

Marketplace Open Enrollment

Megan Reilly

Office of Communications

Centers for Medicare & Medicaid Services



What's the Marketplace? And what is Open Enrollment?

- The Health Insurance Marketplace® provides health plan shopping and enrollment services for individuals and families (the individual market), online, over the phone, and with the help of local assistance (assisters and agents/brokers).
- Anyone who needs health insurance who doesn't have coverage through an employer, Medicaid, the Children's Health Insurance Program (CHIP), Medicare or other comprehensive health coverage can apply and enroll in Marketplace coverage during Open Enrollment.
- When applying, the Marketplace will determine eligibility for:
 - Coverage in Marketplace plans
 - Premium tax credits that help reduce the cost of monthly premiums
 - Extra savings, thru cost-sharing reductions (CSRs), to lower what consumers pay for out-of-pocket costs, like deductibles, copayments, and coinsurance
 - Medicaid and the Children's Health Insurance Program (CHIP)
- Some states operate their own Marketplace platform while others use HealthCare.gov. For 2024, 32 states are using HealthCare.gov. Check if your state uses HealthCare.gov or has its own Marketplace:
[HealthCare.gov/marketplace-in-your-state/](https://www.healthcare.gov/marketplace-in-your-state/)

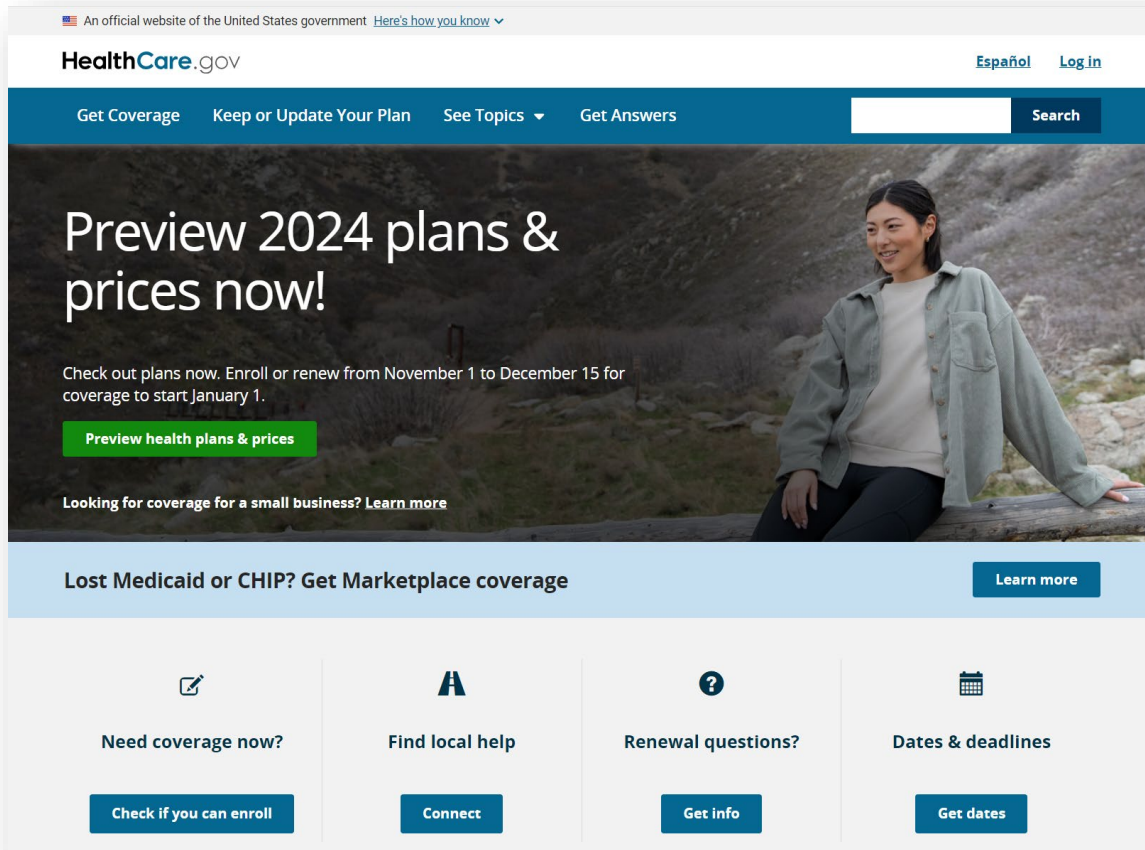
Marketplace Open Enrollment:

