Use Your Health Insurance

Review Membership Package...

- Usually arrives within 2-3 weeks after you enrolled, and includes health insurance card/s for everyone insured
- If you haven’t received, call your insurance company or go to their website to get help

Schedule Annual with PCP (Primary Care Provider)...

- This is who you’ll see first for most health needs
- They will coordinate recommended screenings, keep your health records, help manage chronic conditions, and link you to other providers when needed

Choose the right care for your need...

- Your PCP—Many offer same day openings for same day needs
- 24-hour Nurse Hotline—Describe your symptoms and get guidance
- Urgent Care Clinic—Usually have evening and weekend hours
- Emergency Room/Hospital—life or limb-threatening emergency

Use In-Network Providers...

- Marketplace plans do not cover any costs for Out-of-Network Providers
- Providers can change networks at any time. Confirm that your provider is In-Network:
  ◦ Check your health plan’s Provider Directory online, or
  ◦ Call and ask your health plan, or
  ◦ Call and ask the doctor’s office
Safeguard Your Health Insurance Card

Have your health insurance card with you always

- Identifies you
- Used for billing
- Used to track specific benefits of your plan
- Describes the type of plan (HMO, PPO, etc.)
- Lists what you pay for services
- Number to call with questions
- Amount you pay for prescriptions

Show your health insurance card when you seek care

- Use at doctor’s office, hospital or urgent care
- Labs for bloodwork
- Pharmacies for medications

It’s fraud to use someone else’s insurance card
Call your insurance company immediately if you lose your card

Keep your health insurance card safe

Example Insurance Card

<table>
<thead>
<tr>
<th>Insurance Company Name</th>
<th>Plan Type</th>
<th>Effective Date</th>
<th>Prescription Group #XXXX</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Insurance Company Name</th>
<th>Member Name: Mary Smith</th>
<th>Group Number: xxx-xx-xxx</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>DOB: 08/23/65</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Member Number: xxx-xx-xxxx</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Insurance Company Name</th>
<th>Prescription Copay</th>
<th>PCP Copay</th>
<th>Specialist Copay</th>
<th>Emergency Room Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$15.00 Generic</td>
<td>$15.00</td>
<td>$25.00</td>
<td>$75.00</td>
</tr>
<tr>
<td></td>
<td>$20.00 Name Brand</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Member Service: 800-xxx-xxxx

Example:

1. Identifies you
2. Used for billing
3. Used to track specific benefits of your plan
4. Describes the type of plan (HMO, PPO, etc.)
5. Lists what you pay for services
6. Number to call with questions
7. Amount you pay for prescriptions