

Special Enrollment

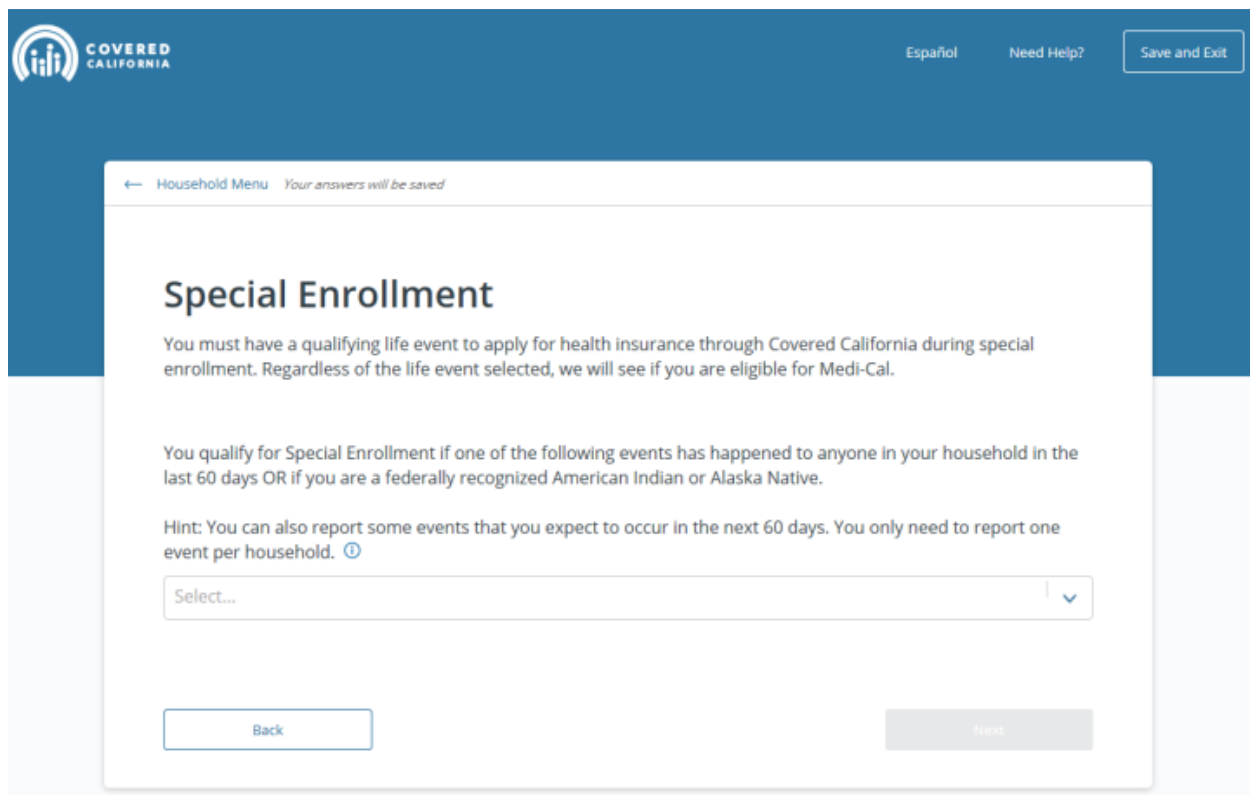
Outside of the Open Enrollment Period, consumers may only enroll in a Covered California Health or Dental plan or change their current plan if they experience a [Qualifying Life Event](#). This is called a [Special Enrollment](#).

- Certified Enrollers may assist consumers submitting an application during a Special Enrollment
- The Special Enrollment Verification page now displays at the beginning of the application
- Eligibility and Coverage start dates are determined by the QLE selected
- 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 Applications

When enrollers access consumers accounts. 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 to submit the consumer's QLE.



The screenshot shows the "Special Enrollment" screen within the Covered California system. At the top, there is a blue header with the Covered California logo, "Español", "Need Help?", and a "Save and Exit" button. Below the header, a white box contains the "Special Enrollment" title and instructions: "You must have a qualifying life event to apply for health insurance through Covered California during special enrollment. Regardless of the life event selected, we will see if you are eligible for Medi-Cal." It then states: "You qualify for Special Enrollment if one of the following events has happened to anyone in your household in the last 60 days OR if you are a federally recognized American Indian or Alaska Native." A hint follows: "Hint: You can also report some events that you expect to occur in the next 60 days. You only need to report one event per household." Below the hint is a dropdown menu labeled "Select..." with a downward arrow. At the bottom of the white box are two buttons: "Back" and "Next".