- **November 1 – January 15 each year**
- New and returning consumers can enroll in Marketplace coverage
- Consumers can choose any plan available in their area
- Key deadlines:
 - Choose a plan by Dec 15 for coverage starting Jan 1
 - Enroll or change plans by Jan 15 for coverage starting Feb 1

Outside of Open Enrollment consumers need a Special Enrollment Period to newly enroll or change plans

Experience: Applying & Enrolling

- **Right now:** get ready for Open Enrollment
- Consumers can preview 2024 plans and prices and get an estimate of what they're eligible for
- **Starting November 1:**
 - Create an account / login if returning consumer
 - Fill out or update 2024 application
 - Review eligibility results for Marketplace coverage, financial help, or Medicaid & CHIP
 - If eligible, choose a plan
 - **Enroll by Dec 15 for coverage starting Jan 1**
 - Enroll by Jan 15 for coverage starting Feb 1



Marketplace Application

- At the beginning, sets expectations for the sections of information consumers will be asked to help guide them through their next steps with hints along the way.
- Consumers that start their application and need to pause and come back later can see where they left off (which section) and jump back in on the last question they were on. Or they can choose to review information they already entered in an earlier section before continuing.





[← Back](#)

Your Marketplace application

Fill out this application to check for 2 things

- If you or others in your household can enroll in coverage.
- If your household can save money on coverage costs.

There are 4 main sections in the application

| | | | |
|---|---|--|--|
| <p>SECTION 1 Application setup</p>  <ul style="list-style-type: none">• Cost savings setup• Contact information• Who needs coverage | <p>SECTION 2 Personal & household information</p>  <ul style="list-style-type: none">• Information about filing taxes• Social Security Numbers• Household income | <p>SECTION 3 Current coverage & life changes</p>  <ul style="list-style-type: none">• Current health coverage• Recent life changes, like moving or getting married | <p>SECTION 4 Submit your application</p>  <ul style="list-style-type: none">• Review your application• Agree to statements• Sign & submit |
|---|---|--|--|

[Learn more about what information you may be asked to provide.](#)

After you submit your application

You'll get your eligibility results after submitting your application.

If you're eligible to enroll, you can compare plans and choose the coverage that fits your needs.

[Continue to application](#)

Marketplace Application: Key Highlights

Check for Marketplace Savings

- Checking for savings helps the Marketplace determine how much financial savings consumers may qualify for to reduce their monthly premiums, lower out-of-pocket costs, and check if they can get free or low-cost health care through Medicaid or CHIP

Decide if you'd like to check for savings

You can set up your application to check if your household is eligible for lower costs on health coverage.

[Learn more about the types of savings we can check for.](#)

Tell us more about your household so we can see if you should check for savings.

✓ **Applying for coverage in West Virginia.**
[Change your state by returning to your account and starting a new application.](#)

✓ **How many people do you report on your tax return, including yourself?**
[Learn more about who to include, and how to answer if you don't file taxes.](#)

✓ **In 2024, what do you estimate your household's income range will be?**
[Learn more about how to estimate household income.](#)

- ☒ \$61,000 or less
☐ More than \$61,000
☐ I choose not to answer

✓ **Your household is likely to qualify for savings!**

Your household is likely to qualify for savings!

We'll ask for more information as you fill out the application to make sure you're eligible, and to see how much you may be able to save.

Choose a savings option

☒ **Check for all savings options. (Recommended)**

You'll see your results after you fill out and submit your application. If you're eligible to enroll, you can apply these savings to the plan you select.

☐ **Continue without checking for savings options.**

You'll still fill out and submit your application. If you're eligible to enroll, you'll pay the full price of your health insurance premiums on the plan you select.

