

Short term insurance plans:

- are medically underwritten and you must answer a series of medical questions to apply for coverage
- are not guaranteed issue the insurer can decline the application
- do not cover preexisting conditions
- do not have coverage requirements, so plans vary in what they cover
- is not required to comply with certain federal market requirements for health insurance
- Short term policies can be applied for any day of year

Affordable Care Act (ACA) / Marketplace / Obamacare Plans:

- December 15th was the deadline for plans with a January 1st effective date
- January 15th is the extended deadline for plans with a February 1st effective date
- ACA health plans are guaranteed issue, meaning you cannot be denied coverage based on preexisting conditions
- ACA health plans are required to cover 10 essential health benefits
- ACA law provides consumers with subsidies ("premium tax credits") that lower costs for households with incomes between 100% and 400% of the federal poverty level (FPL).

Essential Health Benefits Ensure That ACA Health Plan Are Required to Cover

These essential health benefits fall into 10 categories:

1. Ambulatory patient services (outpatient services)
2. Emergency services
3. Hospitalization
4. Maternity and newborn care
5. Mental health and substance use disorder services, including behavioral health treatment
6. Prescription drugs
7. Rehabilitative and habilitative services (those that help patients acquire, maintain, or improve skills necessary for daily functioning) and devices
8. Laboratory services
9. Preventive and wellness services and chronic disease management
10. Pediatric services, including dental and vision care