

HBE & HCA Webinar

Special Enrollment Period for Domestic Violence Survivors

MAY 12, 2016



Agenda

- Background
- SEP and Domestic Violence
 - Survivors can enroll for health care at any time
- Illustrative DV Scenarios for QHP and WAH
- Address Confidentiality Program
- Application Tips
- SEP Resources



Participants

- Maggie Clay, Office of Medicaid Eligibility and Policy, HCA
- Rebecca Janeczko, Office of Medicaid Eligibility and Policy, HCA
- Christine Gibert, Associate Director of Policy, HBE
- Joan Altman, Leg. and External Affairs Manager, HBE
- Natoshia Erickson, Systems Analyst Manager, HBE
- Spring Tudich, Senior Program Specialist, Call Center
- Jim Byers, Senior Program Specialist, Call Center

Background

- *Washington Healthplanfinder* is an online marketplace for individuals, families and small businesses in Washington to compare and enroll in health insurance coverage and gain access to tax credits, reduced cost sharing and public programs such as Apple Health (Medicaid)
- Enrollment in Washington Apple Health (WAH) is year-round
 - Apple Health customers will receive a notice 60 days before the month they enrolled in or renewed their coverage last year
- Small business owners have the option of enrolling year-round through Washington Healthplanfinder Business
- Open enrollment is the only time Washingtonians can select a Qualified Health Plan (QHP) through *Washington Healthplanfinder* unless they qualify for a special enrollment period (SEP)
 - American Indian/Alaskan Natives (AI/ANs) may enroll in or switch QHP coverage one time per month

SEP Overview

- An SEP is a time outside the open enrollment period when you can enroll in a new QHP or change your current plan
 - [SEP Fact Sheet](#)
 - [Special Enrollment Periods-VIDEO](#)
- If you have a major life change (getting married, having a baby, moving to a new area, losing your existing coverage, etc.), you may qualify for an SEP
 - For list of qualifying events, visit <http://www.wahbexchange.org/SEP> (see [Special Enrollment Qualifying Events](#) chart)
- Certain other exceptional circumstances may also qualify you for a SEP
 - For list of qualifying special circumstances, visit <http://www.wahbexchange.org/SEP> (see [Qualifying Life Events for Special Circumstances](#) chart)

SEP for Survivors of Domestic Violence

- If the abuser left the marriage (spousal abandonment), or the survivor is living with or fleeing domestic violence, these are exceptional circumstances
 - Survivors and their children (and other dependents) can qualify for this SEP
- Domestic violence is self-reported and defined from the perspective of the person experiencing it
- Domestic violence survivors do not need to be married to or living with their abuser to qualify for this SEP

Survivor Statements or “Self-Attestation” is Sufficient

Eligibility verification:

- “...the exchange shall verify that a person seeking to enroll in a qualified health plan or qualified dental plan during a special enrollment period has experienced a qualifying event...and shall require reasonable proof or documentation of the qualifying event.” (RCW 43.71.035)
- “...self-attestation to qualifying events in Healthplanfinder satisfies the requirements in the section... carriers may require proof from consumers directly as allowed under other law.” (Governor’s signing statement for 2ESB 6089)

Illustrative DV Scenarios

- 1) **Survivor (and his/her dependents) unable to enroll in a QHP during open-enrollment, and now can safely seek coverage**
- 2) Survivor (and children/dependents) enrolled in health coverage through *Healthplanfinder* with their abuser

(a): Survivor is Primary Applicant

(b) Survivor is not Primary Applicant, needs separate application

Scenario 1: Survivor not currently enrolled, needs coverage outside OE

- Individuals living with or fleeing domestic violence can apply for health coverage for themselves and their children/dependents at any time
- The special enrollment determination occurs as part of the application process for QHP eligible consumers (reminder: WAH enrollment is year-round)

