



pennie®



Pennie Community Workgroup

April 14, 2023



MS Teams Live Conference Call



All attendees' lines are muted



All questions can be typed using the Q&A function.
Pennie Reps will answer them one-on-one, publish, or audibly address.

Today's Agenda



- **Reminders**
- **PY 2024 Plan Certification**
- **Medical Assistance Unwinding Recap**
- **Pennie's Unwinding Outreach Activities**
- **Questions & Feedback**



Reminders

Customer Notice Preferences

Before We Begin

Steps

Start Your Application

Before We Begin

Get Ready

Primary Contact Information

Help Applying for Coverage

Help Paying for Coverage

About Your Household

Summary

Family and Household

Income Information

Additional Information

Privacy of Your Information

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and state ager
We will not ask
information or

Important:

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changed.

To learn more,

Steps

Start Your Application

Before We Begin

Get Ready

Primary Contact Information

Help Applying for Coverage

Help Paying for Coverage

About Your Household

Summary

Family and Household

Income Information

Additional Information

Review and Sign

Primary Contact Information

Primary Contact Name

First Name* Pennie

Middle Name Enter Middle Name

Last Name* Test

Suffix Suffix

Date of Birth*
Month Day Year
01 01 1991

Email Address* pennietest@yopmail.com

☒ Send me important alerts to this email address.

Paper, email alert, text alert.

Pennie Notices Alerts

How Do I Change My Mailing Preferences to Paperless in my Pennie Account? – pennie help

My Stuff

- My Dashboard
- My Applications
- My Eligibility Results
- My Enrollments
- My Inbox
- My Tickets
- My Preferences**
- Quick Links
- Find Local Assistance

Next Steps

You missed the open enrollment period. You may not have a Qualifying Life Event.

Overview

Your Application Status

2023 Application

My Stuff

- My Dashboard
- My Applications
- My Eligibility Results
- My Enrollments
- My Inbox
- My Tickets
- My Preferences

Quick Links

- Find Local Assistance

Communication Preferences

Alerts

Please select how you would like Pennie to alert you when you have a notice in your Secure Inbox.

Phone Number* (xxx) xxx-xxxx

☐ By clicking this box, I consent to receiving calls or text messages, initiated by electronic means, including an automatic telephone dialing system by, or on behalf of, Pennie to the phone number provided. These calls or text messages may be for any purpose, including products and/or services that I have previously purchased, ones that I have not previously purchased, or general marketing. I acknowledge that I do not have to consent in order to receive assistance or services from Pennie and that my refusal to consent will in no way affect the availability of the amount of assistance or services I receive from Pennie. I also acknowledge that this consent may be removed at my request but that until such consent is revoked, I may receive calls or text messages from Pennie at my wireless number. Carrier charges may apply.

Pennie's privacy policy can be found [here](#).

Email Address Enter your email

☐ Send me important alerts to this email address.

RECAP

Periodic Data Matching (PDM)

What is Periodic Data Matching (PDM)?

- This process ensures customers receiving APTC and/or CSR are not:
 - Enrolled in non-Employer Sponsored Insurance Minimum Essential Coverage (Non-ESI MEC)
 - Deceased
- Exchanges are required to run this process twice per calendar year
 1. Once as a part of the annual redetermination process
 2. Separate mid-year process (Pennie typical runs it end of March/early April)
- Pennie will identify those enrolled in coverage with APTC/CSR dually-enrolled in:
 - Medicaid (MA)
 - CHIP
 - Medicare
 - Tricare
 - VA Care
 - Peace Corps

RECAP

Periodic Data Matching (PDM)

Pennie just ran this process—should see customer notices in 1-2 business days.

If an enrollee is flagged as being enrolled in other coverage (e.g. Medicaid, CHIP, Medicare) or deceased:

1. Warning notice sent, includes:
 - Name of each enrollee who needs to provide documentation
 - Type of issue the enrollee has been flagged for, including the specific type of other coverage they are enrolled in (e.g. Medicaid, CHIP, Medicare)
 - If they do not provide documentation to resolve the issue, their coverage will be terminated
2. Amount of time customer has to provide documentation (starting from the date of notice)– **30 days**
3. If the issue is not resolved by the deadline:
 - **Coverage will be terminated** end of the month (**effective 5/31/2023**)
 - Notice sent explaining that their coverage has been terminated because of the issue
 - Eligibility redetermined - customer is no longer eligible for coverage through Pennie

This process helps prevent customers from being dually-enrolled, if customer did not terminate their Pennie coverage when they enrolled in other coverage.

RECAP

Data Matching Issues (DMIs)

What is a Data Matching Issue (DMI)?

- Pennie is required by federal law to verify information on a customer's application against trusted data sources and flag inconsistencies, called Data Matching Issues (DMIs)
 - Checked every time an application is submitted
 - Most common DMIs are for income, citizenship/immigrations status, and having other coverage
- If application information inconsistent with trusted data sources:
 - DMIs will be generated for each inconsistency found
 - Customer "conditionally eligible" for coverage until the DMI deadline (typically 90 days)
 - Inconsistencies must be resolved before the deadline or else adverse action taken
- Since eligibility is determined at the individual family member level, most DMIs are applicable to a specific person not the entire household.
 - The only exception is income since income is for the entire household. Therefore, an income DMI will be generated for the primary tax filer but the entire household's income is the inconsistency



How is a Periodic Data Matching (PDM) DMI different?

