



HOW TO SIGN UP FOR HEALTH CARE WITH A NAVIGATOR

Washington *Healthplanfinder* Enrollment Guide



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Working with a Navigator

What Is a Navigator?

Navigators can answer your questions about health plans or how to enroll. They can also tell you if you qualify for financial support. They share their knowledge and make sure enrolling is a simple process.

✓ Navigators can...

- Answer your questions about eligibility and enrollment.
- Explain the benefits and costs of health plans.
- Protect your privacy.
- Provide language and disability access.

✗ Navigators cannot...

- Charge you for services.
- Take personal interest in any insurance carrier.
- Guide you to enroll in or switch to a certain plan.

Key Terms

These terms are the key to understanding your health plan.

► Premium

Your premium is the amount you pay each month for your health plan. You must pay your premium even if you do not get any health care services.

► Cost Sharing

Cost-sharing refers to the amount of health care costs that you pay. This term includes deductibles, co-insurance and copay.

► Deductible

Your deductible is the amount you must spend on care before your health plan starts to share the cost. Your deductible amount starts over at the beginning of each year.

► Copay

A copay is the amount you pay for a covered health care service. Your copay is due when you receive the service.

► Co-insurance

Co-insurance is your share of the cost of a covered health care service. You start to pay co-insurance after you have paid your health plan's deductible.

► Out-of-Pocket

Out-of-pocket costs are what you pay for health care. They can include your deductible, co-insurance and copays. Any amount that is not covered by your health plan is an out-of-pocket cost.

► Network

The network is the list of providers your health plan covers. In-network providers are approved by your health plan. Out-of-network providers are not approved by your health plan.

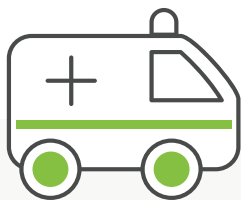
Basics of a Health Plan

What Is a Health Plan?

You buy a health plan each year in case you or your family needs health care. Your insurance carrier pays a part of the cost of health care when you have a health plan.

Why Do I Need a Health Plan?

Even healthy people use the health care system. Getting a health plan makes sure that health care costs are affordable when you do. You can get preventative care to stay healthy if you are healthy. You can get treatment quickly if you are not. A health plan provides an affordable way to get medical care when you need it.



A Health Plan for the Future

You never know when you will need to go to the doctor. Having a health plan ensures that you can afford to get medical care when you need it.

Even if you are healthy, your health plan helps you stay healthy.



Invest in Your Health

Health care costs can be expensive without a health plan. Routine visits add up quickly. The cost of care for a surprise injury or major illness can deplete your savings.

You can save a lot in the future by spending a little on a health plan today.

What Is the Affordable Care Act?

With the passing of the Affordable Care Act, Washington state created *Washington Healthplanfinder*. The goal of the Affordable Care Act is to make health care cost less. More people than ever can get a health plan for little or no cost. Your situation may qualify you for Washington Apple Health (Medicaid) or benefits that reduce the amount you pay for coverage.

You can apply for free or low-cost health coverage on wahealthplanfinder.org and the WAPlanfinder app.

What If I Do Not Get a Health Plan?

You will pay the full cost of medical care without a health plan. Flu shots can cost \$50. A three-day stay in the hospital costs tens of thousands. Treatment for cancer can add up to hundreds of thousands.

You may also get a tax penalty if you do not get covered. In Washington, you get one for each person in your household.

What Does Care Cost?

Here are some common treatments and what they cost. Your health plan can share costs like these with you.

TREATMENT	COST
Heart Surgery	\$78,585
Mammogram	\$263
Spinal Surgery	\$13,255
Colonoscopy	\$1,484
C-Section	\$18,098
Urgent Care Visit	\$181
Yearly Checkup (for Teens)	\$117
ER Visit	\$579

How Does a Health Plan Work?

Insurance Carriers Share the Cost of Health Care.

For Example: Jenna visits the Emergency Room. After, the hospital sends her a bill for \$10,000.

Without health insurance

\$10,000

Jenna would have to pay the full amount without a health plan.

With health insurance

\$3,800

Jenna's health plan has:

- a \$250 Emergency Room copay
- a \$2,000 deductible
- 20% co-insurance

Since her health plan shares costs, Jenna pays:

- \$250 copay
- \$2,000 deductible
- \$1,550 co-insurance (20% of the bill after copay and deductible)

Thanks to her health plan, Jenna pays \$3,800 of the \$10,000 bill. Her insurance carrier pays the rest.



Benefits

What Does a Health Plan Cover?

All health plans cover these ten essential health benefits. Some plans, like Cascade Care plans, cover more.

