5 things you can do to get ready to enroll

1. **Explore the Marketplace.** Visit HealthCare.gov to learn more about the Health Insurance Marketplace and programs you may qualify for, including Medicaid and CHIP.

2. **Ask your employer if it offers health insurance.** Some employers will take advantage of the Small Business Health Options Program (SHOP) to provide health coverage to employees. If not, you may need to get coverage through the Marketplace or other sources.

3. **Make a list of questions you have before it's time to choose your health plan.** For example, “Can I stay with my current doctor?” or “Will this plan cover my health costs when I’m traveling?” This will help you as you compare different health plans.

4. **Gather basic information about your household income.** Most people using the Marketplace will qualify to save money. To find out how much you’re eligible for, you’ll need income information like the kind you get on your W-2, pay stubs, or tax return.

5. **Set your budget.** There are different types of health plans to meet a variety of needs and budgets. You’ll need to figure out how much you’re able to spend on premiums each month. Think about your health care needs. If you expect a lot of doctor visits or need regular prescriptions, you might want a plan that has higher monthly premiums, but pays more of the costs when you need care so you’d pay lower out-of-pocket costs for each visit, prescription, or other medical service.
Better health insurance choices

The Health Insurance Marketplace is a way to find health coverage that fits your budget and meets your needs. With one application, you can see all your options and enroll. You can apply for private insurance, Medicaid, or the Children’s Health Insurance Program (CHIP).

Every health plan in the Marketplace offers the same set of essential health benefits, including doctor visits, preventive care, hospitalization, prescriptions, and more. You can compare plans based on price, benefits, quality, and other features important to you before you make a choice.

Insurance plans run by private companies

Insurance plans offered through the Marketplace are run by private companies. No matter where you live, you’ll be able to compare your health coverage options in the Marketplace and see what your premium, deductibles, and out-of-pocket costs will be before you make a decision to enroll.

There are protections for you and your family. Insurance plans can’t deny you coverage because of pre-existing or chronic conditions like cancer or diabetes, and they can’t charge women and men different premiums.

Get a break on costs

When you use the Marketplace you may be able to get a tax credit to lower costs on your monthly premiums and out-of-pocket costs. When you apply, you’ll find out how much you can save. Most people who apply will qualify for some kind of savings.

Explore the Marketplace

Visit HealthCare.gov to get answers to your questions and sign up for e-mail updates about the Marketplace. You can also call the Health Insurance Marketplace Call Center at 1-800-318-2596. TTY users should call 1-855-889-4325.

When Open Enrollment starts, you can go to the Marketplace and apply for health coverage, compare all your options, and enroll in a plan.

If you qualify for a Special Enrollment Period (SEP) because of a life change like getting married, having a baby, losing other coverage, or moving, you may apply for coverage outside of Open Enrollment. You also can apply for Medicaid and the Children’s Health Insurance Program (CHIP) any time of the year, using the same application.

Open Enrollment for 2016 coverage begins November 1, 2015 and ends January 31, 2016. Enroll by December 15 so your new coverage starts January 1.