

Special Enrollment Period (SEP)



Overview for the Federally- facilitated Marketplaces (FFMs)

June 28, 2016

*Centers for Medicare & Medicaid
Services (CMS)
Center for Consumer Information
& Insurance Oversight (CCIIO)*

Disclaimer

The information provided in this presentation is intended only as a general informal summary of standards for protection of consumer personally identifiable information. It is not intended to take the place of the statutes, regulations, and formal policy guidance that it is based upon. This presentation summarizes current policy and operations as of the date it was presented. Links to certain source documents have been provided for your reference. We encourage audience members to refer to the applicable statutes, regulations, and other interpretive materials for complete and current information about the requirements that apply to them.

This document generally is not intended for use in the State-based Marketplaces (SBMs) that do not use HealthCare.gov, but the material applies to you if are in a state with an SBM that is using HealthCare.gov for eligibility and enrollment. Please review the guidance on our Agents and Brokers Resources webpage (<http://go.cms.gov/CCIIOAB>) and Marketplace.CMS.gov to learn more.

Special Enrollment Periods (SEPs)



*Overview for
Agents and
Brokers*

When Consumers Can Enroll in Qualified Health Plan Coverage

- During the Annual Open Enrollment period
 - The 2016 Open Enrollment period ended on January 31, 2016.
 - The 2017 Open Enrollment period will run from November 1, 2016 through January 31, 2017.
- During an SEP, if eligible

SEPs

Consumers who experience a qualifying event can enroll in or change plans through an SEP.

- SEPs provide a pathway to coverage.
- Most SEPs last 60 days from the date of the qualifying event.
- A qualifying event can occur at any point during the year outside of Open Enrollment.

Regular Coverage Effective Dates

Regular coverage effective dates for enrollment are:

- The first day of the month following plan selection if selection took place between the 1st and 15th day of any month; or
- The first day of the second month following plan selection if selection took place between the 16th and the last day of any month.

Qualifying for an SEP

Consumers may qualify for an SEP to enroll in or change plans if they experience a qualifying event in one (1) of the following six (6) categories:

1. Loss of qualifying health coverage
2. Change in household size
3. Change in primary place of living
4. Change in eligibility for Marketplace coverage or help paying for coverage
5. Enrollment or plan error
6. Other qualifying change

See the “Special Enrollment Periods for the Health Insurance Marketplace” fact sheet: <https://marketplace.cms.gov/outreach-and-education/special-enrollment-periods-for-marketplace.pdf>

1. Loss of Qualifying Health Coverage

Consumers may qualify for an SEP if they (or anyone in their household for whom they seek coverage) lose qualifying health coverage. Some examples of qualifying health coverage include:

- Coverage through a job, or through another person's job
 - This also applies when consumers become newly eligible for help paying for coverage because their employer stops offering coverage or the coverage isn't considered qualifying coverage.

1. Loss of Qualifying Health Coverage (Continued)

- Medicaid or Children's Health Insurance Program (CHIP) coverage (including pregnancy-related coverage and medically needy coverage)
- Medicare
- Individual or group health plan coverage that ends during the year
- Dependent coverage that a consumer has through a parent's plan
 - If you turn 26 or the maximum dependent age allowed in your state and lose coverage, you can qualify for an SEP.

When Consumer Does Not Qualify for Loss of Qualifying Health Coverage SEP

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

- They voluntarily ended their prior coverage (does not apply if a consumer left his or her job and, as a result, lost health coverage)
- Their coverage ended due to nonpayment of premiums (does not apply where employer coverage ended because the employer didn't pay premiums)
- The coverage they lost did not qualify as minimum essential coverage (MEC)
- They lost coverage more than 60 days ago

Coverage Effective Dates for Loss of Qualifying Health Coverage SEPs

Situation	Plan Selection Date	Coverage Effective Date
Loss of Qualifying Health Coverage (up to 60 days in the past)	Any day of the month	First day of the following month after plan selection
Future Loss of Qualifying Health Coverage (up to 60 days in the future)	Any day of the month	First day of the month following loss of qualifying health coverage after plan selection

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, 2016, and her employer-sponsored coverage ended at the end of the month, on April 28.

Scenario 1:

- On April 29, 2016, 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, 2016.

Scenario 2:

- Emma applies for and enrolls in a plan through the Marketplace on May 3, 2016.
- Emma qualifies for a Loss of MEC SEP, and her Marketplace coverage will begin on June 1, 2016.

