

are you eligible for financial help?

Most likely, yes! Approximately 90% of Covered California enrollees get financial help. How much financial help depends on your household income, family size and where you live.

You could pay as little as \$0/month for your plan, and you won't pay more than 8.5% of your income for our benchmark Silver plan. You may also qualify for low or no-cost Medi-Cal.



To estimate your monthly payment with our calculator tool, scan the QR code or visit CoveredCA.com/#quick-calculator

AM I REQUIRED TO HAVE HEALTH INSURANCE?

In California, most people are required by law to have health insurance or pay a tax penalty: \$850/adult + \$425/child under 18, up to \$2,550/household, or 2.5% of your annual household income over your California tax filing threshold, whichever is higher.

Other questions?

Visit CoveredCA.com/support

Covered California complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Atención: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1.800.300.0213 (TTY: 1.888.889.4500).

注意: 如果您使用繁體中文, 您可以免費獲得語言援助服務。請致電 1.800.300.1533 (TTY 1.888.889.4500)。

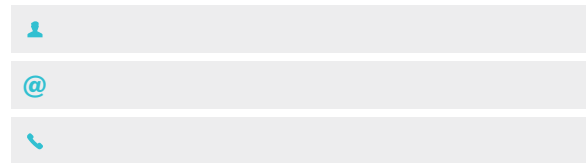
what you need to enroll.

The following is needed for every household member who is applying for coverage:

- Home ZIP code
- Birth date
- Proof of current household income*
- California ID or driver's license
- Social Security no. or Individual Taxpayer Identification Number, if you have one
- Proof of citizenship or lawful presence (e.g., U.S. passport, certificate of citizenship or naturalization document, green card, or a valid visa)**

FOR MORE INFORMATION AND FREE IN-PERSON HELP, CONTACT:

CoveredCA.com | 800.300.1506



*Proof of current income of all members in the tax household, such as a recent tax return, W-2, or pay stub. A dependent's income should only be included if their income level requires them to file a tax return. A household is defined as the person who files taxes as the primary tax filer and all the dependents claimed on that person's taxes. If you don't file taxes, you can still qualify for free or low-cost insurance through Medi-Cal.

**You can apply for your eligible child or spouse even if you are not eligible.

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this way to health insurance.

WHEN, WHERE & HOW TO ENROLL



COVERED CALIFORNIA



To get started,
visit [CoveredCA.com](https://www.CoveredCA.com)
or call 800.300.1506.

explore your coverage options.

WE'VE GOT YOU COVERED.

Covered California was created to help Californians compare, afford and enroll in brand-name health insurance plans. Most people who enroll receive financial help, and everyone is guaranteed the same, high-quality coverage.

WE'RE HERE TO HELP.

Covered California offers free, expert assistance online, in person, and over the phone in 13 languages as well as for the hearing-impaired.

OPEN ENROLLMENT IS November 1 — January 31

Medi-Cal and Special Enrollment are available year-round. Special Enrollment allows Californians to get coverage within 60 days of a qualifying life event, such as losing health insurance, a change in household size, or moving to or within California. For more information, visit [CoveredCA.com/special-enrollment](https://www.CoveredCA.com/special-enrollment).

Covered California offers four levels of coverage: Bronze, Silver, Gold and Platinum. Insurance companies pay a portion of covered services, and the benefits offered within each level are the same no matter which insurance company you choose.

Visit [CoveredCA.com](https://www.CoveredCA.com) and choose “Shop and Compare” to see which brand-name health plans are right for you.

Choose **Platinum** or **Gold** and you'll pay a higher monthly premium, but you'll pay less for medical services when you need them.

Choose **Silver** or **Bronze** and you'll pay a lower monthly premium, but you'll pay more for medical services when you need them.

A **minimum coverage plan** is available to those under 30, or those 30 and over who receive a hardship exemption.

STANDARD COVERAGE BENEFITS BY LEVEL —

KEY BENEFITS	BRONZE Covers 60% of average annual cost	SILVER Covers 70% of average annual cost	GOLD Covers 80% of average annual cost	PLATINUM Covers 90% of average annual cost
Individual / family deductible	\$6,300 / \$12,600	\$5,400 / \$10,800**	No deductible	No deductible
Annual preventive care visit	No cost	No cost	No cost	No cost
Primary care visit copay	\$65*	\$50	\$35	\$15
Urgent care visit copay	\$65*	\$50	\$35	\$15
Emergency room copay	40%†	\$450	\$350	\$150
Generic medication copay	\$18	\$19	\$15	\$7
Annual out-of-pocket max for one	\$8,200 /year	\$9,100 /year	\$8,700 /year	\$4,500 /year
Annual out-of-pocket max for family**	\$16,400 /year	\$18,200 year	\$17,400 /year	\$9,000 /year

Chart does not include all medical copays and coinsurance rates. For complete information, visit [CoveredCA.com](https://www.CoveredCA.com).

*For Bronze Plans, the deductible is waived for the first three primary care or urgent care visits. Additional visits are charged at full cost until deductible is met.

**Silver is the only level where your deductible and other costs may be lower based on your household income.

†40% after the deductible, up to annual out-of-pocket max.