act: Health Insurance Exchanges, Additional Information

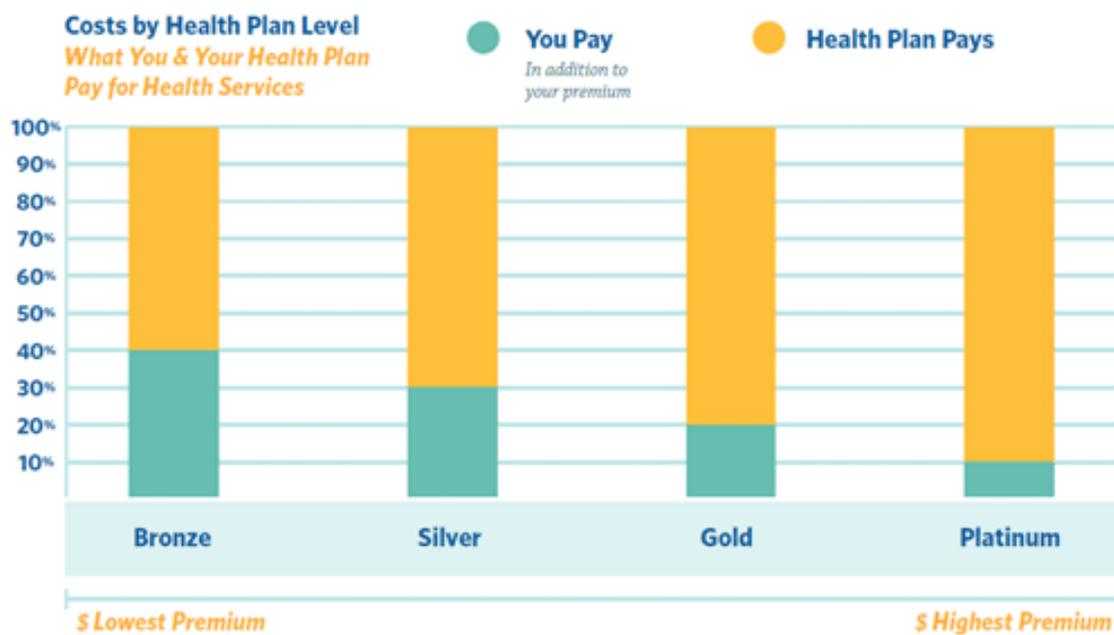
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For those of you who already have insurance, there are few changes under the ACA that will affect you, especially if you receive coverage from your employer. If you buy insurance for yourself or your family, however there are a few, important rules that could improve the quality of the health insurance you already have or that you buy in the Marketplace. These include:

- **New Protections** – Health Insurance companies can no longer charge higher premiums because of your gender or health status. Beginning in 2014, health plans can no longer have an annual or lifetime limits (maximum amount of money a health insurance plan will pay for covered benefits in a year or lifetime, respectively). Health insurance also cannot refuse or stop coverage if you get sick, including pre-existing conditions.
- **New Options** – In the Missouri Health Insurance Marketplace, you can compare and buy health insurance plans. The exchange is designed to help you find the best quality, most affordable plan for you and your family through the [website](#), in person or on the phone (1-800-318-2596)
- **New Benefits** – New health insurance plans for individuals and small businesses must cover essential health benefits, which include: ambulatory patient services (doctor's office visits), emergency services, hospitalizations, maternity and newborn care, mental health and substance use disorder services, prescription drugs, rehabilitative and habilitative services and devices (physical therapy and walkers), laboratory services (blood tests), preventive care and chronic disease management and pediatric services (vision and dental care for kids). New health insurance plans must also cover recommended preventive care (screenings, check-ups and counseling) with no cost sharing (deductibles, coinsurance and co-pays).

Insurance Plans that will be available through the [Missouri Health Insurance Marketplace](#) are broken down into four levels; Bronze, Silver, Gold and Platinum. The levels are based on how much your share costs will be and how much the insurance company will pay for covered care. All of the Missouri Marketplace plans will cover the same set of essential health benefits (see

above for New Benefits). The covered health services included, like doctor's visits and prescription drugs, will determine the monthly or yearly premiums (your cost for health insurance) that you will pay. If you are receiving employer-based coverage, you will only pay the amount that is not covered by your company.



For young adults up to age 30 and other people who cannot get affordable coverage, catastrophic coverage will be available in the marketplace. This plan acts as a safety net if you have unexpected health needs, such as a serious car accident. Generally speaking, this kind of plan will have a low monthly premium and a high yearly deductible. Under this plan, you will be covered for three primary care visits a year before the deductible is met. You must pay the deductible before the plan will pay for covered benefits.

There are a few other options available if you cannot afford health insurance. Premium tax credits, which lower the amount you pay for your health insurance premiums and cost-sharing reductions, which lower how much you must spend out-of-pocket for covered health services are the two main options. If you do not qualify for either of these options, you may qualify for Medicaid, which is a public health insurance program for people with very low incomes. For people with kids, you may qualify for the Children's Health Insurance Program (CHIP) which is a public health insurance program for children with family income above the Medicaid limits. If any of these scenarios fit your current situation, the Missouri Marketplace will notify you after providing the necessary information and direct you to the right place to get that coverage.

### References

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