

Health Insurance—Making A Choice Following Loss of Employment

When you have lost your job, you may have also lost your health insurance. You have options to either retain your current coverage or to obtain new coverage. The following information may be of assistance to you as consider what is best for you.

Federal Marketplace

You can purchase health insurance for yourself or for you and your family on the federal marketplace if you lose coverage due to the loss of your job. This is called a Special Enrollment Period (SEP). You will have sixty days to enroll after you lose coverage **OR** if you expect to lose your coverage in the next 60 days.

Depending upon your income, you may be eligible for a subsidy to help you pay your premium. Additional financial assistance to pay for co-payments for your medications or doctor visits may also be available if you qualify due to your income. To see if you potentially qualify for a subsidy prior to the purchase of a plan, the Department recommends you visit the [Kaiser Family Foundation website](#). Please note that this website is for informational purposes only.

To **sign up for a plan**, you will need to:

- Work with a licensed insurance agent;
- Visit healthcare.gov to directly sign up for a plan with the federal marketplace; or
- Call 1-800-318-2596.

When you look at the price of the plan, you should also factor in the cost of the deductible and out-of-pocket expenses. You will also want to make sure that your medical providers are in the plan you select.

If you purchase through the federal marketplace, you will be asked to fill out an application. You may also be asked for additional information regarding the loss of your previous health insurance coverage. Once you fill out the application, you'll find out if you qualify for a subsidy to help you pay for your premium and your out-of-pocket health care costs. You might also discover that you, or members of your family, may be eligible for Medicaid or the Children's Health Insurance Program (CHIP). If you purchase coverage through the federal marketplace, your coverage date is based upon when you pick a plan. Typically, the coverage will start on the first day of the month after you pay your premium for the plan you pick.

There are two companies currently offering coverage on the marketplace in 2020 in Nebraska—Bright Health and Medica.

For more information on a marketplace special enrollment period and if you potentially qualify, please click [here](#).

COBRA

If you had coverage through your employer, and your employer had more than 20 employees, you may be eligible for continuation of your health insurance coverage through your employer plan. The coverage can continue for up to 18 months. Some may choose this option if they have already had significant medical expenses, and have met their deductibles or out-of-pocket expenses under their plan.

Carefully research your options before making a decision. The cost may be more expensive than a plan on the marketplace. You'll need to consider that you will pay the full premium costs, without any contribution by your former employer or the government, plus you will pay an additional administrative fee. To find out more about those costs, contact the human resources division of your former employer.

If you opt for COBRA coverage, your ability to obtain a marketplace plan may be limited until the next marketplace open enrollment period. An open enrollment period typically runs from November 1 through December 15. If you are outside of the open enrollment timeframe, the only way to get into a marketplace plan is through a Special Enrollment Period, during the next open enrollment period, or if your costs of the COBRA coverage change. You may be in locked into your COBRA plan for some time until one of those events occur resulting in significant cost to you. More information on that situation can be found [here](#).

Mini-COBRA

The Nebraska Health Insurance Continuation of Coverage Act, or "mini-COBRA," is a state law that allows for the continuation of your employer-sponsored health insurance coverage and applies to employers with 20 or less employees. If you are involuntarily terminated, for reasons other than misconduct, mini-COBRA allows you to keep your coverage on a monthly basis until one of the following events happen:

- The date of expiration of a period of six months following the date the coverage of the terminated employee would otherwise be terminated, or
- The date of the terminated employee becomes eligible for other group coverage or becomes eligible for Medicare, or
- The date of expiration of the monthly period for which premiums were paid in the event of a non-payment of premium, or
- The date the terminated employee exercised the privilege provide under the group policy to convert to an individual or family plan, or
- The date on which the group plan or HMO agreement is terminated or the employer terminates participation under the group plan or HMO.

If you opt for Mini-COBRA coverage, please keep in mind that **you will pay the total cost of the plan plus an administrative fee of 2%**. The cost of the plan can be very expensive. Your former employer does not contribute to the payment of the plan and there is no subsidy available from the government to assist in payment. If you fail to make the premium payments, you will be terminated from the plan.

Any questions concerning the Federal Marketplace, COBRA, or mini-COBRA may be directed to Martin Swanson at martin.swanson@nebraska.gov or Laura Arp at laura.arp@nebraska.gov.