- Not triggered by an application submission; Bi-annual re-check by Pennie
- Only checks for enrollment in other coverage & death
- Customers only have 30 days to resolve PDM DMIs (instead of 90 days for most DMIs)

Income DMI Deadline Extended during Unwinding

Until the end of the Medicaid Unwinding, Pennie is granting customers additional time to resolve income DMIs (*Unwinding Period: April 2023 to March 2024*).

- **Income DMI deadlines** have been extended **from 90 days to 150 days**
- All Pennie customers are eligible for the additional time, not just customers losing Medicaid due to unwinding
- Customers will see the extended income DMI deadline in their Pennie account and notices
- If sufficient documentation is not received by the 150 day deadline to resolve their Income DMI, customer will lose financial assistance, just like any expired income DMI
- Note: Deadline to resolve any non-Income DMIs is still 90 days

Pennie Customer Service Hours

Outside of OEP: January 16 – October 31

Mon-Fri	8a-6p
Sat	Closed
Sun	Closed

During OEP: November 1 – January 15

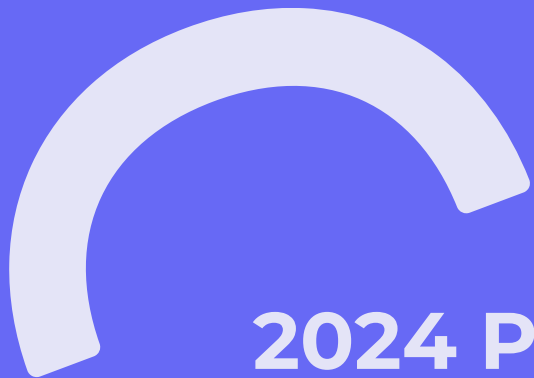
Mon-Fri	8a-7p
Sat	8a-1p
Sun	Closed

Next Holiday Closing: Mon., 5/29/23 - Memorial Day



1-844-844-8040
Customers

1-844-844-4440
Assister / Broker



2024 Plan Year

Plan Certification Policy

(Approved by Board 2/24/2023)

Overview

Applies to qualified health plans (QHPs) and qualified dental plans (QDPs).
offering coverage through Pennie for 2024 plan year

Plan certification requirements are in addition to all federal and state regulations or other guidance related to offering QHPs and QDPs.

Process:

- ➡ Feedback will be sought from variety of stakeholders
- ➡ Staff will review feedback and prepare recommendations for Board
- ➡ Board will review and approve policy

See [Jan 2023](#) Community Workgroups for more information on the 2024 plan certification policy proposals that we sought stakeholder feedback on.
See [Feb 2023](#) Pennie Board meeting materials and [meeting recordings](#).



2024 Plan Certification Policy:

**Stakeholder Feedback,
Staff Recommendations, and
Board Approval**

#1: Coverage for COVID-19

Provide coverage for COVID-19 vaccination, testing, diagnosis, and treatment in a manner consistent with the Coronavirus Aid, Relief, and Economic Security (CARES) Act, Pub. L. 116-136, §§ 3201-03.

Proposal	Policy Goal(s)	Benefits	Challenges
Coverage for COVID-19 vaccination, testing, diagnosis, and treatment	Ensure access to quality health care	Ensure Pennsylvanian's have access to necessary health care in public health crisis	N/A

Stakeholder Feedback:

- Some insurers requested this provision be sunset since the Public Health Emergency (PHE) MA Continuous Coverage Requirement (CCR) is scheduled to end in April 2023.

Staff Recommendation: Withdraw

- Due to the upcoming end of the CCR and because existing federal and state laws, regulations, and rules have evolved to address these coverage issues (e.g. vaccine requirements will be covered under existing ACA preventive services guidelines).



Board Approved Staff Recommendation

#2: Commissions Disclosure to Producers

Recommend continuing PY23 policy requiring advanced notice of commissions prior to OEP.

Note: Per CMS guidance June 2022, insurers are not allowed to have different commissions for OEP enrollments and SEP enrollments, therefore changing commissions after OEP removed from policy.

Proposal	Policy Goal(s)	Benefits	Challenges
<ul style="list-style-type: none"> Advanced notice of commissions prior to OEP Consistent commissions throughout the plan year 	<p>Ensure Pennsylvanians have access to a robust pool of licensed producers to provide expert assistance</p>	<ul style="list-style-type: none"> Advanced notice for brokers to decide whether to participate Consistency of commissions allows producers to commit and invest in support Pennie customers 	<ul style="list-style-type: none"> Operational timing difficulties for some insurers to disclose commissions a month prior to OEP

Summary of Feedback:

- Broad support, including all medical insurers and vast majority of brokers
- One broker requested more than 30 days notice,
- One broker concerned this would require insurers to pay commissions that they would not otherwise have paid
 - Note: This policy does not require insurers to pay commissions. IF an insurer pays commissions, then they must give brokers notice 30 days prior to OEP.

Staff Recommendation: Adopt

- Given broad support for this policy for several years, recommend adopting provision for 2024 and future plan years.