- Select a 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)

Special Enrollment

You must have a qualifying life event to apply for health insurance through Covered California during special enrollment. Regardless of the life event selected, we will see if you are eligible for Medi-Cal.

You qualify for Special Enrollment if one of the following events has happened to anyone in your household in the last 60 days OR if you are a federally recognized American Indian or Alaska Native.

Hint: You can also report some events that you expect to occur in the next 60 days. You only need to report one event per household. ⓘ

Lost or will soon lose my health insurance

This application qualifies for special enrollment as a result of a qualifying life event.

Yes, this household qualifies for Special Enrollment

No, this household does not qualify for Special Enrollment

Coverage Date Category

Birth/Adoption/Appeals Mid-Month

MEC or Marriage/Domestic Partnership

Regular

Enter today's date or the date of your qualifying life event, if you have one. ⓘ

mm/dd/yyyy



Special enrollment expiration date ⓘ

mm/dd/yyyy



Next

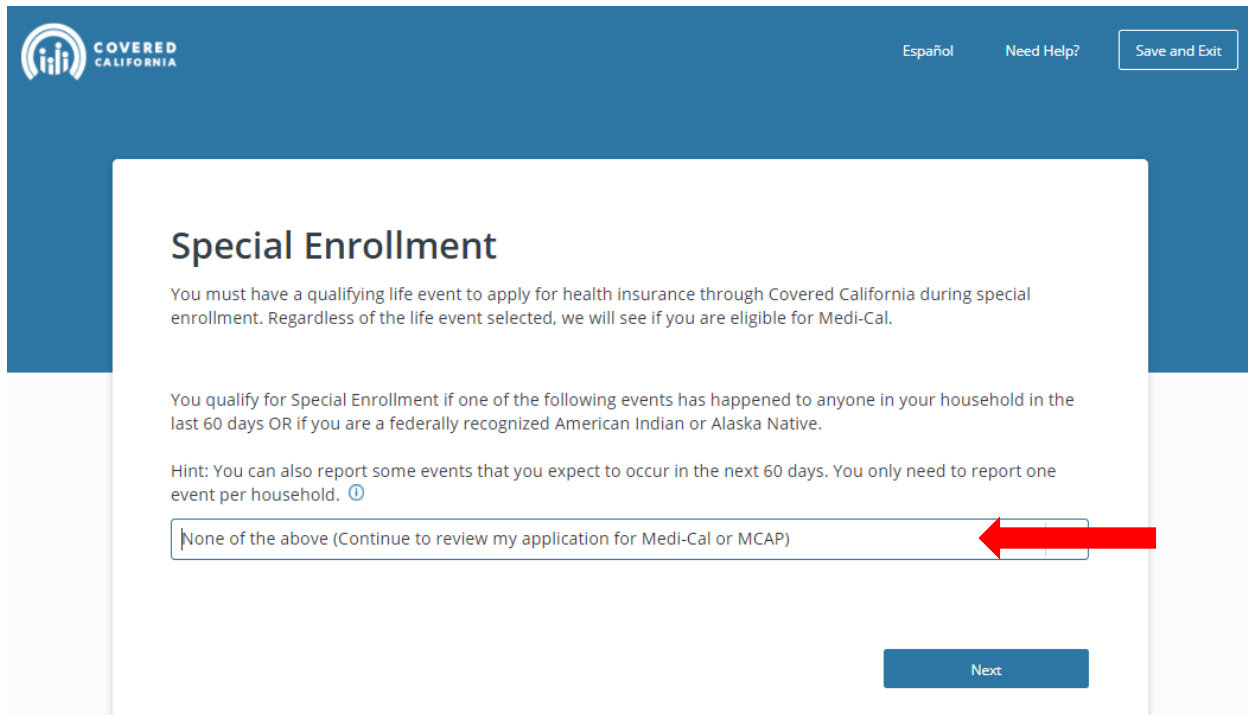
The following situations qualify an individual for Special Enrollment so that they can enroll or change plans outside of Open Enrollment:

Lost or will soon lose my health insurance	Released from jail or prison
Permanently moved to/within California	Gained citizenship/lawful presence
Had a baby or adopted a child	Federally Recognized American Indian or Alaska Native
Got married or entered into domestic partnership	Other qualifying life event
Returned from active duty military service	None of The Above (continue to review my application for Medi-Cal)

Exceptions to Special Enrollment

Special Enrollment does not apply to Medi-Cal applicants or to verified American Indians and Alaska Natives (AI/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, “None of the above” should be selected from the dropdown list.