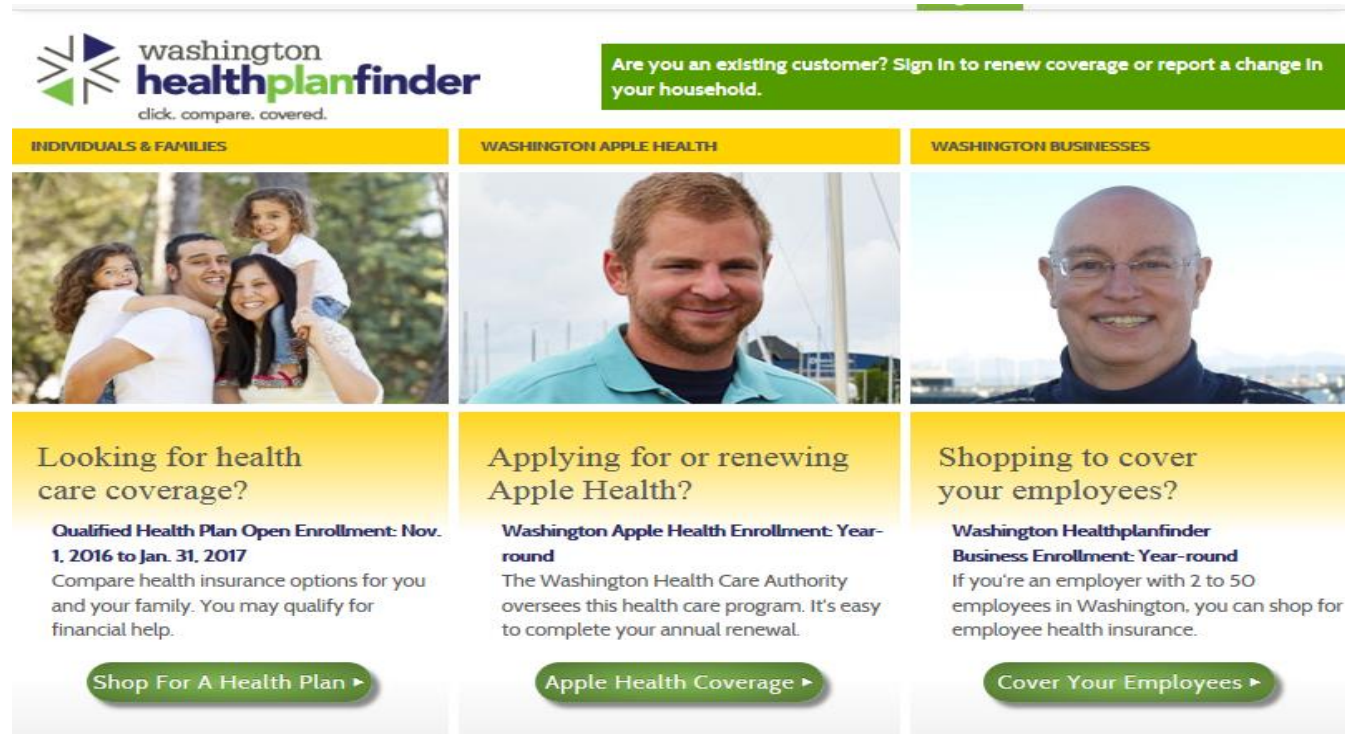


- *Example: Nelly is married to an abusive spouse, who she has been in the process of leaving for several months. She has moved to a safe location and now needs her own health insurance. Open-enrollment has ended.*

Scenario 1: Survivor not currently enrolled, needs coverage outside OE

- 1) Nelly visits *Washington Healthplanfinder* to complete and submit an application (<https://www.wahealthplanfinder.org/>)

Remember: If she is married or separated she can indicate on her HPF application that she is unmarried and intends to file taxes for this year as "Single Filing Taxes"



The screenshot shows the Washington Healthplanfinder website. At the top left is the logo with a stylized star and the text "washington healthplanfinder" and "click. compare. covered." below it. To the right is a green banner that says "Are you an existing customer? Sign In to renew coverage or report a change in your household." Below this are three main sections, each with a yellow header and a white body. The first section, "INDIVIDUALS & FAMILIES", features a photo of a family and the text "Looking for health care coverage?" followed by "Qualified Health Plan Open Enrollment: Nov. 1, 2016 to Jan. 31, 2017" and "Compare health insurance options for you and your family. You may qualify for financial help." with a "Shop For A Health Plan" button. The second section, "WASHINGTON APPLE HEALTH", features a photo of a man and the text "Applying for or renewing Apple Health?" followed by "Washington Apple Health Enrollment: Year-round" and "The Washington Health Care Authority oversees this health care program. It's easy to complete your annual renewal." with an "Apple Health Coverage" button. The third section, "WASHINGTON BUSINESSES", features a photo of a man and the text "Shopping to cover your employees?" followed by "Washington Healthplanfinder Business Enrollment: Year-round" and "If you're an employer with 2 to 50 employees in Washington, you can shop for employee health insurance." with a "Cover Your Employees" button.

washington healthplanfinder
click. compare. covered.

Are you an existing customer? Sign In to renew coverage or report a change in your household.

INDIVIDUALS & FAMILIES

WASHINGTON APPLE HEALTH

WASHINGTON BUSINESSES

Looking for health care coverage?

Qualified Health Plan Open Enrollment: Nov. 1, 2016 to Jan. 31, 2017
Compare health insurance options for you and your family. You may qualify for financial help.

Shop For A Health Plan ▶

Applying for or renewing Apple Health?

Washington Apple Health Enrollment: Year-round
The Washington Health Care Authority oversees this health care program. It's easy to complete your annual renewal.

Apple Health Coverage ▶

Shopping to cover your employees?

Washington Healthplanfinder Business Enrollment: Year-round
If you're an employer with 2 to 50 employees in Washington, you can shop for employee health insurance.

Cover Your Employees ▶

Scenario 1: Survivor not currently enrolled, needs coverage outside OE

2) Nelly reviews her eligibility results

- If WAH eligible, she can select a health plan or will be automatically enrolled
- If QHP eligible, she selects "See If You Qualify" on Special Enrollment page

The screenshot shows the Washington Healthplanfinder website interface. At the top left is the logo with the text "washington healthplanfinder" and the tagline "click. compare. covered.". To the right is a progress bar with four steps: 1. Browse, 2. Apply (highlighted in green), 3. Select, and 4. Finalize. The main heading is "Special Enrollment – See If You Qualify". Below this, it states: "Qualified Health Plan Open Enrollment is currently closed. The next Open Enrollment Period is November 1 to January 31". A paragraph explains that a Special Enrollment Period is available for households with certain life events, with a 60-day window to report them. A list of qualifying life events includes: Getting married, Giving birth, adopting or placement of a child, Permanently moving to a new area that offers different health plan options, Losing other health coverage, Becoming a U.S. citizen, and Released from jail or prison. It also mentions that other life events may qualify and directs users to visit www.wahbexchange.org/sep for more information. At the bottom, there are two buttons: "Cancel" and "See if You Qualify".

washington healthplanfinder
click. compare. covered.

