Overview

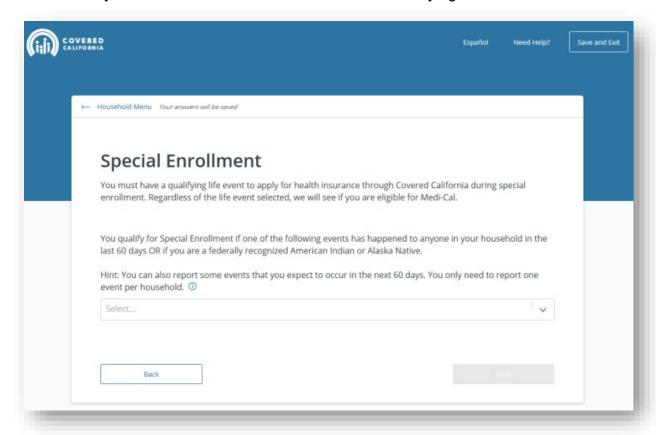
Outside of the Open Enrollment Period, consumers may only enroll in a Covered California Health or Dental plan or change their current plan if they experience a <u>Qualifying Life Event</u> (QLE). This is called a <u>Special Enrollment Period</u>.

- Certified Enrollers may assist consumers applying during a Special Enrollment Period
- The Special Enrollment Verification page now displays at the beginning of the application
- Eligibility and Coverage start dates are determined by the QLE selected
- With some exceptions, the consumer's QLE date must be within 60 days to qualify for a Special Enrollment
- Some applications may require Administrative Review if "Other Qualifying Life Event" is selected

Processing Special Enrollment Period Applications

When enrollers access a consumer's account, they will select "Report a Change".

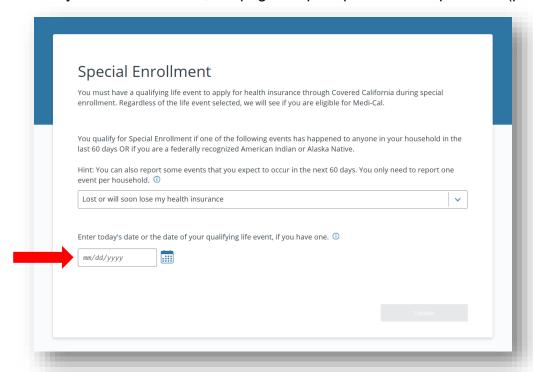
• The application will prompt you with the Special Enrollment screen (pictured below) where you will be asked to select from a list of Qualifying Life Events.





Special Enrollment Period Job Aid

- Select the appropriate QLE from the drop-down list and provide a date on which the life event occurred.
- Once you select a reason, the page will prompt additional questions (pictured below).



The following are some of the life events that qualify an individual for Special Enrollment Period to enroll or change plans outside of Open Enrollment:

Lost or will lose my health insurance	Paid the penalty for not having health insurance
Newly qualifies for health insurance stipend (formerly "Newly qualifies for app-based driver stipend")	Victim of domestic abuse or spousal abandonment
Permanently moved to/within California	Federally Recognized American Indian/Alaska Native
Had a baby or adopted a child	Gained citizenship/lawful presence
Got married or entered into domestic partnership	Released from jail or prison
Returned from active-duty military service	County under state of emergency
Other qualifying life event	None of the Above (continue to review my application for Medi-Cal)

System-Applied SEP Reason

The CalHEERS system will evaluate new enrollments and reported changes in circumstances (RAC) for a new SEP Reason "APTC – Detected low FPL." The system will automatically apply this SEP / QLE when the consumer's household income is at or below 150% Federal Poverty Limit and at least one member of the household meets all other eligibility requirements to be deemed Eligible or Conditionally Eligible for APTC or Cost-Sharing Reductions.

