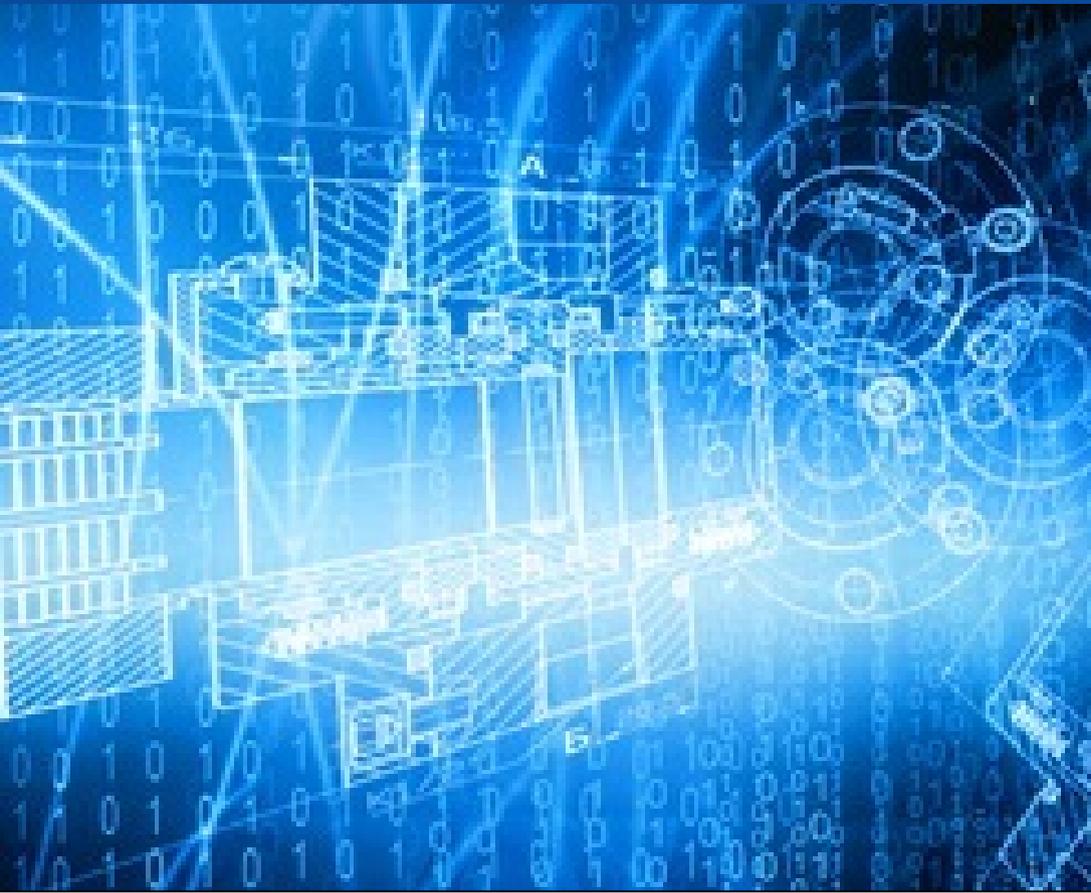




Special Enrollment Period (SEP) Overview for the Federally-facilitated Marketplace



*Center for Consumer
Information & Insurance
Oversight (CCIIO)*

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<https://www.regtap.info/FFENR.php>

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Agenda

- SEP Basics
 - Qualifying Events Overview
 - Prior Coverage Requirements
 - Plan Category Limitations (PCL)
- Qualifying Events and Examples
- Questions

SEP Basics

Qualifying Events Overview

Qualifying for an SEP

Consumers may qualify for an SEP to enroll in or change plans if they experience a qualifying event in one of the following six categories:

1. Loss of qualifying health coverage
2. Change in household size
3. Change in primary place of living (referred to as “move SEP”)
4. Change in eligibility for Marketplace coverage or help paying for coverage
5. Enrollment or plan error
6. Other situations

SEP Basics

Prior Coverage Requirements

Prior Coverage Requirements

- Some SEPs are available to anyone who's eligible for coverage and experienced a qualifying event.
- Some SEPs are only for:
 - Consumers who had prior coverage.
 - Consumers who already have Marketplace coverage.

Examples?

