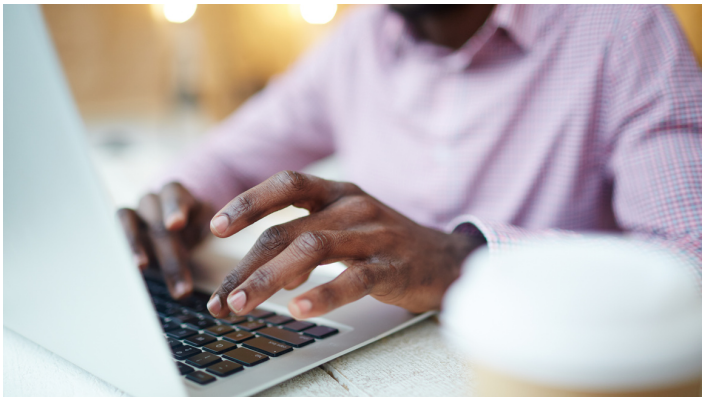
NEED HEALTH INSURANCE?
WE CAN HELP!

OPEN ENROLLMENT IS 11/1/2023 - 1/17/2024

PROOF OF INCOME NEEDED

MINIMUM ANNUAL INCOME $14,580
+ $5,140 PER HOUSEHOLD MEMBER

UNLESS THERE IS A
QUALIFIED HARDSHIP



AVAILABLE DAILY | FLEXIBLE TIMES

IN-PERSON, TELEPHONE, OR VIRTUAL

CREATE ACCOUNT

ENROLL

CONNECT TO CARE

LOST MEDICAID OR KIDCARE?

GET MARKETPLACE COVERAGE

CALL OR TEXT US

561.440.0164 | ENGLISH
561.545.4740 | ESPAÑOL
561.545.4989 | KREYOL

www.HCSEF.org

HEALTH COUNCIL OF SOUTHEAST FLORIDA

A HEALTHIER

Appointment for Health Insurance Enrollment, Information & Linkage

Community Health Advocate _____

Phone Number _____

Meeting Site _____

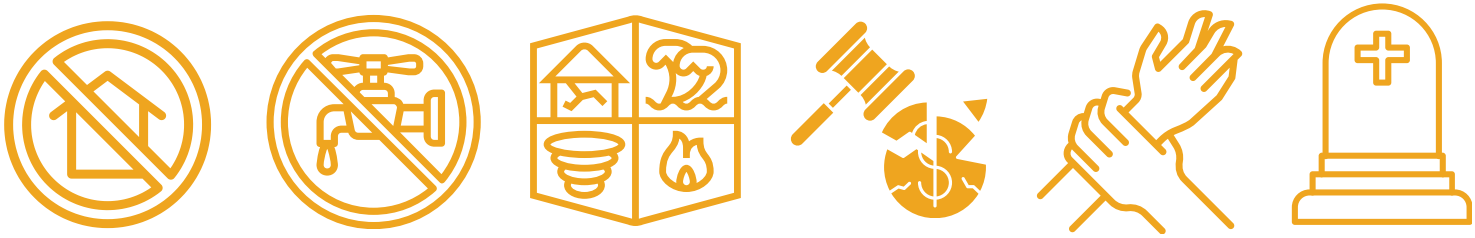
Meeting Time _____

Marketplace Income Guidelines (2023)

Household Size	1	2	3	4	5	6
Maximum Eligible Income	$14,580	$19,720	$24,860	$30,000	$35,140	$40,280

+ $5,140 for each additional person.

Hardship Exemptions



Homelessness, eviction, utility shut-off notice, disaster, bankruptcy, victim of domestic violence, death in household, and more.

HEALTH COUNCIL OF SOUTHEAST FLORIDA

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