1 Browse 2 Apply 3 Select 4 Finalize

Special Enrollment – See If You Qualify

Qualified Health Plan Open Enrollment is currently closed. The next Open Enrollment Period is **November 1 to January 31**

A Special Enrollment Period is available to households with certain life events. There are several situations where you may qualify to enroll in a new health plan or switch your current plan. Once you've had a qualifying life event, you have 60 days to report it to Washington Healthplanfinder in order to qualify for a Special Enrollment Period.

Special Enrollment qualifying life events include:

- Getting married
- Giving birth, adopting or placement of a child
- Permanently moving to a new area that offers different health plan options
- Losing other health coverage
- Becoming a U.S. citizen
- Released from jail or prison

Some other life events may also qualify your household for a Special Enrollment Period. Visit www.wahbexchange.org/sep to learn more.

◀ Cancel See if You Qualify

Scenario 1: Survivor not currently enrolled, needs coverage outside OE

3) Select "Yes" on Special Enrollment Questionnaire page to "Someone in my household is a survivor of domestic violence" and click Next

Special Enrollment Questionnaire


* REQUIRED FIELD

Before you can shop and select a Qualified Health Plan, you'll need to provide information about a Special Enrollment qualifying life event. Some information may be prepopulated based on information you reported. Select "Yes" to all that apply.

Notice:

Reporting false information below could result in a loss of insurance, if you are approved for a Special Enrollment Period.

Your insurance company may ask for records that prove you qualify for Special Enrollment. Make sure you have those papers ready in case you need to show proof.

Someone in my household lost or will lose health coverage for one of the following reasons: 

☐ YES ☐ NO

- Lost Washington Apple Health Coverage
- Coverage through work
- COBRA Coverage ran out
- No longer eligible for student health coverage
- Turned 26 and no longer eligible to be covered under current plan
- Joined/left AmeriCorps/VISTA/National Civilian Community Corp
- Released from jail or prison

Someone in my household got married or entered into a registered domestic partnership

☐ YES ☐ NO

Household size has changed due to one of the following reasons:

☐ YES ☐ NO

- Had a baby
- Adopted a child
- Placed a child up for adoption or placed in foster care
- Under court order for child support or other support

Someone in my household is a survivor or victim of domestic violence

☐ YES ☐ NO

Someone in my household moved to or within Washington State

☐ YES ☐ NO

Someone in my household became a U.S. Citizen, U.S. National or lawfully present non-citizen

☐ YES ☐ NO

Scenario 1: Survivor not currently enrolled, needs coverage outside OE

- 4) SEP Determination page will display that the SEP has been Approved
- 5) Select "Next" to see qualified health plans (QHPs)
- 6) Select QHP within 60 days
 - For coverage to start the 1st of the next month, the life event must be reported and a plan selected by the 23rd of the current month

Special Enrollment Approved

Based on the information you provided, you qualify for a Special Enrollment Period. You have until **June 19, 2016** to select a plan to take advantage of the Special Enrollment Period. Coverage start dates are based on the event you reported. Visit www.wahbexchange.org/sep to learn more.

Click "Next" to see the plans available to you.



**Questions?
Comments?**

Illustrative DV Scenarios

- 1) Survivor (and his/her dependents) unable to enroll in a QHP during open-enrollment, and now can safely seek coverage
- 2) **Survivor (and children/dependents) enrolled in health coverage through *Healthplanfinder* with their abuser**

(a) Survivor is Primary Applicant

For safety planning: Primary Applicant should consider changing their account password and security questions/answers, and consider changing their authorized rep. (if applicable)

- (b) Survivor is not Primary Applicant, needs separate application

Scenario 2: Survivor enrolled with their abuser

- Survivor enrolled with their abuser can apply for coverage on their own
- Key consideration: Who is the Primary Applicant?
 - 2(a): If survivor is Primary Applicant, can remove abuser from the coverage at any time
 - 2(b) If abuser is Primary Applicant, survivor will need help from customer service to be removed from the shared application
- Remember: Per federal guidance, if survivor is married, separated, or in a registered domestic partnership with their abuser, they can enroll in separate health coverage and still be eligible for tax credits
 - On the Washington Healthplanfinder application, when asked to provide tax filing status, survivor should indicate that they are "Single Filing Taxes." Federal guidelines state this can be done without fear of an IRS penalty
 - This will allow Healthplanfinder to apply tax credits if eligible

Scenario 2(a): Survivor enrolled with their abuser, is Primary Applicant

- Example: During the last open-enrollment period, Helen enrolled herself, her partner John, and their son Jacob in coverage through Healthplanfinder and is the Primary Applicant. She and John are enrolled in the same QHP. Jacob is enrolled in WAH. Helen recently fled with Jacob due to domestic violence. She now wants to remove John from her application. To do this, Helen needs to do the following:
 - 1) Log in to her *Healthplanfinder* account
 - Note: if household is active on Washington Apple Health, they may not have created a Healthplanfinder account. If this is the case, the Primary Applicant needs to either create an account or contact HCA to remove the spouse/abuser
 - For safety planning: Primary Applicant should consider changing their account password and security questions/answers, and consider changing their authorized rep. (if applicable)
 - 2) Select “Report a Change in Income or Household” under the Quick Links on her account dashboard