Board Approved Staff Recommendation – Adopted for 2024 & future plan years

#3: Renewal Plan Mapping

Proposed Modification #1: Prior to mapping same product two or more metal levels different (155.335(j)(1)(iv)), insurers should identify if a different product is available at the current metal level that has similar benefits and similar provider network as the current plan which would be more comparable renewal plan.

Proposal	Policy Goal(s)	Benefits	Challenges
Avoid disruption due to renewal plan mapping	Seamless autorenewals for customers into appropriate comparable plans	Ensure customers are autorenewed into the most appropriate comparable plan without surprises of significant changes	Adds subjectivity to some potential mapping scenarios

Summary of Feedback:

- Majority of insurers supported, one supported with request for flexibility to account for other factors that may better achieve the policy goal (e.g. whether plan is HSA-compatible, whether plan covers adult dental and vision).
- One insurer opposed any mapping across products: customers “consciously choose to be in an HMO product or PPO product”
- Assisters and brokers generally supported, noting that “dropping one metal level, let alone two metal levels, does not have the customers’ best interest at heart” and reiterated support for mapping to the same insurer.
- Some brokers expressed broader concerns about any renewal mapping, proposing to do away with plan renewal mapping entirely and requiring customers to re-visit their plan selection every year.

Staff Recommendation: Adopt, with modifications

- In scenarios where current mapping rules would result in mapping across two or more metal levels, allow insurers to propose alternate mapping for a more appropriate comparable plan, for approval by the exchange.



Board Approved Staff Recommendation



#4: Renewal Plan Mapping – Bronze to Silver CSR

Proposed Modification #2: Similar to 2024 federal proposed rule, autorenew CSR-eligible customers currently enrolled in Bronze to a Silver plan with the same product, the same insurer, and the net premium is no more than \$10 more per month, regardless of whether the enrollee’s current plan is available.

Proposal	Policy Goal(s)	Benefits	Challenges
Autorenew customers currently in Bronze to Silver CSR if net premium up to \$10 more than Bronze autorenewal	Seamless autorenewals for customers into appropriate comparable plans Help customers maximize financial assistance to lower their costs	Autorenewing customers into plans with richer benefits and lower out-of-pocket costs with the same or lower cost would lower health insurance costs for lower-income customers	Change to current mapping rules Mapping would be based on customer eligibility System implementation LOE

Summary of Feedback:

- Broad support for the intent of the proposal, but range of concerns about customer abrasion due to any change in their plan, including concerns of changes to provider network, covered benefits, etc. (However, since renewal is within same product, many of these concerns should not apply.)
 - One insurer noted the potential for additional confusion for new Pennie enrollees who lost MA due to Unwinding, who could be renewed into different plan.
- Assistors and brokers were split – some supported increased Silver CSR benefits, some concerns about customer confusion
 - “customers [will be] delighted to discover that this change will almost certainly lower their out-of-pocket costs and provide more cost-effective coverage for them”
 - “premiums will be the biggest factor”, “CSR is very confusing to people”

#4: Renewal Plan Mapping – Bronze to Silver CSR

Summary of Feedback (continued):

- Some noted that income fluctuations result in more changes for Silver CSR enrollees, potentially exacerbated if renewals based on prior year income. Some requested to exclude CS04 (200-250% FPL) since plans are not as much of an increase in benefits as other CSR levels. Some requested to exclude HSA-compatible plans. Some requested mapped customers be eligible for an SEP after OEP
- Many insurers expressed operational concerns about how the renewal determinations would be made.
- More preference for \$0 net premium increase (federal exchange approach) over Pennie's up to \$10 approach; \$0 increase would be more accepted by customers
- 6% of CSR-eligible Bronze enrollees saw \$0 net premium increase to enroll in Silver; 8% saw increase up to \$10 (2023 Pennie renewals)
 - If you further limit to <200% FPL (i.e. exclude CS04), 5% saw \$0 net premium; 7% saw increase up to \$10 (2023 Pennie renewals)

Staff Recommendation: Adopt \$0 net premium increase approach

- This policy will renew people into a better version of their current product with lower cost sharing and no additional net premiums
- Most insurers' operational concerns are mitigated by the existing renewal eligibility process. Also recommend coordinating additional outreach with insurers to all CSR-eligible customers.
- Note: Requires Pennie IT development to implement



Board Approved Staff Recommendation

#5: Meaningful Difference

Proposed Modification: Insurers would be prohibited from continuing to offer a plan in a service area after two consecutive plan years with very low enrollment in that service area. Very low enrollment is defined as less than 50 unique enrollees over 2 yr period.

Proposal	Policy Goal(s)	Benefits	Challenges
Prohibit plans from being offered after 2 consecutive years with very low enrollment.	Provide high quality, affordable, comprehensive health coverage to Pennsylvanians	Ensure plans provide added value to customers with differentiated features and sufficient, but not overwhelming, choice	Can be a difficult standard to quantify

#6: Standard Plans

Proposed Policy: If there is sufficient interest in implementing standard plans in PA, establish an implementation workgroup that will incorporate broad stakeholder feedback to develop a recommended standard plan policy, for an earliest availability in PY25.

