

ACA – Special Enrollment Periods

By Jacques Chambers
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When health insurance companies agreed to cover everyone that applies under the **Affordable Care Act (ACA)**, regardless of their health or medical history, they wanted some arrangement so people couldn't wait until they felt sick to buy insurance. That was resolved by limiting enrollment to certain Open Enrollment Periods.

The Open Enrollment has closed for 2014. People wanting to purchase health insurance or change plans must wait until the next Open Enrollment Period. The federal government's Health Exchange (www.healthcare.gov) has set the next Open Enrollment to begin in November 15 and it will last until February, 2015. It is expected that states that operate their own exchanges will do the same. There are people who, for one reason or another, didn't need health insurance during the Open Enrollment but now need to enroll in or change plans.

For those people, ACA has created Special Enrollment Periods to help those who are caught without insurance between Open Enrollment Periods. People who qualify may enroll in health insurance under a Special Enrollment Period for a limited time only.

Persons will be eligible to enroll in health insurance under a Special Enrollment Period if they have a Triggering Event. The Special Enrollment Period for each individual will last for 60 days following a Triggering Event.

Triggering Events include:

- **Marriage** – A couple has 60 days from the date of marriage to enroll in a health plan or add the spouse to the other spouse's plan. If they notify the Exchange in the month of the marriage, spouse coverage will begin the first of the following month; if notification is in the month following the marriage, the effective date will be the first of the month after that.
- **New Child** – Having, adopting, or receiving placement of a child will create a Special Enrollment Period for the new child. Again, the Exchange must be notified within 60 days of acquiring the child;
- **Moving** – Moving your residence to a new area that offers different health plan options creates a Special Enrollment Period;
- **Losing Other Health Coverage** – When coverage which is considered to be Minimum Essential Coverage under ACA is lost, a Special Enrollment Period opens. Loss of coverage can be for many reasons including:
 - Leaving a job with employer provided health insurance;
 - Divorce;
 - Aging out as a dependent child from under the parents' coverage;
 - Losing Medicaid coverage;

- Losing coverage in a Qualified Health Plan for any reason other than non-payment of premium;
- Change in income or household that affects eligibility for subsidies and tax credits;
- Gaining legal residency through citizenship or legal permanent residency;
- Upon providing proof that the Qualified Health Plan in which they are enrolled has violated a provision in the contract to the enrollee; and,
- Native Americans covered under the Indian Health Care Improvement Act may enroll or change plans once a month.

During the 60 days following the Triggering Event, a person may enroll in a plan.

In addition, there are exceptional or complex situations that can create a Special Enrollment Period.

Medically Needy Medicaid: Many states provide Medicaid for persons with higher income but also with high medical bills. They will have a Spend Down (also called Share of Cost or Deductible) they must go through before Medicaid starts paying.

Although Medically Needy Medicaid is not considered to be Minimum Essential Coverage (MEC) under ACA, meeting the Share of Cost or Spend Down will trigger a Special Enrollment Period. They will have 60 days from the date they met their Spend Down to notify the Exchange and enroll in a plan.

In states like Florida or California which have a monthly Spend Down, enrollees are encouraged to notify their Exchange as soon as possible as their 60 day Special Enrollment Period begins the first of the month after meeting their Spend Down requirement.

COBRA Continuation Coverage: People losing employer coverage due to losing their job have a Special Enrollment Period when they may purchase an Exchange Plan without having to take the COBRA Continuation Coverage, which is often expensive and does not provide the subsidies and tax credits of an Exchange Plan.

If, however, someone chooses to take the COBRA Continuation Coverage, they will have a Special Enrollment Period once the COBRA coverage expires. They also may drop their COBRA coverage and switch plans during any annual Open Enrollment Period.

There is also a one-time Special Enrollment Period just for 2014. Anyone eligible for COBRA or already on COBRA may drop that coverage and enroll in an Exchange Plan up through July 1, 2014. This applies to all states that use the

federal health exchange at www.healthcare.gov. States that operate their own exchanges are encouraged, but not required, to do the same. This is being done on an exception basis, as the federally required COBRA Notices did not contain wording that included the choice of an ACA plan. The Notices have since been revised to encourage COBRA eligible individuals to strongly consider purchasing coverage through an Exchange.

Loss of Enrollment Opportunity: A Special Enrollment Period is also available for individuals who were unable to enroll due to an unexpected hospitalization or a cognitive disorder. Similarly, a Special Enrollment Period will allow people to enroll who were previously unable to due to a natural disaster such as floods, storms or earthquakes.

Errors During Enrollment: A Special Enrollment Period may be available if there were system or display errors when originally enrolling or other problems in the initial enrollment process.

Requesting a Special Enrollment Period: The starting point would be to contact the Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325) and request a Special Enrollment Period. They will provide the necessary information to start the process.

Appealing a Denial: If an individual's request for a Special Enrollment Period is denied, the decision can be appealed and, if the denial is overturned, coverage will be effective back to the date the requested was denied.

1. Go to <https://www.healthcare.gov/can-i-appeal-a-marketplace-decision/> and print out the form for your state.
2. Attach a copy of the denial or other official notice.
3. Send the appeal to:
Health Insurance Marketplace
465 Industrial Blvd.
London, KY 40750-0061

The Affordable Care Act (ACA) is a long and very complicated law, and its provisions are changing the way that health insurance is marketed and purchased in this country. There will be many new issues under the law. This column will continue to explore and explain the various provisions as they become established law.