Marketplace Application: Key Highlights

Transitioning from Medicaid or CHIP

- Consumers may be transitioning from Medicaid and CHIP coverage that recently ended or will end soon.
- Even during Open Enrollment, consumers will need to let the Marketplace know if they had Medicaid or CHIP coverage and the date the coverage ends.
- During November, if consumers just lost Medicaid and CHIP, they can fill out their 2024 application and enroll in a plan that starts January 1. If they need coverage for December, consumers should also complete a 2023 application and choose a plan.
- Consumers that applied for Medicaid and CHIP but were found not eligible by the state (i.e. weren't enrolled and were referred to the Marketplace) can provide the date of the denial on a separate question later in the application.

HealthCare.gov

[← Back](#) | [1 Set up](#) - **[2 Household](#)** - [3 Coverage & changes](#) - [4 Review & submit](#)

Medicaid or CHIP coverage ending

[Learn more about Medicaid and Children's Health Insurance \(CHIP\) programs.](#)

Did John have West Virginia Medicaid or West Virginia Children's Health Insurance Program (WVCHIP) that recently ended or will end soon?

Select Yes if one applies:

- John's coverage ended between 3/31/2023 and today
- John's coverage is going to end between today and 12/18/2023

☒ Yes

☐ No

Enter the last day of John's coverage.

If you don't know it, enter the last day of the month that you know John had, or will have, coverage, for example:

10/31/2023. Most coverage ends on the last day of the month.

Month Day Year
 / /

Save & continue

Application ID: 4394087446

Marketplace Application: Key Highlights

HealthCare.gov

← Back | 1 Set up - 2 Household - 3 Coverage & changes - 4 Review & submit

Next: Income information

Household income

Household income includes all estimated income and some expenses for both the current month and all of 2024. You'll need to enter income information for each person in the household.

Documents you may need

- Pay stubs
- Personal records of income from a person's own business or from other self-employment, like delivery or ride services
- Last year's tax returns, if income for this year will likely be about the same

Why do I need to enter this information?

We'll use annual income to help check your household's eligibility for savings through the Marketplace, like a premium tax credit to reduce monthly insurance bills or lower out-of-pocket costs on certain plans. We'll also use the current month's income to check eligibility for free or low-cost health care coverage through programs like Medicaid and the Children's Health Insurance Program (CHIP). [Learn more about how we use estimated income to check for certain types of eligibility.](#)

What if income changes from month to month, or throughout the year?

Estimating income can be hard, especially if a person's income changes or varies.

Enter your best estimate for now. If anyone's income changes during the year, come back and update your application as soon as possible. Income changes may affect the savings and coverage options your household qualifies for.

Continue

Application ID: 4392267714

Next: Other coverage offers from a job

Job-based health coverage

Some employers may offer health insurance plans to employees. These plans may also be available to other family members, too.

Information you may need

Details about a health plan's benefits and coverage from the employer, including:

- Premium costs
- Who in the household can enroll
- Whether any plans meet the minimum value standard [Learn more about the minimum value standard.](#)

If you don't have this document, you can print or download the [Employer Coverage Tool](#) (PDF) and ask the employer to fill out their part.

It's ok if you need to pause to go find these documents. All your answers up to this point have been saved.

Continue

Eligibility results

Results based on your application (ID 4392267714) submitted on 10/19/2023. Follow these steps below to complete your enrollment. [Learn more about your eligibility results](#)

Eligibility overview

John Carson

Eligible

To buy a Marketplace plan

For a premium tax credit of up to \$891 each month for your tax household

For lower copayments, coinsurance, and deductibles (cost-sharing reductions) on Silver plans

Required action: View your eligibility notice

Your eligibility notice explains your options for coverage, costs, deadlines and next steps. If you're eligible for coverage through a Marketplace plan, you can enroll after you view your notice.

VIEW ELIGIBILITY NOTICE (PDF)

Continue to enrollment


You've submitted your application and viewed your results. Next, you'll choose a plan.

CONTINUE TO ENROLLMENT

Enrolling in a Marketplace Plan

- Consumers choose how much of their tax credit to use to lower their monthly premiums.
- Consumers that qualify for extra savings on Silver plans can get lower deductibles and save on out-of-pocket costs if they enroll in a Silver plan.
- Plans are sorted by lowest estimated total yearly costs first, rather than by premium to help consumers understand how much they may spend across the year in each plan inclusive of premiums and costs for care, taking into account deductibles and copays/coinsurance.
- Consumers can compare and save plans, then choose the one that best fits their needs. Re-enrolling consumers will see their current plan highlighted if it's still available.
- After choosing a plan, consumers will need to pay their first month's premium directly to their insurance company, so coverage starts.

