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- Expert Interview Series: Sean Parnell of Selfpay Patient
- Why Obamacare Has Increased Demand for Short-Term Health Insurance
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- How Health Insurance Premiums & Deductibles Are Related
- What's Your Out of Pocket Maximum?
- Your 5 Best Health Insurance Policies
- The Best Healthcare Option – Preventive Care
- How Wearable Technology Is Transforming Healthcare
- How Do I Know What Health Insurance Is Right for Me?
- Why Are Health Insurance Premiums So High?
- Obamacare Exchanges Are Collapsing – What Can You Do?
- Confused About Copays, Co-Insurance and Deductibles?
- Obamacare Meltdown – What Does It Mean?
- Why Go to a Doctor When You Feel Fine?
- What Are the Odds You'll Go to the Hospital?
- Accidents Happen. Are You Prepared?
- Preventive Care vs. Diagnostic Care – What You Need to Know
- More Questions to Ask When Buying Healthcare Insurance
- Top 5 Questions to Ask When Buying Healthcare Insurance
- What They Didn't Teach You About Health Insurance in College
- What It Costs to be Hospitalized
- What Could One Month Without Healthcare Coverage Cost?
- Expert Interview Series: Dennis Jay of The Coalition Against Insurance Fraud
- 8 Very Real Risks of Going Without Healthcare Insurance
- 5 Things You Can Do to Make Your Healthcare Coverage More Affordable
- Two Reasons You May Lose Your Employer's Healthcare Coverage
- 5 Things That Can Save You Money When Buying Health Insurance
- Busting the Pre-Existing Condition Myth
- What to Do When You Lose Health Insurance Coverage Through Your Job
- What Happened to Freedom of Choice in Healthcare?
- You CAN Get Affordable Health Insurance!
- The Two Reasons You Need Health Insurance
- Don't Kid Yourself. You Need Healthcare Coverage.
- Young, Single, Uninsured? Short Term Health Insurance May Be Right for You
- 6 Good Reasons to Get Short Term Health Coverage
- You Missed Open Enrollment! Now What?
- Thought Leader Series: Why Obamacare Is Hurting Seniors
- What Are The Best Short-Term Health Insurance Options?
- Flexibility of Short-Term Health Insurance for Individuals
- Short-Term Medical Insurance for Independent Contractors
- What Are Some Quality and Inexpensive Health Insurance Options?
- What to Do When You Can't Afford the Affordable Care Act
- How Can I Find the Best Affordable Health Insurance?
- Suddenly Uninsured? You Don't Have to Stay That Way!
- Health Insurance for People in Transition
- Mississippi Health Insurance and the ObamaCare Market: Understanding Consumer Healthcare Options for Mississippi Residents (2015)
- Health Insurance for Temporary Lifestyle Changes
- Health Insurance for Recent College Graduates
- Affordable Health Insurance for the Unemployed
- Temporarily Bypassing Obamacare
- Will Texas Accept Obamacare?
- Can Florida Benefit From Obamacare?
- Choosing Critical Illness Insurance and Life Insurance
- How to Choose Dental Insurance
- How to Shop for Health Insurance
- The Benefits of Short-Term Health Insurance
- Is Short-Term Health Insurance More Affordable?
- How Health Insurance Agents and Brokers Can Help
- Understanding the Pros and Cons of Obamacare
- How to Use a Health Insurance Marketplace
- How to Understand the Affordable Care Act

How to Use a Health Insurance Marketplace

There's a new place to pick a health plan: the Health Insurance Marketplace. It's a type of market where only government-approved health plans can be sold to the public.

What made this market possible? Well, the government set new standards for the quality and affordability of health insurance by passing a new law — the Affordable Care Act.

You may have heard people refer to this law as Obamacare. It puts health care within reach of more Americans than ever before.

Now, when you visit a new type of Website run by the federal government or by your home state, it's easier to qualify for health insurance. Under the new rules of the Affordable Care Act, an insurance company can't turn you down for health coverage if you have a pre-existing health condition.

Better yet, if you and your family meet certain income guidelines, you may be eligible to receive tax credits that pay for part of your monthly health premium.