Prior Coverage Requirements (continued)

Some SEPs are available to anyone who is eligible for coverage.

- Example: SEP for consumers who become newly eligible for Marketplace coverage due to change in immigration status

Prior Coverage Requirements (continued)

Some SEPs are only available to:

- Consumers who had prior coverage for one or more days in the 60 days preceding their SEP qualifying event
 - Example: Move SEP*

*Unless they moved to the U.S. from a foreign country or U.S. territory, are a member of a Federally recognized tribe or Shareholders of Alaska Native Corporations (sometimes referred to as “AI/AN”), or lived for 1 or more days during the 60 days before their qualifying event or during their most recent enrollment period in a service area where no qualified health plan (QHP) was available through the Marketplace

Prior Coverage Requirements (continued)

Some SEPs are only available to:

- Consumers who already have Marketplace coverage
 - Example: SEP for enrollees whose income changes, making them newly eligible or ineligible for help paying for coverage

SEP Basics

Plan Category Limitations

Plan Category Limitations

Most consumers who qualify for an SEP and want to change plans outside of Open Enrollment will be limited to choosing a new plan in a particular “metal” categories to choose from:

- This means that consumers who want to change plans may need to select a new plan from within the same plan category as their current plan, OR
- Wait until the next Open Enrollment Period to select a new plan in a different “metal” category
- Example: Someone who is already enrolled in a Bronze Health Plan (and wants a new plan in a different metal category) will only be able to select a new plan from the Bronze Category until the next Open Enrollment Period

Plan Category Limitations (continued)

However, there are some circumstances that will allow a consumer to change plan metal categories:

- Becoming newly eligible for cost-sharing reductions (CSRs)
- Adding new household members
- Where health plan business rules do not allow you to add new members to your plan
- For consumers with very complex situations

Plan Category Limitations (continued)

For more information on Plan Category Limitations, please see:

- <https://www.healthcare.gov/choose-a-plan/plans-categories/>
- <https://www.healthcare.gov/coverage-outside-open-enrollment/changing-plans/>
- <https://marketplace.cms.gov/technical-assistance-resources/plan-category-restrictions-overview.PDF>

Qualifying Events and Examples

Qualifying Events

Loss of Qualifying Health Coverage

Consumers may qualify for an SEP if they (or anyone in their household who is seeking coverage) lose qualifying health coverage, also known as minimum essential coverage (MEC). Some examples of qualifying health coverage include:

- Coverage through a job, or through another person's job
- Medicaid or Children's Health Insurance Program (CHIP) coverage including CHIP unborn child coverage, pregnancy-related coverage and medically needy coverage (depending on State rules)
- Some student health plans (check with the school to see if the plan counts as qualifying health coverage)
- Individual or group health plan coverage that ends during the year
- Dependent coverage that a consumer has through a parent's plan
- COBRA coverage

When Consumers Do Not Qualify

Consumers do not qualify for the loss of qualifying health coverage SEP if:

- They voluntarily end their prior coverage.
 - Exception: Consumers can qualify if they voluntarily leave their job and, as a result, lose their health coverage.
 - Exception: Consumers can qualify if they voluntarily end existing coverage with a mid-year renewal period.
- Their coverage ends due to nonpayment of premiums.
 - Exception: Consumers can qualify if employer coverage ended because the employer didn't pay premiums.
- The coverage they lost did not qualify as minimum essential coverage.
- They lost coverage more than 60 days ago.

Coverage Effective Dates: Loss of Qualifying Health Coverage

Situation	Plan Selection	Coverage Effective Date
<p>Loss of Qualifying Health Coverage</p> <p>Qualifying Event Date: Date that prior coverage ends</p>	Any day of the month	Accelerated: First day of the month after plan selection
<p>Future Loss of Qualifying Health Coverage</p> <p>Qualifying Event Date: See above</p> <ul style="list-style-type: none">➤ Consumers can apply and qualify for this SEP up to 60 days before they lose coverage.	Any day of the month	Accelerated: First day of the month after plan selection, following prior coverage end date

Changes in Household Size

A consumer may qualify for an SEP if he or she (or anyone in his or her household):

- Got married
- Had a baby, adopted a child, or placed a child for foster care
- Gained or became a dependent due to a child support or other court order
- Got divorced, legally separated, or had a death in the family and lost health coverage

Prior Coverage Requirement for Marriage SEP

- In order to qualify for an SEP due to a marriage, at least one spouse must have:
 - Had qualifying coverage; OR
 - Lived in a foreign country or in a U.S. territory for one or more days during the 60 days before the marriage; OR
 - Lived for 1 or more days preceding the move or previous enrollment period in a service area where no qualified health plan (QHP) was available through the Exchange.
- This prior coverage requirement does not apply to members of a federally recognized tribe or Alaska Native Claim Settlement Act (ANCSA) Corporation shareholders (AI/AN).