A screenshot of the 'Special Enrollment' form on the Covered California website. The form has a blue header with the Covered California logo, 'Español', 'Need Help?', and a 'Save and Exit' button. The main content area is white with a blue border. It features the title 'Special Enrollment' and instructions: 'You must have a qualifying life event to apply for health insurance through Covered California during special enrollment. Regardless of the life event selected, we will see if you are eligible for Medi-Cal.' Below this, it states: 'You qualify for Special Enrollment if one of the following events has happened to anyone in your household in the last 60 days OR if you are a federally recognized American Indian or Alaska Native.' A hint follows: 'Hint: You can also report some events that you expect to occur in the next 60 days. You only need to report one event per household. ⓘ'. A dropdown menu is shown with the selected option 'None of the above (Continue to review my application for Medi-Cal or MCAP)'. A red arrow points to this dropdown. At the bottom right is a blue 'Next' button.

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.

Special Enrollment

You must have a qualifying life event to apply for health insurance through Covered California during special enrollment. Regardless of the life event selected, we will see if you are eligible for Medi-Cal.

You qualify for Special Enrollment if one of the following events has happened to anyone in your household in the last 60 days OR if you are a federally recognized American Indian or Alaska Native.

Hint: You can also report some events that you expect to occur in the next 60 days. You only need to report one event per household. ⓘ

 Other qualifying life event ▼

Reason for Other 1 ⓘ

Select One... ▼

Reason for Other 2 ⓘ

Select One... ▼

This application qualifies for special enrollment as a result of a qualifying life event.

Yes, this household qualifies for Special Enrollment

No, this household does not qualify for Special Enrollment

Coverage Date Category

Birth/Adoption/Appeals Mid-Month

MEC or Marriage/Domestic Partnership

Regular

Enter today's date or the date of your qualifying life event, if you have one. ⓘ

mm/dd/yyyy 

Special enrollment expiration date ⓘ

mm/dd/yyyy 

Next



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 Qualifying Life Events found [here](#) to review and confirm with the consumer
- This selection notes the Certified Enroller's confirmation for Special Enrollment, based on the households Qualifying Life Event

This application qualifies for special enrollment as a result of a qualifying life event.



Yes, this household qualifies for Special Enrollment

No, this household does not qualify for Special Enrollment

Coverage Date Category



Birth/Adoption/Appeals Mid-Month

MEC or Marriage/Domestic Partnership

Regular

- If 'Yes' is selected, Special Enrollment plan selection is made available for the consumer
- If 'No' is selected, Special Enrollment plan selection is not opened for 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

