Open Enrollment Checklist



Know what you'll need to apply for a health insurance plan? Use the following checklist to save you time when applying. There are a few things you should gather and consider prior to enrolling to in order to make the application process quicker and easier:

- Website Credentials this is your Username & Password for Healthcare.gov (if you have an existing account). You can still create an account or recover your password prior to Nov 1st at https://www.healthcare.gov/login
- □ **Basic information** this includes name, date of birth and social security numbers for you and anyone else in your household, regardless of whether or not they will be applying for coverage
- □ Information about your insurance plan Confirm if you had a marketplace plan and if you were satisfied with the coverage you received
- □ Home and mailing address for everyone applying for coverage
- Immigration status and documents only for those lawfully present immigrants who are applying for coverage. Visit <u>HealthCare.gov/help/immigration-document-types</u> for more information on what documents are accepted
- □ Tax filing status whether you file separately or jointly and who is considered a tax dependent
- □ Your employer and income information aside from regular wages, this will also include supplemental or non-traditional income sources such as tips, social security payments, alimony, retirement or pension income, investment income, rental income, and any other taxable income
- □ Your best estimate of your household income this is your best estimate of what your household income will be in 2019. To help you estimate, use the following tool <u>here.</u>
- Current coverage information and policy number this includes you or anyone in your household covered in 2018 under Medicare, Children's Health Insurance Plan (CHIP), Medicare, TRICARE, VA Healthcare Program, Peace Corps, or employer coverage
- □ **Employer contact information for all household members** you will also be asked if you are covered coverage under any employer plans
- □ A completed "Employer Coverage Tool" this is a tool offered by healthcare.gov which needs to be completed for any member of the family who isn't enrolled in a job-based plan. Link tool <u>here</u>.
- □ A copy of your medications and future medical plans (See reverse side) create a list of the current medications you're taking. Many plans have different copayments or co-insurance for different drugs, and some drugs may be much more expensive than others. Also, list if you have any surgeries or medical procedures planned. This will help in determining if your new insurance plan will provide adequate coverage for your health care needs. It is important to check whether all the same health care services that were covered in your previous plan will be covered in a new plan or if there will be any limits on coverage of these services.

Legacy Community Health is here to support you. Our teams can help you choose the right plan for you and your family. Call (832) 548 5000 to set up time with our team to talk through any enrollment questions. Visit us at <u>LegacyCommunityHealth.org/ACAenroll</u> for the tools and tips you need to successfully enroll.

Fill out the form before enrolling for an insurance plan to help you determine the best health plan to choose for next year. It's important to determine whether you plan you choose will provide coverage for the items/service below.

Name	Current Insurance
Primary Doctor Name	Pharmacy name
Allergies	

My Medication Log

Medication Name/Dose	Medication Used For (Heart conditions, muscle pain, etc)	Medication Frequency (daily, 2x daily, weekly, etc.)	Notes

List any needed surgeries, medical conditions or health services you know you will need in 2019:

