

Covered Clips

A Weekly Summary of News and Activities for the Cover Arizona Coalition



Week of February 24th

Marketplace Numbers Spike

HHS reported Tuesday that nationally, Marketplace numbers now exceed 4 million.

AHCCCS Enrollment Update

From AHCCCS:

As of February, nearly 64,000 adults eligible for AHCCCS under Arizona voter mandate Prop 204 had their AHCCCS coverage restored. (In total, there are 131,632 Arizonans enrolled in this eligibility category.)

An additional 3,042 adults who were without health insurance were able to access health insurance in the “expansion” eligibility category (those earning between 100-133 percent FPL.)

http://www.azahcccs.gov/reporting/Downloads/PopulationStatistics/2014/Feb/AHCCCS_Population_by_Category.pdf

Trainings This Week for Enrollment Assisters

The Centers for Medicare & Medicaid Services (CMS) San Francisco Regional Office, in partnership with the Cover Arizona Coalition, invites assisters to attend a follow-up presentation on the recent improvements to the Healthcare.gov website that may help you better assist two groups of consumers.

The first are those consumers who have tried to make consumer-initiated changes, such as that they did not qualify for AHCCCS, and who can now move forward with a Marketplace application.

The second are those consumers who may qualify for a Special Election Period to switch to a plan offered by the same issuer and which may better meet their needs.

Assisters are strongly encouraged to send at least one person from your organization to attend this important meeting. Advanced registration is required and space at the training is limited. There is no registration fee associated with this training and it is open to the public.

These are in-person meeting! There will not be a conference line or webinar.

RSVP required: jon.langmead@cms.hhs.gov

Phoenix

- **Friday, February 28, 2014**
- Session 1- 1PM-2PM; Session 2- 3PM-4PM
- Location: Arizona Alliance for Community Health Centers, 700 E Jefferson St, Phoenix, AZ
- **Will meet on 2nd floor**

Pima County and Southern Arizona

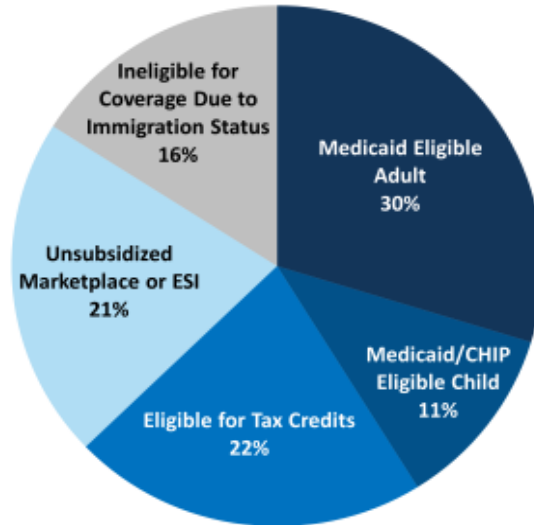
- **Friday, February 28, 2014; 9AM-10:30AM**
- Location: Pima County Health Department, 3950 S. Country Club Rd #100, Tucson, AZ
- **Will meet at 1st floor conference room**

Eligibility for Coverage as of 2014 among Currently Uninsured Arizonans

A new chart and report from the Henry J. Kaiser Family Foundation shows the breakdown of the uninsured by eligibility for coverage. <http://kff.org/health-reform/fact-sheet/state-profiles-uninsured-under-aca-arizona/>

Figure 2

Eligibility for Coverage as of 2014 Among Currently Uninsured Arizonans



Total = 1.1 Million Uninsured Nonelderly Arizonans

Notes: People who have an affordable offer of coverage through their employer or other source of public coverage (such as Medicare or CHAMPUS) are ineligible for tax credits. Unauthorized immigrants are ineligible for either Medicaid/CHIP or Marketplace coverage. SOURCE: Kaiser Family Foundation analysis based on 2014 Medicaid eligibility levels and 2012-2013 Current Population Survey.



Special Enrollment Periods

From CMS:

A Special Enrollment Period (SEP) allows a consumer to enroll in health coverage and have it be effective outside of a normal enrollment period. Certain limited situations will allow consumers to receive a special enrollment period and either change their Marketplace plan enrollment or enroll in coverage for the first time. Consumers have 60 days from the qualifying life event or other circumstance that initiates a SEP to select and enroll a plan.

There are SEPs for qualifying life events, such as having a baby or getting married. Visit www.healthcare.gov/how-can-i-get-coverage-outside-of-open-enrollment to learn more about these qualifying life events.

