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

April 12, 2019

Marketplace Eligibility and Enrollment Group, CCIIO
Agenda

• SEP Basics
  ➢ Qualifying Events Overview
  ➢ Prior Coverage Requirements
  ➢ Coverage Effective Dates
  ➢ SEP Verification
  ➢ Plan Category Limitations (PCL)

• Qualifying Events and Examples

• Questions
SEP Basics

Qualifying Events Overview
When Consumers Can Enroll in Qualified Health Plan Coverage

During the Annual Open Enrollment Period (OEP)
- The 2019 OEP ended on December 15, 2018
- The 2020 OEP will start on November 1, 2019, and runs through December 15, 2019.

During a Special Enrollment Period (SEP), if they experience a qualifying event
- In most cases, consumers have 60 days from the date of the qualifying event to enroll in coverage
- A qualifying event can occur at any time during the year
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
If a consumer qualifies for an SEP, he or she usually has up to 60 days following the _________________ to enroll in a QHP.

a. Application Submission  
b. Plan Selection  
c. Hospital Admission  
d. Qualifying Event
The correct answer is:

d. Qualifying Event
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?
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 (cont.)

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
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
Coverage Effective Dates
Coverage Effective Dates

- Coverage can start based on when the consumer chooses a plan, and the type of SEP they qualify for.

- Coverage might start based on:
  - Regular prospective coverage effective dates
  - Accelerated prospective coverage effective dates
  - Retroactive coverage effective dates
Regular Prospective Coverage Effective Dates

- Coverage starts:
  - The first day of the following month if a plan was selected between the 1st and 15th day of the month; or
  - The first day of the second following month if a plan was selected between the 16th and the last day of the month.

- For example: Move SEP
Accelerated prospective coverage effective dates:

- Coverage starts: The first day of the following month if a plan is selected at any point during the month.
  
  - Example: Loss of qualifying health coverage SEP, Marriage SEP

Retroactive coverage effective dates:

- Coverage starts: On a date in the past, based on the qualifying event date.
  
  - Example: Birth SEP
Knowledge Check 2

All SEPs are available to anyone who is eligible for coverage and experienced a qualifying life event; regardless of when an individual applies, whether or not the individual had prior coverage or had Marketplace coverage.

a. True
b. False
The correct answer is:

B. False

Each SEP qualifying event has its own rules related to how much time after the qualifying event an individual has to enroll in coverage, what the coverage effective date is, and whether or not the applicant must submit documents to prove eligibility for the SEP.
SEP Basics

SEP Verification
SEP Verification

When a consumer applies for coverage, he or she must attest that the information provided is true, including the facts that qualify him or her for the SEP. Depending on their qualifying event, consumers newly enrolling in Marketplace coverage may be required to submit documents to prove SEP eligibility.

For more information on SEPs and SEP verification, please see:

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 (cont.)

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 (cont.)

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/
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

<table>
<thead>
<tr>
<th>Situation</th>
<th>Plan Selection</th>
<th>Coverage Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Loss of Qualifying Health Coverage</strong></td>
<td>Any day of the month</td>
<td>Accelerated: First day of the month after plan selection</td>
</tr>
<tr>
<td>Qualifying Event Date: Date that prior coverage ends</td>
<td></td>
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</tr>
<tr>
<td><strong>Future Loss of Qualifying Health Coverage</strong></td>
<td>Any day of the month</td>
<td>Accelerated: First day of the month after plan selection, following prior coverage end date</td>
</tr>
<tr>
<td>Qualifying Event Date: See above</td>
<td></td>
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</tr>
<tr>
<td>- Consumers can apply and qualify for this SEP up to 60 days before they lose coverage.</td>
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</tbody>
</table>
Qualifying Events and Examples

Examples
Example: Loss of Employer-Sponsored Coverage

Emma recently decided to leave her job to start her own business.

She left her job on April 5, and her employer-sponsored coverage ended at the end of the month, on April 30.
Knowledge Check 3

What is Emma’s qualifying event date?

a. The first date of the next month after losing her coverage.
b. The date she starts her Marketplace application.
c. The date she lost employer sponsored coverage.
d. The date she left her job
Knowledge Check 3 - Answer

The correct answer is: C

The date she lost employer sponsored coverage.

