Q How are state Health Insurance Marketplaces being established?

No matter where they live, consumers will be able to compare their health insurance options in the Marketplace and find a health plan that meets their needs and budget in October of 2013.

Every state will have a Health Insurance Marketplace, but each state can choose how it will operate. A state has substantial flexibility in establishing a Marketplace that meets the needs of its citizens.

A state can choose one of these three Marketplace options:

- **State-based Marketplace** — The state creates and runs its own Marketplace.
- **State Partnership Marketplace** — The state partners with the federal government to run some Marketplace functions.
- **Federally-facilitated Marketplace** — The state uses a Marketplace established and operated by the federal government.

In a State Partnership Marketplace, the state runs certain activities for the Marketplace operated by the federal government. A State Partnership Marketplace allows states to make recommendations for key decisions and help tailor the Marketplace to local needs and market conditions.

The federal government will establish and operate a Marketplace in those states that do not establish their own.

States that decided to operate their own Marketplace in 2014 have already submitted an application and other states have applied to participate in a State Partnership Marketplace with the federal government.

To date, 18 states have been conditionally approved to operate a State-based Marketplace and 7 states have been conditionally approved to operate a State Partnership Marketplace.

States may apply at any time to run their own Marketplace in future years.