Previously CMS informed assisters of the new Marketplace functionality on Healthcare.gov and through the Call Center that now allows consumers to report changes in their lives and households throughout the year – some of which may be qualifying life events - and also allows consumers to make changes to their application through HealthCare.gov. Now consumers can

report these types of changes directly to the Marketplace through MyAccount in HealthCare.gov.

It is important to note that some changes a consumer may report may also affect their eligibility for Medicaid, CHIP, and the advance payments of the premium tax credit (APTC), including the amount of the APTC the consumer receives.

Special Enrollment Period FAQs

From CMS:

Q: Is pregnancy a Qualifying Life Event and do I need to report it?

A: Pregnancy needs to be reported to Marketplace, but is not a Qualifying Life Event that will qualify a person for a Special Enrollment Period for enrolling in a QHP. However, pregnancy may determine someone eligible for Medicaid. It can be reported by logging onto HealthCare.gov or by calling the Call Center.

Q: Is divorce a Qualifying Life Event?

A: Yes. Additionally, any time a dependent is lost or gained due to divorce is also a Qualifying Life Event.

Q: Is losing employer-sponsored coverage a Qualifying Life Event?

A: Yes. A consumer who loses employer-sponsored coverage will be eligible for a Special Enrollment Period. Note that they won't be able to have retroactive coverage, but they can report the anticipated loss of coverage in advance to ensure continuity of care.

Q: If a consumer uses an SEP to change insurance plans, what happens with the deductible? If they have already had medical spending for a deductible on one plan, will it carry over to the new plan?

A: If a consumer changes to a different plan with a different issuer, they will start new deductibles based on their new coverage effective date. Any amounts paid toward their previous premium or deductible will not carry over, so consumers should take this into account when selecting a new plan. If the consumer's new plan is with the company, many issuers will transfer the out of pocket costs from the old plan to the new plan. In this situation, the consumer should work with their issuer to try to get the amounts paid carried over.

Q: Do you have to be enrolled in a QHP in order to qualify for a special enrollment period to select a different plan? For example, can someone who did not apply because they were

unemployed and did not expect to have income in 2014 but then gets a job beyond March 31 qualify for a SEP to enroll in a plan?

A: A consumer does not have to be enrolled in, or have applied for, a QHP to qualify for a Special Enrollment Period. Consumers who think they may qualify for an SEP may create an account and submit an application. In the application, there are questions that ask about Qualifying Life Events. For example, if a person says in their application that they recently got married, they will be able to submit their application and shop for plans even if they were not previously enrolled in a QHP.

Q: If it's still "open enrollment" why does one need a special enrollment unless it was after March 31?

A: One benefit of Special Enrollment Periods is that a consumer may be able to receive coverage sooner. For example, if a consumer wants March 1st coverage, they can get that even after February 15th if they qualify for certain categories of Special Enrollment Periods. Consumers may also use Special Enrollment Periods to make changes to plan selections they've already made, because SEPs are the only way to change plans once coverage has become effective.

Q: Healthcare.gov says that consumers have 30 days to report changes in circumstance, but this newsletter says they have 60 days. Which one is right?

A: Consumers have 60 days from the qualifying life event or other circumstance that initiates a SEP to select and enroll a plan. CMS encourages consumers to report changes within 30 days, so that they have another 30 days to select a new plan. That's why HealthCare.gov recommends that they report changes within 30 days.

Exemption FAQs

From CMS:

Q: Is it necessary to apply for a hardship exemption if the consumer is not required to file income taxes?

A: No, a consumer who has income below the filing threshold is not required apply for a hardship exemption if they are not required to file income taxes. Similarly, a consumer doesn't need to file a tax return just to get an exemption.

Q: I have read that the exemption (due to all available coverage being unaffordable) can also be requested when one files their income tax return. Is that also an option, or does everyone who thinks they should be exempted due to coverage being unaffordable have to complete an exemption application?

A: Certain exemptions from the shared responsibility payment can be granted directly by the Internal Revenue Service. An individual may claim an exemption if there is no affordable coverage to them through their employer or the Marketplace on the tax return submitted to IRS based on actual income. The hardship affordability exemption granted by the Marketplace is determined in advance, based on projected income.

Q: Can consumers apply for a hardship exemption throughout the year?

A: Yes, consumers may apply for the hardship exemption throughout the year at the Marketplace. Certain exemptions may only be claimed on a tax return with the Internal Revenue Service upon tax filing.

Q: If a person loses Medicaid coverage because their income increased, and had previously filed a hardship exemption, could they get a Special Enrollment Period (SEP) after reporting it to the Marketplace?