The qualifying event is the loss of coverage, which is the last day the consumer had coverage under his or her previous plan.
Knowledge Check 4

How much time does Emma have to select a plan?

a. 60 days from the date she left her job
b. 60 days before April 30
c. 60 days after April 30
d. Both (B) and (C) are correct
The correct answer is:

D. Both (B) and (C) are correct.

A consumer can report loss of qualifying health coverage both 60 days before and 60 days after the loss of MEC.
Knowledge Check 5

When will Emma’s Marketplace coverage start if she selects a plan before April 30th?

a. The first day of the following month if a plan was selected between the 1st and 15th day of the month.
b. The first day of the second following month if a plan was selected between the 16th and the last day of the month.
c. The first of the month after she loses coverage, and selects a plan, regardless of when during the month she selects her plan.
d. None of the above
Knowledge Check 5 - Answer

The correct answer is: C

The first of the month after she loses coverage and selects a plan, regardless of when during the month she selects her plan.
Scenario: Emma chooses a plan before coverage loss

- Emma’s employer-sponsored coverage is ending on April 30.
- On April 29, Emma applies for and enrolls in a plan through the Marketplace.
- Emma qualifies for a Loss of MEC SEP, and her Marketplace coverage will begin on May 1.
- Emma may be required to submit documents to confirm her SEP eligibility but this will not change her coverage start date.
Example: Loss of Employer Sponsored Coverage in the Past

Scenario: Emma chooses a plan after coverage loss

- Emma’s employer-sponsored coverage ended on April 30.
- On May 3, Emma applies for and enrolls in a plan through the Marketplace.
- Emma qualifies for a Loss of MEC SEP, and her Marketplace coverage will begin on June 1.
- Emma may be required to submit documents to confirm her SEP eligibility but this will not change her coverage start 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

<table>
<thead>
<tr>
<th>Situation</th>
<th>Plan Selection Date</th>
<th>Coverage Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gaining or becoming a dependent through marriage and</td>
<td>Any day of the month</td>
<td>Accelerated: First day of the month following plan selection</td>
</tr>
<tr>
<td>• Had qualifying coverage; or</td>
<td></td>
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<tr>
<td>• Lived in a foreign country or in a U.S. territory for at least one of</td>
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<tr>
<td>the 60 days preceding the date of the marriage; or</td>
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<tr>
<td>• Lived for 1 or more days preceding the qualifying event or most recent</td>
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<tr>
<td>enrollment period in a service area where no qualified health plan (QHP)</td>
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<tr>
<td>was available through the Exchange</td>
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</tr>
<tr>
<td>This prior coverage requirement does not apply to AI/AN consumers.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Qualifying Event: Date of marriage</td>
<td></td>
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</tr>
</tbody>
</table>
## Coverage Effective Dates for Change in Household Size (cont.)

<table>
<thead>
<tr>
<th>Situation</th>
<th>Plan Selection Date</th>
<th>Coverage Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
<td>Any day of the month</td>
<td>Retroactive: Day the child was born, adopted, or placed for adoption or foster care, or date that the court order took effect</td>
</tr>
<tr>
<td>Qualifying Event: Date of birth, adoption, foster care placement, or effective date of child support/ other court order</td>
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</tr>
</tbody>
</table>
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 - cont.)

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

<table>
<thead>
<tr>
<th>Situation</th>
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<th>Coverage Effective Date</th>
</tr>
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<tbody>
<tr>
<td>Gaining access to new Marketplace plans because of a change in his or her primary place of living; <strong>and</strong></td>
<td>Between the 1&lt;sup&gt;st&lt;/sup&gt; and 15&lt;sup&gt;th&lt;/sup&gt; day of the month</td>
<td>Regular: First day of the month following plan selection</td>
</tr>
<tr>
<td>•Had qualifying coverage; or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>•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</td>
<td></td>
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</tr>
<tr>
<td>•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</td>
<td></td>
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</tr>
<tr>
<td>This prior coverage requirement does not apply to AI/AN consumers.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>•Qualifying Event: Date of move</td>
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</tbody>
</table>
Assister Tip: Help Consumers Understand the Primary Place of Living SEP

Consumers who might qualify for the SEP due to a change in their primary place of living should consider:

- Did I move to a different county, and/or did my zip code change?
  - This usually means the consumer will have access to new health coverage options.
- Did I have qualifying coverage at any point during the 60 days before I moved?
  - If not, did I move from a foreign country or a U.S. territory?
  - If not, did I live 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?

If a consumer can answer yes to both of these questions, he or she may qualify for an SEP due to a change in primary place of living.
Example: Moving to a New State

Charles lives in Orlando, FL and is enrolled in a Marketplace Plan. He moves to Newark, NJ on May 12 to be closer to his family.