2. 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
- Got divorced, legally separated, or had a death in the family and lost health coverage
- Gained or became a dependent due to a child support or other court order

Coverage Effective Dates for Change in Household Size SEP

Situation	Plan Selection Date	Coverage Effective Date
Gaining a dependent through marriage (up to 60 days in the past)	Any day of the month	First day of the following month after plan selection
Gaining or becoming a dependent due to birth, adoption, or placement for adoption or foster care, or due to a child support or other court order (up to 60 days in the past)	Any day of the month	Day the child was born, adopted, or placed for adoption or foster care, or date that the court order took effect

Example: Marriage

- Bob and Britney got married on May 5.
- Britney was already enrolled in a QHP.
 - Bob can join her QHP.
 - Bob can enroll in a different QHP.
 - Britney can enroll in a different plan with Bob.
- Bob and Britney have 60 days to report the marriage to the Marketplace and enroll in coverage.
- Britney returns to the Marketplace to add Bob to her application, and, after reviewing their plan options, they decide to enroll in a new plan together on May 18.
- Coverage in their new plan begins June 1.

3. Change in Primary Place of Living

A consumer may qualify for an SEP if he or she (or anyone in his or her household) has a change in his or her primary place of living and gains access to new QHPs as a result. This includes:

- Moving to a new home in a new ZIP code or county where new QHPs are available
- Moving to the United States from a foreign country or U.S. 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

Example: Moving to a New State

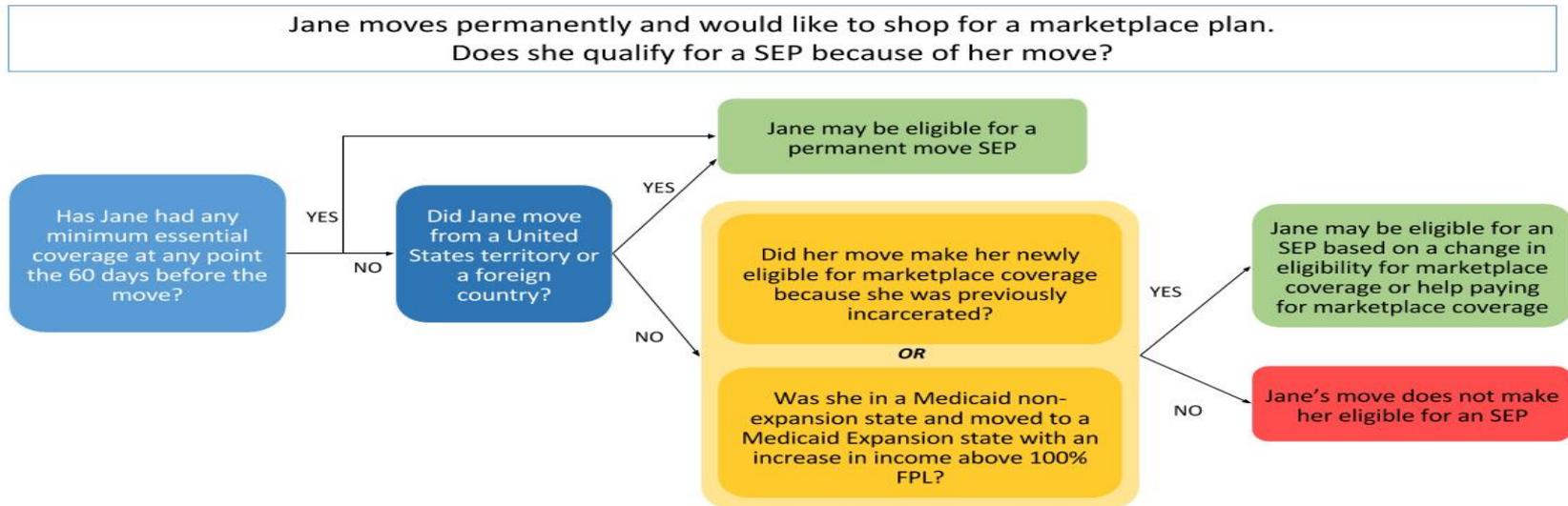
- Charles lives in Orlando, Florida and is enrolled in a QHP.
- Charles moves to Newark, New Jersey on May 12 to be closer to his family.
- Charles has gained access to new QHPs as a result of his move and so may qualify for the primary place of living SEP.
- However, since Charles has moved states, he must complete a new application for New Jersey in his Marketplace account.
- Charles returns to his Marketplace account on May 14, terminates his Florida coverage effective May 31, and enrolls in new coverage in New Jersey.
- His coverage in New Jersey will begin in June 1.

