5 Tips: Changing from Marketplace Health Insurance to Other Coverage

If you're enrolled in a Marketplace plan, you may need to end your coverage if you get other health coverage, like through a new job, Medicare, Medicaid, or the Children's Health Insurance Program (CHIP).

Here are 5 tips to help you transition to coverage outside the Marketplace:

1. **Act as soon as possible.** There may be consequences to not ending your Marketplace plan in a timely manner. You can end coverage for everyone on your plan or just some people, like if someone gets coverage from another source, but the rest of the people on the application want to keep their Marketplace coverage.
   - If you're ending Marketplace coverage for everyone on your application, your termination can take effect as soon as the day you cancel, or you can set the end date to a day in the future.
   - If you're ending Marketplace coverage for just some people, in most cases, their coverage will end immediately.
2. **Don't end your Marketplace plan until you're certain when your new coverage will start.** Otherwise, you may have a gap in coverage. If you think you may be eligible for Medicaid or CHIP, don't cancel your Marketplace plan until you get a final decision about your eligibility. Once you end Marketplace coverage, you can't re-enroll until the next annual Open Enrollment Period, unless you have certain life events —like getting married, having a baby, moving, or losing coverage — that qualify you for a Special Enrollment Period.

3. **When and how you end your Marketplace plan depends on your situation, including whether:**
   - You're eligible for or enrolled in Medicaid, CHIP, or Medicare.
   - You're ending coverage for everyone on the Marketplace plan, or just some people.
   - You're ending coverage for the person who filled out the application.

> For step-by-step instructions on how to end your Marketplace plan based on your situation, visit **HealthCare.gov/how-to-cancel-a-marketplace-plan/.**

4. **Report all income and household changes immediately.** These changes may affect your coverage or cost savings. For example:
   - If you remove a member of your household from your Marketplace plan, you may qualify for less savings than you're getting now. If you don't report the change to the Marketplace, you may have a greater tax liability or a smaller refund when you file your federal tax return.
   - If your household income goes down, you could qualify for more cost savings than you're getting now, including lower monthly premiums. You could also qualify for lower-cost or free coverage through Medicaid or CHIP. If you don't report the income change, you could continue to pay more than you need to.

Learn how to report changes at **HealthCare.gov/reporting-changes.**

5. **You can cancel a stand-alone dental plan while keeping your Marketplace coverage.** If you bought a stand-alone dental plan when you enrolled in a Marketplace health plan and now want to end only your dental coverage, you can do so any time. You can't buy a dental plan unless you're buying a Marketplace plan at the same time.

For more information, visit **HealthCare.gov**, or call the Marketplace Call Center at 1-800-318-2596 TTY users can call 1-855-889-4325.

You have the right to get Marketplace information in an accessible format, like large print, Braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against. Visit **CMS.gov/about-cms/agency-information/aboutwebsite/cmsnondiscriminationnotice.html**, or call the Marketplace Call Center at 1-800-318-2596 for more information. TTY users can call 1-855-889-4325.

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