123 total plans

- 35 Bronze
- 53 Silver  Extra savings
- 35 Gold

Categories are based on how you and the plan split costs of care. To find a plan that works for you, look at each plan's estimated total yearly costs.

Extra Savings

You qualify for extra savings on out-of-pocket costs.

Pick a Silver plan to get these savings.



[See Silver plans](#)

Quick tips



[Review plan category fast facts](#)

[Think about all costs, not just the premium](#)

[Consider plans with easy pricing](#)

CareSource

[CareSource Marketplace Low Premium Silver 1](#)

 Extra savings | Silver | HMO | Plan ID: 50328WW0010021 | Rating 

Ambetter of Illinois

[CMS Standard Silver](#)

 Extra savings |  Easy pricing | Silver | HMO | Plan ID: 27833IL0140074 | Rating 

Premium

\$12.98 /month

Including a \$352 tax credit
was \$364.98

Estimated total yearly cost

\$1,326

Individual total
Based on your predicted use of medical
services

[Edit yearly cost](#)

Deductible

\$800

Individual total
(health & drug combined)

Out-of-pocket maximum

\$3,000

Individual total

You pay

| | |
|--------------------------|----------------------------------|
| Primary care | \$20 per visit from day 1 |
| Specialist care | \$40 per visit from day 1 |
| Urgent care | \$30 per visit from day 1 |
| Emergency room | 30% coinsurance after deductible |
| Outpatient mental health | \$20 per visit from day 1 |
| Generic drugs | \$10 |

[View plan details](#) for full list of benefits, limits, and exclusions.

Plan features

-  Adult Dental
-  Child Dental

Find covered providers & drugs

[Add doctors & facilities](#)

[Add prescription drugs](#)

[Enroll](#)

[Go to plan details](#)

[Save](#)

[Compare](#)

Special Enrollment Periods

- Eligible consumers can enroll in or change Marketplace plans during the annual Open Enrollment Period or during a Special Enrollment Period (SEP). Once Open Enrollment ends, consumers need to qualify for a Special Enrollment Period to newly enroll in coverage or change plans mid-year.
- Special Enrollment Periods are available generally based on recent life events like a move, loss of other health coverage, gaining a dependent, a marriage, gaining recent immigration status and release from incarceration.
- Members of federally recognized tribes can enroll in the Marketplace or change plans throughout the year.
- Based on recent law changes through 2025, consumers who have income at 150% or below of the federal poverty level are eligible for a Special Enrollment Period to newly enroll or change plans mid-year.
- Current enrollees may be able to change plans mid-year through a Special Enrollment Period, but plan choices may be limited in the plans they can change to.
- **Consumers that still need 2023 coverage for the rest of the year can apply through HealthCare.gov.** Complete a 2023 application, and if eligible, enroll in a plan for coverage that starts in November or December.

Learn more about SEPs: [HealthCare.gov/coverage-outside-open-enrollment/special-enrollment-period/](https://www.healthcare.gov/coverage-outside-open-enrollment/special-enrollment-period/)

Find out if you can still get health coverage

You can get or change health coverage for the rest of the year if you qualify for:

A Special Enrollment Period due to a life change

Certain life events, like losing health coverage (including Medicaid or Children's Health Insurance Program (CHIP) coverage), moving, getting married, having a baby, or adopting a child, may qualify you to enroll in or change Marketplace health plans outside the yearly Open Enrollment Period (November 1 - January 15).

A Special Enrollment Period due to a recent loss of Medicaid or Children's Health Insurance Program (CHIP) coverage

If you recently lost (or will soon lose) your Medicaid or CHIP coverage because your income is too high or other changes make you ineligible, you may qualify to enroll in a Marketplace plan through a Special Enrollment Period.

