



OREGON'S SENATOR JEFF MERKLEY

Health Insurance Coverage Options During the Coronavirus Pandemic

As Oregonians grapple with the impacts of the coronavirus pandemic, Sen. Merkley has compiled resources, available through the State of Oregon, for those seeking health insurance. If you are uninsured or are losing your insurance due to unemployment, you have options for health coverage available. If you would like help signing up for any of the following options, one of [Oregon Health Authority's Community Partners](#) may be able to help you locate health care coverage. For additional questions, [please contact the state agency](#).

Note that testing for COVID-19 is free for all Americans, with or without insurance.

Check to see if you qualify for Medicaid or Children's Health Insurance Program (CHIP)

Unlike Marketplace coverage, you can apply for Medicaid—known as the Oregon Health Plan (OHP) in Oregon—at any time of the year. Enrollment is always open for OHP and Oregon has waived income verification for new enrollees. [Apply today at ONE.Oregon.gov](#) or call 800-699-9075. Note that the state has reported that wait times may be long.

If you have OHP coverage, it will not be terminated during this national emergency. This new rule went into effect on March 18, 2020. If you have OHP, and receive a letter that says your OHP is closing or you no longer qualify, please call the OHP customer service line for reinstatement at 800-273-0557.

Individual or family Marketplace coverage through Oregon's health insurance exchange

If you experience a [qualifying life event](#), such as losing employer-sponsored health insurance or student health insurance, you can shop for health plans through [Oregon's insurance marketplace](#). You may also be able to get coverage through your spouse's or family's insurance plan. The qualifying life event might allow them to add you to their health insurance as a dependent. You have 30 to 60 days to sign up after a qualifying life event before the special enrollment period closes.

If you lost your job, but did not also lose health coverage, because your former job didn't offer coverage: By itself, a job loss (or a change in income) doesn't make you eligible for a Special Enrollment Period to enroll in marketplace coverage.

If your employer reduced the hours you work and you're enrolled in a marketplace plan: Update your HealthCare.gov application within 30 days to report any household income changes. You may qualify for more savings than you are getting now. [Learn how to report changes](#).

If you are furloughed: In some situations, depending on the status of your health coverage from your employer, you may qualify for a Special Enrollment Period.

If any of these marketplace situations apply you, you may be eligible for a premium tax credit to help pay for marketplace coverage. [Create an account](#) or [log in](#) to start your marketplace application to find out if you qualify.

COBRA coverage

If you recently lost your employer-sponsored health insurance, you are eligible for coverage through the Consolidated Omnibus Budget Reconciliation Act (COBRA). [COBRA](#) gives you an option to continue the same health insurance coverage you had under your employer if you worked for an employer with 20 employees or more. You will be responsible for the costs your employer used to cover. It can last for up to 18 to 36 months. Note that, because your cost will be whatever premiums your employer was paying for your health plan along with an additional 2% fee, COBRA coverage can be expensive. Your insurer is required to notify you if you have the COBRA option, and you have [60 days](#) to elect to take it.

Additional information

If you get a direct deposit or check from the IRS that is called an economic impact payment:

The *Coronavirus Aid, Relief, and Economic Security (CARES) Act* calls for the IRS to make economic impact payments of up to \$1,200 per taxpayer and \$500 for each qualifying child.

If you get one of these payments, **they do not affect your eligibility for financial assistance for health care coverage** through the marketplace, or your eligibility for OHP/Medicaid or the Children's Health Insurance Program (CHIP). For more information, visit [IRS Coronavirus Tax Relief](#) information.

If you receive unemployment benefits:

- The federal increase in unemployment benefits of \$600 per week for up to four months (ending July 31, 2020) **IS counted as income for marketplace coverage** and will need to be reported for marketplace plans and subsidies.
- The \$600 per week for up to four months (ending July 31, 2020) **is NOT count toward your income eligibility for OHP**.

If you are an undocumented Oregon resident:

- If you are undocumented or have been a legal permanent resident (green card holder) for less than 5 years, you may be eligible for the Oregon Health Plan's (OHP) Citizen/Alien Waived Emergency Medical (CAWEM) benefit, which covers emergency medical, dental and transport services, including services at a hospital emergency room and hospitalization. CAWEM also includes all services for the diagnosis and treatment of COVID-19. This coverage is not limited to emergency rooms and hospitals.
- The receipt of emergency Medicaid, such as CAWEM, cannot be counted under the U.S. Citizenship and Immigration Service's (USCIS) public charge rule. Additionally, on March 13, 2020, [USCIS issued a statement](#) that the agency will not consider testing, treatment, or preventive care (including vaccines, when a vaccine becomes available) related to COVID-19 as part of a public charge determination.
- For additional questions about these policies, the Oregon Public Benefits Hotline can be reached at 1-800-520-5292.
 - **NOTE: This is not legal advice.** If you are concerned about whether and how receipt of public benefits might affect your immigration status, ask for help from an immigration attorney.

Recent legislation on coverage for COVID-19 related care:

- If you have **OHP/Medicaid**, COVID-19 tests and related care are covered with no cost-sharing.
- If you have **private insurance**, all private insurance plans are required to cover coronavirus testing without deductibles, coinsurance, or co-pays.
 - The *Families First Act* also prohibits plans from using tools like prior authorization to limit access to testing. The *CARES Act* ensures that the policy covers all COVID-19 tests that meet the appropriate standards. Insurers also have to cover fees for visits to the emergency room, an urgent care center, or a doctor's office associated with getting a test without cost sharing.

For updates: Visit merkle.senate.gov/coronavirus for updates on these and other resources.