Enter today's date or the date of your qualifying life event, if you have one. ⓘ

mm/dd/yyyy



Special enrollment expiration date ⓘ

mm/dd/yyyy

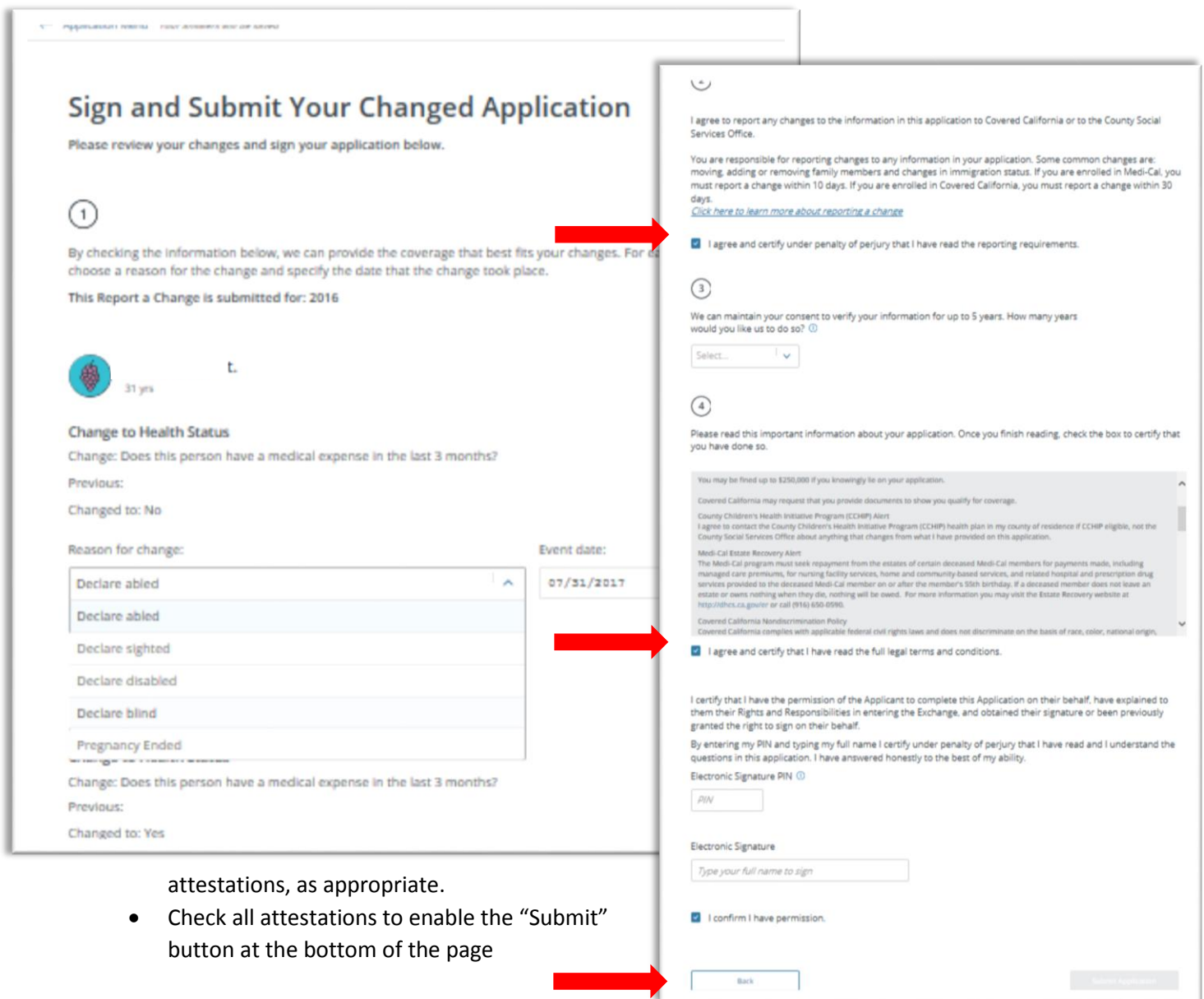


- **Plan selection must be completed within 60 days of the life event date**
- If consumers wait more than 60 days from the date of the life event, they must wait until the next Open Enrollment to enroll or change a plan

View of the “Application Signature” page

The “Review and Sign” 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



Sign and Submit Your Changed Application
Please review your changes and sign your application below.

1

By checking the information below, we can provide the coverage that best fits your changes. For each change, choose a reason for the change and specify the date that the change took place.

This Report a Change is submitted for: 2016

31 yrs

Change to Health Status
Change: Does this person have a medical expense in the last 3 months?
Previous: No
Changed to: No

Reason for change:

- Declare abled
- Declare abled
- Declare sighted
- Declare disabled
- Declare blind
- Pregnancy Ended

Event date: 07/31/2017

I agree to report any changes to the information in this application to Covered California or to the County Social Services Office.

You are responsible for reporting changes to any information in your application. Some common changes are: moving, adding or removing family members and changes in immigration status. If you are enrolled in Medi-Cal, you must report a change within 10 days. If you are enrolled in Covered California, you must report a change within 30 days.
[Click here to learn more about reporting a change](#)

☒ I agree and certify under penalty of perjury that I have read the reporting requirements.

