



The Affordable Care Act and You

A Guide on Employer-Provided Health Insurance

Under the Affordable Care Act, some employers are required to offer health insurance coverage to their employees. This guide will provide you with basic information about employer-provided health insurance. For more information about other parts of the law, including the requirement for individuals to have health insurance and exemptions to that requirement, see [Farmworker Justice's Guide on the Health Insurance Requirement](#). For more information about Medicaid and the Health Insurance Marketplaces, see [Farmworker Justice's Guide for U.S. Citizens](#).

How do I know if I am covered through my employer?

You should contact your employer to find out if he/she offers health insurance and if you are eligible for coverage. If your employer offers health insurance, you should receive information about your health insurance options in a language you understand.

Who is covered under my employer-provided health insurance?

Employers who offer coverage are required to offer it to both you and your children up to 26 years old. Employers are NOT required to offer coverage to spouses.

Are immigrants eligible for employer-provided health insurance?

All employees are eligible for employer-provided health insurance.

How much will I have to pay for my health insurance?

The exact amount you will have to pay depends on the kind of plan your employer offers you and the number of family members on your insurance plan.



What happens if I choose not to enroll in my employer's health insurance?

You are not required to accept your employer's offer of health insurance, but most individuals are required to have some form of health insurance. If you decline coverage from your employer, you may have to pay a tax penalty if you do not enroll in another health insurance plan. Exemptions from this penalty are explained in [Farmworker Justice's Guide on the Health Insurance Requirement](#). You may also qualify for Medicaid, which you can enroll in throughout the year. An offer of employer insurance will not affect your eligibility for Medicaid.

Caution: *If you choose to decline your offer of employer insurance, you can still explore your options in the Marketplace. However, you may not qualify for financial assistance. To qualify for financial assistance, your payment for your own health insurance must be more than 9.5% of your household income. You can speak with a certified application assister for more information.*

Can I use my health insurance if I change employers?

If you change employers you will also have to enroll in a new health insurance plan. If you are not offered health insurance by your new employer, you will have 60 days after you lose coverage to enroll in a health insurance plan in the Marketplace.

Where can I get more information?

You might need assistance to go over your health insurance options so you can choose what is best for you and your family.



Call **800-318-2596** to speak with someone who can answer your questions or connect with someone near you. Help is available at anytime in Spanish and other languages.

You can also seek help at:

Disclaimer: This project was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under cooperative agreement number U30CS22741 for \$447,333.00 with 0% of the total NCA project financed with non-federal sources. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS, or the U.S. Government.