Proposal	Policy Goal(s)	Benefits	Challenges
Implement standard plan design for PY25	<div>Provide high quality, affordable, comprehensive health coverage to Pennsylvanians</div> <div>Address inequities in access to health care for marginalized and underserved Pennsylvanians</div>	<div>Simplify plan selection process</div> <div>Plan designs incorporating a range of stakeholder input</div>	<div>Development of standard plan design</div> <div>Regional variations in current plan designs</div> <div>Ongoing process for updating standard plan design</div>



Pennie's Unwinding Policy & Systems Updates / Reminders

RECAP

Unwinding - Medicaid (MA) Renewals

April 1st 2023, DHS resumed regular Medicaid / Medical Assistance (MA) renewals

Each MA member will have a renewal due date between April 2023 - March 2024 where eligibility will be redetermined and members no longer eligible for MA will lose coverage

What is “Unwinding”? Why does it matter?

- During the PHE, DHS did not process redeterminations for those no longer eligible
- Regular MA renewals have resumed, and those no longer eligible for MA will lose coverage
- MA renewals not processed during the PHE will be spread out over 12 months, along with regular MA renewals as they become due
- Pennie is working with DHS to ensure a seamless transition to Pennie coverage for those QHP-eligible

Pennie Policies Applicable during MA Unwinding Period (*April 2023 – March 2024*)

1. New Loss of MA/CHIP Special Enrollment Period (SEP) - Customers have **60 days** to enroll in coverage with an effective date of the 1st of the month following loss of MA/CHIP to avoid a gap in coverage
2. All loss of coverage SEPs extended to 120 Days
3. Income DMI Reasonable Opportunity Period (ROP) Extended to 150 Days

See [Feb 2023](#) & [Mar 2023](#) Community Workgroups for more information on Unwinding, Medicaid (MA) renewals, and how customers losing MA can enroll in coverage through Pennie.

RECAP

Unwinding – Earlier Coverage Start (Loss of MA/CHIP)

Keep continuous coverage by enrolling in Pennie during first 60 days after losing Medicaid (MA)!

- Only available to individuals losing MA or CHIP to avoid a gap in coverage
- MA/CHIP coverage end date must occur during Unwinding (*April 2023 – March 2024*)
- If Pennie plan shopping completed within first 60 days after coverage end date, customer can choose coverage effective retro to 1st of month after coverage end date OR normal prospective shopping
- If plan shopping completed during day 61-120 of SEP, only prospective shopping available

EXAMPLE: Loss of MA on 5/31/2023

Loss of Coverage on	Plan Selected on	Coverage Start Date	
		1 st of month following plan shopping (default)	Choice of earlier coverage start date? (First 60 days only)
5/31/2023	5/17/2023	6/1/2023	--
	6/17/2023	7/1/2023	6/1/2023
	7/17/2023	8/1/2023	6/1/2023
	8/17/2023	9/1/2023	--
	9/17/2023	10/1/2023	--
	10/17/2023	No SEP Available (more than 120 days from coverage end date)	

Note: All Loss of Coverage SEPs have 120 SEP (if coverage ends during Unwinding)

Unwinding – Earlier Coverage Start (Loss of MA/CHIP)

Pennie Policies Applicable during MA Unwinding Period *(April 2023 – March 2024)*

Earlier coverage start date automatically offered if:

- QLE = “Loss of Medicaid / Medical Assistance (MA) or CHIP”
- MA/CHIP Coverage End Date is during Unwinding period
- Plan shopping completed no later than 60 days from MA/CHIP coverage end date

Next Steps

You have successfully completed your application and reported the life event to enroll in health plan(s). Please confirm the life event by clicking the button below. You will be able to shop for plans and enroll once you confirm the event.

[Confirm Event and Shop](#)

Life Change Reporting Qualifying Life Event

Select your Qualifying Life Event and the date the event occurred

Qualifying Life Event *

Loss of Medicaid/Medical Assistance (MA) or CHIP

mm/dd/yyyy



- ☐ [By checking the box], I attest that all of the answers I have provided, or information included in this application is truthful and accurate to the best of my knowledge and understanding. I acknowledge that I understand that Pennie may verify that myself, or a member of my household, has lost Medical Assistance/Medicaid or CHIP with the Pennsylvania Department of Human Services. I further affirm the accuracy of the information provided and any assertions made herein, under penalty of perjury, pursuant to 28 U.S.C. § 1749 and 18 Pa.C.S. § 4904.

[Back to Dashboard](#)

[Continue](#)

Unwinding – Earlier Coverage Start (Loss of MA/CHIP)

Pennie Policies Applicable during MA Unwinding Period (April 2023 – March 2024)

Earlier coverage start date automatically offered if:

- QLE = “Loss of Medicaid / Medical Assistance (MA) or CHIP”
- MA/CHIP Coverage End Date is during Unwinding period
- Plan shopping completed no later than 60 days from MA/CHIP coverage end date

Select Coverage Start Date

X

Your 120-day shopping period begins on May 31, 2023.

☒ Your coverage is currently scheduled to begin (August 1, 2023)

You may choose to have your coverage start earlier to avoid a gap in coverage.
Important note: If you choose this earlier date, you will have to pay multiple monthly premiums to start your coverage.