Scenario 2(a): Survivor enrolled with their abuser, is Primary Applicant

The screenshot shows the Washington Healthplanfinder website. At the top, there are links for 'HOME' and 'EN ESPAÑOL'. A red box highlights the 'Sign In' button in the top right corner. Below this, the 'WASHINGTON healthplanfinder' logo is displayed with the tagline 'click. compare. covered.'. To the right of the logo is a sign-in form with fields for 'USERNAME' and 'PASSWORD', a 'Remember Me' checkbox, and a 'Sign In' button. Below the form are links for 'Forgot your username or password?' and 'Create an account'. The main content area features three yellow boxes with images and text: 'Looking for health care coverage?' (with a family photo), 'Applying for or renewing Apple Health?' (with a man's photo), and 'Shopping to cover your employees?' (with a man's photo). Each box includes a brief description of the service.

Quick Links

[Create Another Application](#)

[View Current Eligibility Results](#)

[Find a Broker](#)

[Find a Navigator](#)

[Report a Change in Income or Household](#)

[Change Account Settings](#)

[Submit A Document](#)

[Update Email Address](#)

<https://www.wahealthplanfinder.org/>

Scenario 2(a): Survivor enrolled with their abuser, is Primary Applicant

3) Select "Yes" on Report Changes/Life Event page to: "Something else has changed" and click Next

Something else has changed. Examples include: ☒ YES ☐ NO

- I need to change tax filing status for myself or others in my household
- My citizenship or tribal status has changed
- Someone has moved out of state.

Remove Primary Applicant? ☐ YES ☐ NO

[◀ Back](#) [Next](#)

Scenario 2(a): Survivor enrolled with their abuser, is Primary Applicant

4) Proceed to the Primary Applicant information page. Update the address and phone number as necessary. At the bottom of the page, if the abuser is listed as the Authorized Representative, uncheck the "I have an Authorized Representative" box and click Next

Authorized Representative

☐ I have an Authorized Representative ?

Scenario 2(a): Survivor enrolled with their abuser, is Primary Applicant

- 5) On the page that asks, "Do you have other household members or tax dependents?" click "X" in the "Remove" column for the person being removed
- 6) On the pop-up screen that asks the reason for removal, select "other" and fill in the current date as the Date of Event. Click Next

Do you have other household members or tax dependents?

Note: All household and tax dependents must be listed, even if they do not need health care coverage

Name	Sex	Social Security Number	Date of Birth (MM/DD/YYYY)	Applying for Coverage	Living in Same Home as Helen	Edit	Remove
Helen	Female			Yes	N/A		
John	Male			Yes	Yes		

Remove John

REASON FOR REMOVAL *

-Select an Option-

Death

Divorce

Incarceration

No longer in tax household and not living in the home

Moving out of State

Other

Cancel

Next

Scenario 2(a): Survivor enrolled with their abuser, is Primary Applicant

7) Removed will now appear next to the partner's name

Do you have other household members or tax dependents?

Note: All household and tax dependents must be listed, even if they do not need health care coverage

Name	Sex	Social Security Number	Date of Birth (MM/DD/YYYY)	Applying for Coverage	Living in Same Home as Helen	Edit	Remove	Unremove
Helen	Female			Yes	N/A			
John	Male			Yes	Yes			
(Removed)								

8) On the same screen, click on the Edit icon next to the person being removed

Scenario 2(a): Survivor enrolled with their abuser, is Primary Applicant

9) Change the following:

- Relationship to Primary Applicant to “Unrelated”
- Tax filing status for all years to “Single Filing Taxes”
- Click Save

Edit Household Member

IS THIS PERSON AN AMERICAN INDIAN OR ALASKA NATIVE ? * ? ☐ YES ☒ NO

HOW IS THIS PERSON RELATED TO THE PRIMARY APPLICANT ? *

Unrelated ▼

IS THIS PERSON APPLYING FOR COVERAGE OR CONTINUING EXISTING COVERAGE THROUGH WASHINGTON HEALTHPLANFINDER ? * ☒ YES ☐ NO

WHAT WAS THE TAX FILING STATUS OF THIS PERSON IN TAX YEAR 2015? * ?

Single filing taxes ▼

IS THIS PERSON PLANNING TO HAVE THE SAME TAX FILING STATUS AS THAT OF 2015 FOR TAX YEAR 2016? * ? ☒ YES ☐ NO

IS THIS PERSON LIVING WITH THE PRIMARY APPLICANT ? * ? ☒ YES ☐ NO

[Cancel](#) [Save](#)

Scenario 2(a): Survivor enrolled with their abuser, is Primary Applicant

10) Click the Edit icon for the Primary Applicant (Helen), Update the tax filing status for all years to "Single Filing Taxes", Click Save

