

# Special Enrollment Period (SEP) Reference Chart – Connect for Health Colorado

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## *A Guide to Special Enrollment Period Triggers and Timing*

A Special Enrollment Period (SEP) is a period of time outside of the annual Open Enrollment Period during **which individuals and their entire household** can shop for and enroll in a health insurance plan (or change to a different plan if already enrolled). This chart outlines all of the possible triggering events and the specific enrollment details associated with each, as implemented by Connect for Health Colorado in accordance with State and Federal regulations.

### Key Terms for SEP Reference Chart

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**QUALIFIED INDIVIDUAL:** A person who meets the criteria to enroll through the Marketplace — specifically a person who is not incarcerated, has a lawfully present immigration status, and resides in the state where the Marketplace operates — including individuals who are already enrolled in a qualified health plan (QHP) through the Marketplace. (A qualified individual does not have to be the application filer.)

**DEPENDENT (for SEP purposes):** A person eligible to enroll in a health plan with a qualified individual under the terms of the health plan. This can include a spouse, child, or other family member, and does not necessarily have to be a tax dependent.

**ENROLLEE:** Someone enrolled in a qualified health plan.

**REQUIREMENT OF PRIOR COVERAGE:** Eligibility for certain SEPs require that the person experiencing a qualifying event be enrolled in Minimum Essential Coverage (MEC) prior to the qualifying event in order to trigger the SEP. Some SEPs require that the person be enrolled in MEC for at least one day in the 60 days prior to the qualifying event (or have lived abroad) in order to be eligible for the SEP. Other SEPs are only triggered by people currently enrolled in a QHP. Not every SEP has a requirement of prior coverage, and the chart outlines the specific prior coverage requirements, if any, for each SEP.

**REGULAR COVERAGE EFFECTIVE DATES:** For SEPs with “regular coverage effective dates,” coverage is effective the first day of the following month if a plan is selected between the 1st and 15th, or the first day of the second following month if a plan is selected between the 16th and the last day of the month.

**SEP GENERALLY GRANTED BY:** Most SEPs are granted by answering certain questions directly on the Marketplace application, but certain SEPs can only be granted by a representative from specialized teams within the Connect for Health Colorado Call Center. The chart notes whether an SEP is available through the Marketplace application, or if the SEP is only available by calling the Connect for Health Colorado Call Center.

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#### General Categories of Special Enrollment Periods:

1. Loss of Qualifying Coverage (Minimum Essential Coverage)
2. Change in Household Size
  - a. Marriage
  - b. Birth / Adoption / Court Order
  - c. Death
  - d. Divorce / Legal Separation
3. Change in Primary Place of Living
4. Change in Eligibility for Financial Help
5. Enrollment or Plan Error

6. Other (Uncommon Scenarios)

Type	Qualifying Event	Requirement of Prior Coverage	Timing	Coverage Effective Dates	Additional Requirements	SEP Generally Granted By
Loss of Other Qualifying Coverage	<p><u>LOSS OF MINIMUM ESSENTIAL COVERAGE (MEC)</u>  <b>Qualified individual, enrollee, or a dependent:</b></p> <ul style="list-style-type: none"> <li>Loses employer coverage due to, for example:                             <ul style="list-style-type: none"> <li>→ Loss of a job</li> <li>→ Voluntarily quitting a job</li> <li>→ Reduction in work hours that causes loss of eligibility for employer plan</li> </ul> </li> <li>Discontinuation of employer plan</li> <li>Is enrolled in a plan in the individual (non-group) or group market that comes to the end of the plan year in a month other than December                             <ul style="list-style-type: none"> <li><b>Note:</b> SEP is available even if there is an option to renew the non- calendar year plan.</li> </ul> </li> <li>Loses eligibility for Medicaid or CHIP, including loss of coverage for pregnancy related or medically needy programs (whether or not they meet MEC standards)</li> <li>COBRA coverage expires</li> <li>Must pay full cost of COBRA coverage due to termination of employer contributions to COBRA coverage</li> <li>Non-group plan is canceled</li> <li>Loses eligibility for student health plan</li> <li>Loses coverage due to a divorce or legal separation</li> <li>Loses coverage because no longer a dependent</li> <li>Loses eligibility for coverage under a parent’s plan</li> <li>Loses coverage due to a death of another person in the family</li> <li>No longer living, working, or residing in the area of the plan</li> </ul> <p><b>Notes:</b> “Loss of MEC” <b>does not include</b> voluntarily dropping coverage or termination by insurer due to nonpayment of premiums or fraud. If a qualified individual loses employer-sponsored coverage and elects COBRA coverage, their access to this SEP is not lost. If they apply for a QHP within 60 days of the loss of employer-sponsored coverage they can still access this SEP.</p>	<p>YES: This SEP is only available if the qualified individual will lose coverage in the next 60 days or has lost coverage in the past 60 days</p>	<p>This triggering event can be reported up to 60 days <b>BEFORE or AFTER</b> loss of coverage</p>	<p>If the plan is selected <b>before</b> loss: 1st day of month following loss of previous coverage</p> <p>Example: James is enrolled in employer-sponsored coverage that will end on 5/31. If James applies and selects a plan anytime before 5/31, his coverage will start on 6/1.</p> <hr/> <p>If plan is selected <b>after</b> loss: 1st day of month following plan selection</p> <p>Example: James is enrolled in employer-sponsored coverage that will end on 5/31. If James applies and selects a plan anytime during the month of June, his coverage will start on 7/1. If James applies and selects a plan during the month of July, coverage will begin on 8/1.</p>	<p>If a customer lost coverage because they failed to pay their premiums or were involved in fraud, this Special Enrollment Period is not available.</p>	<p>Marketplace Application</p>

