

Understanding health insurance & plan choices in the Marketplace

Having health coverage gives you access to preventive care and provides a safety net when unexpected medical emergencies happen. The Missouri Health Insurance Marketplace (healthcare.gov) is a website where you can compare plans, find options to lower your costs, and buy health insurance. You can use the Marketplace if you don't have access to affordable coverage through work.

What is health insurance?

Health insurance helps you pay for medical care and can protect you from high health care costs, like emergency room visits or hospital stays. There are important things to look at when buying health insurance:

- The health services the plan covers
- The doctors and services included in the provider network
- How much you'll pay for the plan – monthly premiums
- How much you'll pay for things like doctor visits or prescription medicine – cost-sharing

What are my plan choices in the Marketplace?

Insurance plans in the Missouri Health Insurance Marketplace fall into four categories based on how the costs of care are shared between you and the insurance company. All health plans in the Marketplace will cover the same 10 essential health benefits, including yearly doctor visits, trips to the emergency room, and prescription medicines. The four plan categories are: Bronze, Silver, Gold, and Platinum.

Some health plans may cover more health services. It's important to know that insurance companies may limit how much they'll pay for these "nonessential benefits." For example, your plan could limit how much it will pay for your dental care each year or over your lifetime, because dental care for adults is not considered an essential health benefit.

It's important to know that some health plans outside the Marketplace may not cover essential health benefits and may have other restrictions. These health insurance plans may include association health plans and short-term, limited-duration plans.

What will I have to pay for health insurance?

Health insurance helps pay for the cost of medical care by lowering the amount you pay when you have medical needs. The amount you pay depends on your specific health insurance plan. Most health plans include these costs:

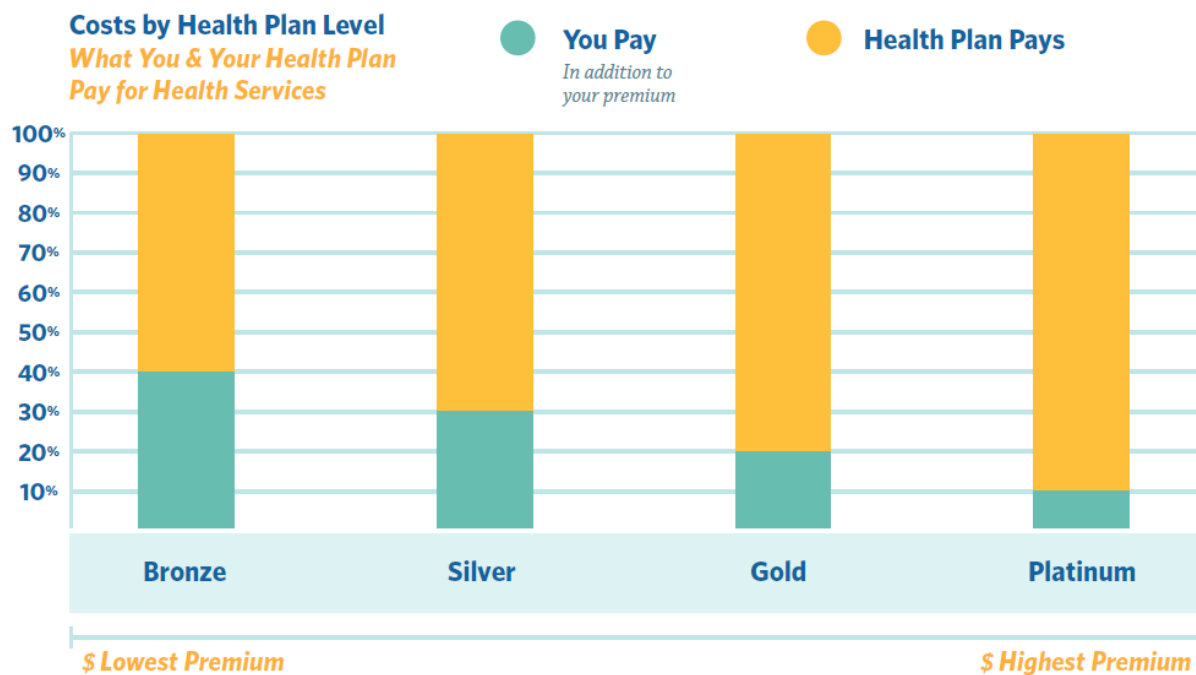
- **Premium** – The cost you pay for your health insurance plan, usually paid every month. You pay your premium even if you don't get medical care that month.
- **Deductible** – The amount you must pay out of your own pocket for your covered health care services each year – for example, \$1,000. Once you reach your deductible, your insurance plan will begin sharing the cost with you (see coinsurance). For example, if your health insurance plan has a \$1,000 deductible, you must pay \$1,000 for medical care before your insurance will start paying. A deductible may not apply to all health services, such as preventive care.



- **Co-payment** – A co-payment, also called a co-pay, is a fixed amount you may pay at the time you receive a health care service. For example, you may pay \$25 every time you visit your doctor.
- **Coinsurance** – Your share (percentage) of the cost for health care services after you have paid your deductible each year. Once you reach your deductible, the insurance plan will start sharing the cost of health care with you. For example, if you go for a doctor visit that costs \$100, your share may be \$20 and your insurance plan’s share may be the remaining \$8. The coinsurance percentage depends on your specific insurance plan.

How does each plan share costs between the insurance company and me?

Each health plan may have different costs, even if they are in the same category. When you go to the Marketplace, you’ll see the available plans and costs in your area. In general, the more you pay each month for your premium, the less you’ll pay for health care services, such as copayments, deductibles, and coinsurance.



Have questions?



Find free, in-person help

Find free in-person help from trained assisters near you. Visit covermissouri.org or call **1-800-466-3213** to set up an appointment to learn more or enroll.



Contact the Marketplace

The Marketplace Call Center is open 24 hours a day, 7 days a week. Call **1-800-318-2596** (TTY **1-855-889-4325**). You can also have a live online chat at healthcare.gov.



Para El Español

Encuentre ayuda gratuita de personas capacitadas cerca de usted llamando **1-855-Cuidado** (**1-855-284-3236**) o visitando cuidadodesalud.gov.



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