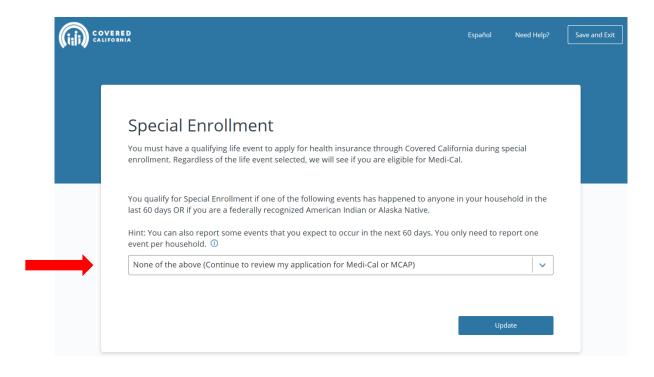
This SEP / QLE:

- Does not limit plan selection to 60 days. It allows eligible consumers to select plan
 enrollment at any point during the year or until a new QLE is selected (i.e., when
 Change Plan is available on screen).
- Runs in the background. It is not displayed as a dropdown. Users will continue to select the Qualifying Life Event that the consumer originally called to report.
- Applies first-day-of-the-following-month rule to determine the eligibility effective date when the new SEP reason APTC – Detected low FPL is detected.

Exceptions to Special Enrollment

Special Enrollment does not apply to Medi-Cal applicants or to verified American Indians and Alaska Natives (Al/AN). These consumers can apply for coverage anytime during the year.

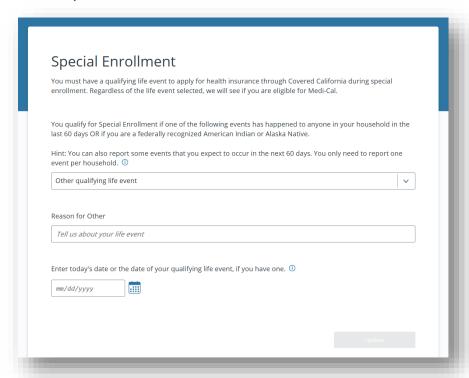
A consumer applying with no QLE may be eligible for other programs such as Medi-Cal.
 If there is no qualifying life event, select "None of the above" from the dropdown list.



Selecting Other Qualifying Life Event

Additional fields display and must be completed when "Other qualifying life event" is selected from the "Do any of the following life events or situations apply to you?" drop down list.

- Input a brief description of the "Other qualifying life event" in the "Reason for Other" textbox.
- Select a reason for the "Other qualifying life event" from the "Reason for Other" dropdown list.



Note: Using "Other qualifying life event" will require a Service Center representative to verify the life event to begin the plan selection process.

Confirming Qualification for Special Enrollment

Certified Enrollers must confirm the application qualifies for Special Enrollment and select the appropriate coverage start date category.

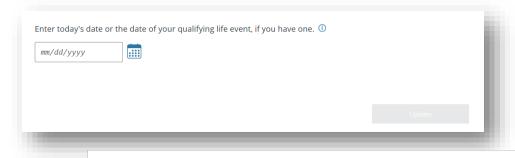
Use the list of <u>Qualifying Life Events</u> to review and confirm with the consumer.

Certified Enrollers must select an option from the "Coverage Date Category" dropdown list, to indicate the appropriate coverage start date rules, as part of the approval for Special Enrollment.

Qualifying Life Event Date

If the life event date is more than 60 days in the past, the consumer will not qualify for Special Enrollment.

 The life event date can also be up to 60 days in the future for loss of Minimum Essential Coverage.



Where can I find the date of my qualifying life event?

The date of your qualifying life event is usually the day that the life event happened. If you do not know the date of your life event, or do not have a date, enter today's date.

- If you moved permanently, enter the date you moved.
- For adoption, enter the effective date listed on adoption certificate.
- For the birth of family member, enter the date of the birth listed on the birth certificate.
- For married/domestic partnership, enter the date listed on the married or domestic partnership certificate.
- If you have lost, or will soon lose, your coverage, enter the date when you lost or will lose coverage.
- For no longer incarcerated, enter the date you were released from incarceration.
- · For gained citizenship/lawful presence, enter the date you gained citizenship or were lawfully present.
- Plan selection must be completed within 60 days of the life event date
- If consumers wait more than 60 days from the date of the life event, they must wait until the next Open Enrollment to enroll or change a plan
 - Exception includes when a consumer knows they will lose their Minimum Essential Coverage in the future, in which their Special Enrollment Period is 60 days before the event, and 60 days after the event.

