

HEALTH CARE REFORM POLICY DOCUMENTATION

QHP ENROLLMENT PERIOD

This policy applies to:	<input type="checkbox"/> MAGI Medicaid <input checked="" type="checkbox"/> Cost Sharing Reductions <input type="checkbox"/> Non-MAGI Medicaid <input checked="" type="checkbox"/> Qualified Health Plans (QHP) <input checked="" type="checkbox"/> Advanced Premium Tax Credits <input type="checkbox"/> Individual Insurance Requirement Exemption
Does this document reflect a change in policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Document Scope:	This document describes the policies regarding Qualified Health Plan enrollment periods.
------------------------	--

DEFINITIONS		
Term	Definition	Comments

'AS IS' POLICY ASSESSMENT OF CURRENT POLICY	
Current Citations <i>List citation and link to underlying authority or embedded PDF</i>	Plain Language Synopsis of Citations
	N/A
Current Policy	
There is no current policy as QHP enrollment is a new Exchange concept.	
References: <i>Include links to HCPM sections, DHS web, bulletins or other relevant documentation of current policy.</i>	

'TO BE' POLICY ASSESSMENT UNDER ACA	
ACA Citations <i>List citation and link to underlying authority or embedded PDF</i>	Plain Language Synopsis of Citations
45 CFR 155.305(b)	The Exchange must determine an applicant eligible for an enrollment period if he or she meets the criteria for an enrollment period, as specified in §§ 155.410 and 155.420.
45 CFR 155.410(a)	<p>The Exchange must provide an initial open enrollment period and annual open enrollment periods during which qualified individuals may enroll in a QHP and enrollees may change QHPs.</p> <p>The Exchange may only permit a qualified individual to enroll in a QHP or an enrollee to change QHPs during the initial open enrollment period, the annual open enrollment period, or a special enrollment period for which the qualified individual has been determined eligible.</p>
45 CFR 155.410(b)	The initial open enrollment period begins October 1, 2013, and extends through March 31, 2014.
45 CFR 155.410(e)	For benefit years beginning on or after January 1, 2015, the annual open enrollment period begins October 15 and extends through December 7 of the preceding calendar year.

HEALTH CARE REFORM POLICY DOCUMENTATION QHP ENROLLMENT PERIOD

45 CFR 155.420(a)	<p>The Exchange must provide special enrollment periods consistent with this section, during which qualified individuals may enroll in QHPs and enrollees may change QHPs.</p>
45 CFR 155.420(d)	<p>The Exchange must allow qualified individuals and enrollees to enroll in or change from one QHP to another as a result of the following triggering events:</p> <ul style="list-style-type: none"> • A qualified individual or dependent loses minimum essential coverage • A qualified individual gains a dependent or becomes a dependent through marriage, birth, adoption or placement for adoption • An individual, who was not previously a citizen, national, or lawfully present individual gains such status; • A qualified individual's enrollment or non-enrollment in a QHP is unintentional, inadvertent, or erroneous and is the result of the error, misrepresentation, or inaction of an officer, employee, or agent of the Exchange or HHS, or its instrumentalities as evaluated and determined by the Exchange. In such cases, the Exchange may take such action as may be necessary to correct or eliminate the effects of such error, misrepresentation, or inaction; • An enrollee adequately demonstrates to the Exchange that the QHP in which he or she is enrolled substantially violated a material provision of its contract in relation to the enrollee; • An individual is determined newly eligible or newly ineligible for advance payments of the premium tax credit or has a change in eligibility for cost-sharing reductions, regardless of whether such individual is already enrolled in a QHP. The Exchange must permit individuals whose existing coverage through an eligible employer-sponsored plan will no longer be affordable or provide minimum value for his or her employer's upcoming plan year to access this special enrollment period prior to the end of his or her coverage through such eligible employer-sponsored plan. • A qualified individual or enrollee gains access to new QHPs as a result of a permanent move • An Indian, as defined by section 4 of the Indian Health Care Improvement Act, may enroll in a QHP or change from one QHP to another one time per month • A qualified individual or enrollee demonstrates to the Exchange, in accordance with guidelines issued by HHS, that the individual meets other exceptional circumstances as the Exchange may provide

'To Be' Policy	
MAGI	An individual who loses eligibility for Medicaid will qualify for a special enrollment period if otherwise eligible to enroll in a QHP.
Non-MAGI (Applies Across Medicaid)	An individual who loses eligibility for Medicaid will qualify for a special enrollment period if otherwise eligible to enroll in a QHP.
Advanced Premium Tax Credits	An individual must meet the eligibility requirements for a QHP enrollment period in order to be eligible for APTC.
Cost Sharing Reductions	An individual must meet the eligibility requirements for a QHP enrollment period in order to be eligible for CSR.
Qualified Health Plans	An individual can enroll in a QHP during the initial open enrollment period. An individual can enroll in or change from one QHP to another during the annual open enrollment period or during

