

Individual Eligibility and Effective Dates–Based on Policy Language

Type of Enrollment	When to Apply	Effective Date	Supporting Documentation
Annual Enrollment Period	Each year there is an enrollment period that will be determined by federal law to allow enrollment. Individuals must apply during this enrollment period or wait until the next annual enrollment period, unless they qualify for a special enrollment.	Determined by federal law.	
Special Enrollment Periods			
A policyholder or a dependent loses minimum essential coverage, including group continuation coverage required by any state or federal law. This does not include a loss of coverage due to rescission, failure to pay premiums on a timely basis, or voluntary loss of coverage.	Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.	Effective date of coverage is: <ul style="list-style-type: none"> • First day of the month following plan selection. The Health Insurance Marketplace can also authorize a different effective date.	Certificate of creditable coverage.
A policyholder or a dependent loses government-sponsored pregnancy-related coverage (i.e. coverage through State Medicaid or CHIP) or a dependent under the age of 18 loses government-sponsored medically needy coverage (i.e. coverage through State Medicaid), This does not include a loss of coverage due to rescission, failure to pay premiums on a timely basis, or voluntary loss of coverage.	Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.	Effective date of coverage is: <ul style="list-style-type: none"> • First day of the month following plan selection. The Health Insurance Marketplace can also authorize a different effective date.	
A policyholder gains a dependent through marriage, birth, adoption or placement for adoption, placement in foster care, through a child support order or other court order.	<p>For marriage, enrollment must be requested within 60 days of the event. The policyholder or his/her spouse must have had minimum essential coverage for one or more days in the 60 days prior to the move, unless he/she is moving from a foreign country or a United States Territory, is an American Indian as defined by section 4 of the Indian Health Care Improvement Act, or lived in a service area where no qualified health plans were available through the Exchange.</p> <p>For a change from single to family due to birth, we must receive enrollment within 60 days of birth or within one year.</p>	<p>For marriage, effective date of coverage is:</p> <ul style="list-style-type: none"> • First day of the month following plan selection. <p>For birth, adoption, or placement for adoption, placement in foster care, or through a child support order, effective date of coverage is:</p> <ol style="list-style-type: none"> (1) Date of qualifying event; or (2) First day of the month following plan selection, at the option of the subscriber. <p>Effective date is date of birth.</p>	<p>Marriage: Copy of marriage certificate.</p> <p>Birth: No documentation required.</p> <p>Adoption, placement for adoption, or foster care: Legal documentation of adoption or proof of placement, which includes placement date, child’s name, and adoptive parent’s name OR legal documentation from a court or social service agency showing legal rights to make medical</p>

