

# Why the Affordable Care Act Matters for Women: The Requirement to Have Health Insurance

SEPTEMBER 2015

The Affordable Care Act (ACA) has made it easier for millions of women to find and enroll in more economical health plans that meet their and their family's needs. To help ensure that coverage remains more affordable and to keep the cost of coverage stable, the ACA requires most individuals to enroll in health plans that qualify as minimum essential coverage.

## Who Is Required to Have Health Insurance?

While the requirement to have minimum essential coverage applies to most people, some groups are exempt, including:

- ▶ Undocumented immigrants
- ▶ Incarcerated individuals
- ▶ People with incomes so low that they are not required to pay income taxes
- ▶ People who would have to use more than 8 percent of their income to pay their health insurance coverage premium
- ▶ People who would qualify for Medicaid under the ACA's income limits [138 percent of the Federal Poverty Level (FPL)], or about \$16,243 in 2015, but who live in states that have chosen not to expand their Medicaid programs<sup>1</sup>
- ▶ People who have a gap in coverage of less than three consecutive months<sup>2</sup>

For a complete list, visit [HealthCare.gov](http://HealthCare.gov) or the Internal Revenue Service [website](#).

## What Type of Coverage Is Required?

Individuals must be enrolled in health plans that qualify as minimum essential coverage, meaning that their plans must cover a comprehensive, minimum scope of benefits.<sup>3</sup> Many people who currently receive their insurance through their employers or through federal health-insurance programs are already enrolled in plans that meet this requirement. This includes people covered by:

- ▶ Medicare Part A

- ▶ Medicare Advantage
- ▶ Most Medicaid programs
- ▶ Children’s Health Insurance Program (CHIP)
- ▶ Most TRICARE coverage
- ▶ Some veterans’ health coverage through the Veterans Administration
- ▶ Any employer plan, with or without “grandfathered” status
- ▶ Any plan bought through a health insurance marketplace
- ▶ Coverage provided to Peace Corps volunteers<sup>4</sup>

The federal government has determined that the following types of coverage do not qualify as minimum essential coverage. Individuals enrolled in the following plans should seek supplemental coverage unless they have been granted an exemption from the requirement to have minimum essential coverage:

- ▶ Medicaid coverage of specific services, such as family planning, emergency, or in some cases, pregnancy-related services<sup>5</sup>
- ▶ Coverage only for vision or dental care, workers’ compensation, or accident or disability
- ▶ Certain types of TRICARE coverage<sup>6</sup>

## Important Enrollment Dates

Anyone who is not exempted is **required to have health insurance**.

Health care coverage from the health-insurance marketplace must be purchased during an open enrollment period. The next open enrollment period is **November 1, 2015, through January 31, 2016**. (Note: Medicaid and CHIP, which are administered by the government, accept new enrollees year round.)

Individuals must qualify for a special enrollment period to enroll in a marketplace plan outside of an open enrollment period. To qualify for a special enrollment period, an individual must experience a qualifying life event such as getting married, having a baby or losing employer-sponsored coverage (there are other qualifying events as well). To determine qualification for a special enrollment period, visit [HealthCare.gov](http://HealthCare.gov) or call 1-800-318-2596.

Generally, coverage purchased through the marketplace by the 15th of the month should kick in on the first day of the following month (so if someone buys insurance on May 7, their coverage will begin on June 1).

## How to Enroll in the Health Insurance Marketplace

Many Americans already have coverage through employer-sponsored insurance, individually purchased coverage or a federal program like Medicare, Medicaid, TRICARE, or veteran’s health care. For individuals and families who do not have health insurance, or

who are looking for new coverage plans, affordable coverage options can be found in the marketplace.

These online marketplaces allow individuals to compare health plans based on price, benefits, quality and other features. Unlike in the past, plans sold in the health insurance marketplace are described in plain, consumer-friendly language and must offer comprehensive coverage.

A marketplace has been established in each state, and every marketplace offers a telephone help-line. All insurance plans offered in the marketplace must be designated as qualified health plans (QHPs), which means they include a set of minimum essential health benefits (such as maternity care), comply with limits on cost-sharing (including out-of-pocket costs) for those benefits and meet all applicable private-market reforms specified in the ACA.

For more information on how to get affordable health insurance coverage, visit [HealthCare.gov](http://HealthCare.gov) or call 1-800-318-2596.

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1 Values calculated by National Partnership based on data from: U.S. Dept. of Health and Human Services, Centers for Medicare & Medicaid Services. (2015). *2015 Poverty Guidelines*. Retrieved 22 October 2015, from <http://www.medicare.gov/medicaid-chip-program-information/by-topics/eligibility/downloads/2015-federal-poverty-level-charts.pdf>; Internal Revenue Service. (2015, July). *Individual Shared Responsibility Provision – Exemptions: Claiming or Reporting*. Retrieved 12 August 2015, from <http://www.irs.gov/Affordable-Care-Act/Individuals-and-Families/ACA-Individual-Shared-Responsibility-Provision-Exemptions>

2 U.S. Internal Revenue Service. (2015, April). *Questions and Answers on the Individual Shared Responsibility Provision*. Retrieved 12 August 2015, from <http://www.irs.gov/uac/Questions-and-Answers-on-the-Individual-Shared-Responsibility-Provision>

3 Ibid.

4 See note 2.

5 Note: For more information on pregnancy-related coverage, see <https://www.macpac.gov/publication/update-on-pregnancy-related-medicare-and-minimum-essential-coverage/>

6 See note 2.