Medicaid, CHIP, or a new Special Enrollment Period based on income

Individuals, families and children with certain incomes may qualify for Medicaid, the Children's Health Insurance Program (CHIP), or health insurance through the Marketplace. If eligible based on estimated household income, you can apply any time.

Not sure you qualify?



We'll ask you a few quick questions before you apply to give you an idea if you may qualify to get or change health coverage.

Enter your ZIP code

Check first

Ready to apply?



Complete a Marketplace application to know for sure if you can get or change health coverage. You'll see plans and prices before making a choice.

Already have a Marketplace plan? Pick this option to make updates or see if you can change plans.

Apply now

Getting assistance

Consumers can use [HealthCare.gov](https://www.healthcare.gov) or [CuidadoDeSalud.gov](https://www.cuidadodesalud.gov) to find and apply for Marketplace health and dental coverage that fits their budgets and specific needs.

Consumers can apply either online, by phone, or by mail, and can get help from a Marketplace enrollment assister, agent, or broker in their area.



Call Center

Assists consumers in states using HealthCare.gov:

1-800-318-2596 (TTY: 1-855-889-4325)

Customer service representatives are available 24/7

Help with eligibility, enrollment, and referrals

Assistance in English and Spanish

Oral interpretations in 240+ additional languages

State Based Marketplaces have their own call centers



Local Assistance

Local or in-person assisters may provide face-to-face, one-on-one assistance to consumers in their Marketplace service area.

Marketplace-approved local help is available through several programs to help consumers with the process of applying for and enrolling in health insurance coverage, including:

- Navigators
- Certified Application Counselors
- Agents and Brokers

Consumers can use [Find Local Help](https://www.healthcare.gov/local-help) (LocalHelp.HealthCare.gov) to search for a list of local people and organizations who can help them apply, pick a plan, and enroll in Marketplace coverage or Medicaid and CHIP.

Consumers in state-based Marketplaces can apply online, over the phone and through local help in their state. Check [HealthCare.gov/marketplace-in-your-state/](https://www.healthcare.gov/marketplace-in-your-state/) for state-based Marketplace resources.



Medicare Open Enrollment 2023

October 25, 2023



Medicare's Open Enrollment Period

- For everyone with Medicare
- Runs October 15 – December 7 every year
- Opportunity to make changes to prescription drug or health coverage options
- Time to compare options to find the right plan

Open Enrollment Actions for People with Medicare

- Join a new Medicare Advantage (MA) plan
- Join a new Part D prescription drug plan
- Switch from Original Medicare to MA
- Switch from MA to Original Medicare (with or without a Part D plan)

Changes effective January 1, 2024

Review the Annual Notice of Change

Review the plan's Annual Notice of Change (ANOC) letter to learn about changes in 2024:

- Costs
- Benefits and coverage rules
- Drug formulary (list of covered drugs)
- Networks, including preferred pharmacies

Medicare Plan Finder

www.Medicare.gov/plan-compare

- Review & compare plans
- Manage a list of preferred pharmacies and prescriptions
- Get side-by-side comparison of plan coverage, costs, quality ratings

Inflation Reduction Act (IRA) improvements:

- No more than \$35 copay per month supply of covered insulin
- \$0 copays for covered ACIP vaccines
- \$0 in the cost after coverage gap column for covered drugs
- Expanded Extra Help program information and costs

Happy? Don't do anything

Choose a new option? Enroll online right from Plan Finder

Beware of Marketing Fraud

Medicare.gov and 1-800-MEDICARE are the official sources of Medicare information.

Watch out for people who:

- Pressure you to join their plan
- Say they represent Medicare or give you a service for free
- Call your home without permission
- Say that you'll lose your Medicare benefits if you don't sign up for their plan
- Require you to provide contact information at a plan event

Resources

- **www.Medicare.gov**
- **1-800-MEDICARE (800-633-4227)**
 - Available 24 hours a day, including weekends
 - TTY 1-877-486-2048
- **"Medicare & You" Handbook**
 - Mailed to all Medicare households each fall
 - Electronically at www.Medicare.gov
 - Spanish, Chinese, Korean, Vietnamese
 - Braille, Large Print, Audio, eReader

State Health Insurance Assistance Program (SHIP)

SHIP is a national program that offers free, personalized health insurance counseling to people with Medicare, their families, and caregivers to help them make informed decisions about their care and benefits.

