



CICP

Colorado Indigent Care Program

Why should I purchase health insurance?

All Americans are now required by law to have health insurance. If you do not have health insurance for the entire year, you will have to pay a fee when you file your Federal income taxes. Discount programs like the Colorado Indigent Care Program (CICP) do NOT count as health insurance. More health care services are available to you through insurance than the CICP. You may also get financial assistance to help reduce costs if you buy your health insurance through Connect for Health Colorado.

What is Connect for Health Colorado?

Connect for Health Colorado is Colorado’s insurance marketplace. Financial assistance is available for people who make 400% or less of the Federal Poverty Level if they buy their insurance plan through Connect for Health. You can apply for financial assistance and choose an insurance plan on Connect for Health’s website, <http://connectforhealthco.com/>, or by calling them at 855-752-6749.

What insurance plan should I pick?

There are four main levels of health insurance plans – platinum, gold, silver, and bronze. Each plan level has a different monthly fee, or premium. Usually, the higher the premium, the more the plan pays for. If you make 250% or less of the Federal Poverty Level (about \$29,700 for a single person or about \$60,750 for a family of four) you may qualify for extra discounts.

Plan Level	Premium Cost	Coverage Level	Advanced Premium Tax Credits Available?	Cost Sharing Reductions Available?
Platinum	\$\$\$\$	Plan pays about 90% of medical costs	Yes	<i>No</i>
Gold	\$\$\$	Plan pays about 80% of medical costs	Yes	<i>No</i>
Silver	\$\$	Plan pays about 70% of medical costs	Yes	Yes
Bronze	\$	Plan pays about 60% of medical costs	Yes	<i>No</i>

What is an Advanced Premium Tax Credit?

An Advanced Premium Tax Credit, or APTC is a tax credit from the federal government granted to people who make about \$47,520 or less for a single person or about \$78,732 or less for a family of four. A portion of the credit can either be applied monthly to your insurance plan to reduce your premium, or the credit can be taken all at once when you file your taxes for the year.

Our mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

www.colorado.gov/hcpf



What are Cost Sharing Reductions?

Cost Sharing Reductions, or CSRs, are payments to the insurance company from the Federal government that help reduce your costs. CSRs can also lower the maximum out of pocket costs you would have to pay. These costs are called deductibles, copayments, and coinsurance. Some plans won't pay for certain services until you've paid your full deductible. The lower the deductible, the faster the insurance company payments kick in. CSRs may make a silver level plan the best choice for anyone whose income is at or under 250% of the Federal Poverty Level.

How do I get the CSRs?

If you make 250% or less of the Federal Poverty Level and you pick a silver level plan through Connect for Health Colorado, you may qualify for CSRs. Once you are found to be eligible, you will be able to pick a silver plan with lower deductibles, copays, coinsurance, and out of pocket limits. Premium reductions, bills from non-network providers, and non-covered services are not covered by CSRs.

Do I have to pay back CSRs?

The only time CSRs would need to be repaid is if you make more money during the year than you estimated when your CSR amount was calculated. The amount of overpayment would be due back to the Federal government at tax time. If you make less money during the year than you estimated, your correct CSR amount would be more than originally estimated. The extra amount would be returned to you as a refund, or as a discount on any taxes you owe.

What if I am over income?

If your income is higher than 400% of the Federal Poverty Level, you will not be eligible for any financial assistance through the APTCs or CSRs. However, you still may purchase insurance through Connect for Health.

When can I choose an insurance plan?

New insurance plans can only be chosen during open enrollment. Open enrollment is from November 1st to January 31st every year. You can also sign up for or change your coverage outside of open enrollment if you have a qualifying life event, such as a marriage, a birth, a death, or a change in insurance offered through your job. If you miss the open enrollment window and do not have a qualifying life event, you will not be able to get insurance until the next open enrollment period, and you may be subject to a fee on your taxes.