Regulatory Change to Primary Place of Living SEP

- Starting July 2016, consumers who change their primary place of living must have had qualifying coverage for least one day in the 60 days prior to their move in order to qualify for this SEP.
- Exception: The proposed rule would not apply to consumers who experience a change in primary place of living due to a move:
 - From outside the United States or from a U.S. territory
 - Upon leaving incarceration

Changes will take effect on July 11, 2016

Regulatory Change to Primary Place of Living SEP (Continued)



Note: We provided this graphic because it contains additional information that may be useful. As with other external partner resources that we share, we cannot attest to the accuracy of the information provided by third party sites or any linked site, and linking to a non-CMS web site does not constitute an official endorsement by CMS.

<http://www.enrollmentloop.org/groups/three-updates-permanent-move-sep> (last accessed on May 23, 2016)

Coverage Effective Dates for Change in Primary Place of Living SEPs

Situation	Plan Selection Date	Coverage Effective Date
Change in primary place of living	Between the 1 st and 15 th day of the month	First day of the month following plan selection
	Between the 16 th and last day of the month	First day of the second month following plan selection

4. 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
 - Ineligible for help paying for coverage
 - Eligible for a different amount of help paying out-of-pocket costs
- Gains or maintains status as a member of a federally recognized tribe or Alaska Native Claim Settlement Act (ANCSA) Corporation shareholder
- Becomes newly eligible for Marketplace coverage after being released from incarceration

4. Change in Eligibility for Marketplace Coverage or Help Paying for Coverage (Continued)

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

- Becomes newly eligible for Marketplace coverage because he or she has become a U.S. citizen, U.S. national, or lawfully present individual
- Becomes newly eligible for help paying for Marketplace coverage because he or she had a change in household income or moved to a different state and was previously both of these:
 - Ineligible for Medicaid coverage because he or she lived in a state that hasn't expanded Medicaid
 - Ineligible for help paying for coverage because his or her household income was below 100% of the FPL

Coverage Effective Dates for Change in Eligibility SEP

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

Consumers who are members of a federally recognized Indian tribe or ANCSA Corporation shareholders can sign up for or change plans once per month throughout the year.

5. 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 for Enrollment or Plan Error SEPs

Situation	Plan Selection Date	Coverage Effective Date
Enrollment or Plan Error	Between the 1 st and 15 th day of the month	First day of the following month
	Between the 16 th and last day of the month	First day of the second following month

In some cases, qualified individuals can elect retroactive coverage so that their coverage takes effect back to the date the consumer would have gotten coverage, absent the error.

6. 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 Open Enrollment period, or due to a qualifying event, and the state agency determined the consumer was not eligible, but did not transfer the application to the Marketplace for the consumer to enroll during Open Enrollment or an SEP
- 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
- Is an AmeriCorps service member starting or ending AmeriCorps service
- 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

Coverage Effective Dates

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

Events That Do Not Trigger an SEP

- Voluntarily dropping other coverage
- Being terminated from other coverage for not paying premiums or for fraud
- Divorce or death of a family member without a resulting loss of coverage
- Moving solely for medical treatment or vacation
- Changing from one (1) legally present status to another (e.g. becoming a U.S. citizen when you are previously a lawfully present individual)

Review: Qualifying for an SEP

Consumers may qualify for an SEP to enroll in or change plans outside of Open Enrollment if they experience a qualifying event in one (1) of the following six (6) categories:

1. Loss of qualifying health coverage
2. Change in household size
3. Change in primary place of living
4. Change in eligibility for Marketplace coverage or help paying for coverage
5. Enrollment or plan error
6. Other qualifying change

See the “Special Enrollment Periods for the Health Insurance Marketplace” fact sheet: <https://marketplace.cms.gov/outreach-and-education/special-enrollment-periods-for-marketplace.pdf>

SEP Overview Resources

- *The “Special Enrollment Periods for the Health Insurance Marketplace” fact sheet:*
<https://marketplace.cms.gov/outreach-and-education/special-enrollment-periods-for-marketplace.pdf>
- *Information on regulatory change to the primary place of living SEP:* <http://www.enrollmentloop.org/groups/three-updates-permanent-move-sep> (last accessed on May 23, 2016) - As with other external partner resources that we share, we cannot attest to the accuracy of the information provided by third party sites or any linked site, and linking to a non-CMS web site does not constitute an official endorsement by CMS.