But, to apply for these credits, you must visit a Health Insurance Marketplace. According to the National Conference of State Legislatures (NCSL), there are three versions of this Marketplace: a Federally-facilitated Marketplace, a State Partnership Marketplace, and a State-based Marketplace.¹

The U.S. Government runs the Federally-facilitated Marketplace, which is publicly known as HealthCare.gov.

The Centers for Medicare & Medicaid Services — a division of the U.S. Department of Health & Human Services — says that in a State Partnership Marketplace, the Marketplace functions are shared by both a state and the federal government.²

State-based Marketplaces are run only by an individual state. In that case, the state usually has its own Website where consumers can shop for and enroll in health plans.

If you want to know who runs the Marketplace for your home state, check out [the online database](#) published by The Henry J. Kaiser Family Foundation, a non-profit organization.³

If you're not sure if your state has its own Marketplace Website, don't worry. Simply visit HealthCare.gov; click the sentence that reads, *See plans and prices*; and answer the first few questions until you see a drop-down menu listing U.S. states. If you select a state that has its own Marketplace site, you'll immediately be presented with a link to that site.

So, help is available to you. And, if you need help applying for a health plan in a Marketplace, there are people who are trained by the Centers for Medicare & Medicaid Services (CMS) to give you guidance.

CMS, a government agency, says that professionals such as insurance agents and brokers can help you but are first required to complete three main tasks before being authorized to serve you in a Federally-facilitated Marketplace or a State Partnership Marketplace.⁴

The agency lists those tasks as identity confirmation, completing a Marketplace training course, and agreeing to follow federal and state laws, rules, standards, and policies, including privacy and security policies.

CMS adds that, after completing those tasks, agents and brokers are issued a federal ID and can then offer you two different ways to get help in a Marketplace: an issuer-based pathway or a Marketplace pathway.

The Center for Consumer Information & Insurance Oversight, a government agency, notes that in an issuer-based pathway, an agent or broker uses a health insurance company's Website to help a consumer get a government-approved health plan.⁵

The agency also says that when this option is used, the agent or broker requests information from the consumer and runs the insurance application and enrollment process on behalf of him or her.

The Marketplace pathway uses the federal Website, HealthCare.gov, according to the Centers for Medicare & Medicaid Services (CMS).⁴ The agency also says that, with this pathway, the consumer must register for an account on the Website and the agent or broker can then explain how to complete the application.

So, with the issuer-based pathway, the agent or broker fills out the online application and enrollment *forms for the consumer*. With the Marketplace pathway, the agent or broker tells the consumer how to fill out the application and enrollment forms.

Regardless of which option you might choose, CMS has created documents showing that there are three stages in the process of getting health insurance through the Federally-facilitated online Marketplace, HealthCare.gov: registration, application, and enrollment.

Training materials from CMS show that in each stage, there are several steps that involve completing online forms.⁶

In these materials, the agency shows that in the **registration** stage, you must create a Marketplace account on HealthCare.gov by choosing a username and password and by listing your name, state, email address, and answers to three security questions.

The **application** stage is a bit more involved. The training documents from CMS show that it involves the following steps: verifying your identity and contact information, specifying how many family members need health coverage, answering family and household questions, providing information about your household income, reviewing and signing the application, reading and agreeing to specific statements, and signing and submitting the application.

You would then start the **enrollment** stage, which, according to the CMS training documents, involves the following steps: applying any available tax credits to your monthly health insurance premium, answering a question about tobacco use, choosing whether to enroll yourself and family members in separate health plans or in one plan, comparing four different categories of health plans, picking a plan, reviewing and confirming your health plan policy, agreeing to the terms of the policy and signing and submitting the agreement, and then confirming your plan choice.

As you can see, applying for and enrolling in a health plan through a Health Insurance Marketplace is a bit of a process. That's why some people choose to get help from insurance agents and brokers. These trained professionals know their way around the health insurance industry and can provide invaluable guidance.

Best of all, they can help you understand the different types of managed care health plans that are offered on Health Insurance Marketplaces. A good agent or broker can explain the difference between plans that are designated as Health Maintenance Organizations (HMOs), Preferred Provider Organizations (PPOs), and Point-of-Service (POS) plans.

Selective Healthcare

At Selective Healthcare, we understand the health insurance industry. Our licensed insurance agents and brokers can help you find a health plan that matches your budget and needs.

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