A: If a person has a change in income they should report it to the Marketplace. Yes, for those individuals who lose eligibility for an exemption they can get an SEP.

Immigration-Related Tips for Assisters

From CMS:

Some consumers have experienced difficulty navigating the immigration section of the application if they do not have, or cannot locate, all of the document numbers requested on the application. Consumers with an eligible immigration status can electronically verify their status during the application process using only an alien number or an I-94 number, instead of providing multiple document numbers. If a consumer has immediate access to all of the document numbers, we recommend that they select their specific document in the drop-down list and enter all of the numbers requested. While it is possible to use just one number, the system will produce better verification results if all of the numbers are provided.

Entering in Immigration Status Information

The application will first ask if a consumer is a U.S. citizen or U.S. National. Consumers with an eligible immigration status should attest to their status by checking the box **“check here if [you] have an eligible immigration status.”** A drop down list will appear with possible document types for a consumer to choose from depending on what type of immigration document they have. Some may select a Green Card, an I-551, or I-766, among others. Some consumers do not have, or have had difficulty, finding all of the document numbers that may be requested, but do have either an Alien Number or an I-94 Number; these consumer can

verify their information through another route. Consumers should instead select **“Other documents or status types”** from the drop down, instead of selecting their specific document type.

They will then be shown a list of other document or status options. Here consumers should select **“Other.”** A field will appear where consumers should describe the type of document they have. Consumers should then select whether they have an alien number or I-94 number, and enter the number in the field that appears.

Naturalized Citizenship Verification

From CMS:

Naturalized or derived citizens who do not have a Naturalization Certificate or a Certificate of Citizenship can upload a copy of their U.S. Passport as supplemental documentation for citizenship verification. They can do this either through their My Account or by mailing it to the Marketplace to be verified.

Additional Eligibility and Application Help Resources for Citizens and non-Citizens:

- Information on immigration document types - <https://www.healthcare.gov/help/immigration-document-types/>
- Information on eligible immigration statuses - <https://www.healthcare.gov/help/immigration-status-questions/>
- Information on Citizenship and immigration statuses - <https://www.healthcare.gov/help/citizenship-and-immigration-status-questions/>

Immigrant Application FAQs

From CMS:

Q: What is the procedure when an applicant has an expired work visa and says it has been renewed, but does not have the renewed visa with them?

A: Consumers should enter the all of the documentation that they do have; the Marketplace will attempt to verify it. In this case, the consumer should enter the expired work visa. If the Department of Homeland Security has more updated information, they will provide that to Marketplace and we will use it to determine eligibility.

Q: If a consumer has a Green Card, but due to computer errors will not receive their Social Security Number until April, should they wait to apply until then?

A: The consumer should apply now with the information that they have. A Social Security Number is not required to apply to coverage, so this consumer should apply now using their Green Card.

Q: Does a passport have to be verified if it is used as supplemental documentation for citizenship verification?

A: The Marketplace can't electronically verify a U.S. passport as proof of citizenship, but consumers whose citizenship cannot be electronically verified will be asked to provide proof of their citizenship to the Marketplace, and can submit a US passport to the Marketplace for review. This can be uploaded via My Account, or mailed to the Marketplace.

Miscellaneous FAQs

Q: What should a consumer do if they don't have a physical address, such as people experiencing homelessness, members of Tribes living on reservations, or people in rural areas?

A: If a consumer does not have a physical address, there is a box they can check to state that they have no fixed address. This disables the street address, and they have to enter a mailing address. Consumers can enter anywhere that they can receive mail, including a PO box. Note that consumers cannot enter a PO box as their home address. Consumers experiencing homelessness can provide an address of a shelter, friend or relative. The address needs to be in the state of application. If the consumer needs additional assistance filling out the application they should contact the Call Center.

Q: When do we start using the 2014 Federal Poverty Levels?

A: CMS has already implemented the 2014 Federal Poverty Levels for Medicaid eligibility determinations and assessments. For Marketplace coverage, we will begin to use the new levels for advance payments of the premium tax credit and cost-sharing reductions eligibility determinations at the start of the next Open Enrollment period in November 2015.

Q: Can a consumer enroll in a Marketplace plan without a Social Security Number?

A: Yes, a consumer who does not have a Social Security Number can still apply for and enroll in a Marketplace plan if he or she is otherwise qualified. However, if a consumer does have a Social Security Number, he or she should put that number into the application.

Have something you want us to possibly add to next week's newsletter? Email Kim VanPelt at kim.vanpelt@slhi.org.