In an emergency, you can get care from the hospital closest to you. That hospital will treat you whether or not you have insurance. Your insurance company can’t charge you more for getting emergency room services at an out-of-network hospital.

If I’m having an emergency, do I need to call my insurance company before I go to the hospital?

No. If you’re having a true emergency, go straight to the hospital. Insurance companies can’t require you to get prior approval before getting emergency room services, including from a provider or hospital outside your plan’s network.

What does it mean that insurance companies can’t charge me more?

Getting out-of-network care usually costs more than getting in-network care, but in an emergency you’ll only be charged your in-network amounts even if you get care at a hospital that’s out of network.

Insurance companies can’t make you pay more than your in-network cost-sharing amount (like your deductible, copayment, or coinsurance) if you get emergency care from an out-of-network hospital. The hospital can’t bill you for more than this amount.

What will I have to pay for emergency room services?

This depends on the plan that you have and the hospital you go to. For example, you may have to pay a deductible.

How can I learn more?

To learn more about coverage through the Marketplace or your benefits and protections, visit HealthCare.gov or call the Marketplace Call Center at 1-800-318-2596. TTY users can call 1-855-889-4325.