## CONNECTICUT HEALTH INSURANCE EXCHANGE

d/b/a Access Health CT (the "Exchange)

PROCEDURE: PRE-ENROLLMENT VERIFICATION OF CONSUMERS' ELIGIBILITY FOR SPECIAL ENROLLMENTS

## **Authorization**

Federal regulations at 45 CFR 155.420 require the Exchange to provide Special Enrollment Periods ("SEPs) which are consistent with the requirements of that section. SEPs are triggered by a number of factors including, but not limited to, life events (such as marriage, birth of a baby or a permanent move), loss of "Minimum Essential Coverage" and other special circumstances specified in the regulation.

In order to maintain the integrity of the health insurance marketplace and to ensure that individuals understand the eligibility requirements for Special Enrollment Periods, the federal health insurance marketplace is in the process of implementing a pilot to confirm the eligibility of consumers who enroll in coverage under the Special Enrollment Period provisions prior to enrollment. The pilot program will require these consumers to provide documentation to verify that they meet the qualifications for an SEP prior to enrollment. In order to better serve the people of Connecticut and to streamline the SEP enrollment process, the Exchange will adopt the following procedure to address verification of consumers' eligibility for Special Enrollment Periods.

Nothing in this procedure is intended to limit or change to requirements or rights in any other statute or rule. If there is a conflict between anything in this procedure and the present or future requirements of the Affordable Care Act ("ACA") or federal regulations or guidance issued pursuant to the ACA, the federal rules or guidance shall prevail.

All information provided to consumers in connection with the Pre-Enrollment Verification of Consumers' Eligibility for Special Enrollments will be in plain language and will include information about the availability of services for individuals with disabilities and individuals who have limited English proficiency, as well information about how to access such services. The Exchange will minimize the burden on consumers, by, for example, not asking them to provide duplicative information or documentation that has already been provided.

## **Pre-Enrollment Verification Procedure**

Consumers who seek to enroll in coverage using an SEP based on the following triggering events will be notified in writing that they must submit documentation verifying their eligibility for the SEP prior to enrollment:

- Loss of Minimum Essential Coverage
- Permanent Move to Connecticut (consumers moving from another state must also show proof of minimum essential coverage for one or more days during the sixty (60) days prior to the move
- Birth
- Adoption, placement for adoption, placement for foster care or child support or other court order
- Marriage

The Exchange may also require verification documentation with respect to other triggering events as deemed necessary by the Exchange.

The notification to the consumer will specify what documentation will be sufficient to verify eligibility. Consumers may also be required to provide additional information if requested after receipt of their initial submission if deemed necessary by the Exchange. Consumers will be required to submit the required documentation no later than thirty (30) days from the date of the notice. If a consumer fails to supply the required documentation within the thirty (30) day period, the consumer's enrollment will be cancelled.

The coverage effective dates for enrollments subject to pre-enrollment verification pursuant to this procedure will follow applicable rules for special enrollments pursuant to federal law and regulations. A consumer may request a later effective date if a consumer's enrollment is delayed until after the Exchange's verification of the consumer's eligibility for a special enrollment period, and the coverage effective date pursuant to federal law and regulations would result in the consumer being required to pay two or more months of retroactive premium to effectuate coverage or avoid termination for non-payment.