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	<p>For adoption or foster care, application must be received within 60 days.</p> <p>For court order, must apply after the court order is issued. If he/she does not request enrollment within the time periods stated above, the policyholder and any dependents must wait until the next annual enrollment period.</p>	<p>Effective date is either the date the court makes a final order granting adoption or the date the child is placed for adoption or foster care.</p> <p>Date of court order or date stated within court order.</p> <p>The Health Insurance Marketplace can also authorize a different effective date.</p>	<p>decisions for foster child.</p>
<p>A policyholder's or dependent's enrollment or non-enrollment in a qualified health plan is unintentional, inadvertent, or erroneous and is the result of the error, misrepresentation, or inaction of an officer, employee, or agent of the Health Insurance Marketplace or the Department of Health and Human Services, or its instrumentalities as evaluated and determined by the Health Insurance Marketplace. In such cases, the Health Insurance Marketplace may take such action as may be necessary to correct or eliminate the effects of such error, misrepresentation, or inaction.</p>	<p>Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.</p>	<p>The effective date is as follows:</p> <ol style="list-style-type: none"> (1) If enrollment is received between the first and 15th of any month, the effective date is the first day of the following month; (2) If the request for enrollment is received between the 16th and the last day of the month, the effective date is the first day of the second following month. <p>The Health Insurance Marketplace can also authorize a different effective date.</p>	<p>Letter explaining the violation of the material provision of the contract, including a date and signature.</p> <p>If the applicant states the agent made an error, obtain a signed/dated letter from the agent indicating what took place.</p>
<p>A policyholder or dependent adequately demonstrates to the Health Insurance Marketplace or the Wisconsin Office of the Commissioner of Insurance (OCI) that the qualified health plan he/she is enrolled in substantially violated a material provision of its contract in relation to him/her.</p>	<p>Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.</p>	<p>The effective date is as follows:</p> <ol style="list-style-type: none"> (1) If enrollment is received between the first and 15th of any month, the effective date is the first day of the following month; (2) If the request for enrollment is received between the 16th and the last day of the month, the effective date is the first day of the second following month. <p>The Health Insurance Marketplace can also authorize a different effective date.</p>	
<p>A policyholder or dependent applies for coverage through the Health Insurance Marketplace either during the open enrollment period or due to a qualifying event or at the State Medicaid or CHIP agency during the open enrollment period and is determined ineligible for Medicaid or CHIP by the State Medicaid or CHIP agency either after open enrollment has ended or more than 60 days after the qualifying event.</p>	<p>Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.</p>	<p>The effective date is as follows:</p> <ol style="list-style-type: none"> (1) If enrollment is received between the first and 15th of any month, the effective date is the first day of the following month; (2) If the request for enrollment is received between the 16th and the last day of the month, the effective date is the first day of the second following month. <p>The Health Insurance Marketplace can also authorize a different effective date.</p>	

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<p>A policyholder or dependent gains access to new qualified health plans as a result of a permanent move. This does not include a move solely for medical treatment or vacation.</p>	<p>Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.</p> <p>He/she and any dependents must have had minimum essential coverage for one or more days in the 60 days prior to the move, unless he/she is moving from a foreign country or a United States Territory, is an American Indian as defined by section 4 of the Indian Health Care Improvement Act, or lived in a service area where no qualified health plans were available through the Exchange.</p>	<p>The effective date is as follows:</p> <ol style="list-style-type: none"> (1) If enrollment is received between the first and 15th of any month, the effective date is the first day of the following month; (2) If the request for enrollment is received between the 16th and the last day of the month, the effective date is the first day of the second following month. <p>The Health Insurance Marketplace can also authorize a different effective date.</p> <p>Move is defined by an address in a different county.</p>	<p>Documentation of previous and current address (e.g., utility bill or rental agreement).</p>
<p>A policyholder's renewal of a non-calendar year plan.</p>	<p>Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.</p>	<p>The effective date is as follows:</p> <ol style="list-style-type: none"> (1) If enrollment is received between the first and 15th of any month, the effective date is the first day of the following month; (2) If the request for enrollment is received between the 16th and the last day of the month, the effective date is the first day of the second following month. <p>The Health Insurance Marketplace can also authorize a different effective date.</p>	<p>Copy of renewal letter.</p>
<p>The policyholder or dependent gains access to new qualified health plans due to no longer being incarcerated.</p> <p>Incarcerated is defined as serving a term in prison or jail. It does not mean living at home or in a residential facility under supervision of the criminal justice system or living there voluntarily. In other words, incarceration does not include being on probation, parole, or home confinement. You are not considered incarcerated if you are in jail or prison pending disposition of charges (in other words, being held, but not convicted of a crime).</p>	<p>Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.</p>	<p>The effective date is as follows:</p> <ol style="list-style-type: none"> (1) If enrollment is received between the first and 15th of any month, the effective date is the first day of the following month; (2) If the request for enrollment is received between the 16th and the last day of the month, the effective date is the first day of the second following month. <p>The Health Insurance Marketplace can also authorize a different effective date.</p>	<p>Prison release document.</p>