☐ Earlier coverage effective date (June 1, 2023)

Continue

Next Steps

You have successfully completed your application and confirmed life event. Please click on the button below to start shopping.

Shop for Plans

53 Health Plans

Estimated Monthly Savings

\$1,193.84/month For Customer Name, Spouse, and Child in ZIP code 17101.

Coverage will start on 8/1/2023 [Go to Dashboard to change coverage start date](#)

SORT BY

LOWER EXPENSE \$

LOWER EXPENSE \$

To avoid a gap in coverage, shop in first 60 days and choose “Earlier Coverage Effective Date” when prompted.

RECAP

Unwinding – MA Renewals

Notices to MA Members

Renewal Due

- 90 days prior:
Update Contact Info
- 60 days prior:
Encourage Early Renewal
- 30 days prior:
Complete Renewal Now!



MA Renewal Determination

Did member complete renewal?

yes

1

Eligible
for Medicaid
or CHIP

Enrolled in
MA / CHIP

yes

2

Not Eligible
for Medicaid
or CHIP

Term MA Coverage

To Pennie
(for APTC/CSR
Eligibility)

NO

No Response
to Renewal
Packet

3

MA Closed
No Eligibility
Determination

Term MA Coverage

See [February 2023](#) Community Workgroup for more information on Unwinding MA Renewals and scenarios that will result in loss of MA coverage.

Unwinding – MA Renewals



Pennie Eligibility Application

Completed by Pennie

Eligible for
• MA/CHIP?
• APTC/CSR?

Completed by Pennie

Report Loss of MA for SEP

Completed by Pennie

Customer Notice Login to Enroll

Completed by Pennie

up to 120 days

Shop for Health Plan

Completed by Customer

Pay First Invoice

Completed by Customer

- MA notice that application being sent to Pennie
- Pennie will:
 - Process application (recently updated at MA renewal),
 - Determine eligibility for QHP with APTC/CSR,
 - Open Loss of Medicaid/CHIP SEP, and
 - Send Login to Enroll notice
- Customer will:
 - Shop for a health plan (up to 120 days after end of MA coverage),
 - Pay first invoice

Sample Customer Notice

Subject: Eligibility Information

Re: Your 2023 Plan Year Application

Dear [Customer Name],

You are receiving this notice because the Department of Human Services (DHS) has determined that one or more members of your household do not qualify for Medicaid, otherwise known as Medical Assistance (MA) in Pennsylvania, or the Children's Health Insurance Program (CHIP). DHS has transferred your eligibility application information to Pennie®, the Commonwealth of Pennsylvania's official health insurance marketplace. Pennie is the place to apply for, shop, and enroll in the health coverage that fits you and your family's needs, and the only source of financial assistance to help lower the cost of health coverage and care. You should have also received a notice from DHS communicating that your application would be sent to Pennie.

Take action to enroll in coverage through Pennie

Based on the information included in your application, Pennie has determined your eligibility for coverage, including any financial assistance you may be eligible to receive. Please complete the following steps either online, or over the phone, to claim your new Pennie user account and enroll in health coverage. All you need is your Unique Access Code to get started.

IMPORTANT!

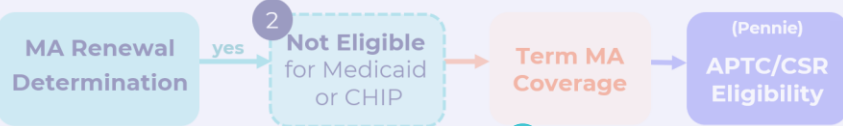
Your Unique Access Code is: [ABCD1234]

Follow these steps to enroll either online or over the phone:

Your Eligibility Summary

Household Member(s)	Eligibility Results
[Customer Name]	<ul style="list-style-type: none"> • You are eligible for health coverage. • See 'Enroll in Coverage' for more details. • You are eligible for financial assistance through Pennie Credits (APTC).

Unwinding – MA Renewals



**Customer Notice
Login to
Apply &
Enroll**

Completed by Pennie

**Pennie
Eligibility
Application**

*Started by Pennie
Completed by Customer*

**Eligible for
• MA/CHIP?
• APTC/CSR?**

Completed by Pennie

**Report
Loss of MA
for SEP**

Completed by Customer

up to 120 days

**Shop for
Health
Plan**

Completed by Customer

**Pay
First
Invoice**

Completed by Customer

Sometimes, Pennie cannot automatically generate eligibility.

- MA notice that application being sent to Pennie
- Pennie will:
 - Prepopulate application, and
 - Send Login to Apply & Enroll notice
- Customer will:
 - Review and submit application, receive eligibility for QHP with APTC/CSR,
 - Report Loss of Medicaid/CHIP SEP (self-attested),
 - Shop for a health plan (up to 120 days after end of MA coverage), and
 - Pay first invoice

Sample Customer Notice

Subject: Eligibility Information

Re: Your 2023 Plan Year Application

****No Eligibility Summary Included**

Dear [Customer Name],

You are receiving this notice because the Department of Human Services (DHS) has determined that one or more members of your household do not qualify for Medicaid, otherwise known as Medical Assistance (MA) in Pennsylvania, or the Children's Health Insurance Program (CHIP). DHS has transferred your eligibility application information to Pennie®, the Commonwealth of Pennsylvania's official health insurance marketplace. Pennie is the place to apply for, shop, and enroll in the health coverage that fits you and your family's needs, and the only source of financial assistance to help lower the cost of health coverage and care. You should have also received a notice from DHS communicating that your application would be sent to Pennie.

