Benefits of Health Insurance through the Affordable Care Act

The ACA has been life-changing for people who were previously uninsured, have lower incomes, or have preexisting conditions, among other groups.



All Marketplace plans must cover treatment for pre-existing medical conditions.



No insurance plan can reject you, charge you more, or refuse to pay for essential health benefits for any condition you had before your coverage started.



Once you're enrolled, the plan can't deny you coverage or raise your rates based only on your health.

All plans offered in the Marketplace cover these 10 essential health benefits:

- AMBULATORY PATIENT SERVICES (outpatient care you get without being admitted to a hospital)
- **2** EMERGENCY SERVICES
- HOSPITALIZATION (like surgery and overnight stays)
- PREGNANCY, MATERNITY, AND NEWBORN CARE (both before and after birth)
- 5 MENTAL HEALTH AND SUBSTANCE USE DISORDER SERVICES including behavioral health treatment (this includes counseling and psychotherapy)

- RESCRIPTION DRUGS
- **7 REHABILITATIVE AND HABILITATIVE SERVICES AND DEVICES** (services and devices to help people with injuries, disabilities, or chronic conditions gain or recover mental and physical skills)
- **R** LABORATORY SERVICES
- PREVENTIVE AND WELLNESS SERVICES and chronic disease management
- **PEDIATRIC SERVICES** including oral and vision care (but adult dental and vision coverage aren't essential health benefits)