Coverage Effective Dates for Change in Household Size

Situation	Plan Selection Date	Coverage Effective Date
<p>Gaining or becoming a dependent through marriage and</p> <ul style="list-style-type: none"> • Had qualifying coverage; or • Lived in a foreign country or in a U.S. territory for at least one of the 60 days preceding the date of the marriage; or • Lived for 1 or more days preceding the qualifying event or most recent enrollment period in a service area where no qualified health plan (QHP) was available through the Exchange <p>This prior coverage requirement does not apply to AI/AN consumers.</p> <ul style="list-style-type: none"> • Qualifying Event: Date of marriage 	Any day of the month	Accelerated: First day of the month following plan selection

Coverage Effective Dates for Change in Household Size (continued)

Situation	Plan Selection Date	Coverage Effective Date
<p>Gaining or becoming a dependent through birth, adoption, or placement for adoption or foster care, or due to a child support or other court order</p> <p>Qualifying Event: Date of birth, adoption, foster care placement, or effective date of child support/ other court order</p>	<p>Any day of the month</p>	<p>Retroactive: Day the child was born, adopted, or placed for adoption or foster care, or date that the court order took effect</p>

Coverage Effective Dates for Change in Household Size (continued)

- The FFM automatically establishes retroactive effective dates for add a dependent SEP types (i.e., birth, adoption, or placement for adoption or foster care, or due to a child support or other court order)
- However, if they prefer, consumers can call the Marketplace Call Center to request one of the following alternate effective date options:
 - Accelerated prospective (1st of the month following the date of plan selection); or
 - Regular prospective (15th of the month rule)

Change in Primary Place of Living (Move SEP)

A consumer may qualify for an SEP if he or she (or anyone in the household):
Gained access to new Marketplace plans because of a change in his or her primary place of living; and

- Had qualifying coverage; or
- Lived in a foreign country or in a U.S. territory for at least one of the 60 days preceding the date of the move.
- Lived for 1 or more days preceding the qualifying event or most recent enrollment period in a service area where no qualified health plan (QHP) was available through the Exchange.

*This prior coverage requirement does not apply to members of a federally recognized tribe or Shareholders of Alaska Native Corporations (sometimes referred to as AI/AN).

REMINDER: Moving only for medical treatment or staying somewhere for vacation doesn't qualify consumers for an SEP.

Change in Primary Place of Living (Move SEP - continued)

Examples of qualifying changes in primary place of living:

- Moving to a new home in a new zip code or county where new QHPs are available
- Moving to the U.S. from a foreign country or United States territory
- A student moving to or from the place he or she attends school
- A seasonal worker moving to or from the place he or she lives and works
- Moving to or from a shelter or other transitional housing

REMINDER: Moving only for medical treatment or staying somewhere for vacation doesn't qualify consumers for an SEP.

Coverage Effective Dates: Move SEP

Situation	Plan Selection Date	Coverage Effective Date
<p>Gaining access to new Marketplace plans because of a change in his or her primary place of living; <u>and</u></p> <ul style="list-style-type: none"> • Had qualifying coverage; or • Lived in a foreign country or in a U.S. territory for at least one of the 60 days preceding the date of the move; or • Lived for 1 or more days preceding the qualifying event or most recent enrollment period in a service area where no qualified health plan (QHP) was available through the Exchange <p>This prior coverage requirement does not apply to AI/AN consumers.</p> <ul style="list-style-type: none"> • Qualifying Event: Date of move 	<p>Between the 1st and 15th day of the month</p>	<p>Regular: First day of the month following plan selection</p>
	<p>Between the 16th and last day of the month</p>	<p>Regular: First day of the second month following plan selection</p>

