maryland health connection℠

It's as Easy as 1, 2, 3!
Using Your Health Plan

1 Paying Your First Bill

Information from your insurance company. Your health insurance company will send you information by mail or email about your plan and how to pay your monthly bill (premium).

First bill. It is important to pay your first bill immediately, by the first of the month that your plan starts.

Call your insurance company to pay if you haven't received a bill. Your coverage will not start until the insurance company receives your first payment in full. Your insurance company may cancel your plan if you are late making payments.

If you have questions about your bill or coverage, contact your insurance company directly:

- Aetna Health: **844-365-7373 (TTY: 711); AetnaCVSHealth.com/payment**
- CareFirst: **855-444-3121; member.carefirst.com**
- Kaiser Permanente: **844-524-7370; kp.org/paypremium**
- UnitedHealthcare: **1-800-691-0021; myuhc.com/exchange**
- Wellpoint: **833-476-1457; wellpoint.com/individual-family**

Member ID card. Your insurance company will mail you a member ID card after you pay your bill. You can use health services once the bill is paid, even if you haven't received a card.

2 Understanding Your Coverage and Costs

What services are covered? All private health plans must offer core benefits like these and more:

- Doctor visits
- Hospitalization
- Emergency care
- Prescriptions
- Mental health care
- Maternity and newborn care
- Pediatric care

Preventive care, like vaccinations, wellness visits and screenings, also is covered at no cost to you, even if you haven't met your yearly deductible. To see all services that must be covered, visit **MarylandHealthConnection.gov/choose-a-plan**.

Find out what your specific plan covers. Visit your insurance company's website or review any information mailed to you for what your plan covers. Call your insurer directly if you have questions.

Understand plan costs and key terms. Here are some common words that may affect how much you will pay for services:

- Deductible: The amount you owe for health care services that your plan covers before your health insurance or plan begins to pay.
- Coinsurance: Your share of the costs of a covered health care service, calculated as a percent (for example, 20%) of the allowed amount for the service.
- Network: The doctors, other health care providers and hospitals that have agreed to provide medical care within a plan.
- Copayment (copay): A fixed amount (for example, $15) you pay for a covered health care service, usually when you receive the service.

3   Finding a Provider and Using Your Insurance

Find a doctor in your plan. You will pay the lowest costs for services when you see a doctor or provider in your plan's network. To find a doctor who accepts your plan:

- Call your insurance company or look on its website.
- Search online at **MarylandHealthConnection.gov/find-a-provider**.
- Call your doctor's office to ask if he or she accepts your insurance.

Get ready for your first appointment. After you find a provider and schedule your first appointment, bring these to your appointment:

- Your insurance card
- A list of any medications you are currently taking
- Payment for your copay, if you have one

Get the care you need, before you get sick. All plans sold through Maryland Health Connection cover preventive care and chronic disease management for free, as long as you see a doctor in your plan's network. Many checkups, shots and screenings are covered at no cost to you:

- Flu and pneumonia shots
- Birth control
- Routine vaccinations
- Well-woman visits
- Mental health screening and counseling
- Screenings for cancer, such as blood pressure, diabetes, mammograms and colonoscopies
- Domestic violence screening and counseling