



A look at the benefits of health care reform

Your health should always come first. That's why it's so important to understand health care reform. Although the Affordable Care Act (ACA) has been in place since the beginning of the year, there's still a lot of confusion about health insurance and how the new health care laws affect people.

You probably know that the new laws require all legal U.S. residents to have health coverage – or pay a tax penalty that goes up every year.

Now is a great time to think about your health insurance needs.

Open enrollment runs November 15, 2014 - February 15, 2015.

Open enrollment is the easiest time to sign up for health insurance. There are fewer restrictions than at other times of the year. If you already have health insurance, you can renew or make changes to your plan during open enrollment.

You can also buy health coverage through the health insurance marketplace (also known as exchanges). You may even be eligible for a government subsidy (a tax credit) to help you pay for a plan on the marketplace. Subsidies are based on:

- Income
- Family size
- Age
- Where you live

All plans in the marketplace are run by health insurance companies and have a core set of benefits called essential health benefits. These benefits include things like emergency room care, hospital stays, maternity and newborn care, prescription drugs and preventive care.

You can choose among four levels of coverage: bronze, silver, gold and platinum. The bronze level has the lowest monthly premium, but you pay more for your care. Platinum plans have the highest monthly premium, but you pay less for care.

Coverage is important

Without health insurance, if you get sick or have an accident, you'd face unexpected bills that could put a strain on your budget — and put your savings at risk. Health insurance protects you from the big medical bills that often come with accidents and illnesses.

Plus, with the new laws, you'll likely pay a tax penalty if you don't have coverage.

You'll enjoy more benefits with your health plan

The goal of health care reform is to improve health care for all Americans. That's why the new law adds benefits to your health plan. Your new health plan will offer:

- **In-network preventive care at no extra cost:** This includes yearly checkups, shots, tests and screenings.
- **Coverage for children age 28 and younger:** Children covered on a parent's plan can stay covered until they're 28 years old*. They're covered whether or not they live at home. They don't

have to be a full-time student, and they can even be married or have children of their own. However, their dependents can't be on the plan.

- **Coverage — no matter what:** If you have a pre-existing condition (such as cancer, asthma, high blood pressure or arthritis), you can still qualify for a health plan.

Preventive care helps you stay healthy.

Preventive care services can help you avoid getting sick and improve your health. In the past, you had to pay a copay, coinsurance or deductible for preventive care. Now, you won't have to pay these costs or file a claim for these services as long as you get care from a doctor in your plan's network. That's because preventive care is covered 100% when you go to an in-network doctor. That includes:

- Many cancer screenings, including mammograms and colonoscopies
- Counseling on quitting smoking, losing weight, eating healthy foods, treating depression, reducing alcohol use and other topics
- Preventive care checkups, which are covered for all ages
- Routine vaccines against diseases like measles, polio or meningitis
- Counseling, screenings and vaccines for healthy pregnancies
- Flu and pneumonia shots

Remember, no matter which plan level you choose, you'll get preventive care with no out-of-pocket costs and basic benefits.

You can still make changes, even if life gets in the way.

Many life-changing events may enable you to change your health plan during a "special enrollment period" outside of the government-mandated open enrollment period. These are called qualifying events. Common qualifying events include:

- Marriage
- Divorce
- Birth of a child
- Loss of employment
- Death of a dependent
- Adoption

If you've had a change in your coverage, family or income that qualifies, you can shop for a new health plan without waiting for the annual open enrollment period.

Time is limited to qualify for a special enrollment period. Most people have 60 days after a qualifying event occurs to enroll in a new plan.

Act now!

To learn more about your insurance options or to sign up for an ACA-compliant plan, call your chamber, broker or 1-800-293-2347.

**Dependent age regulations vary by state. Age 28 is the dependent age applicable to Ohio.*

** Provided by Anthem Blue Cross and Blue Shield.*