

**You Have
Health Insurance.**

Now What?





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Introduction

Many people don't know what it really means to have health insurance, what they should know about it, or do with it to get the best from their coverage in terms of cost and needed care.

This booklet is designed to give you a better understanding of the basic things you should know about your coverage and how to use it. Hopefully, when you are done reading this booklet, you will be more comfortable using your insurance to get the care you need and deserve.

For additional information, training or workshops about health insurance options, please contact HRA's Office of Citywide Health Insurance Access at **OCHIA@dss.nyc.gov** or visit **www.nyc.gov/hilink**



How do I Build a Relationship with my Primary Care Provider?

You hear a lot of talk these days about primary care and the importance of it, but what is “primary care”?

Primary care is the most basic, day-to-day health care. It is generally provided by your primary care provider, also known as a general practitioner or family practitioner.

It’s important to have a strong relationship with your primary care provider because you and your chosen provider should be comfortable working as a team. You should feel like you can trust your primary care provider and can talk to them about any concerns you have because you need to work together to promote your overall health and well-being. The provider should understand and listen to your concerns.

Before appointments with your provider, you should think about the questions or concerns you want to discuss during your visit. You may even want to write them down so that you are sure to talk about these issues. With this kind of preparation, you are working to build a relationship with your provider that helps you both make informed decisions.



Why is Preventive Care Important?

Preventive care includes measures such as vaccines, screenings, and annual well visits, to prevent future illness or disease and keep you in the best health possible. Additionally, preventive care can detect illness at an early stage when treatment will work best.

Basically, preventive care is designed to keep you as healthy as possible so that you don't have to return to your provider with more serious health problems.

What preventive care can I receive at no cost to me?

- Annual check-up
- Blood pressure screening
- Vaccines such as the flu shot and tetanus
- Depression screening
- Alcohol misuse screening/counseling
- Tobacco use screening

These are just a few examples of the kind of services covered by health plans under the requirements of the Affordable Care Act. To find the full list of preventive services you can receive without paying a co-payment or coinsurance, see <https://www.healthcare.gov/coverage/preventive-care-benefits/>

You should follow the preventive care recommended by your primary care provider.





How do I Prepare for Appointments?

Before all of your appointments, use this checklist below to help you prepare for your discussion with your provider.

- Required Paperwork:** I've asked what paperwork I'll need to fill out and what documentation I should bring with me
- Insurance Card:** I have my insurance card to bring to the appointment
- List of Medications:** I've made a list of medications I'm currently taking and the dosage to tell my provider about them
- Family History:** I know my family medical history to tell my provider
- Questions List:** I have a list of questions/concerns to talk to my provider about
- Care Partner:** If necessary, I have someone to come to the appointment with me to provide assistance

What Will Care Cost Me?

You should learn about and prepare for all of the costs that you might have to pay as you use your health insurance plan to get medical care. These costs will include monthly premiums and other costs that can arise as you go to appointments, purchase prescription drugs and seek primary care and other services. Examples of some of these costs are your co-payment, coinsurance and deductible.

You should know that these types of costs can vary significantly depending upon the type of health care plan that you choose-- whether it is a health maintenance organization (HMO), preferred provider organization (PPO), point of service (POS) plan or exclusive provider organization (EPO). Each type of plan sets its own rules for how you can get services, what kind of doctors, hospitals and other providers you can use without having additional costs at the time of service, and whether you will need a referral from a designated primary care provider to see specialists as needed or recommended. You can find a more detailed explanation of these types of health plans and how each type of plan operates at <https://www.fairhealthconsumer.org/insurance-basics/your-health-plan/type-of-health>.

Common Out-of-Pocket Costs

There are some key terms you will need to understand as you use your health insurance coverage.

Common Out-of-Pocket Costs	
Premium	The monthly fee that you pay for your insurance coverage.
Deductible	The amount of money you have to pay out of pocket for medical bills before your insurance coverage starts paying.
Co-payments	A set amount that you pay for a provider visit, service, or prescription.
Coinsurance	A percentage of the cost that you must pay for provider visits, prescriptions, or services.

In-Network vs. Out-of-Network Care

In-network care will have lower costs for you because it is provided by medical providers who contract with your insurance plan to cover the costs of services. These providers have agreed to accept the reimbursement that your insurance plan will provide for the services that they will provide under the terms of their contract with the plan. You can find a more full explanation of in-network care at <https://www.fairhealthconsumer.org/insurance-basics/healthcare/in-network-and-out-of-network-care>.

You can choose to receive care from **out-of-network** providers but, depending upon the type of insurance plan that you choose and the requirements of that plan, it will likely cost you more out of pocket. Out-of-network providers do not contract with your insurance plan. Since your insurance plan does not contract with these providers, the plan will generally pay for some or none of the cost of out-of-network care and you will have to pay more out of pocket. You can learn more about out-of-network care and costs at <https://www.fairhealthconsumer.org/insurance-basics/your-costs/types-of-out-of-network-reimbursement>.



How do I Keep my Health Insurance Coverage?

Health Insurance Coverage through the New York State of Health Marketplace

NY State of Health will send you a notice with instructions on what you need to do when it is time to renew your coverage through Medicaid, Child Health Plus, the Essential Plan, or a Qualified Health Plan. The process is easy, but very important. Log onto to your NY State of Health Marketplace account at www.nystateofhealth.ny.gov or call the Customer Service Center at 1-855-355.5777.

