

IMPORTANT INFORMATION ABOUT HEALTH INSURANCE COVERAGE OPTIONS

Selecting a health insurance plan that is right for you and your family is a big decision. You can choose from a number of coverage options for you and your family designed to give you real choices. Because everyone has different budgets and care needs, this information can help you make the decision that is right for you.

WHAT ARE YOUR COVERAGE OPTIONS?

The loss of a job is considered a qualifying event. This allows you to change your health insurance outside of the yearly open enrollment window. At this time, you are likely hearing about the options for Individual or family coverage, including dental and vision coverage, through a health insurance exchange. COBRA may also be an option for some, but it is not the only one. See the chart below to learn more about other choices you may have.

Coverage option	What is it?	Are my eligible dependents covered?	What is or is not covered?	How much does it cost?
COBRA	COBRA stands for the Consolidated Omnibus Budget Reconciliation Act. It allows you to extend your previous employer's medical, dental, and vision benefits from the date of the qualifying event for a limited period of 18 or 36 months.	Yes	You may elect to stay on your same coverage plan or move to another option under your previous employer's plan.	The average yearly premium is 102% more than the cost of employer-sponsored coverage and cannot exceed this amount. Your cost is higher with COBRA because your previous employer no longer helps pay for coverage. As part of the American Rescue Plan, COBRA premiums will be covered at 100% from April 1 through September 30, 2021.
Health insurance exchange	The health insurance exchange commonly refers to public health insurance exchanges developed by the government or your state because of the Affordable Care Act, or ACA. Think of it as a comparison-shopping area for health insurance, where you can view health plans from various insurers and choose from the available health plan options.	Yes	Empire offers medical, dental, and vision plans and networks designed to fit a variety of health and budget needs. Individuals may qualify for subsidies to assist with premiums at reduced or no cost based on incomes below certain levels.	The costs, including premium deductibles, copays, coinsurances, and out-of-pocket maximums, vary by plan. As part of the American Rescue Plan, individuals who buy their own health insurance through the Marketplace may be eligible to receive increased financial help to reduce their plan premiums. Starting April 1, 2021, individuals enrolling in Marketplace coverage may be able to take advantage of increased savings and lower costs. The law increases financial help for coverage years beginning in 2021 and 2022. Additionally, individuals who receive unemployment compensation during any week beginning in 2021 may be eligible to receive financial help to help pay for 2021 Marketplace coverage.

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Short-term plans	With short-term plans, you pick your length of coverage. Choose from one year up to a maximum of three years, depending on your state regulations. Short-term plan availability varies by state and may have coverage restrictions.	Yes*	Short-term plans may be an ideal choice for people under 65 because they offer limited coverage. Unlike Affordable Care Act plans, short-term plans do not cover pre-existing conditions. In addition, they often do not cover essential health benefits, such as prescriptions and maternity care.	Premiums may be lower than traditional individual insurance short-term plans. However, short-term plans may have a cap on the yearly coverage amount, leaving you with high out-of-pocket costs.
Medicaid	Medicaid is a low-cost, federal-state health insurance program that covers Americans based on income and other factors, such as household size and disabilities. Eligibility varies by state.	Yes	Covered services vary by state but Medicaid generally provides the same benefits as an employer-sponsored plan, such as doctor visits, labs and tests, and prescriptions.	Medicaid services are usually at no extra cost to you. However, some children and adults in higher-income households may have a small monthly premium and/or copay.
Medicare	Medicare is a federal health insurance program available for people who are 65 or older and 65 and under with certain disabilities.	No	You can choose one or more of these options: <ul style="list-style-type: none"> • Part A (hospitals) – protects you if you are hospitalized. • Part B (doctors) – coverage for outpatient care, such as doctor appointments. • Part D – coverage for prescription drugs. • Part C (Medicare Advantage) - private insurance companies provide and combine coverage from Parts A, B, and D. 	Premiums, deductibles, and out-of-pocket costs can vary greatly.

NEXT STEPS

Call us today on the Coverage Options Hotline at 888-832-2583. Our trusted advisors are available 8:30 a.m. to 8 p.m., ET, Monday to Friday. They can help answer your questions and guide you through the steps to find coverage. To help our advisors assist you as quickly as possible, please have your ZIP code and your current income level available.

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*Child-only short-term plans may be offered for dependents ages 2-17. A separate application must be submitted for dependents.