



eHealth Sets the Health Reform Record Straight With Obamacare Myths vs. Realities

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eHealth Delivers the Facts about Government Exchanges, Insurance Subsidies, Best Prices, Tax Penalties and More

MOUNTAIN VIEW, CA -- (Marketwired) -- 02/04/14 -- Today eHealth, Inc. (NASDAQ: EHTH) (www.ehealth.com), which operates eHealthInsurance.com, the nation's first and largest private online health insurance exchange, published information highlighting common Obamacare myths, and the realities behind them.

"Many American consumers are still unfamiliar with the Affordable Care Act and what it means for them," said Gary Matalucci, Vice President of Customer Care for eHealth, Inc. "They're confused about their responsibilities under the law, where and how to shop for coverage, and the role of government exchanges, among other things. At eHealth, we believe that consumers deserve straight answers and simple explanations to help them understand how Obamacare affects them in 2014."

The Obamacare myths identified below reflect points of confusion that are sometimes expressed by health insurance consumers contacting eHealth's Customer Care Center.

Obamacare Myths vs. Realities

MYTH: Government health insurance exchanges are the only places to buy insurance in 2014.

REALITY: There are also licensed online health insurance marketplaces like eHealth.com where individuals and families can shop for and purchase reformed 2014 health insurance plans that will meet their coverage requirements under the Affordable Care Act.

MYTH: It's cheaper to buy a 2014 health insurance plan through the government exchange.

REALITY: Unless you qualify for a government subsidy, you won't save any additional money by shopping through the government exchange. Since health insurance rates are regulated by the states, you'll pay the same monthly premium for any given health insurance plan whether you buy it from a licensed online marketplace like eHealth, from a government exchange, or from the insurance company. Shopping through a licensed online marketplace like eHealth can give you a broader view of your coverage options and easier access to personal assistance from licensed agents.

MYTH: The penalty for being uninsured in 2014 is only \$95. It costs way more than that to buy health insurance. I might as well go uninsured in 2014.

REALITY: You may face a tax penalty much higher than \$95 for going uninsured next year. The penalty is \$95 or 1% of your income - whichever is greater.

MYTH: I can go uninsured this year and just enroll in a health plan when I get sick.

REALITY: The Affordable Care Act established specific open enrollment periods when consumers can enroll in health insurance coverage. The current open enrollment period runs through March 31, 2014. Unless you experience a qualifying event, such as a marriage, the birth of a child, or the loss of employer-based health insurance, you cannot get a health insurance plan on your own outside of the open enrollment period.

MYTH: "Government insurance" plans purchased through the state exchanges will be accepted by all doctors and hospitals.

REALITY: Whether your health insurance plan was purchased through a government exchange or elsewhere, you will typically be limited to visiting doctors and hospitals in your plan's provider network if you want to get the best coverage for your medical care. Individual and family plans purchased through the government exchanges are not "government insurance" products in the way that Medicaid and Medicare are. Instead, these plans are offered through private health insurance companies that may also sell coverage off of government exchanges.

MYTH: Subsidies are for people who need Medicaid, they don't apply to me.

REALITY: While the Affordable Care Act does allow states to expand access to Medicaid, subsidies are designed for people who don't qualify for Medicaid or Medicare or who are without another form of minimum essential coverage (such as some employer-sponsored plans). If your household income is up to 400% of the federal poverty level (about \$46,000 per year for a single person or \$94,000 per year for a family of four), you may qualify for a subsidy to help you pay for your coverage. The amount of subsidy you may receive can vary depending on your exact income and on the affordability of coverage in your area.

MYTH: I have to buy an Obamacare plan even if I'm on Medicare.

REALITY: If you're already enrolled in Medicare or Medicaid you do not have to do anything as a result of the health reform law. The Affordable Care Act ("Obamacare") is primarily designed for people who are not eligible for Medicare.

MYTH: I have to buy an Obamacare plan even if I'm offered insurance through my job or through a family member's employer.

REALITY: If you are enrolled in a health insurance plan through an employer and that health plan is compliant with the coverage requirements of the Affordable Care Act, you do not need to buy health insurance on your own in 2014. If you lose your employer-based coverage in the middle of next year, this is considered a "qualifying event" and you will be able to purchase a plan on your own at that time -- even outside of the nationwide open enrollment period.

MYTH: If I don't already have health insurance I will have to pay a tax penalty.

REALITY: Under the Affordable Care Act, you are only subject to a tax penalty if you are uninsured for more than three consecutive months in 2014, or if your coverage is not compliant with the law's requirements (with certain exceptions) for more than three consecutive months in 2014.

MYTH: Obamacare has been delayed. I don't need to worry about it until they get the website fixed.

Reality: Though government health insurance exchange websites have experienced some difficulties, the provision of the law requiring most Americans to have health insurance still took effect on January 1, 2014.

MYTH: Navigators working for government health insurance exchanges can recommend a 2014 health insurance plan for me.

REALITY: The kind of assistance available from navigators employed by government exchanges may be limited. The Affordable Care Act itself does not require navigators to be licensed health insurance agents (though some states may require it). Navigators can help you through the process of using a government exchange, but only licensed agents can provide you with personalized plan recommendations based on your needs and budget.

MYTH: I won't have to pay the penalty for not having insurance because I have short-term health insurance.

REALITY: Short-term health insurance products are designed to provide consumers with protections against unforeseen medical bills, typically for a period of between one to twelve months. Short-term health insurance products do not meet the coverage requirements of the Affordable Care Act. Buying a short-term health insurance plan will not exempt you from the tax penalty for not having ACA-compliant coverage in 2014.

About eHealth

eHealth, Inc. (NASDAQ: EHTH) operates eHealthInsurance.com, the Nation's first and largest private health insurance exchange where individuals, families and small businesses can compare health insurance products from leading insurers side by side and purchase and enroll in coverage online. eHealthInsurance offers thousands of individual, family and small business health plans underwritten by more than 200 of the nation's leading health insurance companies. eHealthInsurance is licensed to sell health insurance in all 50 states and the District of Columbia. eHealth, Inc. also provides powerful online and pharmacy-based tools to help Medicare beneficiaries navigate Medicare health insurance options, choose the right plan and enroll in select plans online through PlanPrescriber.com (www.planprescriber.com) and eHealthMedicare.com (www.eHealthMedicare.com).

For more health insurance news and information, visit the eHealth consumer blog: [Get Smart - Get Covered](#) or visit eHealth's Affordable Care Act Resource Center at www.eHealth.com/affordable-care-act.

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