Special Enrollment Periods (SEPs)



*Agent and
Broker
Resources*

Upcoming Deadlines

- Plan year 2016 FFM registration and training for agents and brokers will close on the Marketplace Learning Management System (MLMS) on July 15 at 11:59 AM ET.
 - Do not sign up for a new plan year 2016 FFM training curriculum after July 1. After this date, the MLMS is only available for updates to your profile's training completion status.
 - Complete all other plan year 2016 FFM registration requirements (e.g., identity proofing, sign the applicable Agreement(s)), or print copies of your Registration Completion Certificate(s), by **July 14**.
 - Please note that completion of a plan year 2016 training curriculum, or signing the plan year 2016 FFM Agreements, does not count towards plan year 2017 FFM registration for agents and brokers.
- The MLMS will be undergoing scheduled maintenance from 12:00 PM ET on June 29 to 11:59 PM ET on June 30. Due to this maintenance, the MLMS cannot be launched during this time; and any course or curriculum completed during this time will not be recorded.

MLMS Closing Resources

CMS has posted two (2) key resources on the Agents and Brokers Resources webpage related to the MLMS closing:

- [Myths and Facts about the Closing of the Marketplace Learning Management System for Plan Year 2016 Agent and Broker Federally-Facilitated Marketplace Registration and Training.](#)

The myths and facts document dispels some of the most common misconceptions agents and brokers have about the closing of the MLMS for plan year 2016 and how the closing will impact their ability to complete registration and training.

- [Quick Reference Guide: Avoiding the Creation of a Duplicate CMS Enterprise Portal Account](#)

The Quick Reference Guide explains how agents and brokers can use self service options, including finding out if they have a CMS user account, how to retrieve their CMS User ID and password, and how to reset a password.

Upcoming Activities

- Register for one of the upcoming plan year 2017 registration webinars. Topics to be addressed include:
 - An overview of the role of agents and brokers in the Health Insurance Marketplaces;
 - An overview of what's new for the FFM plan year 2017 registration and training process using the MLMS or one of the CMS-approved vendor training options; and
 - Information on the new refresher training option for agents and brokers who have previously completed the FFM registration and training requirements.
- Agents and brokers are welcome to attend any one (1) of the sessions, but CMS asks that agents and brokers only register for one session. To register for the webinar, please log in to www.REGTAP.info.

Plan Year 2017 FFM Registration and Refresher Training for Agents and Brokers Returning to the FFMs

- Wednesday, July 13 from 1:00 PM – 2:30 PM ET
- Tuesday, July 19 from 1:00 PM – 2:30 PM ET
- Thursday, July 28 from 11:00 AM – 12:30 PM ET
- Wednesday, August 3 from 1:00 PM – 2:30 PM ET
- Wednesday, August 10 from 1:00 PM – 2:30 PM ET

Plan Year 2017 FFM Registration and Training for Agents and Brokers New to the FFMs

- Wednesday, July 20 from 1:00 PM – 2:30 PM ET
- Wednesday, July 27 from 1:00 PM – 2:30 PM ET
- Thursday, August 4 from 11:00 AM – 12:30 PM ET

Agent and Broker Resources

The Agents and Brokers Resources webpage is the best place to start for guidance on how agents and brokers operate in the FFM. It can be accessed at <http://go.cms.gov/CCIIOAB> and provides links to many useful resources, including:

- *General reference resources and regulatory guidance on the role of agents and brokers in the FFM*
- *The “Agent and Broker Roadmap to Resources,” which provides a quick guide to resources CMS and its federal partners have developed to help agents, brokers, and consumers navigate the FFM.*
- *Information on how to complete registration and training for the Individual and SHOP Marketplaces*
- *The Agent and Broker Federally-Facilitated Marketplace (FFM) Registration Completion List (updated on this site twice monthly for the current plan year)*
- *All 2015 and 2016 (to date) editions of the “News for Agents and Brokers” newsletter*

Agent and Broker Resources (Continued)

- CMS presents periodic webinars on topics of interest to agents and brokers assisting consumers in the FFMs.
- Webinars are announced via emails to registered agents and brokers, on the Agents and Brokers Resources webpage, and in the monthly “News for Agents and Brokers” newsletter.
- Slides for past webinars are posted on the Agents and Brokers Resources webpage, including:
 - “IRS Data Recheck of Failure to File and Reconcile 2014 APTC Population: Overview for Agents and Brokers,” which provides an overview of a new process the FFMs are implementing in the summer 2016 that may impact consumers that agents and brokers work with.
 - “Protection Requirements and Appropriate Usage of Consumer’s Personally Identifiable Information (PII),” which highlights the standards of conduct for agents and brokers, requirements for protecting and using consumer PII, and new requirements included in the 2017 Payment Notice and Letter to Issuers that will be effective starting for plan year 2017.