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<p>The policyholder is a victim of domestic abuse or spousal abandonment, enrolled in minimum essential coverage, and seeking to enroll in coverage separate from the perpetrator of the abuse or abandonment.</p>	<p>Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.</p>	<p>The effective date is as follows:</p> <ol style="list-style-type: none"> (1) If enrollment is received between the first and 15th of any month, the effective date is the first day of the following month; (2) If the request for enrollment is received between the 16th and the last day of the month, the effective date is the first day of the second following month. <p>The Health Insurance Marketplace can also authorize a different effective date.</p>	
<p>The following special enrollments are included on the Exchange endorsement and only apply on Exchange.</p>			
<p>A policyholder or a dependent who was not previously a United States citizen, national, or individual who was lawfully present in the United States gains such status. This does not include changing from one legally present status to another.</p>	<p>Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.</p>	<p>The effective date is as follows:</p> <ol style="list-style-type: none"> (1) If enrollment is received between the first and 15th of any month, the effective date is the first day of the following month; (2) If the request for enrollment is received between the 16th and the last day of the month, the effective date is the first day of the second following month. <p>The Health Insurance Marketplace can also authorize a different effective date.</p>	<p>No documentation required by AAHP of WI.</p>
<p>If a policyholder is an American Indian as defined by section 4 of the Indian Health Care Improvement Act, he/she may enroll in or change from one Qualified Health Plan to another one time per month.</p>	<p>Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.</p>	<p>The effective date is as follows:</p> <ol style="list-style-type: none"> (1) If enrollment is received between the first and 15th of any month, the effective date is the first day of the following month; (2) If the request for enrollment is received between the 16th and the last day of the month, the effective date is the first day of the second following month. <p>The Health Insurance Marketplace can also authorize a different effective date.</p>	<p>No documentation required by AAHP of WI.</p>
<p>A policyholder or dependent 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 policyholder is already enrolled in a qualified health plan.</p>	<p>Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.</p>	<p>The effective date is as follows:</p> <ol style="list-style-type: none"> (1) If enrollment is received between the first and 15th of any month, the effective date is the first day of the following month; (2) If the request for enrollment is received between the 16th and the last day of the month, the effective date is the first day of the second following month. <p>The Health Insurance Marketplace can also authorize a different effective date.</p>	

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A policyholder adequately demonstrates to the Health Insurance Marketplace that a material error related to plan benefits, service area, or premium influenced the qualified individual's or enrollee's decision to purchase a plan through the Health Insurance Marketplace.	Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.	<p>The effective date is as follows:</p> <ol style="list-style-type: none"> (1) If enrollment is received between the first and 15th of any month, the effective date is the first day of the following month; (2) If the request for enrollment is received between the 16th and the last day of the month, the effective date is the first day of the second following month. <p>The Health Insurance Marketplace can also authorize a different effective date.</p>	
A policyholder demonstrates to the Health Insurance Marketplace that he/she meets other exceptional circumstances as the Health Insurance Marketplace may provide.	Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.	<p>The effective date is as follows:</p> <ol style="list-style-type: none"> (1) If enrollment is received between the first and 15th of any month, the effective date is the first day of the following month; (2) If the request for enrollment is received between the 16th and the last day of the month, the effective date is the first day of the second following month. <p>The Health Insurance Marketplace can also authorize a different effective date.</p>	No documentation required by AAHP of WI.
Any other event as determined by the Health Insurance Marketplace.	Enrollment must be requested within 60 days of the event. If he/she does not request enrollment within this time period, the policyholder and any dependents must wait until the next annual enrollment period.	<p>The effective date is as follows:</p> <ol style="list-style-type: none"> (1) If enrollment is received between the first and 15th of any month, the effective date is the first day of the following month; (2) If the request for enrollment is received between the 16th and the last day of the month, the effective date is the first day of the second following month. <p>The Health Insurance Marketplace can also authorize a different effective date.</p>	No documentation required by AAHP of WI.

This document is provided for educational purposes and is not intended to provide legal advice. If questions arise related to how Special Enrollment Periods (SEP) apply to specific matters, then the WPS Legal Department should be consulted.