Change in Eligibility for Marketplace Coverage or Help Paying for Coverage

A consumer may qualify for an SEP if he or she (or anyone in his or her household):

- Is enrolled in Marketplace coverage and reports a change that makes the consumer:
 - Newly eligible for help paying for coverage
 - Newly ineligible for help paying for coverage
 - Eligible for a different amount of help paying out-of-pocket costs
- Becomes newly eligible for Marketplace coverage after being released from incarceration

Change in Eligibility for Marketplace Coverage or Help Paying for Coverage (continued)

- Becomes newly eligible for Marketplace coverage because the consumer becomes a citizen, national, or lawfully present individual.
- Gains or maintains status as a member of a federally recognized tribe or Alaska Native Claim Settlement Act (ANCSA) Corporation shareholders.
- Consumers with this status may change plans once per month, and their dependents may enroll in or change plans with them.

Change in Eligibility for Marketplace Coverage or Help Paying for Coverage (continued)

- Becomes newly eligible for help paying for Marketplace coverage because of a change in income or move to a different state and the consumer was previously:
 - Ineligible for Medicaid coverage because they lived in a state that hasn't expanded Medicaid;
- AND**
- Ineligible for help paying for coverage because their household income was below 100% of the Federal Poverty Level (FPL).

Coverage Effective Dates: Change in Eligibility

Situation	Plan Selection Date	Coverage Effective Date
Change in eligibility for Marketplace coverage or help paying for coverage Qualifying event date: Change in eligibility	Between the 1 st and 15 th day of the month	Regular: First day of the month following plan selection
	Between the 16 th and last day of the month	Regular: First day of the second month following plan selection

Enrollment or Plan Error

- A consumer may qualify for an SEP if he or she (or anyone in his or her household):
 - Wasn't enrolled in a plan or was enrolled in the wrong plan because of:
 - Misinformation, misrepresentation, misconduct, or inaction of someone working in an official capacity to help the consumer enroll
 - A technical error or another Marketplace-related enrollment delay
 - Wrong plan data (like benefit or cost-sharing information) was displayed in the plan compare feature of HealthCare.gov at the time of plan selection
- Can demonstrate that his or her Marketplace plan has violated a key part (material provision) of its contract

Coverage Effective Dates: Enrollment or Plan Error

Situation	Plan Selection Date	When Does Coverage Start?
<p data-bbox="117 544 571 636">Enrollment or Plan Error Qualifying Event:</p> <p data-bbox="117 689 664 839">Date that error occurs or that the consumer is notified by the Marketplace or Issuer</p>	<p data-bbox="685 544 1093 582">Any day of the month</p>	<p data-bbox="1136 544 1640 636">Effective dates appropriate based on circumstances</p> <p data-bbox="1136 715 1789 1029">Consumers may be eligible to elect retroactive coverage back to the date they would have gotten absent the error, or a regular prospective coverage effective date</p>

Other Qualifying Changes

A consumer may qualify for an SEP if he or she (or anyone in his or her household):

- Applies for Medicaid/CHIP during an OEP, or due to a qualifying event, and the state agency later determined, outside of the OEP or more than 60 days after the SEP qualifying event, that the consumer was not eligible.
- Is a victim of domestic abuse or spousal abandonment and wants to enroll in a health plan separate from his or her abuser or abandoner; dependents on the same application may enroll in coverage at the same time as the victim.
- Is an AmeriCorps service member starting or ending AmeriCorps service.
- Newly gains access to an individual coverage HRA, or provided with a QSEHRA

Other Qualifying Changes (continued)

A consumer may qualify for an SEP if he or she (or anyone in his or her household):

- Submitted documents and cleared their data matching issue after the FFM took action and their coverage was ended.
- Is under 100% of the Federal Poverty Level (FPL), submitted documents to prove that they have an eligible immigration status and didn't enroll in coverage while they waited for their documents to be reviewed.
- Can show he or she experienced an exceptional circumstance that kept him or her from enrolling in coverage during an enrollment period, like being incapacitated, or a victim of a natural disaster or experienced domestic abuse/violence or spousal abandonment.

Coverage Effective Dates for Other Qualifying Changes

Situation	When Does Coverage Start?
Other Qualifying Changes/Exceptional Circumstances	Effective dates appropriate based on circumstances