Plan Compare

Your Enrollment To-Do List with Advance Payment of the Premium Tax Credit



Step 1: Applicants who are determined eligible for advance payment of the premium tax credit (APTC) have the option to decide how much of their APTC to use on a monthly basis. This choice is then reflected in the prices displayed for the plans they will see and compare. (**Note:** Step 1 will be different if the applicant does not qualify or apply for APTC)

Step 2: The applicant will be asked additional questions about tobacco usage for each member of the household who is over the age of 18 and applying for coverage, prior to seeing available plans.

Step 3: The applicant will be able to compare plans to see whether they cover specific doctors, hospitals, and prescription drugs. (This step is optional but advised)

Step 4: The applicant may estimate the level of care each family member would need in order to estimate their annual expenses under available plans. The plans shown will be tailored to the yearly cost option chosen. (This step is optional but advised)

Step 5: The applicant determines the enrollment groups for individual family members before they choose a health plan. This grouping will allow the family to select different plans for different family members. Then the applicant chooses a health plan.

Step 6: The applicant has the option to select a separate stand-alone dental plan if they are available. To purchase a stand-alone dental plan, the applicant must be enrolled in a Marketplace health plan. Generally, most plans cover pediatric dental services.

Step 7: The applicant will confirm and enroll in their plan choices and finalize the enrollment process. The applicant may be able to arrange for payment through the Marketplace.