Type	Qualifying Event	Requirement of Prior Coverage	Timing	Coverage Effective Dates	Additional Requirements	SEP Generally Granted By
Change in Household Size	<p><u>MARRIAGE</u></p> <p><b>Qualified individual or enrollee:</b></p> <p>Gets married</p>	<p>YES: This SEP is only available if at least one spouse:</p> <ul style="list-style-type: none"> <li>• Enrolled in MEC at least 1 day in 60 days before marriage,</li> <li>• Lived abroad at least 1 day in 60 days before marriage,</li> <li>• Is an American Indian or Alaska Native (AI/AN), OR</li> <li>• Lived in a service area with no QHPs sold in Marketplace during most recent available enrollment period or during prior 60 days.</li> </ul>	<p>Up to 60 days AFTER marriage</p>	<p>1st day of month following plan selection</p>	<p>Please note that the Insurance Company may request documentation verifying that the applicant experienced this event and complies with the prior coverage requirements.</p>	<p>Marketplace Application</p>

Type	Qualifying Event	Requirement of Prior Coverage	Timing	Coverage Effective Dates	Additional Requirements	SEP Generally Granted By
Change in Household Size (cont.)	<p><u>BIRTH, ADOPTION, PLACEMENT FOR ADOPTION OR FOSTER CARE, OR COURT ORDER</u></p> <p><b>Qualified individual or enrollee:</b></p> <ul style="list-style-type: none"> <li>• Has a baby (including parents not physically giving birth)</li> <li>• Adopts a child, or is adopted</li> <li>• Gains or becomes a dependent through placement for foster care</li> </ul> <p>Gains or becomes a dependent through a child support order or other court order</p>	NO	Upto 60 days AFTER birth, adoption, placement, or court order	<p>The newly added dependent will have coverage effective their date of birth, adoption or placement, or effective date of court order.</p> <p>The household may also choose to change the effective date to the first of the month following plan selection (or chose effective dates based on the 15/16 day rule), but will need to call the Call Center to request this.</p> <p>For new enrollments, the household will default to coverage effective the date of the newly added dependents CSD.</p>	Please note that the Insurance Company may request documentation verifying that the applicant experienced this event.	Marketplace Application (Call Customer Service Call Center to request effective date changes)
	<p><u>DEATH</u></p> <p><b>Enrollee or a dependent:</b></p> <ul style="list-style-type: none"> <li>• Dies</li> </ul> <p><b>Note:</b> If the enrollee dies, an SEP is triggered for the enrollee's dependents.</p>	YES: This SEP is only available to current enrollees. If a qualified individual is not currently enrolled, but lost coverage because a member of their household died, they can utilize the loss of MEC SEP above.	Upto 60 days AFTER death	First of the month following plan selection	NO	Marketplace Application
	<p><u>DIVORCE OR LEGAL SEPARATION</u></p> <p><b>Enrollee:</b></p> <ul style="list-style-type: none"> <li>• Gets divorced or legally separated</li> <li>• Loses a dependent due to divorce or legal separation</li> <li>• Loses a dependent through a child support order or other court order</li> </ul>	YES: This SEP is only available to current enrollees. If a qualified individual is not currently enrolled, but lost coverage as a result of the separation, they can utilize the loss of MEC SEP above.	Upto 60 days AFTER divorce or legal separation	Regular coverage effective dates (15/16 day rule)	NO	Marketplace Application

