

All Affordable Care Act plans must cover these ten conditions called "Essential Health Benefits" ("EHB"):

- Ambulatory patient services
- Emergency services
- Hospitalization
- Maternity and newborn care
- Mental health and substance use disorder services
- Prescription drugs
- Rehabilitative and habilitative (conditions a person is born with) services
- Laboratory services
- Preventive and wellness services and chronic disease management
- Pediatric services, including dental and vision care and services for children under age 19

Plans that cover these conditions and meet other requirements like not exceeding maximum permitted deductibles and having adequate networks of providers are referred to as "Qualified Health Plans" ("QHP").

- To qualify for special enrollment, you must have a Qualifying Life Event (QLE), such as losing employer-based coverage.
- You can enroll or change plans during open enrollment or if you qualify for a special enrollment period. You can re-enroll in your existing plan during open enrollment.
- If you enroll during open enrollment in states that participate in healthcare.gov (e.g., Florida) coverage will be effective January 1, 2024 if you enroll between November 1 and December 15, 2023) or February 1, 2024 if you enroll between December 16, 2023 and January 15, 2024.
- Only plans sold on healthcare.gov (in states like Florida) qualify for cost assistance [NOTE: we can help you choose plans on healthcare.gov (or directly with insurance carriers). We have special software that allows us to expedite the process and quickly help you enroll. Some states, e.g., Connecticut and California, do not participate on healthcare.gov, but, instead, have their own state-based enrollment systems.]