Edit Household Member

Aleut
Asian Indian
Black/African American

IS THIS PERSON AN AMERICAN INDIAN OR ALASKA NATIVE? * ? ☐ YES ☒ NO

IS THIS PERSON APPLYING FOR COVERAGE OR CONTINUING EXISTING COVERAGE THROUGH WASHINGTON HEALTHPLANFINDER? * ☒ YES ☐ NO

WHAT WAS THE TAX FILING STATUS OF THIS PERSON IN TAX YEAR 2016? * ? Single filing taxes

IS THIS PERSON PLANNING TO HAVE THE SAME TAX FILING STATUS AS THAT OF 2016 FOR TAX YEAR 2017? * ? ☒ YES ☐ NO

Cancel Save

Scenario 2(a): Survivor enrolled with their abuser, is Primary Applicant

11) Click Next. On the "Set Household Relationship" screen, for the abuser change their relationship to other household members to "unrelated"

Set Household Relationships

* REQUIRED FIELD

Please indicate relationship between the household members below.

HELEN'S RELATIONSHIP TO
JOHN (REMOVED) *

Unrelated ▼

JACOB *

Parent ▼

JOHN (REMOVED)'S RELATIONSHIP TO
HELEN *

Unrelated ▼

JACOB *

Unrelated ▼

JACOB'S RELATIONSHIP TO
HELEN *

Child ▼

JOHN (REMOVED) *

Unrelated ▼

◀ Back

Next

Scenario 2(a): Survivor enrolled with their abuser, is Primary Applicant

12) If there are tax dependent(s) on the application (Jacob), the following pages will ask who the tax filer was for the dependent(s). Select the survivor (Helen).

Household Taxes for Last Year

We are unable to determine the tax filing relationship for the household members below.

Tax Information for 2016

JACOB

WAS A TAX DEPENDENT OF *

- Select One -

Helen

◀ Back

Next ▶

13) Continue through the application and update any other information that has changed, then submit the application

Scenario 2(a): Survivor enrolled with their abuser, is Primary Applicant

14) Review eligibility results on Eligibility Status page. Results will show partner is no longer eligible for coverage

Note: Results may also show a change in program eligibility for remaining household members

- If primary applicant (Helen) is now WAH eligible, she can select a health plan or will be automatically enrolled into a plan
- If primary applicant (Helen) remains QHP eligible and would like to stay in her current QHP, no further action is needed
- If primary applicant (Helen) remains QHP eligible but wants to switch to a different QHP (e.g., her tax credit amount has changed, she wants to receive care at a different facility or a different provider, etc.), she can follow the steps in Slide 11-13

Scenario 2(a): Sample Eligibility Results

Eligibility Status

You applied for free or low-cost health insurance coverage. Thank you for providing your household information. To see Eligibility Status details per household member click each name below. Clicking "Next" will give you a summary of your household's next steps to finalize your coverage.

<div><div>Helen</div><div><div>✓</div>APPROVED</div><div>Household: Primary Applicant</div><div>Coverage: WAH - Family</div><div>Start Date: 04/01/2016</div><div>End Date: 03/31/2017</div><div>View Details</div></div>	<div><div>John [redacted]</div><div><div>✗</div>DENIED</div></div>
<div><div>John [redacted]</div><div><div>✗</div>INELIGIBLE</div><div>Household: Spouse (including same sex marriage)</div><div>Coverage: None</div><div>Start Date: Not Applicable</div><div>End Date: Not Applicable</div></div>	<div><div>INELIGIBLE</div><div><div><div>📄</div>Ineligible</div><div>We were unable to provide coverage to John [redacted] on this household application for the reasons below. Please review the reasons and update any information you may have mistakenly provided by clicking the "Report A Change" button.</div></div></div> <div><div>REASON(S) FOR DENIAL</div><div><div>We first evaluated you for Washington Apple Health coverage. You are not eligible for the following reasons:</div><div><div>• Requested closure of Washington Apple Health coverage</div></div></div></div>

Scenario 2(a): Sample Notice Sent to Primary Applicant

HELEN:

OLYMPIA WA 98504

09/20/2016

Application ID:

Subject – Updated Eligibility Decision

Dear Helen

There were changes to the health care coverage your household can get. Below is a summary of the changes.

Name	Program	Eligibility Start Date	Eligibility End Date
Helen	Washington Apple Health Family Coverage	04/01/2016	03/31/2017

The individual(s) listed below cannot get Washington Apple Health for these reasons:

Name	Reason	Household Size	Income Standard	Monthly Household Income	Denial Effective Date
John	You asked us to stop your Washington Apple Health care coverage. WAC: 182-503-0080	2	\$1,775.55	\$1,200.00	09/30/2016

For more information about how we determine household size and countable income, see the WAC 182-506-0010 and WAC 182-509-0300.

You can check these rules online at <http://apps.leg.wa.gov/wac/> or view them at your public library reference desk.

The following individual(s) are not eligible to purchase health insurance through Washington Healthplanfinder for the following reason(s):

Name	Reason
John	- You asked us to stop your Washington Apple Health care coverage.

Change Reporting Requirements

If you bought health care coverage through Washington Healthplanfinder or if you get Washington Apple Health, you must tell us when information about you or your household changes because it may affect your health care coverage.

No matter what kind of health care coverage you receive, you have 30 days to report changes in the information listed below (for Washington Apple Health, see WAC 182-504-0105).

