

March 2023 Community Workgroup Q&A

Upcoming System Enhancements

- For customers who are losing coverage, is it possible to make those email messages appear as “Urgent” versus showing up as regular Pennie notices? Is it also possible to add a search feature in the Broker Inbox to help us sort through messages quicker versus having to open each one?
 - Thanks for the suggestion. We'll see what we can do to help make it easier to identify those termination notices or other notices where someone may be losing financial assistance.
- Will there be a chat function for assisters and brokers?
 - Anonymous chat on help.pennie.com is available for everyone. Our recent implementation was to expand chat functionality to be available within the secure customer portal. This allows us to provide assistance to our customers on specific account information in a secure environment. We will look into the possibility to expand secure chat to the assister and broker portal dashboards in the future.
- For the Pennie calculator tool, which FPL levels will be used when projecting APTC?
 - Continue to use existing 2022 FPL Tables (for remainder of 2023 plan year) for APTC and CSR eligibility. For Medicaid and CHIP eligibility, use 2023 FPL Tables for the remainder of the 2023 plan year.
- Since we have newer staff to the Financial Counselor role, can you please explain how they determine FPL with income?
 - To calculate FPL, you start by determining the FPL for the plan year by household size. For example, 2022 FPL is \$13,590 for a household of one. To determine 100% FPL for a household of 2 or more, you add an additional \$4,720 for each additional person. Therefore, 100% FPL for household of 2 is $\$13,590 + \$4,720 = \$18,320$. To determine a customer's FPL, divide their annual income by 100% FPL for a tax household of their size.
 - You don't need to be able to calculate a customer's FPL to determine their eligibility for financial assistance. Pennie will do that for you when you submit an application or if you use the estimated eligibility available through Browse for Plans.
- How do we access the search function to see which of our clients have documentation due?
 - Brokers would access their active customers via their book of business and click on the plus (+) sign to the right of the Search box. The Applicant Verifications filter will display as the last filter on the screen to enable search by due date of open DMIs.

Unwinding – Medicaid (MA) Renewals

- Does the Medicaid/CHIP letter say to call Pennie? Do you work with the members or refer to brokers?
 - When DHS determines a customer no longer eligible for MA/CHIP, the MA determination letter will explain that the customer's application is being sent to Pennie to determine if

they may be eligible for financial assistance through Pennie. Pennie will then send a notice to the customer explaining what they need to do to enroll in coverage through Pennie. This notice from Pennie, like all notices from Pennie, includes a “Get Help” section that instructs them how to find help from assisters and brokers:

Get Help

Applications can sometimes seem confusing or complicated. We get it. If you need help filling out your application, or understanding what documents to submit, you can access help over the phone or in-person. There are many local, personalized resources available for you to get the help you need:

- To find an assister or broker ready to help you enroll in a health plan that is right for you, please visit pennie.com/connect.
 - You can also speak with a Pennie Customer Service Representative at 1-844-844-8440 or TTY 711.
- Some Medicaid clients are already getting their renewal packets. Would they be eligible for the 120-day SEP?
 - Customers who lose coverage during the Unwinding period are eligible for an extended 120 day Loss of MEC SEP. The system automatically grants the longer 120-day SEP when the coverage end date occurs during the Unwinding period. It doesn't matter if the customer's renewal notices began prior to the Unwinding period, or even if they completed their MA renewal packet prior to the Unwinding period. The same rules apply for a customer who loses their MA at the end of the Unwinding period – if they come in to shop on Pennie after the Unwinding period is over, they will still receive the 120-day SEP as long as their coverage end date occurred during the Unwinding period.
 - If a member does not complete their Medicaid renewal packet and are terminated, would you recommend we submit an application through Pennie or direct them to Compass directly?
 - The main priority for this procedurally-terminated population is that they take action as soon as they become aware that their MA was terminated. If they apply through Pennie and we determine that they may still be eligible for Medicaid/CHIP, we will send their application to DHS appropriately. The same goes for the inverse scenario. The most important thing is to get their application submitted right away so that they can get covered again.
 - Are brokers going to be notified if one of their clients is eligible for an SEP due to loss of Medicaid?
 - If a Medicaid enrollee previously had a Pennie application with a designated assister/broker, that assister/broker designation will remain unless the customer or assister/broker elected to end the designation. If that individual later loses their Medicaid coverage and their application is sent back to Pennie, the designation should remain.
 - For individuals losing Medicaid who never had a Pennie account or never designated an assister/broker through Pennie previously, then there is no way for us to know they are working with an assister/broker. The customer would have to designate an assister/broker through Pennie once we receive their application.