Essential Health Benefits

- Doctor visits and hospital stays
- Emergency Room visits
- Maternity care
- Mental health services and substance abuse treatment
- Prescription drugs
- Recovery services when you get injured
- Lab tests
- Management of chronic conditions
- Pediatric care

► Cascade Care

You can get access to more services and savings than ever with a Cascade Care plan.

► Quality of Care

Many health plans offer a higher quality of care than what you get when you are not covered.

► No Denials

You will not be denied coverage due to pre-existing conditions.

► Free Preventative Care

Services like checkups and vaccines are fully covered.

Covered Services

Most health plans cover preventative services like shots and screenings at no cost to you. These services are covered by most health plans.



Screenings and Counseling

- Depression screening
- Diabetes screening (Type2)
- Drug and tobacco counseling
- Cholesterol screening
- Colorectal cancer screening
- Diet counseling
- STD and HIV screening
- Wellness visits



Youth Services

- Behavioral and developmental assessment
- Iron and fluoride supplements
- Screenings and counseling
- Vaccines
- Vision Screening



Vaccines

- Hepatitis A and B
- Herpes Zoster
- Human Papillomavirus (HPV)
- Flu shot
- Measles, Mumps, Rubella
- Meningococcal
- Pneumococcal
- Tetanus, Diphtheria, Pertussis
- Varicella



Other Services

- Breastfeeding support
- Mammograms
- Contraceptives
- Domestic violence screening
- STD and HIV screening

Financial Support

What Are Tax Credits?

Tax credits reduce the amount you pay for your health plan each month. They are paid by the government and applied to your health plan's premium. Tax credits are only available through *Washington Healthplanfinder*.

Who Can Get Tax Credits?

The amount of tax credits you get depends on your income and the size of your household. The lower your household income, the more tax credits you may qualify for. This amount is calculated when you enroll. You may qualify for tax credits if these things are true:

- ▶ You do not qualify for Washington Apple Health (Medicaid) or Medicare.
- ▶ You do not have insurance through your job or another government program.
- ▶ You are a U.S. citizen or lawfully present in the U.S. and live in Washington.
- ▶ If you are married, you do not file a Married Filing Separately tax return.

How Do Tax Credits Work?

Your income determines the amount of tax credits you can get. If your income is below a certain level, a limit is put on how much you must pay for your premium. The lower your income, the more tax credits you may qualify for.

Filing Taxes

You must file taxes each year to continue getting tax credits. When you file taxes, your estimated income is compared to your actual income. The tax credits you received are then compared to the amount you should have received based on this difference. This is called tax credit reconciliation. You will be mailed a form at tax time. This form is called a 1095-A. Use this form to complete your taxes.

For Example

- Nelly makes \$1,800 per month
- Nelly's health plan costs \$215 per month
- Nelly's premium limit is \$100 per month
- Nelly gets a tax credit of \$115 per month
- Nelly pays \$100 and uses the \$115 tax credit to cover the rest of her premium



What Is Cascade Care Savings?

The Cascade Care Savings program reduces the cost of your health plan's premium. If you qualify, the state will pay a part of your premium.

Who Can Get Cascade Care Savings?

You may qualify for Cascade Care Savings if these things are true:

- ▶ Your income is less than 250% of the Federal Poverty Level.
- ▶ You do not qualify for Washington Apple Health (Medicaid) or Medicare.
- ▶ You are enrolled in a Cascade Care Silver or Gold plan.
- ▶ If you qualify for tax credits, you have accepted the full amount you can get.

Washington Apple Health (Medicaid)

What Is Apple Health?

Apple Health is the name for Medicaid in Washington. It covers all the essential health benefits.

Many people can get Apple Health at no cost. Some may have to pay a monthly premium.



You can apply for Apple Health at any time through *Washington Healthplanfinder*.

Who Can Get Apple Health?

You can get Apple Health if these three things are true. Create an account or sign into *Washington Healthplanfinder* if you do not know if you qualify.

- ▶ Your income is below 138% of the Federal Poverty Level.
- ▶ You are a U.S. citizen or lawfully present in the U.S. and live in Washington.
- ▶ You are younger than 65.

Cascade Care

What Are Cascade Care Plans?

Cascade Care plans are a type of Qualified Health Plan available through *Washington Healthplanfinder*. They cover essential health benefits and offer more services and savings than many plans.

There are two types of Cascade Care plans: Cascade plans and Cascade Select plans. Cascade Select plans must meet higher standards. They offer more quality and value than other plans.



Why Should I Choose a Cascade Care Plan?

Cascade Care plans offer more coverage for less cost. They cover more services than most plans before you must meet the deductible. This includes primary care, mental health services, generic drugs and more.

You also save on out-of-pocket costs. On average, your deductible is \$1,000 less when you choose a Cascade Care plan.