- Residential address
- Mailing address
- Marital status of any person in the home
- Persons moving in or out of your home, or who is in your tax filing unit
- Pregnancy status of any person in the home
- Incarceration or institutional status
- Health insurance coverage including Medicare eligibility
- Immigration or citizenship status
- Income of \$150 or more a month that is expected to continue for at least two months
- Federal income tax filing status

If you or someone in your household is only enrolled in Washington Apple Health pregnancy or children's coverage, you do not have to report the types of changes listed below until the next time you have to renew your coverage.

- Income changes of \$150 or more a month that are expected to continue for at least two months;
- Federal income tax filing status; or
- The number of tax dependents claimed on federal income taxes.

We will send you a notice to let you know when your household's coverage must be renewed.

Scenario 2(a): Survivor enrolled with their abuser, is Primary Applicant

Summary

- Survivor enrolled with their abuser can apply for coverage on their own
- If survivor is primary applicant, they can remove abuser from the coverage at any time
- Removal of the abuser can be done through *Healthplanfinder* without assistance from customer service
- For safety planning, Primary Applicant should consider changing their account password and security questions/answers, and consider changing their authorized rep. (if applicable)

Questions



Questions?
Comments?

Illustrative DV Scenarios

- 1) Survivor (and his/her dependents) unable to enroll in a QHP during open-enrollment, and now can safely seek coverage
- 2) Survivor (and children/dependents) enrolled in health coverage through *Healthplanfinder* with their abuser**

(a) Survivor is Primary Applicant

(b) Survivor is not Primary Applicant, needs separate application

For safety planning: please note that the Primary Applicant will receive a notice letting them know that changes have been made to their account, as soon as the following day (sample notice on slide 29)

Scenario 2(b): Survivor enrolled with their abuser, is NOT Primary Applicant

- **WAH-Only Household Example:** Abigail is fleeing a DV situation from her spouse, Evan. Both members are currently active on Washington Apple Health under Evan's account and he as primary applicant. Abigail has signed up for the ACP program and has fled the county. What steps can Abigail take to get her health care coverage separate from her spouse?

1. Abigail can contact the HCA eligibility representative in her region: http://www.hca.wa.gov/hcr/me/Documents/area_representatives.pdf. Once she shares that she needs to make changes to her health coverage because she is in a situation involving domestic violence, the eligibility representative will connect her to an account working who can:

(a) Remove Abigail from her abuser's account

Note: Evan will receive a notice letting him know Abigail has been removed from his account, as soon as the next day

(b) Assist Abigail in applying for separate Washington Apple Health coverage

2. Abigail will select a managed care plan

3. Abigail will call the managed care plan to coordinate care in the county where she is actually residing as her ACP address will indicate that she is residing in Thurston County.

Note: Abigail's application information is confidential and will not be shared with anyone that is not currently on her application.

Scenario 2(b): Survivor enrolled with their abuser, is NOT Primary Applicant

■ **Combined WAH & QHP Household Example:** Mary and her child are fleeing a DV situation from her spouse, Ruth. Mary and Ruth are enrolled in Qualified Health Plan (QHP) coverage under Ruth's account. Their child is active on Washington Apple Health (Medicaid/CHIP). What steps can Mary take to get her health care coverage for herself and her child separate from her spouse?

1. Because at least one member of the household is currently active on WAH, Ruth should contact the HCA eligibility representative for the region of client's residence:
http://www.hca.wa.gov/hcr/me/Documents/area_representatives.pdf. Once she shares that she needs to make changes to her health coverage because she is in a situation involving domestic violence, the eligibility representative will connect her to an account worker who can:

(a) Remove Mary and her child from Ruth's account

Note: Ruth will receive a notice letting her know her spouse and child have been removed from her account, as soon as the next day

(b) Assist Mary in applying for separate Washington Apple Health coverage

Note: Based on their updated eligibility results, Mary and her child now both qualify for Washington Apple Health

2. Mary will select a managed care plan

Scenario 2(b): Survivor enrolled with their abuser, is NOT Primary Applicant

QHP-Only Household Example: Jonathan and his child are fleeing domestic violence from his unmarried partner. All three household members are currently enrolled in QHP coverage under his partner as the Primary Applicant. What steps can Jonathan take to get health care coverage for himself and his child separate from his partner?

1. Because all members of the household are enrolled in QHP coverage, Jonathan should call Health Benefit Exchange Customer Support Center at 1-855-923-4633. Once he shares that he needs to make changes to his health coverage because he is in a situation involving domestic violence, the eligibility representative will connect him to an account worker who will:
 - (a) Remove Jonathan and his child from his partner's account

Note: His partner will receive a notice letting him know his spouse and child have been removed from his account, as soon as the next day

Scenario 2(b): Survivor enrolled with their abuser, is NOT Primary Applicant

(b) Assist Jonathan in applying for separate coverage

Note: Program eligibility can change when household members are added or removed

- If Jonathan and his child are eligible for WAH, he can select a health plan for himself and his child or they will be automatically enrolled into a Medicaid plan
- If only Jonathan continues to be eligible for a QHP, he would need to select a plan within 60 days. He can do so through Healthplanfinder by following the steps in Slide 11-13.
 - For coverage to start the 1st of the next month, the plan must be selected by the 23rd of the current month

Scenario 2(b): Survivor enrolled with their abuser, is NOT Primary Applicant

Summary

- Survivor enrolled with their abuser can apply for coverage on their own
- If survivor is NOT the primary applicant, they cannot remove themselves from the shared application with their abuser unless assisted by an account worker at HCA or HBE
- For safety planning, survivor should be aware that Primary Applicant will receive notification of application changes

Questions



Questions?
Comments?

