

## Open Enrollment 2018 Frequently Asked Questions (FAQs)

### OVERVIEW

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This document includes responses to help you address the most common questions about this year's Open Enrollment period. We encourage you to use the responses as you speak to specific audiences to help keep them enrolled and informed, and encourage healthcare professionals to remind patients in their care about Open Enrollment.

### OPEN ENROLLMENT FAQs

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#### **When is this year's Open Enrollment period and why is it important?**

Open Enrollment begins Wednesday, November 1<sup>st</sup> and ends Friday, December 15<sup>th</sup>. It is the only period in which consumers are able to visit [healthcare.gov](http://healthcare.gov) and select an insurance plan from the appropriate vendor (either via their state or the federal government) that makes the most sense for themselves and their families.

#### **What logistical details are most urgent to convey to consumers?**

Previous Open Enrollment periods have lasted 90 days; this year's is only 45 days. Additionally, [healthcare.gov](http://healthcare.gov) – the primary tool for obtaining coverage – will be offline on Sundays during the Open Enrollment period from 12 am-12 pm Eastern Time, except on December 10<sup>th</sup>, 2017.

#### **Why is it important for nurses and ANA to help promote Open Enrollment?**

ANA and nurses are at the forefront of improving the quality of health care for all. For decades, ANA has displayed a longstanding commitment to bolstering the health and wellness of nurses, and advocating on health issues that affect nurses and the public.

#### **What impact will the Trump Administration's recent actions against the Affordable Care Act have on Open Enrollment?**

On Thursday October 12<sup>th</sup>, the Trump Administration took two actions to destabilize the Affordable Care Act exchanges – one allowing for the purchase of alternative health plans (AHPs) (read more here) and one ending critical cost-sharing reduction (CSR) payments (read more here). The action on alternative health plans will not have any impact on this year's open enrollment period. We are uncertain what impact ending CSRs will have; we do know that these moves will not impact premium tax credit subsidies. The best course of action, based, on what we know, **is to still enroll or re-enroll in a health plan during Open Enrollment.**

#### **How do I respond to those who believe our involvement in Open Enrollment is influenced by political considerations?**

The ANA represents the interests of America's 3.6 million registered nurses, and as the nation's most trusted profession and largest group of health care professionals, nurses understand the critical nature of health coverage. Nurses are instrumental in raising awareness and educating their patients, communities, health care colleagues about healthcare coverage. Our efforts to promote Open Enrollment are independent of our ongoing advocacy efforts at the local, state and federal levels.

**What will happen if consumers do not sign up for a health insurance plan during the Open Enrollment period?**

They will be unable to purchase health insurance coverage on the individual market until the next Open Enrollment period, tentatively scheduled to begin in November 2018 (unless they experience a special qualifying event such as pregnancy or qualify for Medicaid or the Children's Health Insurance Program). Being locked out of the individual market for almost a year puts the health of the individual and their family members at risk, and will make it much more difficult to acquire important preventive and other health care services.

**What about low-income consumers who are afraid that they will be unable to afford purchase health insurance coverage or health care services?**

Individuals with household income between 100% (\$12,060 for an individual and \$24,600 for a family of 4) to 400% (\$48,240 for an individual and \$98,400 for a family of 4) of the Federal Poverty Level are eligible for premium tax credits to help pay for monthly premium costs. Some individuals may also be eligible for cost-sharing reduction subsidies to help pay for co-payments and co-insurance. Details can be found on [Healthcare.gov](http://Healthcare.gov).