Take action to enroll in coverage through Pennie

Based on the information included in your application, Pennie has determined your eligibility for coverage, including any financial assistance you may be eligible to receive. Please complete the following steps either online, or over the phone, to claim your new Pennie user account and enroll in health coverage. All you need is your Unique Access Code to get started.

IMPORTANT!

Your Unique Access Code is: [ABCD1234]

Follow these steps to enroll either online or over the phone:

MA Renewal
Determination

NO

No Response
to Renewal
Packet

3

MA Closed
No Eligibility
Determination

Term MA
Coverage


Unwinding – MA Renewals

30

Informational Communications after MA Closed

- MA and CHIP Recipient Targeted Mailing 2 (DHS)
 - Individuals can still submit their renewal or verification to DHS for reconsideration of their medical benefits within 90 days of the closure with no lapse in coverage
- Pennie Mailing (Pennie)
 - Educational mailing informing recipients about Pennie's marketplace
 - If an individual submits an application to Pennie and is found potentially-eligible for MA or CHIP, the application will be forwarded to DHS for processing.
 - Application information NOT sent to Pennie – would need to apply directly to Pennie

OIM Operations
P.O. Box 2675
Harrisburg, PA 17105-2675

 **pennsylvania**
DEPARTMENT OF HUMAN SERVICES

IMPORTANT:
ACT NOW TO RESTORE YOUR HEALTHCARE COVERAGE

Dear [Recipient Name First] [Recipient Name Last]:

Our records show that your Medical Assistance (MA) or Children's Health Insurance Program (CHIP) coverage ended because we did not get the information or documents required for your renewal. If you want to restore your MA and/or CHIP, you must send us the missing information and documents no later than 90 days after the MA and/or CHIP end date on the closure notice we sent to you so the County Assistance Office (CAO) can process your renewal. If the CAO finds you are still eligible, your MA and/or CHIP will reopen with no gap in coverage. If your child is not eligible for MA, they may be reviewed for CHIP coverage, but only if the renewal and other required documents are submitted.

What do I need to do?

Complete your renewal online, by phone, by mail, or at the CAO **as soon as possible**.

Renew Online: You can complete your renewal online even without your renewal packet. There are directions on the back of this page on how to log into COMPASS to complete your renewal online using your Social Security number and this information:

County:
Case Record Number:
Renewal Date:


Renew by Mail or In-Person: You should have received a renewal packet in the mail about 30 days before your renewal was due. If you still have that packet, fill it out and return it along with any other required documents to your local CAO in one of the following ways:


- Use the envelope provided
- Drop it off at your local CAO

If you do not have your renewal packet, you can request one at the Service Center at 1-877-732-7323.

Renew by Phone: You can call the Service Center at 1-877-732-7323, Monday through Friday, 8:00 a.m. to 4:30 p.m.

How do I submit my renewal?

 **pennie**
connecting Pennsylvanians to health coverage

 **pennsylvania**
DEPARTMENT OF HUMAN SERVICES


Lost Your Medical Assistance Health Coverage? Pennie is Here to Help!

Did you recently lose your health coverage through Medical Assistance (MA)?

You may be able to get low-cost or even no-cost health coverage through Pennie™!

Pennie is Pennsylvania's official health and dental insurance marketplace and is the only place where you can get help to reduce the cost of health coverage and care.

Pennie is not an insurance company. Pennie is the place where you can choose a health plan that is best for you and your family.



Unwinding – MA Renewals

MA Renewal
Determination

NO

No Response
to Renewal
Packet

3

MA Closed
No Eligibility
Determination

Term MA
Coverage

Customer Notice
How to
Apply &
Enroll

Completed by Pennie

Pennie
Eligibility
Application

Completed by Customer

Eligible for
• MA/CHIP?
• APTC/CSR?

MA or CHIP
Eligibility (DHS)

Report
Loss of MA
for SEP

Completed by Customer

up to 120 days

Shop for
Health
Plan

Completed by Customer

Pay
First
Invoice

Completed by Customer

- Pennie will:
 - Send info about how to apply for coverage (30-45 days after MA closed)
- Customer will:
 - Submit eligibility application **(IMPORTANT: Not recently denied MA!)**
 - Receive eligibility, either:
 - Potentially-eligible for MA/CHIP ?
 - QHP with APTC/CSR?
 - If QHP eligible, report Loss of Medicaid/CHIP SEP (self-attested),
 - Shop for a health plan (up to 120 days after end of MA coverage), and
 - Pay first invoice

Sample Mailing to Individuals Recently MA Closed

pennie
connecting Pennsylvanians to health coverage™

pennsylvania
DEPARTMENT OF HUMAN SERVICES

Lost Your Medical Assistance Health Coverage? Pennie is Here to Help!

Did you recently lose your health coverage through Medical Assistance (MA)?

You may be able to get low-cost or even no-cost health coverage through Pennie™!