Visit [Shiphelp.org](https://shiphelp.org) for locations near you.

Marketplace Resources

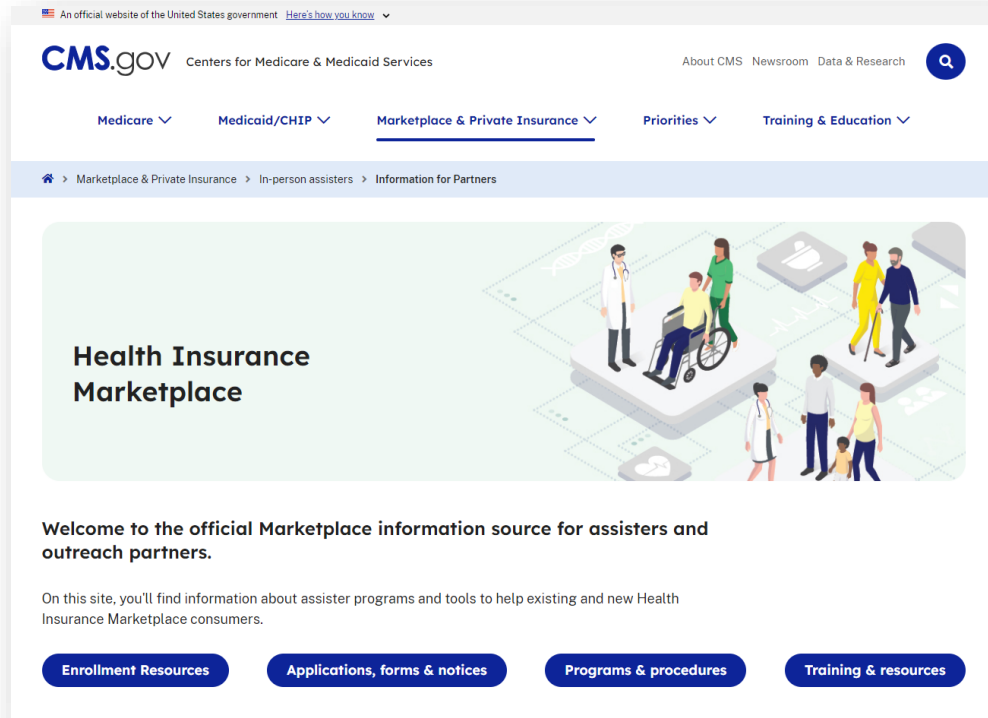
Key Marketplace points to remember

- The Marketplace is a way for qualified individuals and families to find and buy health insurance.
- Open Enrollment generally runs from **November 1 to January 15**. The enrollment period dates in state-based Marketplaces may differ.
- Consumers may enroll in or change plans during a Special Enrollment Period (SEP) if they qualify. Medicaid & CHIP enrollment is available year-round without a Special Enrollment Period. Consumers that recently lost Medicaid & CHIP who may be transitioning to the Marketplace are eligible for a Special Enrollment Period during Medicaid Unwinding.
- Individuals and households may be eligible for lower costs on their monthly premiums and extra savings on out-of-pocket costs.
- There's help available through the Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325), Marketplace enrollment assisters, and agents and brokers.
- If consumers don't agree with a decision made by a Marketplace, they may be able to file an appeal at [HealthCare.gov/marketplace-appeals/](https://www.healthcare.gov/marketplace-appeals/).

Marketplace resources for partners

[CMS.gov/marketplace](https://www.cms.gov/marketplace) provides a variety of resources for partners

- Outreach & education toolkits, including partner-specific toolkits
- Overviews and training materials for assisters across many topics
- Samples of consumer notices



More information about the Marketplace

- Sign up to get email and text alerts at HealthCare.gov/subscribe
- CuidadoDeSalud.gov for Spanish
- Updates and resources for organizations are available at CMS.gov/marketplace
- Twitter@HealthCareGov
- Facebook.com/Healthcare.gov?_rdr=p
- YouTube.com/playlist?list=PLaV7m2-zFKpgZDNCz7rZ3Xx7q2cDmpAm7