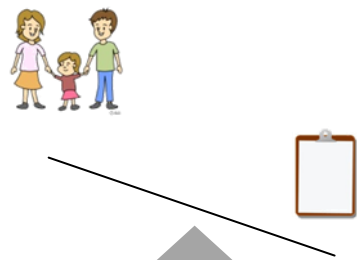


Family Example

Premium (for the Drouin family of three)	\$4,200/year, \$350/month
Deductible	\$5,000
Co-Insurance	20%
Out of Pocket Limit	\$9,000

*Numbers are examples and not representative of any one plan in the Marketplace. They also do not reflect premium tax credits or cost sharing options available for those who qualify.

The Drouins pay their monthly premium for coverage. They pay the first \$5,000 in medical costs before their plan starts paying. Every family members' medical expenses are included in the deductible.

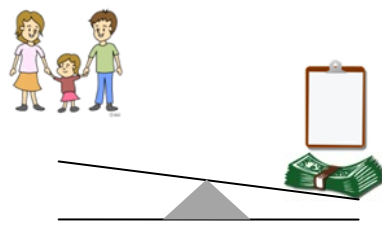


The Drouins pay **100%** Their plan pays **0%**

The Drouins plan does not pay any of the costs except for preventative care services.

Office Visit Costs	\$150
Drouins Pay	\$150
Plan Pays	\$0

The Drouins reach their \$5,000 deductible and their co-insurance is 20% so their insurance pays 80% of their costs.

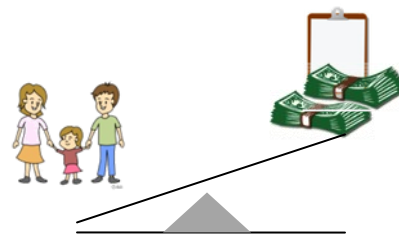


The Drouins pay **20%** Their plan pays **80%**

The Drouins paid \$5,000 in doctor visits, specialists and prescription drugs.

Office Visit Costs	\$100
Drouins Pay (20% of \$100)	\$20
Plan Pays (80% of \$100)	\$80

The Drouins reach their \$9,000 out-of-pocket limit. They paid \$9,000 out-of-pocket on doctor visits, specialists, prescription drugs and their deductible.



The Drouins pay **0%** Their plan pays **100%**

The Drouins plan now covers the rest of their medical expenses for the year. They must still pay their monthly premium.

Office Visit Costs	\$200
Drouins Pay	\$0
Plan Pays	\$200

My Health. My Care.

UNDERSTANDING HEALTH INSURANCE

Health Insurance helps you pay for medical costs. It is an agreement you have with an insurance company to pay some or all of the costs for your healthcare in exchange for a premium, or monthly fee. Health insurance allows you to stay healthy and avoid large unexpected medical expenses.



WHERE CAN I GET HEALTH INSURANCE?

Through your employer if they offer it, through the Health Insurance Marketplace (healthcare.gov), through a private insurance company, directly from the government (eg. Medicaid, Medicare, CHIP, NHHPP)

** Eligibility requirements for all forms of insurance vary.

HOW DO I PAY FOR HEALTH INSURANCE?

Some employers will pay for their employee's health insurance or deduct money from their paychecks for their premiums. Other individuals may purchase health insurance through the new Health Insurance Marketplace and qualify for **premium tax credits** and **cost sharing reductions**. Premiums can be paid directly to the insurance company through a check or in some cases taken directly from a bank account. If you have very low income, you may qualify for government programs.

WHAT WILL I PAY FOR?

You will be responsible for a monthly **premium**. Some employers will cover this **premium**. Insurance only covers part of your care. Plans require you to reach a **deductible**, a set yearly amount before your insurance kicks in. Once you have reached your **deductible**, your **co-insurance** or the portion you are expected to pay for a service begins. You will also be responsible for **co-payments** or co-pays, a fixed amount paid to a provider for a service or medication. In addition, your plan will have an **out-of-pocket maximum** which is the maximum amount you will be expected to pay in one year. If you reach this amount, insurance will pay the rest of your care that year.

WHAT ARE OTHER THINGS TO CONSIDER WHEN PURCHASING A PLAN?

If you already have a **primary care provider** you can check to see if your provider is "in-network" or "out-of-network." If the provider is out of network you may have to pay more to see them. It is also important to see what prescription drugs each plan covers. You can check a plan's **formulary** to see what medications it covers.

WHEN AND WHERE CAN I SIGN UP FOR HEALTH INSURANCE?

You can sign up for healthcare coverage through the Health Insurance Marketplace during the **open enrollment period**. Visit healthcare.gov or call 1-800-318-2596 to enroll. Most employers have special enrollment periods for their employees. You can enroll in Medicaid and the New Hampshire Health Protection Program anytime throughout the year with the NH Department of Health and Human Services.

HealthCare.gov

1-800-318-2596



UNDERSTANDING HEALTH INSURANCE TERMS

PREMIUM

The amount that must be paid for your health insurance. You and/or your employer usually pay it monthly, quarterly or yearly.

OUT OF POCKET LIMIT/ MAXIMUM

The most you pay during a policy period (usually a year) before your health insurance begins to pay 100% of your health care costs. This limit never includes your premium, balance-billed charges, or health care your health insurance doesn't cover. Some health insurance plans don't count your copayments, deductibles, coinsurance payments, out-of-network payments, or other expenses toward this limit. In Medicaid, the limit includes premiums.

DEDUCTIBLE

What you have to pay before your health insurance begins to pay. For example, if your deductible is \$1,000, your plan won't pay anything until you've spent your \$1,000 deductible for covered health care services subject to the deductible. The deductible may not apply to all services.

CO-INSURANCE

Your share of the costs of a covered health care service, calculated as a percent (for example, 20%) of the allowed amount for the service. You pay coinsurance plus any deductibles you owe.

CO-PAYMENT

A fixed amount (for example, \$15) you pay for a covered health care service, usually when you receive the service.

COST SHARE REDUCTIONS

A discount that lowers the amount you have to pay out-of-pocket for deductibles, coinsurance, and copayments.

PREMIUM TAX CREDITS

A new tax credit to help you afford health coverage purchased through the Marketplace.

FORMULARY

A list of prescription drugs covered by a prescription drug plan or another insurance plan offering prescription drug benefits. This can also be called a drug list.

OPEN ENROLLMENT PERIOD

The period of time when you are allowed to choose and compare the health plans available to you and enroll in a plan that fits your needs. Open enrollment usually occurs once a year.

PRIMARY CARE PROVIDER (PCP)

A physician (M.D.- Medical Doctor or D.O.- Doctor of Osteopathic Medicine), nurse practitioner, clinical nurse specialist or physician assistant, as allowed under state law, who provides, coordinates or helps a patient get access to a range of health care services. This is usually the first person you see when you are sick and the person you see for well-visits.



HealthCare.gov
Take health care into your own hands

We're available 24/7!
Call us at:

1.800.318.2596



*Definitions are adapted from healthcare.gov/glossary and The Center for Consumer Information & Insurance Oversight's Uniform Glossary.