Pennie is Pennsylvania's official health and dental insurance marketplace and is the only place where you can get help to reduce the cost of health coverage and care. Pennie is not an insurance company. Pennie is the place where you can choose a health plan that is best for you and your family.

Pennie will help you find the best plan for you. Go to pennie.com and click the "Get Covered" button to shop for health coverage.

Pennie lets you:

- ✓ Compare health plans in your area by the monthly cost after financial help;
- ✓ Review each plan's benefits; and
- ✓ See what you would pay for health care services

Pennie is here every step of the way to help you through the application and enrollment

RECAP

Unwinding – MA Renewals

Comparison of MA Renewal Outcomes Resulting in Term MA Coverage

2

Not Eligible
for Medicaid
or CHIP

3

MA Closed
No Eligibility
Determination

MA Renewal Submitted to DHS?	Yes	No
Loss of Medicaid Coverage?	Yes	Yes
Medicaid Eligibility Determination Made at MA Renewal?	Yes, ineligible for MA/CHIP	No, MA closed. No MA/CHIP eligibility determined
Application Sent to Pennie?	Yes, automatic eligibility determination for APTC/CSR	No, customer must apply to Pennie (or submit late Medicaid renewal)
Can Pennie application find customer potentially-eligible for Medicaid/CHIP?	No, since recently denied Medicaid/CHIP at MA renewal	Yes, since no Medicaid/CHIP determination at MA renewal
Eligible for 120-day Loss of MA SEP through Pennie?	Yes, automatically applied	Yes, customer must report SEP
Eligible for Earlier Coverage Start Date (if shop within first 60 days of Loss of MA SEP)?	Yes	Yes

SEP Quick Reference Chart Update

Pennie updated the SEP Quick Reference Chart to include unwinding QLE and SEP changes.



Special Enrollment Period Quick Reference Guide

Updated: March 30, 2023

Special Enrollment Periods (SEPs) allow customers to enroll in coverage through Pennie outside of the annual Open Enrollment Period. In general, SEPs allow for plan shopping up to 60 days after the date of the qualifying life event. Only some events allow shopping up to 60 days before the event occurs. Some events may require customers to provide proof of the event before being able to shop. Questions? Call Pennie Customer Service at 1-844-844-8000 TTY 711.

	Availability Not Enrolled on Pennie	Current Pennie Enrollee	Coverage Effective Date Rule	SEP Available Before Event?	Documentation Required?	Additional Information
Loss of or Change in Coverage						
Loss of Minimum Essential Coverage (MEC)	✓	✓	1st of month (after event or plan selection, if later)	✓	No, Self Attested	Includes: ✓ Loss of Employer-Sponsored Insurance due to job loss ✓ Exhaustion of COBRA coverage Does NOT Include: ✗ Loss of coverage due to non-payment of premiums ✗ Voluntarily dropping COBRA coverage (unless employer ceases contribution after enrollment) For coverage ending during MA Unwinding (Apr 2023 - Mar 2024): • SEP open for 120 days after loss of coverage event date.
Loss of Medicaid/Medical Assistance (MA) or CHIP	✓	✓	1st of month (after event or plan selection, if later)	✓	No, Self Attested (system-automated)	For coverage ending during MA Unwinding (Apr 2023 - Mar 2024): • SEP open for 120 days after loss of MA/CHIP coverage event date. • If shopping up to 60 days after loss of MA/CHIP coverage event date, option for coverage starting 1st of the month after coverage loss.
Loss of Other Qualifying Coverage	✓	✓	1st of month (after event or plan selection, if later)	✓	No, Self Attested	Includes: ✓ Loss of Medical Assistance for the Medically Needy ✓ Loss of pregnancy-related coverage ✓ Expiration of non-calendar year MEC For coverage ending during MA Unwinding (Apr 2023 - Mar 2024): • SEP open for 120 days after event.
For more information on MA Unwinding and SEP policies applicable for coverage lost during MA Unwinding period, see Appendix.						
Change to employer plan, with gain in eligibility for financial help	✓	✓	1st of month (after event or plan selection, if later)	✗	Yes, Approval of Documents Prior to Plan Shopping	Employer plan no longer meets "affordability" standards, or no longer meets benefit standards to be considered MEC.
Newly eligible for employer health reimbursement arrangement (HRA)	✓	✓	1st of month (after event or plan selection, if later)	✓	Yes, Approval of Documents Prior to Plan Shopping	Individual Coverage HRA (ICHRA), or Qualified Small Employer HRA (QSEHRA)
Gaining QHP Eligibility						
Gain eligible immigration status	✓	✓	1st of month (after plan selection)	✗	Yes, Approval of Documents Prior to Plan Shopping	
Released from incarceration	✓	✓	1st of month (after plan selection)	✗	No, Self Attested	