How Do Cascade Care Plans Work?

Cascade Care plans use a standard cost-sharing design. This means a few things. First, the out-of-pocket costs stay the same between carriers. All Cascade Care plans at each metal level share the same deductible, copays and co-insurance.

Second, Cascade Care plans share the same coverage. They cover the same services before the deductible is met. You can rest easy knowing you have the best coverage available.

More Choices. More Value.

Cascade and Cascade Select plans give you more options and more value. Their standard cost-sharing design makes sure you get the best coverage you can.

Cascade Care plans are only available through *Washington Healthplanfinder*. Sign into your account to see if you qualify.



Plans Available at *Washington Healthplanfinder*

	Non-Cascade Plans	Cascade Plans	Cascade Select Plans
Eligible for tax credits	✓	✓	✓
Eligible for Cascade Care Savings		✓	✓
Qualified Health Plan (must meet quality standards)	✓	✓	✓
Covers all ten essential health benefits	✓	✓	✓
Standardized cost-sharing (plans share the same deductible, copays and co-insurance)		✓	✓
Covers primary care, urgent care, mental health care, generic drugs and more before the deductible is met		✓	✓
Only offered by <i>Washington Healthplanfinder</i>		✓	✓
Offered in every county in Washington	✓	✓	

Current Coverage

Your current coverage can affect your eligibility. These rules apply if you or someone in your family has a health plan.

Health Coverage through Your Job

If your job offers health coverage, you may not get financial support when you enroll through *Washington Healthplanfinder*. There are two exceptions:

- ▶ **Insurance through your job is too costly.**
The premium must be more than 9.61% of your household income.
- ▶ **Insurance through your job does not offer Minimum Essential Coverage.**
It must pay less than 60% of your health care expenses.

You can still enroll through *Washington Healthplanfinder* if you do not qualify for financial support.

Family Coverage through Your Job

Your family can sign up for a health plan through *Washington Healthplanfinder* whether your job offers family coverage or not. The following rules will determine if they can get financial support with their plan.

- ▶ **Your job offers your family coverage.**
Any coverage offered to your family by your employer is considered affordable. In this case, your family cannot get financial support through *Washington Healthplanfinder*. This is true even if the cost to cover your family is more than 9.61% of your household income.
- ▶ **Your job does not offer your family coverage.**
They can get financial support through *Washington Healthplanfinder*.

Medicare

If you are on Medicare, you do not need to change your health coverage or enroll through *Washington Healthplanfinder*. People on Medicare cannot get financial support with their health plan. People over 65 on Medicare cannot sign up for Washington Apple Health (Medicaid).

Checklist to Apply

What Do I Need to Apply?

Some basic information about you is needed when you apply for a health plan. Use the checklist below to make sure you have what you need.



Legal Names and Birth Dates

You will need the legal name and birth date of each person applying for coverage.



Social Security Numbers (SSN)

Have the SSN for each person applying ready if they have one. You can still apply if you do not.



Noncitizen Status

We may need to know your status if you are a noncitizen. You or your family members can still get coverage if this is the case.



Income and Tax Filing Status

Gather any income information you have for each person applying. This can include W-2 forms and tax returns.



Other Insurance Information

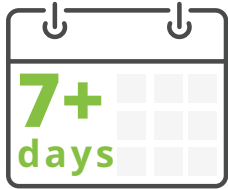
You may have other health insurance options, such as Medicare, Tri-Care or job-based coverage. Gather this information when you apply.

It Is Safe to Sign Up

Facts about you and your family cannot be used for immigration enforcement reasons. They will only be used to find a health plan for you.

After You Enroll

What Happens after I Enroll?



Wait

Wait seven business days* for your first bill or follow up letter.



Pay

Pay your first bill following your insurance carrier's instructions.



Hooray!

You are now covered.

**This may take longer if documentation is required.*

Who Do I Contact?

I need to...	Washington Healthplanfinder	Your Insurance Carrier
Make my monthly payment	✗	✓
Make a claim	✗	✓
Get information about my benefits	✗	✓
Report a life change	✓	✗
Renew my coverage	✓	✗
Get my 1095-A to file taxes	✓	✗
Update my contact information	✓	✗