Agent and Broker Resources (Continued)

Centers for Medicare & Medicaid Services
News for Agents and Brokers

FEBRUARY 2016 EDITION
An electronic source of information for Federally-facilitated Marketplace (FFM) Agents and Brokers

In This Issue:

- New Resources for Agents and Brokers
 - Upcoming Webinars
 - New “Operational” Updates and Announcements for Agents and Brokers Participating in the FFMs” Webinar Slides Now Available
 - New “Agent and Broker Roadmap to Resources”
 - “Operational Tips for Agents/Brokers for Plan Year 2016 in the FFM”
 - New Consumer Decision Support Tools Available at HealthCare.gov
 - Plan Year 2016 Agent and Broker FFM Registration Completion List
- Small Business Health Options Program (SHOP) Corner
 - The SHOP Marketplace is Open All Year!
 - Second Quarter Rates Available on February 16
 - Have SHOP Marketplace Renewals Coming Up?
 - New Research Findings on Small Employers and the SHOP Marketplace
- Special Populations—New Parents and Their New Children Enrolling in the Marketplace Outside of Open Enrollment
- Spotlight on Eligibility and Enrollment (E&E)
 - Help Consumers Understand the Application Question on Filing Taxes Jointly with a Spouse
 - Help Consumers Estimate their Expected 2016 Income
- Did You Know? Reminding Consumers to Pay Their First Month’s Premium for Health Insurance
- Follow Us on Twitter
- Contact Us

New Resources for Agents and Brokers

Upcoming Webinars

CMS will be hosting a number of topic-focused webinars in March on the following dates and times:

- **Tax Season Readiness 101:** March 9 from 12:30-2:00 PM Eastern Time (ET)—This webinar will cover an overview of the forms, tips, and tools agents and brokers should be familiar with as they help consumers prepare for the 2015 tax season.
- **Special Enrollment Periods (SEPs) in the FFMs for Plan Year 2016:** March 23 from 1:00–2:30 PM ET—This webinar will serve as a refresher on the availability of and requirements around SEPs and changes in circumstances.
- **Assisting Consumers with Complex Situations:** March 30 from 1:00–2:30 PM ET—This webinar will explain how to help consumers with multi-tax households and family members enrolling in different qualified health plans (QHPs).

- Registered agents and brokers also receive:
 - *Emails with current information about the FFM agent and broker program, and about the FFMs.*
 - *The “News for Agents and Brokers” monthly newsletter*
 - *For agents and brokers who not receive the newsletter via email, CMS posts it on the Agents and Brokers Resources webpage at: <http://go.cms.gov/CCIIOAB>.*
- Follow CMS’ Twitter feed:
 - *At <https://twitter.com/cmsgov> or by following CMS’ twitter handle, @CMSSGov*
 - *Search by the agent and broker program hashtags #ABFFM and #ABFFSHOP*

Agent and Broker Resources (Continued)

Definition of Acronyms

Acronym	Definition
ANCSA	Alaska Native Claim Settlement Act
APTC	Advance Payments of the Premium Tax Credit
CHIP	Children's Health Insurance Program
CMS	Centers for Medicare & Medicaid Services
FFM	Federally-facilitated Marketplace
FPL	Federal Poverty Level
IRS	Internal Revenue Service
MEC	Minimum Essential Coverage
PII	Personally Identifiable Information
QHP	Qualified Health Plan
SEP	Special Enrollment Period

Questions?

For questions about agent/broker participation in the FFMs:
FFMProducer-AssisterHelpDesk@cms.hhs.gov

For questions on the Marketplace Learning Management System (MLMS):
MLMSHelpDesk@CMS.HHS.gov

For questions when working with consumers applying and enrolling in QHPs:
1-800-318-2596 (TTY: 1-855-889-4325) available 7 days a week, 24 hours a day

For questions unrelated to application and enrollment:
1-855-CMS-1515 (855-267-1515) and select option “1”

For questions about the SHOP Marketplace:
1-800-706-7893 (TTY: 711) available M-F 9:00 AM-7:00 PM ET

For questions regarding a CMS-approved vendor’s training, contact the respective vendor’s help desk. Contact information for these vendors can be found on the Agents and Brokers Resources webpage at: <http://go.cms.gov/CCIIOAB>

For questions/comments about web-broker participation in the FFMs: WebBroker@cms.hhs.gov