



Individual Market Special Enrollment

SEP Guidelines for CoOpportunity Health

Use this chart to determine Special Enrollment Period guidelines. Please note that all Marketplace updates/changes must be made on healthcare.gov.

EVENT: Birth

Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 60 days from the event.
Individual(s) Eligible	New baby, mother, spouse, and dependents.
Coverage Effective Date	Date of birth for baby and all other eligible individuals.
Form to Use and Documentation Needed for New Enrollment	Online application/attestation.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only).

EVENT: Adoption

Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 60 days from the event.
Individual(s) Eligible	New dependent, mother, spouse, and dependents.
Coverage Effective Date	Date of adoption or placement for all eligible individuals.
Form to Use and Documentation Needed for New Enrollment	Online application/attestation.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only).

When enrolling during the special enrollment period, please submit supporting documentation related to the life event. Failure to submit documentation may delay processing the change.

EVENT: Loss of Employer Coverage

Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 30 days of the event.
Individual(s) Eligible	Individual(s) who lost coverage. If the individual voluntarily terminates coverage without losing their job, this does not constitute an event.
Coverage Effective Date	First of month following loss of group coverage.
Form to Use and Documentation Needed for New Enrollment	Online application/attestation.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only). Certificate from carrier showing termination of coverage.

EVENT: Turning 26

Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 30 days of the event.
Individual(s) Eligible	Individual turning 26.
Coverage Effective Date	First of the month following the loss of coverage.
Form to Use and Documentation Needed for New Enrollment	Online application.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only).

EVENT: Divorce

Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 30 days from the event.
Individual(s) Eligible	Spouse and dependents losing coverage due to divorce.
Coverage Effective Date	First of the month following the loss of coverage.
Form to Use and Documentation Needed for New Enrollment	Online application/attestation.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only).

EVENT: Loss of Medicaid or CHIP

Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 60 days from the event.
Individual(s) Eligible	Individual(s) who lost coverage.
Coverage Effective Date	First of the month following plan selection following loss of coverage.
Form to Use and Documentation Needed for New Enrollment	Online application/attestation.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only). Termination letter of loss of Medicaid or CHIP coverage from the carrier noting the date coverage ends suggested but not required.

EVENT: Marriage

Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 60 days from the event.
Individual(s) Eligible	Individual, spouse, and dependents.
Coverage Effective Date	First of the month following plan selection.
Form to Use and Documentation Needed for New Enrollment	Online application/attestation.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only).

EVENT: Loss of Eligibility for Health Insurance Subsidies

Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 60 days from the event.
Individual(s) Eligible	Individual(s) who lost the subsidies.
Coverage Effective Date	First of the month following the event.
Form to Use and Documentation Needed for New Enrollment	Online application. Documentation showing individual is no longer eligible for a health insurance exchange subsidy suggested but not required.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only). Documentation showing individual is no longer eligible for a health insurance exchange subsidy suggested but not required.

When enrolling during the special enrollment period, please submit supporting documentation related to the life event. Failure to submit documentation may delay processing the change.

EVENT: Loss of Minimum Essential Coverage

Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 60 days from the event. (Nonpayment of premiums does not qualify)
Individual(s) Eligible	Individual(s) who lost coverage.
Coverage Effective Date	First of the month following plan selection. When reporting future loss of minimum essential coverage, the effective date is the first of the month following the loss of other coverage.
Form to Use and Documentation Needed for New Enrollment	Online application.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only).

EVENT: Move to a New Plan Area

Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 60 days from the event.
Individual(s) Eligible	Individual(s) who permanently move.
Coverage Effective Date	First of the month following plan selection.
Form to Use and Documentation Needed for New Enrollment	Online application/attestation.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only).

EVENT: COBRA Coverage Expires

Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 31 days from the event.
Individual(s) Eligible	Individual(s) who lost coverage.
Coverage Effective Date	First of the month following loss of COBRA.
Form to Use and Documentation Needed for New Enrollment	Online application.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only).

EVENT: Return From Active Military Service

Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 120 days from the event.
Individual(s) Eligible	Individual(s) who lost coverage.
Coverage Effective Date	First of the month following plan selection.
Form to Use and Documentation Needed for New Enrollment	Online application. Copy of discharge papers or other documentation confirming departure from active military service suggested but not required.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only). Copy of discharge papers or other documentation confirming departure from active military service suggested but not required.

EVENT: Released from Jail


Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 60 days from the event.
Individual(s) Eligible	Individual who was released from jail.
Coverage Effective Date	First of the month following plan selection.
Form to Use and Documentation Needed for New Enrollment	Online application/attestation.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only).


EVENT: Court Order or Chapter 11

Procedure	CoOpportunity Health Guidelines
Event Notification Timeline	CoOpportunity Health must receive the application within 30 days from the event.
Individual(s) Eligible	Individual(s) who lost coverage.
Coverage Effective Date	First of the month following plan selection.
Form to Use and Documentation Needed for New Enrollment	Online application/attestation.
Form to Use When Adding to an Existing Contract	Paper medical change form (off Marketplace only). Copy of legal document requiring health insurance coverage suggested but not required.

When enrolling during the special enrollment period, please submit supporting documentation related to the life event. Failure to submit documentation may delay processing the change.



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