Unwinding information is marked in **blue**

Medicaid (MA) Unwinding Period: April 2023 - March 2024

	Description
Medicaid Unwinding Period	The Medicaid Unwinding Period refers to the 12 month period of time starting April 2023 during which Medical Assistance (MA) has resumed annual eligibility redeterminations. Since March 2020, DHS had not been disenrolling anyone from MA coverage due to a change in their eligibility for MA. Beginning April 2023, DHS resumed annual redeterminations of eligibility for MA and began disenrolling individuals from MA due to no longer being eligible for MA, or for not providing the necessary information to complete the annual renewal process. Pennie has several SEP policies that apply only to individuals losing coverage during the Unwinding, outlined below. To be eligible for these policies, the coverage end date must occur during the Unwinding period of April 2023 - March 2024.
SEP Extended to 120 Days	SEP extended to up to 120 days after the date of event (i.e. end date of other coverage). Automatically applied to: • Loss of MEC, Loss of Medicaid/CHIP, or Loss of Other Coverage SEPs. • Event date (i.e. coverage end date) occurred during the Unwinding Period
Option for Earlier Coverage Start Date	If plan shopping completed between day 1 and day 60 after losing MA/CHIP coverage, customer can choose an earlier coverage start date of 1st of the month following the end of prior coverage. If plan shopping completed between day 61 and day 120 after losing other coverage, customer can only enroll in coverage starting 1st of the month following plan shopping (no earlier coverage start date option available). Example: Medicaid coverage terminated on 5/31/2023. If plan shopping on 7/17/2023 (i.e. within 60 days since the Medicaid coverage end date), customer can choose to enroll through Pennie with coverage starting 8/1/2023 (i.e. regular 1st of month following plan shopping) or coverage starting 6/1/2023 (i.e. coverage starting 1st of month following MA coverage end date). If plan shopping on 8/17/2023 (i.e. more than 60 days since the Medicaid coverage end date), customer can enroll through Pennie with coverage starting 9/1/2023 (i.e. regular 1st of month following plan shopping) only. Automatically applied to: • Loss of Medicaid/CHIP ONLY • Event date (i.e. coverage end date) occurred during the Unwinding Period

You can find the reference chart at pennie.com in the resources section.





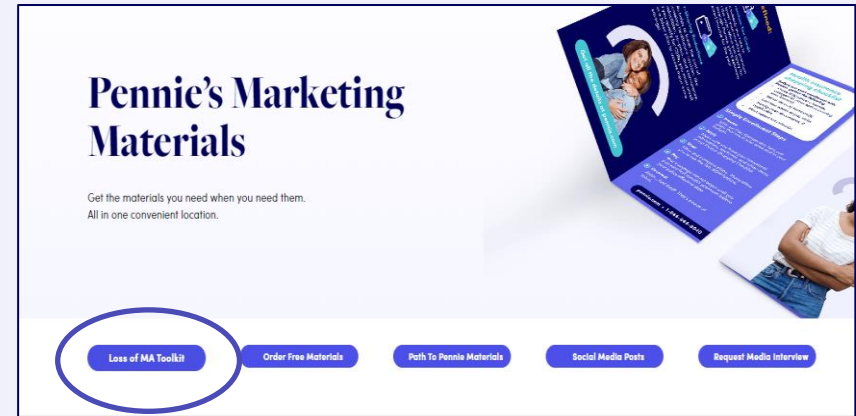
Pennie's Unwinding Outreach Activities

Pennie's Unwinding Outreach Activities

- Pennie & the YMCA continue to collaborate with the Health Equity Tour – 2023/2024
 - Focus on engaging low-income/underserved communities via large community events, housing authority partnerships, and in supporting local food banks
- Continue to work with faith-based organizations, hospitals, health centers, rural health clinics, and Pennsylvania's Free-Clinic Association to engage the uninsured and County Assistance Offices
- Pennie Assistors continue to engage underserved and uninsured residents – providing unbiased 1:1 support for those impacted by the end of continuous coverage, participating in community events, and conducting enrollment events to help those in need – Assistors are well-versed in MA and Pennie options and resources
- Pennie-Certified Brokers are a prime resource for local, professional assistance – they are a fast-path for getting protected
- Pennie and our partners at Pennsylvania's Department of Labor & Industry engage workers in transition, letting them know that they have viable options to COBRA through Pennie
- Working with the Small Business Development Centers throughout PA to help provide individual health insurance options for small business owners, sole proprietors, gig workers, and their employees who may be impacted by the end of continuous coverage
- Briefing many Pennsylvania Professional Boards and working with Legislative partners

Pennie's Unwinding Toolkit

- Pennie Specific Unwinding Toolkit - **NOW AVAILABLE!**
 - Agency.pennie.com/toolkit
 - Includes:
 - Social Posts
 - Social Graphics
 - Medical Assistance Collateral
 - Co-Branded Welcome to Pennie Mailer
- DHS/Pennie Co-Branded Toolkit
 - <https://www.dhs.pa.gov/PHE/Pages/Stakeholder-Resources.aspx>
 - Includes:
 - Collateral pieces
 - FAQs
 - Sample content
 - Digital banners
 - Social graphics
- Read more the ending of the continuous coverage at:
 - [Medical Assistance & CHIP Renewals \(pa.gov\)](#)
 - [Loss of Medical Assistance Coverage | Pennie](#)
 - [MA Renewal Communications](#)





Questions & Feedback

We Want to Hear From You



Questions & Feedback – Always Welcome



**Call Customer
Service**

+1 (844) 844-4440

Monday – Friday
8:00 AM to 6:00 PM