Application Tips

- ACP Program: You can apply through *Healthplanfinder* even if you participate in the Address Confidentiality Program (ACP)
 - More ACP information available at: <https://www.sos.wa.gov/acp/>
- Enter the ACP PO Box number (PO Box 257) as your “Home Address” (line 1)
- After you enter 98507 as the zip code, a box will pop up asking for your “ACP Number” – enter your PMB or ID Number assigned by the Address Confidentiality Program

Important: If you participate in the Address Confidentiality Program (ACP) and are approved for Washington Apple Health, you are automatically enrolled to receive services in Thurston County. If this is not convenient for you, please contact your managed care provider (can be done as soon as 48 hours after you enroll). You will be able to select a Primary Care Provider (PCP) in the area where you reside. Inquiries may be directed to Health Care Authority at 1-800-562-3022 (ext. 16131)

Address Confidentiality Program (ACP)

- Enter ACP PO Box in home address field (indicate mailing address is same as home)
- Enter zip code 98507 and click off the box
- “Provide ACP Number” box pops up
- Enter your PMB or ID Number assigned by the Address Confidentiality Program.

Primary Applicant's Information

* REQUIRED FIELD

APPLICATION ID 

What is your home address?

ADDRESS LINE 1

po box 257

ADDRESS LINE 2

Eg. Suite 1000

CITY *

olympia


STATE *

Washington

ZIP *

Eg. 98501

COUNTY

What is your mailing address? 



My mailing address is the same as my home address

Address Confidentiality Program (ACP)

Primary Applicant's Information

* REQUIRED FIELD

037

Provide ACP Number

ACP NUMBER * ?

Eg: 123456

◀ Back

Save

TY *

lympia

STATE *

Washington

ZIP *

98507

Application Tips

- Privacy: Your application is confidential and your information on your separate application will not be shared with any third party, without your consent
- *Remember*, like in scenario 1b, if the PA has shared account information with the household member being removed from the application, the PA should change their account password and security questions/answers, and consider changing their authorized rep. (if applicable)
- *Remember*, like in scenario 2b, once the non-PA survivor is removed from the PA abuser's account, he/she will get notification by email or letter that a change has been made. Notifications will be sent as soon as the next day. Local advocacy organizations can help survivors anticipate their partner's reaction, analyze their risks and figure out safety strategies

Application Tips

- Additional Privacy Considerations:
 - HPF consumers who are receiving additional services through DSHS (including cash, food or childcare assistance or medical for the aged, blind, or disabled) should also report household/application changes to DSHS at 1-877-501-2233
 - HPF consumers must complete an identity proofing process, administered by Experian, before submitting their application online. This involves answering a series of personal questions (drawn from credit files and other sources). Consumers with concerns that someone who knows the answers to their personal questions will try to fraudulently access their HPF account can contact Experian's National Consumer Assistance Center (online [Credit Fraud Center](#) or automated service at 1- 888-397-3742) for more information about preventing identity theft.

Application Tips

- SSN: You can apply even if you can't provide you or your children's Social Security numbers, due to domestic violence
 - For Washington Apple Health (Medicaid), you can have the requirement to provide a social security number waived.
 - For a Qualified Health Plan, you may be given 95 days of conditional eligibility to provide verification. If you can show a good faith effort in providing verification, you may be given more time.
- Citizenship: You can apply even if you don't have immediate access to proof of citizenship or immigration status
 - You will need to provide additional documentation. You may be given up to 95 days of conditional eligibility.

Healthplanfinder Resources

- [SEP Fact Sheet](#) & [Special Enrollment Periods-VIDEO](#)
- SEP Webpage: <http://www.wahbexchange.org/SEP>
- List of Special Enrollment Qualifying Events:
<http://www.wahbexchange.org/new-customers/who-can-sign-up/special-enrollment-period/special-enrollment-qualifying-events/>
- List of Special Enrollment Periods for Special Circumstances (includes information for survivors of domestic abuse/violence or spousal/domestic abandonment): <http://www.wahbexchange.org/new-customers/who-can-sign-up/special-enrollment-period/qualifying-life-events-for-special-circumstances/>
- Frequently Asked Questions for Survivors of Domestic Violence Applying for Health Coverage: <http://www.hca.wa.gov/medicaid/publications/Documents/22-330.pdf>
- Today's Webinar (Coming soon):
<http://www.hca.wa.gov/hcr/me/Pages/Webinars,-Video,-and-Presentations.aspx>
(Slides and Audio)

Healthplanfinder Resources

- SEP Webpage: <http://www.wahbexchange.org/SEP>

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Application Quick Tips

Coverage Basics

Who Can Sign Up?

- ▶ Individuals & Families
- ▶ Tribal Members
- ▶ Businesses
- ▶ Self-Employed People
- ▶ Immigrants
- ▶ Special Enrollment Period

Special Enrollment Period

A special enrollment period (SEP) is a time outside the open enrollment period when you can enroll in a new health insurance plan or change your current plan. If you have a [life change](#) or [special circumstance](#), you may qualify for an SEP. For events that don't qualify for special enrollment, you'll need to wait for the next open enrollment period to sign up for health insurance through *Washington Healthplanfinder*.

