

ACA Health Insurance Marketplace

Your Simple Guide to Getting Coverage



What is the ACA Marketplace?

The Affordable Care Act (ACA) Marketplace is where you can shop for, compare, and enroll in quality health insurance plans. Think of it as a one-stop shop for health coverage that fits your needs and budget.

Who Can Use the Marketplace?

Most people can use the Marketplace to buy health insurance. You're eligible if you:

- Live in the United States
- Are a U.S. citizen or national (or lawfully present)
- Are not currently incarcerated
- Don't have Medicare coverage



Important Dates for 2025 Coverage

Open Enrollment Period: November 1, 2024 - January 15, 2025

Coverage Starts: January 1, 2025 (if enrolled by December 15, 2024)

Note: Special Enrollment Periods available for qualifying life events

Understanding Plan Categories

All Marketplace plans cover the same essential health benefits. The difference is how you and your plan split costs:

Bronze

60/40

Plan pays 60%

You pay 40%

Lowest monthly
premium

Highest costs when you
need care

Silver

70/30

Plan pays 70%

You pay 30%

Moderate monthly
premium

Moderate costs when
you need care

Gold

80/20

Plan pays 80%

You pay 20%

Higher monthly
premium

Lower costs when you
need care

Platinum

90/10

Plan pays 90%

You pay 10%

Highest monthly
premium

Lowest costs when you
need care

Essential Health Benefits

All Marketplace plans must cover these 10 essential health benefits:

- Ambulatory patient services (outpatient care)
- Emergency services
- Hospitalization
- Maternity and newborn care
- Mental health and substance use disorder services
- Prescription drugs
- Rehabilitative services and devices
- Laboratory services
- Preventive and wellness services
- Pediatric services (including dental and vision)

Financial Assistance



Premium Tax Credits

Lower your monthly premium based on your income and household size



Cost-Sharing Reductions

Lower out-of-pocket costs (deductibles, copays) if you choose a Silver plan

Income Guidelines for 2025

Financial assistance is available for households earning between 100% and 400% of the Federal Poverty Level (FPL).

Example for 2025:

- Individual: \$15,060 - \$60,240
- Family of 2: \$20,440 - \$81,760
- Family of 4: \$31,200 - \$124,800

How to Enroll

1 Create an Account

Visit HealthCare.gov (or your state's marketplace website)

2 Complete Your Application

Provide information about your household, income, and current coverage

3 Compare Plans

Review available plans, costs, and covered doctors/medications

4 Check Your Eligibility

See if you qualify for financial assistance

5 Select and Enroll

Choose your plan and complete enrollment

6 Pay Your First Premium

Make your first payment to activate coverage

Tips for Choosing a Plan

- **Check your doctors:** Make sure your providers are in-network
- **Review medications:** Confirm your prescriptions are covered

- **Consider total costs:** Look beyond just the monthly premium
- **Think about your health needs:** Choose based on how often you need care
- **Don't forget dental/vision:** Adult coverage may require separate plans

Special Enrollment Periods

You can enroll outside Open Enrollment if you have a qualifying life event:

- Lost health coverage (job loss, aging off parent's plan)
- Moved to a new state or ZIP code
- Got married or divorced
- Had a baby or adopted a child
- Household income changed affecting subsidy eligibility

You typically have 60 days from the qualifying event to enroll

Ready to Get Started?

Visit **HealthCare.gov** or call **1-800-318-2596**

TTY users: **1-855-889-4325**

Free help is available in your community from trained assisters
Find local help at [LocalHelp.HealthCare.gov](https://www.localhelp.healthcare.gov)