Type	Qualifying Event	Requirement of Prior Coverage	Timing	Coverage Effective Dates	Additional Requirements	SEP Generally Granted By
Change in Primary Place of Living	<p>PERMANENT MOVE</p> <p><b>Qualified individual, enrollee, or a dependent:</b></p> <ul style="list-style-type: none"> <li>Gains access to new QHPs as a result of a permanent move due to, for example: <ul style="list-style-type: none"> <li>Moving within the same city, county, or state, as long as there is a different set of QHPs available</li> <li>Moving to another state</li> <li>A child or other dependent moving back to parent's home</li> <li>A student moving to or from where he or she attends school</li> <li>Moving for seasonal employment, but maintaining another home elsewhere (such as a seasonal farmworker)</li> <li>Moving to or from a shelter or other transitional housing</li> </ul> </li> <li>Moves permanently to the U.S. after living outside the country or in a U.S. territory</li> </ul> <p><b>Notes:</b> A short-term or temporary move for medical treatment or vacation is not considered a permanent move</p>	<p>YES: Only available if:</p> <ul style="list-style-type: none"> <li>Enrolled in MEC at least 1 day in 60 days before move</li> <li>Moving from abroad</li> <li>An AI/AN, OR</li> <li>Lived in a service area with no QHPs sold in Marketplace during most recent available enrollment period or during prior 60 days</li> </ul>	<p>Up to 60 days BEFORE or AFTER move</p>	<p>If reported in advance, coverage is effective on the first day of the month following the triggering event.</p> <hr/> <p>If plan selected after move, coverage will begin the first day of the month following plan selection.</p>	<p>Please note that the Insurance Company may request documentation verifying that the applicant experienced this event and complies with the prior coverage requirements.</p>	<p>Marketplace Application</p>

Type	Qualifying Event	Requirement of Prior Coverage	Timing	Coverage Effective Dates	Additional Requirements	SEP Generally Granted By
	<p><u>NEWLY ELIGIBLE FOR PREMIUM TAX CREDITS (PTC)/(APTC)</u></p> <p><b>Qualified individual or a dependent:</b></p> <ul style="list-style-type: none"> <li>Experiences a decrease in income and is newly determined eligible for PTC</li> </ul>	<p>YES:</p> <p>Only applies if:</p> <ul style="list-style-type: none"> <li>Enrolled in MEC at least 1 day in 60 days before date of financial change</li> </ul>	Up to 60 days AFTER date of financial change	Regular coverage effective dates	NO	Marketplace Application (“Change of Income”)
	<p><u>CHANGE IN COST-SHARING REDUCTION (CSR) ELIGIBILITY or NEWLY (IN)ELIGIBLE FOR PREMIUM TAX CREDITS (PTC/APTC)</u></p> <p><b>Enrollee or dependent:</b></p> <ul style="list-style-type: none"> <li>Experiences a change in income or household size that changes eligibility for cost-sharing reductions</li> <li>Experiences a change in income or household size that makes household newly eligible or ineligible for PTC,</li> </ul> <p><b>Note:</b> Change in eligibility includes moving between CSR levels and losing or gaining eligibility for CSRs.</p>	<p>YES: This SEP is only available if currently enrolled in Marketplace coverage</p>	Up to 60 days AFTER eligibility determination	Regular coverage effective dates	NO	Marketplace Application (The application automatically recognizes when this occurs, there is no need to select an event type.)