Charles has gained access to new Marketplace plans as a result of his move, so he may qualify for an SEP due to a change in primary place of living.
Knowledge Check 6

What is Charles’ qualifying event date?

a. The day he completes a change of address form at the Postal Office
b. The day he reserves movers online
c. The day he applies for Marketplace coverage
d. The day he moves to Newark, NJ
Knowledge Check 6 - Answer

The correct answer is: D

The day he moves to Newark, NJ
In an FFM State, how much time does Charles have to enroll in coverage?

a. Up to 60 days after he updates his Marketplace application
b. Up to 60 days after he buys a home in New Jersey
c. Up to 60 days after his move on May 12
d. Up to 60 days before his move on May 12
Knowledge Check 7 - Answer

The correct answer is: C

Up to 60 days after his move on May 12.
Knowledge Check 8

When will Charles’ Marketplace coverage start?

a. The first day of the following month if a plan was selected between the 1st and 15th day of the month.

b. The first day of the second following month if a plan was selected between the 16th and the last day of the month.

c. The first of the month after he loses coverage and selects a plan, regardless of when during the month he selects his plan.

d. Both (A) and (B) are correct
The correct answer is: D

Both (A) and (B) are correct following regular prospective dates, also known as the 15th of the month rule.
Charles returns to his Marketplace account on May 14, enrolls in new coverage in New Jersey, and terminates his FL coverage effective May 31.

- His coverage in New Jersey will begin on June 1.

  - Assister Tip: Charles moved to a new state, so he must complete a new application for New Jersey in his Marketplace account. He should also end his current Marketplace coverage in Florida on May 31, either through his Marketplace account or by calling the Marketplace Call Center. His termination can become effective the day he requests it, or he can schedule his termination for a future date.
Knowledge Check 9

Does a consumer qualify for the Move SEP if he or she moves within the same state, zip code, and county?

a. Yes
b. No
The correct answer is:

b. No

A Move SEP is only available to an individual who applies for coverage within 60 days of a move that resulted in the individual being able to access different Marketplace plans than were available at the previous place of residency. If the state, county and zip code all did not change, generally no new Marketplace plans would be available.
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
• 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.
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).
Jeff and Rachel are enrolled in Marketplace coverage, and use advance payments of the premium tax credit (APTC) to help lower their monthly payments. When they signed up during Open Enrollment, they didn’t qualify for cost sharing reductions (CSRs), because their household income was 350% of the federal poverty level (FPL).

On May 22, Rachel reduces the number of hours she works to spend more time caring for the couple’s daughter Lucy. When she and Jeff update their Marketplace application with their new household income, they newly qualify for cost sharing reductions (CSRs).
Knowledge Check 10

Do Jeff and Rachel qualify for an SEP due to their change in eligibility for CSRIs?

a. Yes
b. No
The correct answer is:

a. Yes

REMINDER: If a consumer becomes newly eligible for cost-sharing reductions (CSRs) and they aren’t already enrolled in a Silver Health Plan, they are eligible for a SEP and can choose a plan in the Silver category to use these CSRs or will be limited to their current plan category. For example, if the couple were initially enrolled in a Bronze Health Plan, they could choose to remain in Bronze OR instead enroll in a Silver Health Plan to apply their CSRs.
Jeff and Rachel have until June 20th to select a new plan, 30 days after their change in household income on May 22?

a. True
b. False
The correct answer is:

a. False

Jeff and Rachel have 60 days from the qualifying event to select a new plan and the qualifying event is the date that they update their Marketplace application and are determined newly eligible for APTC.

Jeff and Rachel have 30 days from the change of income to report the change to the Marketplace.
## Coverage Effective Dates: Change in Eligibility

<table>
<thead>
<tr>
<th>Situation</th>
<th>Plan Selection Date</th>
<th>Coverage Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in eligibility for Marketplace coverage or help paying for coverage</td>
<td>Between the 1&lt;sup&gt;st&lt;/sup&gt; and 15&lt;sup&gt;th&lt;/sup&gt; day of the month</td>
<td>Regular: First day of the month following plan selection</td>
</tr>
<tr>
<td>Qualifying event date: Change in eligibility</td>
<td>Between the 16&lt;sup&gt;th&lt;/sup&gt; and last day of the month</td>
<td>Regular: First day of the second month following plan selection</td>
</tr>
</tbody>
</table>
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

<table>
<thead>
<tr>
<th>Situation</th>
<th>Plan Selection Date</th>
<th>When Does Coverage Start?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrollment or Plan Error Qualifying Event:</td>
<td>Any day of the month</td>
<td>Effective dates appropriate based on circumstances. 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.</td>
</tr>
</tbody>
</table>
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.
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

<table>
<thead>
<tr>
<th>Situation</th>
<th>When Does Coverage Start?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Qualifying Changes/Exceptional Circumstances</td>
<td>Effective dates appropriate based on circumstances</td>
</tr>
</tbody>
</table>
Knowledge Check 12

Which of the following events trigger an SEP?

a. Voluntarily dropping COBRA in March
b. Being terminated from other coverage for not paying premiums or for fraud
c. Divorce or death of a family member without a resulting loss of coverage
d. Moving solely for medical treatment or vacation
e. Changing from one legally present status to another
f. None of the above
Knowledge Check 12 - Answer

The correct answer is: F

None of the above
Questions