HEALTH CARE REFORM POLICY DOCUMENTATION

QHP ENROLLMENT PERIOD

	<p>a special enrollment period triggered by an event listed below.</p> <p>Initial open enrollment period for 2014: October 1, 2013 through March 31, 2014. Annual open enrollment period for 2015 and ongoing: October 15 through December 7</p> <p>Special enrollment period: The Exchange must allow qualified individuals and enrollees to enroll in or change from one QHP to another as a result of the following triggering events:</p> <ul style="list-style-type: none"> • A qualified individual or dependent loses minimum essential coverage • A qualified individual gains a dependent or becomes a dependent through marriage, birth, adoption or placement for adoption • An individual, who was not previously a citizen, national, or lawfully present individual gains such status; • A qualified individual's enrollment or non-enrollment in a QHP is unintentional, inadvertent, or erroneous and is the result of the error, misrepresentation, or inaction of an officer, employee, or agent of the Exchange or HHS, or its instrumentalities as evaluated and determined by the Exchange. In such cases, the Exchange may take such action as may be necessary to correct or eliminate the effects of such error, misrepresentation, or inaction; • An enrollee adequately demonstrates to the Exchange that the QHP in which he or she is enrolled substantially violated a material provision of its contract in relation to the enrollee; • An individual is determined newly eligible or newly ineligible for advance payments of the premium tax credit or has a change in eligibility for cost-sharing reductions, regardless of whether such individual is already enrolled in a QHP. The Exchange must permit individuals whose existing coverage through an eligible employer-sponsored plan will no longer be affordable or provide minimum value for his or her employer's upcoming plan year to access this special enrollment period prior to the end of his or her coverage through such eligible employer-sponsored plan. • A qualified individual or enrollee gains access to new QHPs as a result of a permanent move • An Indian, as defined by section 4 of the Indian Health Care Improvement Act, may enroll in a QHP or change from one QHP to another one time per month • A qualified individual or enrollee demonstrates to the Exchange, in accordance with guidelines issued by HHS, that the individual meets other exceptional circumstances as the Exchange may provide <p>Special enrollment period remains in effect for 60 days following the triggering event.</p>
Individual Insurance Requirement Exemption	N/A
How will the 'to be' policy affect or apply to:	
New applicants	New applicants must enroll in a QHP during open enrollment, unless the individual qualifies for a special enrollment period.
Current Enrollees	An individual who loses eligibility for Medicaid will qualify for a special enrollment period if otherwise eligible to enroll in a QHP. Current QHP enrollees must wait for an open enrollment period to change from one QHP to another unless the criteria for a special enrollment period is met.
Application Process	An individual applies for Exchange participation by submitting the streamlined application to the Exchange during open enrollment. Individuals who qualify for a special enrollment period may apply at any time during the year.
Eligibility Begin Date	<ul style="list-style-type: none"> • Initial Open enrollment: coverage begins on January 1, 2014 if the application is processed by December 15, 2013. If the application is processed between the 1st and

HEALTH CARE REFORM POLICY DOCUMENTATION

QHP ENROLLMENT PERIOD

	<p>15th of any subsequent month, during initial open enrollment, coverage begins on the first of the following month. If the application is processed between the 15th and the 31st of December 2013, or between the 15th and the last day of the month in any subsequent month during the initial open enrollment, coverage begins on the first day of the second following month. Initial open enrollment period ends March 31, 2014.</p> <ul style="list-style-type: none"> • Open enrollment: coverage begins on the first day of the following benefit year • Special enrollment: for individuals who enroll between the 1st and 15th of the month: coverage is effective the first day of the following month • Special enrollment: for individuals who enroll between the 16th and the last day of the month: coverage is effective the first day of the second following month • Exception to Special enrollment coverage begin date for birth, adoption, or placement for adoption: coverage is effective on the date of the birth, adoption, or placement for adoption. APTC and CSR are not effective until the first day of the following month unless the event occurs on the first day of the month • Exception to Special enrollment coverage begin date for marriage or loss of minimum essential coverage: coverage is effective the first day of the following month
Renewals	Qualified individuals can enroll in a new QHP during the annual open enrollment and renewal period. If a Medicaid enrollee loses coverage as the result of a renewal processed outside of an open enrollment period, the enrollee will qualify for a special enrollment period for QHP.
Verification Requirements	The exchange must verify an individual's eligibility for enrollment during an open enrollment period, or verify that the individual is eligible for a special enrollment period.
Social Security Number	
Citizenship Status	An individual may qualify for a special enrollment period if citizenship status is gained.
Immigration Status	An individual may qualify for a special enrollment period if lawful presence is gained.
Insurance, TPL & Benefit Recovery	N/A
State Residency	An individual may qualify for a special enrollment period as the result of a permanent move to another state or exchange area. An individual must be a resident of the state of the Exchange offering the QHP unless tax household members live in multiple Exchange areas, in which case the individual may enroll in any Exchange where a tax filer meets the residency standard.
Household Composition	An individual may qualify for a special enrollment period if the individual's household composition changes, such when the individual gains a dependent or becomes a dependent.
Income and Asset Guidelines	N/A
Income and Asset Deeming	N/A
Income Calculation	N/A
Spenddowns and Obligations	N/A
Premiums	N/A
Covered Services	N/A
Service Delivery	N/A
End of Eligibility	Unless coverage is renewed or terminated early, eligibility for enrollment in QHP ends on the last day of the year for which the individual's open or special enrollment period applies.
Other Requirements	N/A
Relationship to Other Programs, Groups or Bases	N/A
Other Reference Material	

HEALTH CARE REFORM POLICY DOCUMENTATION

QHP ENROLLMENT PERIOD

Include links to flowcharts,
tables, issue briefs, etc.

Change in State Law Needed?

Yes No

Detail of State Law Change

Legislation authorizing Exchange

Federal Compliance Considerations?

State Plan Option Waiver Other None

Detail of Federal Compliance Considerations

State plan and approval of Exchange blueprint.