Quick Guide for getting health insurance

This guide offers you basic information about health insurance terms and costs. It’s designed to help you understand your insurance options and find ways to access care affordably.

What is health insurance and why is it important?

It’s important to have access to health insurance when you’re living with a chronic condition, such as psoriasis or psoriatic arthritis. That’s because health insurance helps you pay for services like regular checkups, prescription medicines, appointments with specialists and lab work.

Health care services can be expensive. When you have health insurance, you pay for your health plan. And your health plan helps to pay some costs for your health care. The type of plan you enroll in will determine your coverage for the year, so it’s important to understand what you want from your plan and what your plan provides.

Type and affordability of insurance varies greatly based on your situation and location. If you are uninsured, it’s a good idea to review your options for accessing health insurance on a regular basis.

Health insurance is expensive. Wouldn’t it be cheaper to pay for my health services on my own?

Health insurance ends up saving you money especially when you have unexpected health expenses, like a hospitalization, or when you regularly use health services, like frequent visits to your specialist and prescription refills.

While health insurance includes up-front costs (like a monthly premium), having health insurance is usually cheaper in the end than trying to get specialty care while you’re uninsured.

What are some of the costs associated with health insurance?

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
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<tbody>
<tr>
<td>Premium</td>
<td>This is the dollar amount you pay each month to maintain your health insurance.</td>
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<tr>
<td>Deductible</td>
<td>This is the amount you must pay on your own before your insurance company starts to pay for covered health care services.</td>
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<tr>
<td>Copayment (or copay)</td>
<td>This is a set dollar amount you pay each time you have an appointment with your provider or fill your prescription medicine.</td>
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<tr>
<td>Coinsurance</td>
<td>Some plans have coinsurance. This means you pay a percentage of the cost of your health care and covered prescription medicines. Your insurance plan pays the rest.</td>
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<tr>
<td>Annual Out-of-Pocket Maximum</td>
<td>This is a limit on how much you may have to spend on health care each year.</td>
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<tr>
<td></td>
<td>• This is a total of your deductible, copays and coinsurance</td>
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<tr>
<td></td>
<td>• This does not include your premiums</td>
</tr>
<tr>
<td></td>
<td>Once you reach this limit, your insurance plan will pay for all covered health care costs.</td>
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</table>
If you are currently uninsured, you may have options to get health insurance:

**Commercial Insurance**

You can get insurance through your employer or by purchasing a plan on your own through a broker or insurance company. Another option is the Health Insurance Marketplace, also called the “Marketplace.”

The Marketplace allows you to shop for health insurance and compare plan offerings. Some states have their own marketplace with a specific name and website.

**Marketplace Open Enrollment** is the period each year when you can enroll in a plan or switch your health plans. For 2019, Marketplace Open Enrollment is Nov. 1, 2018 through Dec. 15, 2018.

It is important to keep in mind that cost assistance is available to most people shopping on the Marketplace. Depending on your income and household size, you may be eligible for discounts off the cost of your monthly premium.

**Medicaid**

Medicaid is a federal and state program that provides free or low-cost health care for people with low incomes.

Each state offers different Medicaid programs for different groups of low-income people, such as families and children, pregnant women, the elderly and people with disabilities.

Some states have expanded their Medicaid programs to cover all people below certain income levels. Usually, this income level is 138% of the federal poverty guideline, or $22,715 annual income for a household of two.

Different states have different eligibility requirements for their Medicaid programs based on income level. You can use this tool to get a general idea of whether you’re eligible for Medicaid: [healthcare.gov/lower-costs](http://healthcare.gov/lower-costs).

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**Key questions when comparing my options**

- Does the plan cover the health care services I need?
- Are my current prescriptions covered?
  - Are they listed on the formulary?
  - If so, what tier of coverage are they in?
  - A formulary is a list of drugs your plan will cover. You will pay different copay or coinsurance amounts for different tiers (levels of coverage).
- How much will it cost to see a specialist?
- How much is the:
  - Monthly premium?
  - Deductible?
  - Copay and/or coinsurance?
  - Annual out-of-pocket maximum?
- Does my current health care provider accept this plan?

**Work with your Patient Navigator to access health care**

It can be overwhelming to understand your options for accessing health insurance, but we’re here to help!

An NPF Patient Navigator can help you research affordable options for getting health insurance based on your unique needs and situation. Your Navigator can also help you find ways to access care while uninsured, like participating in clinical trials, using patient assistance programs, or using a free or low-cost clinic.

**Phone:** 1-800-723-9166 (option 1)  
**Email:** education@psoriasis.org  
**Text:** 503-410-7766

Learn more about the Patient Navigation Center: [psoriasis.org/navigationcenter](http://psoriasis.org/navigationcenter)