- Will we be paid commissions on these clients who are reenrolling in Pennie coverage?
 - The commissions process is not impacted. It is the same for this population as it would be any other Pennie customer. If a Pennie enrollee has a designated broker, that broker designation will be sent to the insurer with the customer's enrollment information.
- Is there a question on the Medicaid renewal that asks if the customer has affordable employer-offered coverage? If Pennie automatically submits an application on someone's behalf when they have affordable coverage through their employer, this letter from Pennie would be incorrect and confusing to customers.
 - When Pennie receives application information from DHS, if Pennie does not receive all of the information needed to determine eligibility, we will create a draft Pennie application prepopulated with the information received from DHS and send the customer notice asking them to review their Pennie application and update any information before submitting to receive their eligibility determination.

Unwinding – 120-Day SEP & Earlier Coverage Start Date

- Is premium adjusted if a person chooses an earlier start date? If a client selects an earlier coverage start date, will the payment screen reflect the previous months premiums, or will it only accept a one-month payment?
 - The “Select Coverage Start Date” pop-up displayed provides an alert to the customer if an earlier date is selected with language notifying them that additional premiums may be due if an earlier date is selected. Pennie plan shopping will only show the standard monthly net premium.
- Will income documentation automatically transfer over from DHS to Pennie, or will customers who were denied Medicaid have to upload documents again to Pennie if they have an Income DMI?
 - The documentation of income does not get transferred to Pennie; however, Pennie relies on the validation of income that is performed during the redetermination process by DHS. Pennie will not re-validate income with the Federal Data Services Hub, so there should not be any Income DMI's produced by the Account Transfer process.
- Is a copy of their Medicaid denial letter still acceptable proof of loss of coverage?
 - Yes, a Medicaid denial letter is still sufficient documentation of loss of coverage. There has been no change to that policy.
- How will we know at what point in the 120-day window a customer is in? Will that be on their Pennie notice?
 - For customers who completed their MA renewal packet, were found ineligible for MA, and their application was sent to Pennie with automatic eligibility determination, Pennie will submit the Loss of Medicaid/CHIP SEP on behalf of these customers based on the MA Coverage End date received from DHS. Their dashboard will display a countdown of how many days are left until their SEP window closes.

- Other customers losing MA will need to report the Loss of Medicaid/CHIP QLE and enter their MA coverage end date which they received in notices from DHS. Once they have opened their SEP, their dashboard will display a countdown of how many days are left until their SEP window closes.
- Will members who are transferred from Medicaid to Pennie retain their Medicaid coverage in the interim? How are they covered during the "unwinding period/extended SEP?"
 - Medicaid sends customers to Pennie once they have been determined no longer eligible for MA and their MA coverage will end, typically at the end of that month (or the end of the following month if their eligibility determination occurs late in the month). Customers don't get to continue their MA coverage during their SEP to enroll in a plan through Pennie. That is why we encourage everyone losing MA coverage to go to Pennie right away to shop for a plan to avoid a gap in coverage. If a customer waits until day 119 of their 120 day SEP before they enroll in a plan through Pennie, they will have a gap in coverage of 4 months between when their MA coverage ended and when their Pennie coverage begins.

Path to Pennie

- I have come across several folks who already filed taxes, but not a REV-1882 form, and did not have health insurance. Can a customer file the REV-1882 form even after they have completed their taxes?
 - The customer should consult with their tax professional or the PA Department of Revenue to inquire about possibly amending their taxes to complete REV-1882. After completion of the form, the customer becomes eligible for the Tax Filer SEP. Feel free to review the Path to Pennie we covered in our [January 2023 session](#) (slides 25-30). You may also visit our Path to Pennie [site](#) for more information.
- During this tax season, when a customer files their taxes, is that still an SEP for this year?
 - If a customer submits REV-1882 when filing their PA tax return, they can qualify for a Path to Pennie SEP. The Path to Pennie program is a permanent partnership with the PA Department of Revenue and will continue until further notice is provided to stakeholders. Simply filing a tax return is not an SEP.