



Enrolling during a special enrollment period

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What is special enrollment?

You may change or apply for health care coverage during an annual open enrollment period. Outside of the open enrollment period, you have a special enrollment period to enroll or change your coverage if you experience what's known as a triggering event. Examples of triggering events include getting married, having a baby, and losing coverage because you lost your job. Even if your triggering event occurs during open enrollment, you will still have a special enrollment period and your coverage effective date may differ from open enrollment effective dates. Please refer to the chart on page 2 for effective dates.

From the date of your triggering event, the special enrollment period generally lasts 60 days. That means you have 60 days to change or apply for coverage for you and/or your dependents.

If you have advance notice

If your triggering event is a loss of coverage and you know about it in advance, you may be able to apply for new coverage ahead of time. In this case, you have 60 days before **and** 60 days after you lose coverage to apply for new coverage. For example, you know that you will be laid off from your job.

In some cases, if there is a problem with your enrollment or an issue with a plan contract, the Health Insurance Marketplace determines the length of the special enrollment period.

Refer to pages 3-5 for detailed information on triggering events.

Kaiser Permanente's Bridge Program

If you are applying for Kaiser Permanente's Bridge Program, see page 6 for eligibility requirements for the Kaiser Permanente subsidy.

Have questions? Call us at 1-888-387-0180.



What is my effective date?

Your coverage start date will depend on the type of triggering event you experience.

Under “Loss of health care coverage,” the date of the triggering event is the last day of coverage under your prior plan.

When adding a newborn or newly adopted child or foster child, you have 2 options for listing the date of your triggering event. Choose the date of birth, adoption, or placement, or the first day of the following month. Whichever option you choose will be your effective date.

Please review this chart to see your effective date.

Type of event	Date we receive application or Account Change Form	Effective date
Loss of health care coverage or change in eligibility for employer health coverage	On or before last date of coverage	First day of the month following the last date of coverage
	After loss of coverage or change in employer coverage: between the 1st and the 15th of the month following the triggering event	First day of the following month
	After loss of coverage or change in employer coverage: between the 16th and the last day of the month	First day of the second following month
Gaining or becoming a dependent through marriage	Any day of the month	First day of the month following receipt of application
Gaining a dependent through birth, adoption, or placement for adoption or foster care	Any day of the month	Date of birth, adoption, or placement for adoption or foster care, or first day of the month following the event
Losing a dependent through divorce or legal separation	Between the 1st and the 15th of the month	First day of the month following receipt of application
	Between the 16th and the last day of the month	First day of the second month following receipt of application
Death of a subscriber or dependent	Any day of the month	First day of the month following receipt of application
Court order to cover a child	Any day of the month	Date the court order is effective
Permanent relocation, change in eligibility for federal financial assistance, change in immigration status, or status as an American Indian/Native Alaskan	Between the 1st and 15th of the month	First day of the following month
	Between the 16th and the last day of the month	First day of the second following month
Release from incarceration	Between the 1st and the 15th of the month	First day of the following month
	Between the 16th and the last day of the month	First day of the second following month
Determination by the Health Insurance Marketplace	Any day of the month	Any day of the month as determined by the Health Insurance Marketplace, including a retroactive date

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What are the triggering events?

The following is a list of all the different triggering events you might experience.

1 Loss of health care coverage:

- You lose your employer-provided coverage for the following reasons:
 - You lose your job.
 - Your work hours are reduced, so you no longer qualify for coverage.
 - The person who covers you on his/her employer health plan dies.
 - You're a dependent on the plan and your marital status changes due to a legal separation or divorce, so your eligibility as a dependent ends.
 - You no longer live or work in the service area, and no other group health coverage is available to you.
 - You're part of a group of employees that are no longer offered coverage from your employer.
 - A dependent child has a birthday and no longer qualifies as a dependent.
 - Your employer stops contributing premium payments for your group health coverage.
 - Your COBRA coverage ends.
 - Your retiree coverage is discontinued when your employer declares federal Chapter 11 bankruptcy.
 - The person who covers you on his/her employer health plan becomes entitled to Medicare.
 - Your group plan is renewing or ending on a date other than January 1.
- You lose Medicaid. Common examples may include:
 - You have a change in income.
 - 60 days pass after delivering a child, or your pregnancy fails.
 - You lose what's known as "Medically Needy" coverage, which is special Medicaid coverage for people with too much income or assets to qualify for regular Medicaid, but who have high medical expenses. This type of special enrollment period may occur only once per calendar year.
- You lose Medicare coverage.
- You lose individual plan coverage because:
 - Your individual plan is renewing or ending on a date other than January 1.
 - You become ineligible for individual coverage. For example, you are a dependent child reaching an age limit.

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Have questions? Call us at **1-888-387-0180**.

What are the triggering events? (continued)

Keep in mind, these events do NOT qualify as triggering events:

- You're losing coverage because you didn't pay your premiums.
- Your plan was rescinded.

2 Gaining, becoming, or losing a dependent:

- You have a baby, adopt a child, or get married – or foster a child if your plan includes coverage for foster children.
- You lose a dependent because the dependent reaches an age where they no longer qualify to be covered under your health plan, or the subscriber or a dependent dies.
- You lose a dependent because of a divorce or legal separation.