Type	Qualifying Event	Requirement of Prior Coverage	Timing	Coverage Effective Dates	Additional Requirements	SEP Generally Granted By
Change in Eligibility for Financial Help (cont.)	<p><u>CURRENT EMPLOYER PLAN NO LONGER CONSIDERED QUALIFYING EMPLOYER COVERAGE</u></p> <p><b>Qualified individual or a dependent enrolled in employer plan:</b></p> <ul style="list-style-type: none"> <li>Becomes newly eligible for PTC due to a change in employer-sponsored plan resulting in the plan no longer being considered qualifying coverage (i.e. the plan changes benefits so it no longer qualifies as adequate coverage, or the cost of employee coverage is no longer considered affordable). Examples include: <ul style="list-style-type: none"> <li>→ Employer plan benefits or cost-sharing protections are scaled back, causing the plan to no longer meet the “minimum value” standard</li> <li>→ Termination of employer contributions to employee’s health coverage</li> </ul> </li> </ul> <p><b>Note:</b> Need to terminate employer coverage prior to effective date of the new plan. Otherwise, the enrollee will not be eligible for the PTC.</p>	<p>YES:</p> <p>Only applies if:</p> <p>Previously enrolled in affected employer plan</p>	<p>Up to 60 days BEFORE or AFTER change to coverage</p>	<p>If plan selected before change to coverage: 1st day of month following change</p> <hr/> <p>If plan selected after change: 1st day of month following plan selection</p>	<p>NO</p>	<p>Customer Service Center (This is not currently available in the Marketplace Application, but will be available in the future)</p>
	<p><u>MOVING OUT OF THE MEDICAID COVERAGE GAP</u></p> <p><b>Qualified individual:</b></p> <ul style="list-style-type: none"> <li>Was previously ineligible for Medicaid due to a state’s decision not to expand Medicaid and had income below 100% of the poverty line and moves to Colorado.</li> </ul> <p><b>Note:</b> This SEP is available even if the individual did not previously apply for Medicaid.</p>	<p>NO</p>	<p>Up to 60 days BEFORE or AFTER move to new state</p>	<p>First of the month following the trigger or plan selection (whichever comes later)</p>	<p>NO.</p>	<p>Customer Service Center (In the future, customers will be able to indicate having moved from an applicable state within the Permanent Move section of the application. Until then, customers can only access this SEP through the call center).</p>

Type	Qualifying Event	Requirement of Prior Coverage	Timing	Coverage Effective Dates	Additional Requirements	SEP Generally Granted By
Change in Eligibility for	<p><u>NEWLY GAINING ELIGIBLE IMMIGRATION STATUS</u></p> <p><b>Qualified individual or dependent:</b></p> <ul style="list-style-type: none"> <li>Becomes newly eligible for Marketplace coverage as a result of gaining a lawfully present immigration status.</li> </ul> <p><b>Note:</b> SEP does not apply if the individual already had an eligible immigration status. For more information, see <a href="https://www.healthcare.gov/slist">Healthcare.gov's list</a> of "lawfully present" immigration statuses eligible for Marketplace coverage.</p>	NO	Upto60daysAFTER gaining status	Regular coverage effective dates (15/16 day rule)	NO	Marketplace Application
	<p><u>AMERICAN INDIAN OR ALASKA NATIVE (AI/AN)</u></p> <p><b>Qualified individual or enrollee:</b></p> <ul style="list-style-type: none"> <li>Members of federally-recognized Native American tribe and Alaska Native Claims Settlement Act Corporation Shareholders can enroll in a new plan (or change their existing plan) once per month.</li> </ul> <p><b>Dependent:</b></p> <p>Dependents of tribal members who are listed on the same application can also utilize this SEP.</p>	NO	May enroll in or change QHPs one time per month	Regular coverage effective dates (15/16 day rule)	NO	<p>This is available in the UI for customers who gain the AI/AN status within the last 60 days.</p> <p>Customers utilizing their monthly SEP will need to call the Customer Service Center.</p>



Type	Qualifying Event	Requirement of Prior Coverage	Timing	Coverage Effective Dates	Additional Requirements	SEP Generally Granted By
Change in Eligibility for Financial Help	<u>RELEASED FROM INCARCERATION</u> <b>Qualified individual or a dependent:</b> <ul style="list-style-type: none"> <li>Becomes newly eligible for Marketplace coverage as a result of being released from incarceration (detention, jail, or prison)</li> </ul>	NO	Up to 60 days BEFORE or AFTER release	If selected after release: First day of the month following plan selection  If plan selected before release: 1st day of month following release	NO	Marketplace Application
	<u>ERROR / MISREPRESENTATION / INACTION / MISCONDUCT</u> <b>Qualified individual, enrollee, or a dependent:</b> <ul style="list-style-type: none"> <li>Was not enrolled in a plan, enrolled in the wrong plan, or did not receive PTC or cost-sharing reductions for which he or she was eligible due to the error, misrepresentation, misconduct or inaction by the Marketplace or HHS, its instrumentalities, or other entities providing enrollment assistance (e.g., assisters, navigators, insurers, brokers, Call Center reps)</li> <li>Experienced a technical error when applying for coverage that either:               <ul style="list-style-type: none"> <li>→ Prevented enrollment in a plan, OR</li> <li>→ Prevented insurer from receiving enrollment information</li> </ul> </li> </ul>	NO	Up to 60 days AFTER Marketplace determination of eligibility for SEP	Effective date appropriate to circumstances (generally prospective)	NO	Specialized team at Connect for Health Colorado Service Center
Enrollment or Plan Error	<u>PLAN OR BENEFIT DISPLAY ERROR</u> <b>Qualified individual, enrollee, or a dependent:</b> Experienced an error related to plan benefits, service area, or premium displayed on a Marketplace website at the time of plan selection which influenced the decision to select (or not select) a QHP	NO	Up to 60 days AFTER determination of eligibility for SEP	Effective date appropriate to circumstances (generally prospective)	NO	Specialized team at Connect for Health Colorado Service Center

