

Frequently Asked Questions about the Affordable Care Act

Who is required to have insurance?

Starting in 2014, all US citizens ages 0-64 are required to have insurance unless an exemption is granted. All legal non-citizens must also secure a policy. Individuals who are incarcerated are not eligible to receive tax credits or cost sharing discounts on the Marketplace.

What if I don't want health insurance?

If you are eligible, you may be able to obtain an exemption from coverage. However, individuals without insurance coverage, who do not have an approved exemption, will be subject to pay a fee. For 2014 this amount is the greater of 1% of taxable income or \$95 per person and \$47.50 per child (up to \$285 per family). For lack of coverage in 2015, the penalty is the greater of 2% of household income or \$325 per adult/\$162.50 per child. This amount will significantly increase for 2016 as well!

If medical attention is needed, there may be opportunities to seek health care through community health agencies in your area. They can provide free or low-cost care to the uninsured, low-income or those living in areas where little access to primary health care is available. Local health departments, Planned Parenthoods and some hospitals also have programs to provide health services to the uninsured.

What if my income changes throughout the year?

If you have secured a policy on the Marketplace, and are taking advantage of tax credits, you must update your Marketplace account to reflect this change. Your tax credits are based on anticipated income. For example, if you start making more during the year than you anticipated, your tax credit may actually be lower than what you are receiving. This could lead to you owing money in your taxes when you are filing in early 2015. Similarly, if your income decreases drastically, you may be eligible for more credit.

Can I get insurance for my children?

Absolutely! In addition to being able to purchase a policy for them on the Marketplace (with or without you), your application will automatically be reviewed for eligibility for Medicaid and CHIP (NC Health Choice). Parents of children under age 19 can apply at anytime for Medicaid or CHIP. Children up to age 26 can be included on their parent's policy. Enrollment for Medicaid and CHIP is year-round.

Does everyone in my family have to be on the same policy?

No. Some families may want to include all members of the family on one Marketplace application but want to enroll individuals on separate plans. For example, family members may have doctors in different provider networks, requiring separate plans; or one family member's expensive chronic health condition might require a more costly plan than the other healthier members of the

family. If a household has more than one plan, their tax-credits are assigned to each plan by the Marketplace.

What if the insurance is still too expensive for me?

After taking into account any tax credits and cost sharing discounts, if you feel your monthly premium is still too high, you have two options: you can choose to file an appeal if you feel you should qualify for more credits, OR you can apply for an exemption if the cheapest premium for the year would be more than 8% of your income.

Can I apply for insurance before the next open enrollment period that begins November 15?

To purchase insurance after Open Enrollment has ended, you must qualify for a Special Enrollment Period caused by a qualifying life event such as marriage, birth of a child, or job loss. If no qualifying life event has occurred, you must wait until the next Open Enrollment period begins.

Where can I go for help in my community?

There is a "Find Local Help" link on the home page of www.healthcare.gov. This link will allow you to search for local agencies with application assisters. You can also visit www.ncgetcovered.org, which is a statewide resource for reliable health insurance information. They also allow you to schedule appointments for enrollment assistance. Finally, if you do not have access to a computer, you can also call 1-855-733-3711 to set up an appointment with a Navigator in your area.

I filled out an application and it said my child is eligible for Medicaid or Health Choice. Now what do I do?

The Marketplace will be sending your information over to your local Social Services office to confirm eligibility. A representative from that office should contact you once the application has been reviewed. If you would like to check on the status of that review, you should call your local Social Services office. Response time varies due to volume. Your local office MAY ask you to come in and fill out an application.

Do all doctors take Obamacare insurance?

The federal government's 'Obamacare' does not provide your health insurance coverage. The insurance company listed on your health insurance card supplies your insurance. Not all providers accept every type of health insurance. Therefore, it is a good idea to contact the provider's office to confirm that they accept your type of health coverage before scheduling any appointments.