
What if someone doesn't have health coverage in 2014?

If someone who can afford health insurance doesn't have coverage in 2014, they may have to pay a [fee \(/glossary/fee\)](#). They also have to pay for all of their health care.

When the uninsured need care

When someone without health coverage gets urgent—often expensive—medical care but doesn't pay the bill, everyone else ends up paying the price.

That's why the health care law requires all people who can afford it to take responsibility for their own health insurance by getting coverage or paying a penalty.

People without health coverage will also have to pay the entire cost of all their medical care. They won't be protected from the kind of very high medical bills that can sometimes lead to bankruptcy.

The fee in 2014 and beyond

The fee in 2014 is 1% of your yearly income or \$95 per person for the year, whichever is higher. The fee increases every year. In 2016 it is 2.5% of income or \$695 per person, whichever is higher.

In 2014 the fee for uninsured children is \$47.50 per child. The most a family would have to pay in 2014 is \$285.

It's important to remember that someone who pays the fee won't get any health insurance coverage. They still will be responsible for 100% of the cost of their medical care.

After open enrollment ends on March 31, 2014, they won't be able to get health coverage through the Marketplace until the next annual enrollment period, unless they have a [qualifying life event \(/glossary/qualifying-life-event\)](#).

Minimum essential coverage

To avoid the fee in 2014 you need insurance that qualifies as [minimum essential coverage \(/glossary/minimum-essential-coverage\)](#). If you're covered by any of the following in 2014, you're considered covered and don't have to pay a penalty:

- Any Marketplace plan, or any individual insurance plan you already have
- Any employer plan (including [COBRA \(/glossary/cobra\)](#)), with or without “grandfathered” ([/glossary/grandfathered-health-plan](#)) status. This includes retiree plans
- [Medicare \(/glossary/medicare\)](#)
- [Medicaid \(/glossary/medicaid\)](#)
- [The Children's Health Insurance Program \(CHIP\) \(/glossary/childrens-health-insurance-program-chip\)](#)
- TRICARE (for current service members and military retirees, their families, and survivors)
- Veterans health care programs (including the Veterans Health Care Program, VA Civilian Health and Medical Program (CHAMPVA), and Spina Bifida Health Care Benefits Program)
- Peace Corps Volunteer plans

Other plans may also qualify. Ask your health coverage provider.

Learn about [getting exemptions from paying the fee. \(/exemptions\)](#).

What kinds of health insurance don't qualify as coverage?

Health plans that don't meet minimum essential coverage don't qualify as coverage in 2014. If you have only these types of coverage, you may have to pay the fee. Examples include:

- coverage only for vision care or dental care
- workers' compensation
- coverage only for a specific disease or condition
- plans that offer only discounts on medical services