4 things to know about health insurance

1. Different health insurance policies can offer different benefits, and some can limit which doctors, hospitals, or other providers you can use.
2. You may have to pay a deductible each plan year before your insurance company starts to pay for your care. For example, let's say your deductible is $200. You have a $1,250 emergency room visit. You pay the first $200 to cover the deductible, and then your insurance starts to pay its share.
3. You may have to pay coinsurance or a copayment when you get medical care, like a doctor visit, hospital outpatient visit, or a prescription. Coinsurance is usually a percentage amount (for example, 20% of the total cost). A copayment is usually a fixed amount (for example, $10 or $20 for a prescription or doctor visit).
4. Health insurance plans contract with networks of hospitals, doctors, pharmacies, and health care providers. Depending on the type of policy you buy, your plan might only pay for your care when you get it from a provider in the plan's network, or you may have to pay a bigger share of the bill.

Get more information about how insurance works at **HealthCare.gov**. You can also 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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Health Insurance Marketplace

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The Value of Health Insurance

Health insurance helps pay costs when you need care

No one plans to get sick or hurt, but most people need medical care at some point. Health insurance helps pay for these costs and protects you from very high expenses.

What is health insurance?

Health insurance is a contract between you and an insurance company. You buy a plan, and the company agrees to pay part of your medical costs when you get sick or hurt.

There are other important benefits of health insurance. Plans available in the Health Insurance Marketplace (and most other plans) provide free preventive care, like vaccines and check-ups. They also cover some costs for prescription drugs.

Health insurance helps you pay for care

Did you know the average cost of a 3-day hospital stay is around $30,000? Or that fixing a broken leg can cost up to $7,500? Having health coverage can help protect you from high, unexpected costs like these.

Your insurance policy or summary of benefits and coverage will show what types of care, treatments, and services your plan covers, including how much the insurance company will pay for different treatments in different situations.

What you pay for health insurance

You'll usually pay a premium every month for health coverage, and you may also have to meet a deductible each year. A deductible is the amount you owe for covered health care services before your health insurance or plan begins to pay. The deductible may not apply to all services.

How much you pay for your premium and deductible is based on the type of coverage you have.

Just as important as the premium cost and deductible is how much you have to pay when you get services.

Examples include:

- What you pay out-of-pocket for services after you pay the deductible (coinsurance or copayments)
- How much in total you'll have to pay if you get sick (the out-of-pocket maximum)

The policy with the cheapest premium may not cover many services and treatments.