- week and are able to continue the application online. You may be able to upload docs in the application in some cases.
- ii. Once you send your docs it takes about a week before you are verified.
- iii. Always record your username, password, application I.D. and security questions together with the selected insurance plan I.D., customer service number for the desired provider etc.
- b. Phone: Call the health insurance marketplace at 1-800-318-2596
  - i. Spell you name properly in order to avoid verification issues e.g.- "first name SHYAM: S as in Sun, H as in Hotel, Y as in Yankee, A as in Apple and M as in Mike".
  - ii. Always re-confirm your address, phone no., immigration docs, social security cards etc. and with the representative.
  - iii. In case of verification issues follow the same steps as specified above.

## **Subsidy:**

Depending upon your level of income you may be eligible for Tax Credit and Cost Sharing Reduction. It is necessary to understand how they work in order for you to purchase the best affordable plan.

- a. Tax credit: When you are approved for tax credit you may choose to apply some or all of it towards the monthly premium. Your choice will determine the status of your tax return at the end of the year.
- b. Cost sharing reduction: This is an additional benefit where the program provides you with additional support for your out of pocket costs.

This is why it is required that you select "silver" plan when you are approved for the subsidy in order to get maximum benefits. This way you purchase a lower monthly premium plan but receive the benefits of a platinum plan. For e.g.- A silver plan is a 70-30 plan i.e. the insurance company pays 70% and the client is responsible for 30%. But when you are approved for tax credit and cost sharing reduction and you choose silver plan, you part of the cost sharing is lowered due to subsidy. In such cases, silver plan usually covers about 90%. Up to 94% has been recorded in some applications.

IMPORTANT: Please be careful while choosing between HMO (network provider), POS (out of network- by permission) and PPO (preferred provider) plans depending upon your needs.

## Making a payment:

Due to the heavy volume of applicants your insurance company may or may not reach you on time. So, it is better to call the customer service number after 3 days and make your payment. Remember you need your plan I.D. (not your application I.D.) for the transaction. The plan ID for GA is usually a long number with "GA" in between e.g. 00000GA000000.

## **Timeline for Incomplete Applications and Penalties:**

Applications that began within the deadline and pending verification or other systemic issues have until May 31<sup>st</sup>, 2014 to complete.

You are subject to penalty only if you were eligible (based on income) but didn't purchase a health plan. If ineligible- you are exempt from penalty or exempt if you didn't have coverage for up to 3 months in a given year due to loss or change in job etc.