Remember

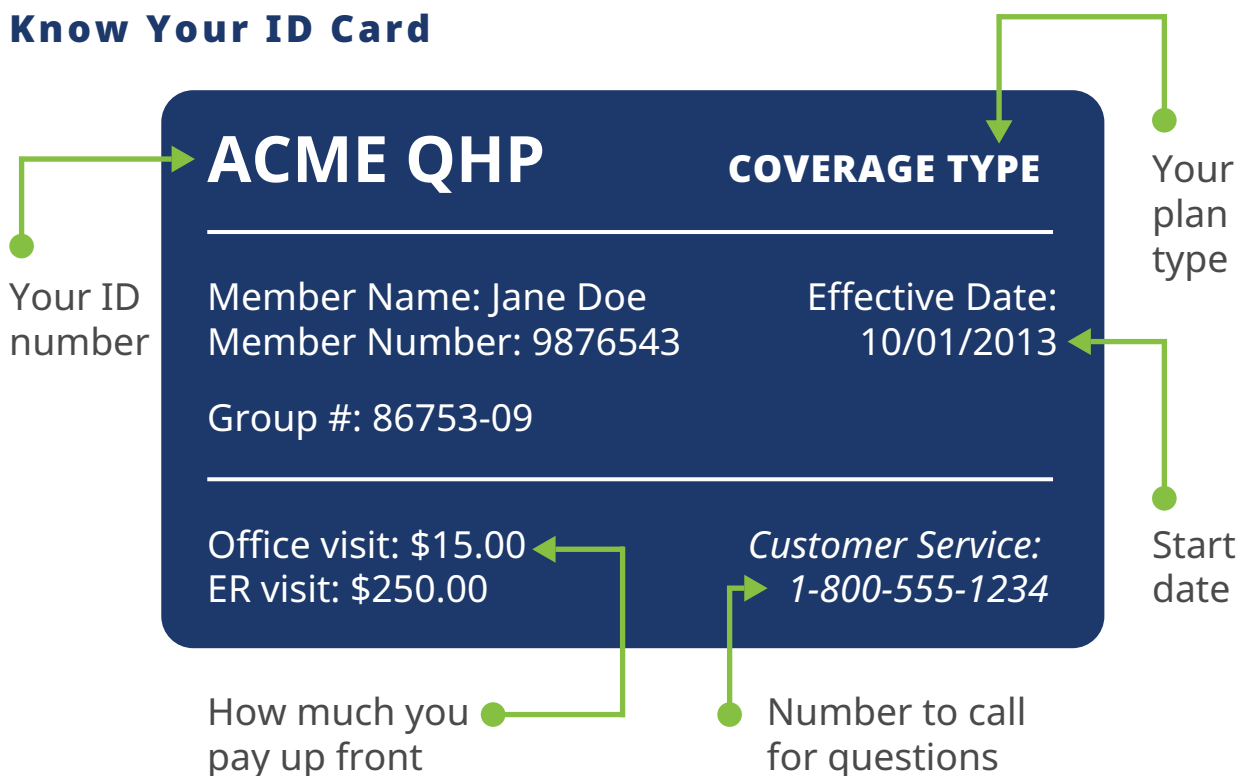
- You are not covered until you pay your first bill.
- You will be mailed an enrollment packet and ID card after your first payment.
- Pay your premium each month to stay covered.

Your ID Card

When Do I Need My ID Card?

Your health plan ID card is your proof of coverage. Bring it with you when you go to the doctor or pharmacy.

Know Your ID Card



Washington Apple Health (Medicaid) Services Card

If you enroll in Apple Health, you will get a blue services card. Keep this card. It shows you are enrolled in Apple Health. You will get a health plan ID card a month after you enroll. Keep this card, too! Bring these cards when you go to the doctor, pharmacy or other health care provider.

Stay Covered, Stay Healthy



Put your health first

- Make healthy choices at home, at work and in the community
- Get recommended screenings and take care of chronic conditions
- Keep your health information in one place



Know your health plan

- Check to see what services your plan covers
- Check your plan's costs, including premiums, copays, deductibles and co-insurance
- Check which services are in- and out-of-network and what each cost to you



Know where to go for care

- Go to the emergency room in life-threatening situations
- Go to your primary care provider when it is not an emergency
- Prepare for your appointments



Find providers you trust

- Ask friends and family or do research on the internet
- Check your health plan's list of providers
- Contact your insurance carrier if you want to change providers

Get Support

Contact Your Navigator

Your navigator can support you throughout the year. Contact them with your health coverage questions.

Navigator Contact Information

Name: _____

Organization: _____

Phone: _____

Email: _____



Contact Washington Healthplanfinder



**Go to
wahealthplanfinder.org**

Create an account, shop health plans and find helpful information on wahealthplanfinder.org.



**Call Us
at 1-855-923-4633**

Customer Support is available by phone from 7:30 a.m. to 5:30 p.m. Monday to Friday.



**Download the
WAPlanfinder app**

Our mobile app is available on the Apple App Store and Google Play.



Language Support

Washington Healthplanfinder offers support in over 200 languages at no cost. Our Customer Support Center can provide translated materials upon request.

Call 1-855-923-4633 to speak with bilingual staff or an interpreter in your preferred language.



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