

Enrollment Assistance Exit Form

Application ID #

Username (your email address)

Password

Security Questions/Answers

1. _____

2. _____

3. _____

Total Reported Income

Application Status

- Verification issues
- Application not completed
- Application completed
- Enrolled
- Other

Comments

Health Insurance Marketplace

Phone

1-800-318-2596

Website

www.healthcare.gov

MY ENROLLMENT ASSISTER:

Name: _____

Phone: _____

Email: _____

DETAILS OF YOUR SELECTED PLAN

Health Insurance Plan: _____ Adv. Premium Tax Credit: _____

Plan I.D. #: _____ Monthly Premium: _____

Provider's phone #: _____ Deductible: _____

Out of pocket max./year: _____ Coverage/Co-Insurance: _____

Dental Insurance Plan: _____ Monthly Premium: _____

Plan I.D. #: _____ Deductible: _____

Provider's phone #: _____

Now that you have health insurance, here are a few important things to keep in mind:

If anything on your application changes, you need to report it to the Marketplace.

This includes a change in income (increase or decrease), a change in family size (birth, death, marriage, or divorce), or moving to another address. In general, if any of the information that you put on your application changes, you need to report it.

Not reporting these changes may result in owing money back when you file your taxes.

To report life changes you can log in to your marketplace account and update your information or call the marketplace at 1-800-318-2596 for assistance.

You MUST file a tax return

If you received financial assistance to help pay for your health insurance, you MUST file a tax return. This is true even if you do not have any taxable income. If you do not file a tax return you will lose your financial assistance.