

Getting Emergency Care

In an emergency, you should get care from the closest hospital that can help you. That hospital will treat you regardless of whether you have insurance.

Private insurers can't charge more for emergency room services (like a deductible, copayment, or coinsurance) at out-of-network hospitals than at in-network ones.

What does it mean that insurance companies can't charge me more?

Getting out-of-network care usually costs more than getting in-network care. By law, in an emergency, your plan can't charge you more even if you get care in a hospital that's out of network. An out-of-network hospital can't bill you for more than an in-network hospital for emergency care.

I'm having an emergency. Should I go straight to the hospital, or do I need to call my insurer first?

Go straight to the hospital if you're having a medical emergency. You don't need to call your insurer first. Insurance companies can't require you to get prior approval from them before getting emergency care, including from a provider or hospital outside your plan's network.

What will I have to pay for emergency room services?

This depends on the plan you have and the hospital you go to. For example, you may have to pay a deductible.

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.

