# 5 Tips: Changing from Marketplace Health Insurance to Other Coverage

If you're enrolled in a Marketplace plan, you may need to end your coverage if you get other health coverage, like through a new job, Medicare, Medicaid, or the Children's Health Insurance Program (CHIP).

# Here are 5 tips to help you transition to health coverage outside the Marketplace:

- Act quickly. There may be consequences if you don't end your Marketplace coverage timely. You can choose to end coverage for everyone on your plan or just some people, like if someone gets health insurance from another source but the rest of your household wants to keep their Marketplace coverage.
  - If you're ending Marketplace coverage for everyone on your application, your termination can take effect as soon as the day you cancel, or you can set your end date to a day in the future.
  - If you're ending Marketplace coverage for just some people in your household, their coverage will end immediately in most cases.

### 2. Don't end your Marketplace plan until you know when your new coverage will start.

Otherwise, you may have a gap in coverage. If you think you may be eligible for Medicaid or CHIP, don't cancel your Marketplace plan until you get a final decision about your eligibility. Once you end your Marketplace coverage, you can't re-enroll until Open Enrollment (November 1 – January 15), unless you're eligible for a Special Enrollment Period due to a qualifying life event — like getting married, having a baby, moving, or losing health coverage — or based on your yearly estimated income. Go to HealthCare.gov/coverage-outside-open-enrollment/special-enrollment-period for a list of qualifying life events.

## 3. When and how you end your Marketplace plan depends on your situation:

- You're eligible for or enrolled in Medicaid, CHIP, or Medicare.
- You're ending coverage for everyone on the Marketplace plan, or just some people.
- You're ending coverage for the person who filled out the application.

For step-by-step instructions on how to end your Marketplace plan based on your situation, visit HealthCare.gov/how-to-cancel-a-marketplace-plan.

### 4. Report all income and household changes immediately.

These changes may affect your coverage or cost savings. For example:

- If you remove a household member from your Marketplace plan, you may qualify for less savings than you're getting now. If you don't report the change, you may owe money or get a smaller refund when you file your federal tax return.
- If your household income goes down, you may qualify for more savings than you're getting now, like lower monthly premiums. You may also qualify for lower-cost or free health coverage through Medicaid or CHIP. If you don't report the income change, you may pay more than you need to.

Learn how to report changes at HealthCare.gov/reporting-changes.

### 5. You can cancel a stand-alone dental plan while keeping your Marketplace health coverage.

If you bought a stand-alone dental plan when you enrolled in a Marketplace health plan and now want to end **only** your dental coverage, you can do so at anytime. But, you can't buy a dental plan unless you're also buying a Marketplace plan.

Get more information on dental coverage at HealthCare.gov/coverage/dental-coverage.

### How can I learn more?

To learn more about coverage through the Marketplace or your benefits and protections, visit **HealthCare.gov** or call the Marketplace Call Center at 1-800-318-2596. TTY users can call 1-855-889-4325.

You have the right to get your information in an accessible format, like large print, braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against.

Visit CMS.gov/About-CMS/Agency-Information/Aboutwebsite/CMSNondiscriminationNotice or call 1-800-318-2596. TTY users can call 1-855-889-4325.





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