



Am I eligible?

Starting on October 1, every state will have a new health insurance marketplace, or “exchange.” Uninsured people will be able to apply for free or low-cost health insurance if they are low income, or get financial aid to help buy a plan. Small businesses and non-profit agencies can also get affordable coverage for their employees in these marketplaces.

Who will be eligible to apply for these new health insurance plans?

If you don't have health insurance coverage or if you lose your insurance through a layoff or a divorce, this new program is for you!

To apply for coverage, you will need to be a resident of the state where you are applying. You will also need to be a U.S. citizen (either born in this country or a naturalized citizen) or a lawfully present immigrant such as a person with a green card, a refugee or a woman who has been trafficked. If you're not sure whether you fit the definition of lawfully present immigrant, you can learn more about that here.

Immigrants without legal status typically can't buy coverage in the marketplace, though. There are some exceptions for pregnant women, children and people with serious illnesses, and for people who qualify for emergency coverage through Medicaid.

If you already get health insurance through your job, that won't change. One exception is if your employer requires you to pay more than 9% of your income as your part of the cost of your insurance. If that is the case, then you can apply for more affordable insurance in the new marketplace to replace your employer health plan.

Who can get the free or low-cost insurance plans that will be available through these marketplaces?

Everybody who applies for coverage through the new marketplaces will be screened to see if they qualify for free or low-cost public insurance under the Medicaid program. So, you will find out if you qualify when you apply!

Low-income parents, children, pregnant women, seniors and people with disabilities are eligible for Medicaid coverage in every state. But what it means to be low-income is different from state to state. In some states, like New York, a single person who earns up to \$15,280 a year qualifies

for Medicaid. A family of four that earns up to \$32,500 a year qualifies. In other states, however, the amount will be lower. (Why is the Medicaid ceiling higher in some states than in others?)

What if you earn too much to qualify for free or low-cost Medicaid in your state? Can you still get financial help to afford health insurance?

Yes! People who earn too much to qualify for Medicaid in their states can apply for financial assistance to help pay the cost of private health plans that will be sold through the state marketplaces. The amount you can earn and still qualify will depend on your family size. See this chart to find out if you might qualify.

This financial aid will be given out using a sliding scale. The lower your income, the more financial assistance you will get. For example, in Sacramento, California, a health plan that would cost \$332 per month for someone who earns \$45,000 will only cost \$119 per month for someone who earns \$22,000.

Can I get help figuring out which health plan is right for me and how to enroll?

Yes! Every state is setting up programs to help people figure out which health plan best meets their needs and the needs of their families. You'll be able to get help from trained staff either on-line, by phone and in-person. They can also walk you through the steps to enroll in the health plan you choose. To learn more about how to choose a health plan, click here. To learn about how to apply, click here.