Type	Qualifying Event	Requirement of Prior Coverage	Timing	Coverage Effective Dates	Additional Requirements	SEP Generally Granted By
Enrollment or Plan Error (cont.)	<p><u>HEALTH PLAN VIOLATION</u></p> <p><b>Enrollee or a dependent:</b> Demonstrates to the Colorado Division of Insurance that QHP substantially violated a material provision of its contract</p>	<p>YES:</p> <p>Only applies if: Currently enrolled in Marketplace coverage</p>	Upto 60 days AFTER determination of eligibility for SEP	Effective date appropriate to circumstances (generally prospective)	Requires approval from the Colorado Division of Insurance	Specialized team at Connect for Health Colorado Service Center <i>only with approval from DOI.</i>
Other Uncommon Circumstances	<p><u>DELAY IN BEING DETERMINED INELIGIBLE FOR MEDICAID OR CHIP:</u></p> <p><b>Qualified individual or a dependent:</b></p> <ul style="list-style-type: none"> <li>Applied for Medicaid or CHIP coverage during open enrollment (or during an SEP) and the state Medicaid agency determined the individual or his or her dependent ineligible for Medicaid or CHIP after the enrollment period ended</li> </ul> <p><b>Note:</b> SEP applies regardless of whether applied directly through state Medicaid agency or applied through Marketplace and information was transferred to state Medicaid agency.</p>	NO	Upto 60 days AFTER being determined ineligible for Medicaid or CHIP	Effective date appropriate to circumstances (generally prospective)	NO	Specialized team at Connect for Health Colorado Service Center <i>following validation of the delay.</i>
	<p><u>SURVIVORS OF DOMESTIC VIOLENCE OR ABUSE OR SPOUSAL ABANDONMENT</u></p> <p><b>Qualified individual or enrollee:</b></p> <ul style="list-style-type: none"> <li>Experiences domestic abuse or violence and wants to enroll in health plan separate from abuser (who could be an intimate partner, a parent, or another relative)</li> <li>Experiences spousal abandonment and wants to enroll in a health plan separate from spouse</li> </ul> <p><b>A dependent on the same application:</b></p>	<p>YES: Only applies if: Currently enrolled in MEC</p>	Upto 60 days AFTER requesting SEP	Regular coverage effective dates (15/16 day rule)	NO	Specialized Team at Connect for Health Colorado Service Center

Type	Qualifying Event	Requirement of Prior Coverage	Timing	Coverage Effective Dates	Additional Requirements	SEP Generally Granted By
Other Less Common Circumstances (cont.)	<p>GAINING ELIGIBILITY FOR A HEALTH REIMBURSEMENT ARRANGEMENT (HRA)</p> <p><b>Qualifying individual, enrollee, or dependent:</b></p> <ul style="list-style-type: none"> <li>Newly gains access to an individual coverage HRA (ICHRA), or qualified small employer HRA (QSEHRA)</li> </ul>	NO	Up to 60 days BEFORE the date the HRA coverage can take effect if the individual was given notice 90 days before the HRA took effect. If notice was not required of the employer, up to 60 days BEFORE or AFTER the date the HRA coverage can take effect.	<p>If plan is selected before the date the HRA can take effect: On the date the HRA can take effect or, if it takes effect other than the 1st day of the month, the 1st day of the month following the date the HRA can take effect</p> <hr/> <p>If the plan is selected on or after the date the HRA can take effect: 1st day of the month following plan selection</p>	NO	Specialized Team at Connect for Health Colorado Service Center
	<p><u>EXCEPTIONAL CIRCUMSTANCES</u></p> <p><b>Qualified individual, enrollee, or a dependent:</b></p> <ul style="list-style-type: none"> <li>Demonstrates to the Marketplace exceptional circumstances prevented enrollment in coverage during open enrollment, such as: <ul style="list-style-type: none"> <li>→ A serious medical condition (e.g., unexpected hospitalization or temporary cognitive disability)</li> <li>→ A natural disaster (e.g., an earthquake, hurricane, or massive flooding)</li> </ul> </li> </ul>	NO	Up to 60 days AFTER determination of eligibility for SEP	Effective date appropriate to circumstances (generally prospective)	NO	Specialized Team at Connect for Health Colorado Service Center