3

We can maintain your consent to verify your information for up to 5 years. How many years would you like us to do so?

4

Please read this important information about your application. Once you finish reading, check the box to certify that you have done so.

You may be fined up to \$250,000 if you knowingly lie on your application.

Covered California may request that you provide documents to show you qualify for coverage.

County Children's Health Initiative Program (CCHIP) Alert
I agree to contact the County Children's Health Initiative Program (CCHIP) health plan in my county of residence if CCHIP eligible, not the County Social Services Office about anything that changes from what I have provided on this application.

Medi-Cal Estate Recovery Alert
The Medi-Cal program must seek repayment from the estates of certain deceased Medi-Cal members for payments made, including managed care premiums, for nursing facility services, home and community-based services, and related hospital and prescription drug services provided to the deceased Medi-Cal member on or after the member's 55th birthday. If a deceased member does not leave an estate or owns nothing when they die, nothing will be owed. For more information you may visit the Estate Recovery website at <http://dhcs.ca.gov/er> or call (916) 650-0590.

Covered California Nondiscrimination Policy
Covered California complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin,

☒ I agree and certify that I have read the full legal terms and conditions.

I certify that I have the permission of the Applicant to complete this Application on their behalf, have explained to them their Rights and Responsibilities in entering the Exchange, and obtained their signature or been previously granted the right to sign on their behalf.

By entering my PIN and typing my full name I certify under penalty of perjury that I have read and I understand the questions in this application. I have answered honestly to the best of my ability.

Electronic Signature PIN

Electronic Signature

☒ I confirm I have permission.

Back Submit

attestations, as appropriate.

- Check all attestations to enable the “Submit” button at the bottom of the page

- After the “Application Signature” page is complete and submitted, if the life event date is outside of the 60-day window, a pop-up message displays.



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.

ELIGIBILITY RESULTS

Here are the programs you qualify for. To view your options and enroll in a health insurance plan, you must click the “Choose a Health Plan” button below.

[Choose a Health Plan](#)

Consumer Sep

Covered California Plan: Eligible - Thank You. Choose a health plan by clicking the button below

You must select a health plan within 60 days of your qualifying life event. The last day you can pick a health plan during your special enrollment period is April 20, 2015.

so your health coverage can start, you must pay your first premium by the due date. You may contact your health plan directly, or you can wait for them to bill you. Please do not send your payment to Covered California.

▼ Important Information & Options

Eligibility Determination Factors:

- Household has a qualifying life event.
- Household qualifying life event is within 60 days.
- You meet all other factors to qualify.

We will send you additional details in two ways: 1) the mail and 2) the Secure Mailbox that you can access through your account on this site.

If “**Other qualifying life event**” was selected as the Qualifying Life Event, the “Eligible Results” page displays this informational message with further instructions

Your eligibility results are not final yet, we still need to review your qualifying life event. You will receive a notice from us with more information. You may also call the Service Center at 1-800-300-1506 for more information.

- A Covered California representative will review the QLE submitted and if approved, will contact the Primary Contact within 5 business days to complete plan selection
- If the Primary contact cannot be reached, a special 800 number will be supplied for the consumer to complete plan selection

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

You are not able to enroll at this time. This is a Special Enrollment Period. While you qualify for insurance through Covered California, you have applied outside the open enrollment period. Based on the information you provided, you did not meet the requirements to enroll in a plan outside of the Open Enrollment period. If you think we made a mistake or you have questions, please contact Covered California at 1-800-300-1506. You can reapply if you have a change in circumstance or during open enrollment in the Fall. We will contact you when Open Enrollment begins. If you need care, different counties have safety net programs where you may be able to get health care. [Click here](#) to see what your county offers.

Below are your eligibility results. Please come back in November for Open Enrollment or if you have a change in circumstance.

Other Qualifying Life Event Examples:

- Already enrolled in a Covered California plan and a change in income re-determines 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 disasters and medical 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
- Victim of domestic abuse or spousal abandonment

Important Information:

- Regulations require the MEC Expected Start Date to be the first day of the month following Plan Selection or the first day of the month following the loss of coverage, whichever is later.
- “If you select a plan on or after the first day of next month, the *Expected Start Date* will move to the first of the next month following Plan Selection. This could result in a gap in your 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 birth month

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.