

## How To Use Your Health Insurance and How Not To Lose Your Health Insurance

The first thing you must do after your insurance starts is to call your insurance company and choose a doctor that works with your insurance company. The doctor that you choose will be your main (primary care) doctor. In an emergency, always call 911 or go to the emergency room, but with non-emergency medical problems, you must always see your main doctor first. If your main doctor thinks you need to see a specialist, he/she will direct you to another doctor who specializes in your medical problem. You cannot go to a specialist without a referral from your main doctor. You also may not be able to go to the doctor(s) that you used in the past and expect that your insurance will help pay to see this doctor. If you have a doctor that you like and want to continue with, you can ask your doctor which insurance plans he/she accepts and you can enroll in one of those if it is affordable. After you buy your insurance, you can then ask your insurance company if that doctor can be your primary care doctor. Here are some insurance company phone numbers: Molina 1-888-560-4087 Total Healthcare 1-800-826-2862 Blue Care 1-800-662-6667 Humana 1-800-833-6917

**Important: If your main doctor refers you to another doctor or lab or hospital, make sure that this lab/doctor/hospital is in your insurance company network. If not, your insurance company will not pay for any of the bill. You should not assume that your doctor referred you to someone in your network.**

Your insurance company will not pay for all of your medical bills. When you see a doctor for a medical problem, you will have to pay a copay (generally a small payment) and your insurance company will pay for the rest. For medication, you will also probably have to make a copay. For lab tests, other tests, surgeries, hospitalizations, etc . . . you will have to pay these bills until you reach your "deductible" amount. Then the insurance company will start paying for most of these bills. After you pay a certain amount of money during the year (called "maximum out of pocket"), then the insurance company will start paying for everything. For example, your insurance plan may have a \$5 copay to see a doctor, a \$20 copay to see a specialist, a \$500 deductible and a \$1500 "max out of pocket". In this example, you will have to pay \$500 out of your own pocket for medical expenses during the year before the insurance company will start paying money toward surgeries, tests, hospitalizations, etc . . . . After you pay \$500 in expenses during the year, then the insurance will start paying for most of your expenses but you will still have to contribute to part of your bills. Once you have spent \$1500 during the year, everything beyond that should be paid completely by your insurance company.

With your insurance there are many free tests and vaccines that you can get without paying a copay. If you are over 50 and have not had a colonoscopy (colon screening), you can get this very important test for free. This test normally costs \$3,000 and it is strongly recommended that everyone over 50 get a colonoscopy . It can be lifesaving. Women over 40 can get a free mammogram every 1 to 2 years. All men and women can get a free blood pressure test, a free cholesterol test, a free type 2 diabetes test if you have high blood pressure, and a free test for HIV or sexually transmitted diseases if you are at risk for these problems. Additionally, sexually active women can get a free cervical cancer screening. There are also a few other free tests available that I have not mentioned many of the standard vaccines are free. To get one or several of these free tests or vaccines, first call your insurance company and make sure the tests you want will be free to you (given your age, medical history, gender, etc . ). Then call your doctor's office and tell them which tests you want. They may require you to schedule a preventative care visit especially if they have not seen you before. Note: if any other medical problems are discussed or found during your preventative care visit, your doctor may charge you for that.

**Important: How To Lose Your Insurance** - the main way is to not pay your monthly insurance bills, but you can also lose your insurance because of large monthly price increases that you cannot afford. This will occur if you lose your tax credits (your insurance discount). **If the IRS (Internal Revenue Service), DHHS (Department of Health and Human Services), or the Health Insurance Marketplace sends you a letter, you must open it, read it, and do what they ask. Do not ignore this letter or assume it is junk mail. Usually they will want you to document your income. If you don't do what they ask, they will take away your tax credits and the price of your insurance will likely rise by hundreds of dollars each month.** If you are not sure what to do when you receive this letter, contact the person that enrolled you in insurance for help. Also if your income changes during the year, it is important that you contact the Marketplace at 800-318-2596 to let them know so they can adjust your tax credits. Also you must file a federal income tax return or lose your tax credits (discount).