Note: You do not need to be a current member to purchase a health plan for yourself or your family if you experience this triggering event by gaining, becoming, or losing a dependent. In the event of death of the subscriber or dependent, you qualify for a special enrollment period only if you are enrolled under the same plan as the deceased.

3 Court order to cover a child:

A state or federal court orders that a dependent child be covered as a dependent.

4 Permanent relocation:

You move to a new location and have a different choice of health plans.

5 Release from incarceration:

You were recently released from incarceration.

6 Change in eligibility for federal financial assistance through the Health Insurance Marketplace:

- Your or your dependent's income level changes and, as a result, you and/or your dependents become eligible – or ineligible – for financial assistance.
- Your eligibility to enroll in a health plan with reduced costs (cost-share reduction) changes.
- You qualify for a premium tax credit (APTC) because your state did not expand Medicaid and your income increases above 100% of the federal poverty level (FPL).
- The Federally Facilitated Marketplace (FFM) stops distributing financial assistance.

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Have questions? Call us at 1-888-387-0180.

What are the triggering events? (continued)

For more information about eligibility for federal financial assistance, visit healthcare.gov or call 1-800-318-2596. You can also call Kaiser Permanente for help at **1-800-494-5314**.

7 **Change in eligibility for employer health coverage:**

Your employer discontinues or changes your current coverage options so that you become eligible for federal financial assistance.

8 **Change in immigration status:**

You're newly entitled to have health care coverage because of an immigration status change. **In this case, you may only enroll in a plan offered through the Health Insurance Marketplace.** For more information, visit healthcare.gov or call 1-800-318-2596. You can also call Kaiser Permanente for help at **1-800-494-5314**.

9 **Coverage as an American Indian/Native Alaskan:**

The Health Insurance Marketplace determines that you are eligible for a monthly special enrollment period to enroll in or change health plan coverage. **In this case, you may only enroll in a plan through the Health Insurance Marketplace.** For more information, visit healthcare.gov or call 1-800-318-2596. You can also call Kaiser Permanente for help at **1-800-494-5314**.

10 **Determination by the Health Insurance Marketplace:**

The Health Insurance Marketplace determines that you are entitled to a special enrollment period due to extraordinary circumstances, such as an error or lack of action on the part of the Health Insurance Marketplace, or for any other reason.

Have questions? Call us at **1-888-387-0180**.



Do I qualify for Kaiser Permanente's Bridge Program?

For the Kaiser Permanente Bridge Program, eligibility during the special enrollment period will be considered for individuals who are uninsured and:

- Live in the Kaiser Foundation Health Plan of Georgia, Inc., service area
- Are between the ages of 18 and 64 and are actively enrolled students or participants in a training program with a participating community partner
- Live in a household with incomes below 100% of the federal poverty level (for example, \$11,770 for an individual and \$24,250 for a family of 4 per 2015 guidelines)
- Do not have access to any other public or private health coverage including, but not limited to, Medicaid, Medicare, a job-based health plan, or coverage through healthcare.gov
- Have not previously been enrolled in the Kaiser Permanente Bridge Program

Please note:

- If Kaiser Permanente determines you are not eligible for the Kaiser Permanente Bridge Program, you can still enroll in the Kaiser Permanente Georgia Gold 500/20 plan and Pediatric Dental: Delta Dental Insurance Company or another Kaiser Permanente for Individuals and Families plan, but without the Kaiser Permanente financial assistance.
- Enrollment in Kaiser Permanente's Bridge Program may be available during the annual open enrollment period and may close to new applicants without notice.

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Have questions? Call us at **1-888-387-0180**.



How do I apply for Kaiser Permanente's Bridge Program?

Please complete these steps to apply directly with Kaiser Permanente during a special enrollment period.



Fax
1-877-705-6970



Mail
Charitable Health
Coverage Operations
P.O. Box 24670
Oakland, CA 94623-9920

If you have experienced a triggering event, you'll need to complete the Kaiser Permanente Individuals and Families (KPIF) Application for Health Coverage and the Kaiser Permanente Subsidy Eligibility Form. Please be sure to select the triggering event and provide the date of the event under Step 1 of the KPIF application.

Apply by mail or fax:

- Submit your signed paper Kaiser Permanente for Individuals and Families (KPIF) Application for Health Coverage and the Kaiser Permanente Subsidy Eligibility Form via mail or fax. We must receive your paper application and Subsidy Eligibility Form within 60 days of your triggering event. If you apply close to the end of your special enrollment period, be sure we receive your application and Subsidy Eligibility Form before your special enrollment period ends.
- You'll need to provide the exact triggering event and the date of the event under Step 1 on the application.
- You'll also need to provide copies of the supporting documents identified on the Kaiser Permanente Subsidy Eligibility Form.
- **By submitting a signed KPIF Application for Health Coverage and the Kaiser Permanente Subsidy Eligibility Form, you are confirming that a triggering event occurred. If we decide that the triggering event did not occur, we may take legal action, including, but not limited to, terminating your coverage retroactively back to the effective date of coverage. You may also be liable for any services that you may have received.**

Have questions? Call us at 1-888-387-0180.