Due to the COVID-19 public health crisis, consumers already enrolled in Medicaid, Child Health Plus, or the Essential Plan will have their coverage continued automatically and do not need to renew through December 31, 2021.

Health Insurance Coverage through Your Parent's Coverage

Typically, you do not have to take any action to renew your health insurance coverage obtained through your parent's employer. Ask your parents if they need to take any action with their employer to renew your coverage.

Health Insurance Coverage through Your Employer

Many employers have specific protocols for how you get or change coverage with select life events such as, getting married or having a baby. During your employer's annual open enrollment period you can make any changes to your coverage and benefits. Check with your employer for your open enrollment period.

New York's "Surprise Bill" Protection

You should also know that New Yorkers are protected against surprise medical bills. As of March 31, 2015, New Yorkers are protected from unexpected bills from out-of-network providers and for out-of-network emergency services by Public Health Law Section 24.

This "Surprise Bill for Health Care Services Law" protects New Yorkers from surprise bills when services are performed by an out-of-network doctor at a participating hospital or ambulatory surgical center in the insurer's network or when a participating doctor refers an insured patient to a non-participating provider without the patient's knowledge or consent, or due to unforeseen circumstances. You are also generally protected from owing more than your in-network co-payment, coinsurance or deductible on bills received for out-of-network emergency services as well.

For more details about this legislation and your rights to dispute surprise medical bills, please visit the Department of Financial Services website at https://www.dfs.ny.gov/consumers/health_insurance/surprise_medical_bills.





What Should I Consider About My Sexual and Reproductive Health Care?



Your sexual and reproductive health is an important part of your overall health and well-being. You should think about the types of care you will need as you use your health insurance coverage.

You may need to talk to your provider about certain preventive care measures, such as:

- Contraception
- STI screening and counseling
- Pap smear
- Annual well-woman visit

You should ask your insurance company for a list of in-network providers who you can see for reproductive and sexual health services. Like your primary care provider, you should feel comfortable with and trust any provider you choose for sexual and reproductive health care.

Where can I get Sexual and Reproductive Health Care?

Even if you don't have health insurance coverage, you can still seek reproductive and sexual health care in New York City from:

+ Department of Health Sexual Health Clinics

For a list of available services and clinic locations, visit:

www.nystateofhealth.ny.gov.

use the services tab, select clinics, and then select "sexual health clinics."



+ Federally-Qualified Health Centers

To find a community health center near you, visit:

www.chcanys.org and use the

"Find A Health Center" button.



+ NYC Health + Hospitals

To learn more about NYC Health + Hospitals, visit: <https://www.nychealthandhospitals.org/>



+ Planned Parenthood

To see where you can receive care from Planned Parenthood in New York, visit: <https://www.plannedparenthood.org/planned-parenthood-greater-new-york>



+ Callen Lorde

To find a Callen Lorde location near you, visit: <https://callen-lorde.org>



+ Metropolitan Hospital Women's Health Center

Services include a wide range of gynecological and obstetric primary and specialty services, visit:

<https://www.nychealthandhospitals.org/metropolitan/our-services/womens-health/>



You may also be eligible to receive coverage through the Family Planning Benefit Program, a program for sexual and reproductive care available through participating Medicaid providers. To learn more visit nyc.gov/famplan

For more information about coverage and care options, visit www.nyc.gov/hilink



Where Can I Find LGBTQ Healthcare Providers?

If you're part of the LGBTQ community, you can also seek care at LGBTQ Healthcare Service Providers who understand and respect your healthcare needs. The New York State LGBT Health & Human Services Network, administered by The Center, lists additional organizations that provide care to LGBT New Yorkers and their families.



LGBTQ Healthcare Service Providers

Callen Lorde Community Health Center	https://callen-lorde.org/
The Center	https://gaycenter.org/
Hetrick-Martin Institute	https://hmi.org/
The Pride Health Center at NYC Health + Hospitals/ Metropolitan	https://www.nyhealthandhospitals.org/metropolitan/ourservices/lgbtq-health-center/
The Pride Health Center at NYC Health + Hospitals/ Gotham Health, Judson	https://www.nyhealthandhospitals.org/judson/pride-health-center/
The Pride Health Center at NYC Health + Hospitals/ Woodhull	https://www.nyhealthandhospitals.org/woodhull/the-pride-health-center-at-nyc-health-hospitalswoodhull/
The New York State LGBT Health & Human Services Network	https://gaycenter.org/recovery-health/health/lgbt-healthnetwork/#networkmembers

I Have Other Questions, Where Can I Go?

+ New York State of Health, the Official Health Plan Marketplace

To find the right coverage option for you in New York State, go to NY State of Health (NYSOH) www.nystateofhealth.ny.gov. You can get free help to enroll in health insurance by visiting the **Get Help** section on the NYSOH website. You can also call NYSOH at 1-855-355-5777.



+ Community Health Advocates (CHA)

CHA provides free, confidential one-on-one health insurance assistance to families and small businesses. CHA helps New Yorkers understand their health insurance, resolve medical billing and debt issues and access the health care services they need. Get help by calling 1-888-614-5400 or learn more by visiting <http://www.community-healthadvocates.org/>



+ NYC Care

NYC Care is a health care access program that guarantees low-cost and no-cost services offered by NYC Health + Hospitals to New Yorkers who do not qualify for or cannot afford health insurance based on federal guidelines. Get more information at www.nyccare.nyc



+ NYC Health Insurance Link

To download health insurance fact sheets, get health insurance news and updates, or to request a health insurance presentation, visit www.nyc.gov/hilink





**Department of
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