



COVID-19 Grace Period and Special Enrollment Period Q & A's
April 3, 2020

Grace Periods

Q: What are the rules about the initial payments for Essential Plan (EP) and Qualified Health Plan (QHP)? Do consumers still need to pay their first premium within 10 days to effectuate coverage?

A: All QHP enrollees, those who must pay the full premium and those receiving advance premium tax credits (APTC), are still required to make their first premium payment (or, binder payment) in order to effectuate coverage. Plans may extend the 10 day initial payment grace period at their discretion.

For EP 1, \$20 binder payments are not required in order to effectuate coverage. While plans are not required to waive the EP + Vision and Dental portion of premium for enrollees who elect this additional coverage, plans may waive this additional premium at their discretion. We encourage plans to waive this portion of the premium for families who are experiencing a financial hardship during this difficult time.

Q: Does the 30-day grace period extension apply to APTC consumers who are already in their grace period?

A: No, under Centers for Medicare and Medicaid Services rules, pre-existing grace period rules still apply for APTC consumers who have already entered the first 30 days of their grace period prior to April 1, 2020. The COVID-19 grace period rules are applicable for enrollees who enter a grace period on or after April 1, 2020 until the end of the public health emergency.

Q: Should plans be terminating EP consumers who did not pay their March 2020 premium?

A: At this time, plans should refrain from disenrolling consumers who fail to pay their \$20 EP 1 premium contribution. While plans are not required to provide an extended grace period to EP + Vision and Dental enrollees for the Vision + Dental portion of the premium, plans may extend a grace period at their discretion. We encourage plans to make this grace period available to families who are experiencing a financial hardship during this difficult time.

Q: Per NY State of Health guidance, plans will delay the QHP-APTC grace period for an additional month resulting in a 120-day grace period. After 120-days, if the full premium amount is ultimately unsatisfied by the end of the 120-day grace period, then from what date should the plan process the termination?

A: If an enrollee does not satisfy their premium by the end of the 120-day grace period, their coverage should be terminated as of the 60th day of their grace period. The termination would be sent to NYSOH with an end date equivalent to the end of the second month of the 120-day grace period. Plans will cover claims for the first 60 days of the grace period, and per CMS [guidance](#), plans will receive APTC for this 60-day period (2 months of APTC).

For example, under current rules, an existing enrollee's premium payment for the month of April 2020 is due by April 1, which would be the start of the 90-day grace period. Under the emergency federal rules, the grace period runs through the end of July (120 days). If the individual ultimately does not make their premium payment, the plan would send NYSOH a termination transaction at the end of July, with an end date of May 31. The plan would retain the APTC for the months of April and May.

Q: If a consumer is terminated for non-payment after the 120-day grace period, can they re-apply for QHP coverage in the same plan or another plan offered through NYSOH?

A: Generally, no. Consumers who are terminated for non-payment after 120-days will not be able to re-enroll in a QHP until the beginning of Open Enrollment for plan year 2021 unless they have a qualifying life event triggering special enrollment, or unless the emergency SEP is extended. If the consumer has an income change and is eligible for Medicaid, Essential Plan or Child Health Plus, they can update their application information and enroll in the coverage for which they are eligible.

Q: Should plans continue to take payments from EP consumers if they do pay?

A: Yes, plans should continue to invoice consumers for their premium contribution on a monthly basis, but if the payment is not received, the consumer should not be disenrolled.

Q: Who is responsible to pay claims for services during the 120-day grace period for QHP consumers with APTC?

A: Per CMS guidance, plans are responsible for paying claims for the first 60-days of the grace period; plans may pend claims for days 61-120 of the grace period. If a consumer is subsequently terminated for non-payment after 120-days, the plan is not responsible for payment of claims incurred during day 61-120 of the grace period (i.e., incurred after the date of termination). Plans should communicate this to consumers and providers.



Q: Is NY State of Health requiring proof of hardship to enable these extended grace periods for subsidized enrollees?

A: No, NY State of Health will not require proof of COVID-19 hardship for the premium payment and grace period flexibilities for EP, CHP, QHP-APTC. DFS will issue guidance for the full premium populations.

COVID-19 Exceptional Circumstances Special Enrollment Period

Q: What will the begin dates of coverage be for the extended COVID-19 Exceptional Circumstances Special Enrollment Period (SEP)?

A: Similar to the rules being applied with the March 16, 2020 COVID-19 Exceptional Circumstances SEP, consumers who enroll via the SEP from April 16 -May 15 will have a choice of when to begin to coverage. They will be allowed to choose a start date of either May 1 or June 1.



**Q&A on Coronavirus Special Enrollment Period (SEP) in Qualified Health Plans (QHP)
March 16, 2020**

- 1. Are April 1 start dates permissible for all members who come in through the Coronavirus SEP, even if they enroll between April 1 and April 15? Are partial month premiums permissible for people who come in after April 1, but still want coverage in April?**

A: Yes, we are going to offer a back date to April 1, if consumers request it. Our goal is to get individuals into care, but because we cannot do partial premiums, if they need coverage in April, it will need to begin on April 1. If consumers want a May 1 start date that is also permissible.

- 2. Can QHP coverage start retroactively under the Coronavirus SEP?**

A: Coverage can only begin as early April 1 under the Coronavirus SEP. Some enrollees may opt for coverage to begin on May 1.

- 3. Are existing QHP members allowed to change their health plan under the Coronavirus SEP?**

A: Unless an existing QHP member is eligible for another SEP that enables them to change their plan, they will not be permitted to change their QHP health plan under the Coronavirus SEP.

- 4. Are consumers whose QHP coverage was terminated or cancelled due to non-payment be permitted to re-enroll under the Coronavirus SEP?**

A: Yes. This SEP is open to uninsured individuals who are otherwise eligible for a QHP. Coverage will not be retroactive, and under this SEP, it can only begin as early as April 1.