

EVENT SPECIAL ENROLLMENT PERIOD (SEP)

Requirements for individual and family plans (ACA/GF/GM)



Special enrollment event	Event notification timeframe	Individual eligible to enroll in coverage or be added to existing policy/certificate	Coverage effective date	Documentation Requirement*
INCREASE OR DECREASE IN PROJECTED ANNUAL INCOME FOR 2016 OR CHANGE TO CURRENT MONTH'S INCOME				
Newly ineligible for subsidy	60 days prior to event and within 60 days of event	Individuals who lost coverage	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Proof from CMS of subsidy eligibility change
ADD OR REMOVE APPLICANT OR NON-APPLICANT HOUSEHOLD MEMBER LISTED ON APPLICATION				
Marriage, including common law	60 days prior to event and within 60 days of event	Individual, spouse and all dependents	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Marriage certificate, Common law affidavit (if applicable)
Domestic Partnership	60 days prior to event and within 60 days of event	Individual and dependents, domestic partner and domestic partner's dependents	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Certification of Domestic Partnership form
Birth	Within 60 days of event	Individual, spouse and all dependents, including newborn	The date of the birth	Birth certificate, letter from the hospital, or medical records
Adoption/foster care	60 days prior to event and within 60 days of event	Individual, spouse and all dependents, including newly gained dependent	The date of the adoption, placement for adoption, or placement in foster care.	Adoption or foster care documentation
Legal guardianship	60 days prior to event and within 60 days of event	Individual, spouse and all dependents, including newly gained dependent	The date of the legal guardianship	Legal guardianship documentation
Court ordered coverage	60 days prior to event and within 60 days of event	Individuals named in court order	The date of the required court ordered coverage	Court order
PERMANENT MOVE				
Access to qualified health plan due to a permanent move	60 days prior to event and within 60 days of event	Individuals who have had prior coverage and make a permanent move, giving the member access to a new QHP	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Proof of old residency and new residency (e.g. old drivers license or mail from prior address and from new address); Release from incarceration is not eligible for SEP.**
LOSS OF OTHER HEALTH COVERAGE				
Death of a policyholder/certificate holder	Within 60 days of event	Individuals who lost coverage	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Death certificate or obituary, letter of loss of coverage from prior carrier
Dependent turning 26	60 days prior to event and within 60 days of event	Individual who lost coverage due to turning 26	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Letter of loss of coverage from prior carrier
Dependent 19-25	60 days prior to event and within 60 days of event	Individual being removed from parent's contract between the ages of 19-25	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Letter of loss of coverage from prior carrier

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Divorce/dissolution of domestic partnership	60 days prior to event and within 60 days of event	Spouse and dependents being removed due to divorce	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Divorce decree or letter of loss of coverage from prior carrier
Exhaustion of COBRA or Continuation Coverage	60 days prior to event and within 60 days of event	Individuals who lost coverage	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	COBRA termination letter or letter of loss of coverage from prior carrier
Loss of Medicaid or Hawk-I eligibility (IA) or CHIP (SD)	60 days prior to event and within 60 days of event	Individuals who lost coverage	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Notification of loss of eligibility and coverage
Policyholder or certificate holder enrolls in Medicare	60 days prior to event and within 60 days of event	Individuals who lost coverage	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Copy of Medicare card of eligible individual or letter of loss of coverage from prior carrier
Termination of employment or reduction in hours	60 days prior to event and within 60 days of event	Individuals who lost coverage	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Letter from employer or letter of loss of coverage from prior carrier
Return from military service	60 days prior to event and 60 days from date of event	Individual returning from military service and his/her spouse and dependents	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Discharge papers or letter of loss of coverage from prior carrier (i.e. Tricare)
CHANGE IN IMMIGRATION STATUS OR CITIZENSHIP				
Gained U.S. Citizenship	60 days prior to event and within 60 days of event	Individuals who gained citizenship	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Proof of US citizenship
Obtain Legal Immigration Status	60 days prior to event and within 60 days of event	Individuals who gained legal immigration status	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Lawful immigration documents
Changes to available employer coverage				
Loss of group coverage	60 days prior to event and within 60 days of event	Individuals who lost coverage	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Letter from employer or letter of loss of coverage from prior carrier
Employer renewal date is outside of an annual open enrollment period for the Individual Health Plan market	60 days prior to event and within 60 days of event	Individuals who lost coverage	Receipt date between the 1st and 15th of the month, first of the month following receipt date. Receipt date between the 16th and the end of the month, first of the second month following receipt date.	Letter from employer

* Documentation Requirement — In addition to the documents listed, an Application (new business) or Contract Change Form (existing members) is required.

**Proof of prior coverage will be required in addition to current documentation requirement.

NOTE: At this time, coverage effective dates will continue to follow the rules already in place.

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