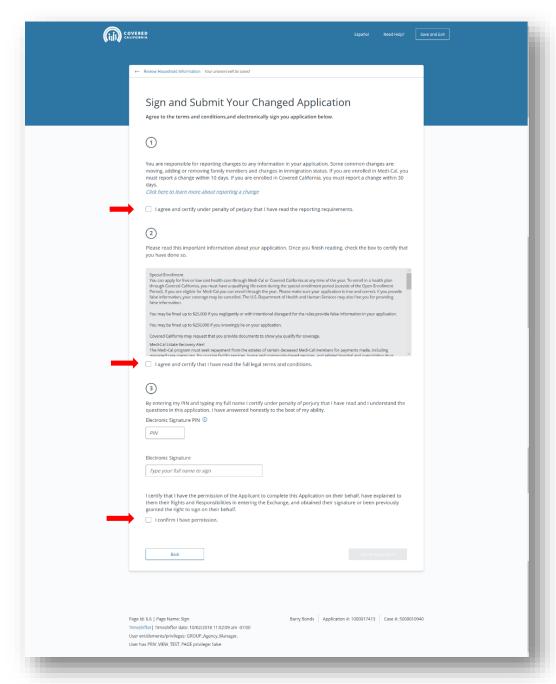
If the life event date is outside of the 60-day window, a pop-up message displays.



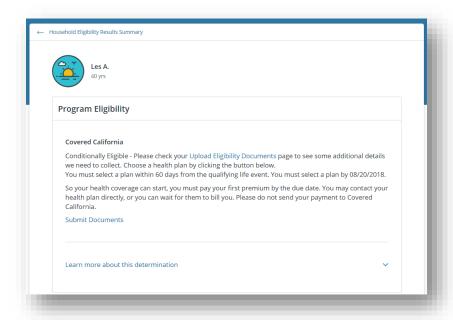
View of the "Application Signature" page

• The "Sign and Submit" section of the "Application Signature" page for Certified Enrollers differs from that of the Consumer. Complete the Review and Sign section of the Application Signature page by checking the attestations, as appropriate.

Check all attestations to enable the "Submit" button at the bottom of the page.



If the reported life event is approved and occurred within the 60-day window, the eligibility determination is run, and the results are displayed on the "Eligibility Results" page.



If "Other qualifying life event" was selected as the Qualifying Life Event, plan selection will not be available. The enroller will need to contact the service center to have the SEP QLE verified.

If the life event is denied, a message displays at the top of the "Eligibility Results" page to inform the consumer and provide further instructions.

Other Qualifying Life Event Examples:

- Already enrolled in a Covered California plan and a change in income redetermines consumer newly eligible or ineligible for tax credits or cost-sharing reductions
- Health plan violated its contract
- Exceptional circumstance occurred on or around plan selection deadlines, including natural and human-caused disasters and proclaimed public health emergencies
- Pending Medi-Cal and later denied May be eligible for retroactive coverage. Call the Service Center
- A Certified Enroller enrolled the consumer in a plan that they did not want to enroll in, failed to enroll the consumer in any plan, or failed to calculate premium assistance for which the consumer was eligible

Important Information:

- Minimum Essential Coverage (MEC) Expected Start Date is the first day of the month following Plan Selection or the first day of the month following the loss of coverage, whichever is later.
 - Please inform the consumer that if they select a plan on or after the first day of next month, the *Expected Start Date* will move to the <u>first of the next month</u> <u>following *Plan Selection*</u>. This could result in a gap in their healthcare coverage.
- Regulations allow MEC Plan Selection up to 60 days ahead of the loss of MEC
- When plan selection is desired 32 to 45 days ahead, use coverage date category
 Regular
- If Plan Selection is more than 45 days ahead:
 - Agents call the Agent Service Center at 877-453-9198
 - Community Enrollment Partners call the CEC/PBE Help Line at 855-324-3147
- Babies are covered under the mother's policy for the first 31 days following the date of birth

Report a Change

The same functionality for Special Enrollment appears in the Report a Change application process after all the required household, personal and income information has been entered and the application is ready to sign and submit. Please see the steps above to complete any changes during Special Enrollment.