Washington Apple Health and *Washington Healthplanfinder Business* enrollment is year-round, and you do not need a special enrollment period to apply.

Healthplanfinder Resources

SEP Webpage: <http://www.wahbexchange.org/SEP> (scroll down)

Special Enrollment Periods for Special Circumstances

Certain other events, such as experiencing a *Washington Healthplanfinder* error, errors or omissions by an assister, living with or fleeing domestic violence, or other exceptional circumstances may also qualify you for a special enrollment.

What counts as a special circumstance:

- ▶ Survivors of domestic abuse/violence or spousal/domestic abandonment
 - ▶ For frequently asked questions, visit [Survivors of Domestic Violence: Applying for Health Coverage](#)
- ▶ Errors of the Exchange (includes system errors that prevented the client from enrolling)
- ▶ Customer is working with Exchange staff on an enrollment issue that did not get resolved before the end of the open enrollment period
- ▶ Additional exceptional circumstances as defined and approved by the Washington Health Benefit Exchange

For a full list, visit [Qualifying Life Events for Special Circumstances](#).

Healthplanfinder Resources

SEP Webpage: <http://www.wahbexchange.org/SEP>

Direct link: <http://www.hca.wa.gov/medicaid/publications/Documents/22-330.pdf>

Survivors of Domestic Violence: Applying for health coverage

Are you living with or fleeing domestic violence and having trouble applying for health care?
This informational guide will assist you with applying for health coverage in Washington
Healthplanfinder.

Healthplanfinder Resources

SEP Webpage: <http://www.wahbexchange.org/SEP>

Direct link: <http://www.wahbexchange.org/new-customers/who-can-sign-up/special-enrollment-period/qualifying-life-events-for-special-circumstances/>

Qualifying Life Events for Special Circumstances

Qualifying Life Event	Description/Details	Effective Date of Coverage
Survivors of domestic abuse/violence or spousal/domestic abandonment, and their dependents.	<p>Customer is a survivor or victim of domestic abuse/violence or spousal abandonment.</p> <p>If the customer is married to (or in a domestic partnership with) the abuser/abandoner and applying for coverage separately, customer can indicate on the application she/he is unmarried and indicate that they will file taxes next year</p>	<p>Plan selection must occur within 60 days of reporting the domestic abuse/violence or spousal abandonment.</p> <p>For coverage to start the 1st of the next month, the life event must be reported and a plan selected by the 23rd of the current month.</p>

Reminder, SEPs are for QHP Enrollees only, WAH enrollment is year-round

Healthplanfinder Application Assistance

- Online: Go to Washington Healthplanfinder at www.wahealthplanfinder.org
- Phone: Health Benefit Exchange Customer Support Center at 1-855-923-4633
- Paper: Application for Health Care Coverage (HCA 18-001P)
<http://www.hca.wa.gov/medicaid/forms/Documents/18-001P.pdf>
- Customer Support Center – Cross Agency Desk Aid
[http://www.hca.wa.gov/hcr/me/Documents/customer support center referrals.pdf](http://www.hca.wa.gov/hcr/me/Documents/customer_support_center_referrals.pdf)

Federal Resources

- **Guidance for Victims of Domestic Abuse**, Centers for Medicare & Medicaid Services (March, 2014)
 - Clarifies that survivors of domestic abuse, and his or her dependents, qualify for an SEP and that Marketplaces may elect to permit such individuals to indicate on the application that they are unmarried (Single Filing Taxes), without fear of penalty for misreporting marital status, and determine them eligible for APTC and CSR on that basis.
- **Fact Sheet: Addressing the Needs of Victims of Domestic Abuse under the Affordable Care Act**, Department of Treasury (July, 2014)
 - Clarifies that married survivors of domestic abuse or spousal abandonment can claim a premium tax credit without filing a joint return for up to three consecutive years. An individual can access this relief by filing a federal income tax return with the status of married filing separately, and indicating that he or she is living apart from a spouse and is unable to file a joint return due to domestic abuse, or because a spouse cannot be located after a reasonable effort. Also, notes existing rules which allow certain married individuals with children who live apart from their spouse to file a federal tax return with a status of "head of household."
- **Helping Consumers Who are Victims of Domestic Abuse or Spousal Abandonment or Heads of Household Access Advance Payment of Premium Tax Credits and Cost-Sharing Reductions for Marketplace Coverage** Centers for Medicare & Medicaid Services (October, 2014)
- **Temporary and Final Rules Regarding the Health Insurance Premium Tax Credit**, Internal Revenue Service
- **Publication 501: Exemptions, Standard Deduction, and Filing Information**, Internal Revenue Service

State DV Resources

- Statewide Domestic Violence Programs: <http://wscadv.org/washington-domestic-violence-programs/>
- Domestic Violence Hotline Information: <http://wscadv.org/get-help-now/>
 - Washington State Domestic Violence Hotline: 800-562-6025
 - National Domestic Violence Hotline: 1-800-799-SAFE; TTY: 1-800-787-3224; VIDEOPHONE: 1-855-812-1001
- Information and Search Tool to find Local Help: www.DomesticShelters.org

Questions



Questions?
Comments?