

PY27 Cert Training Module 3

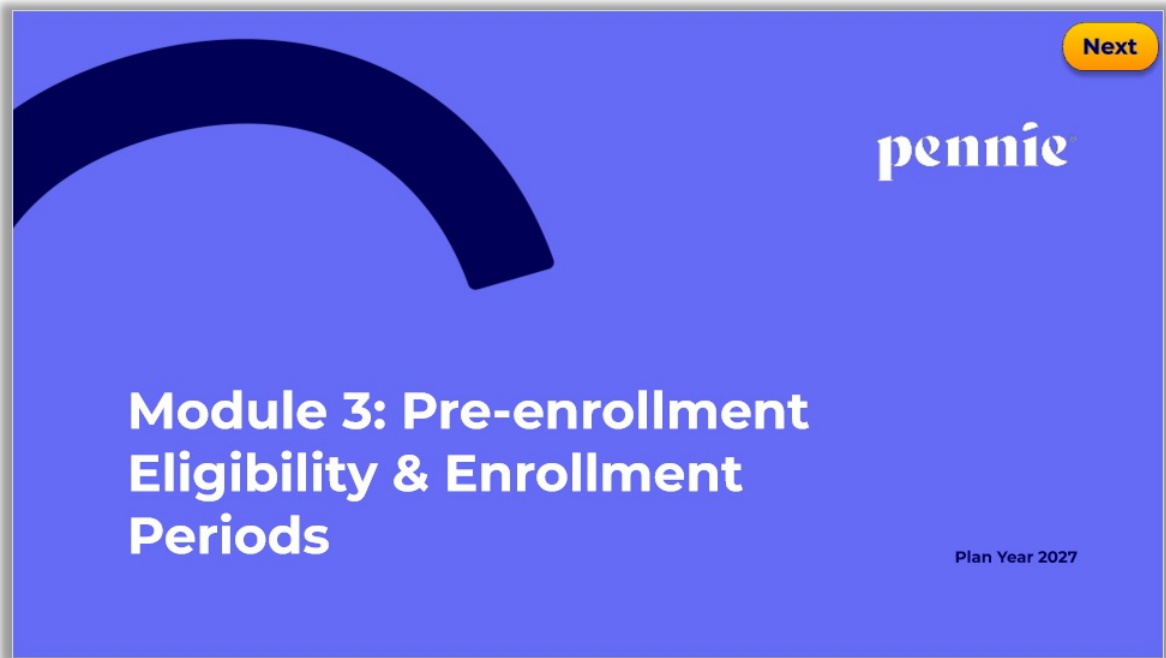
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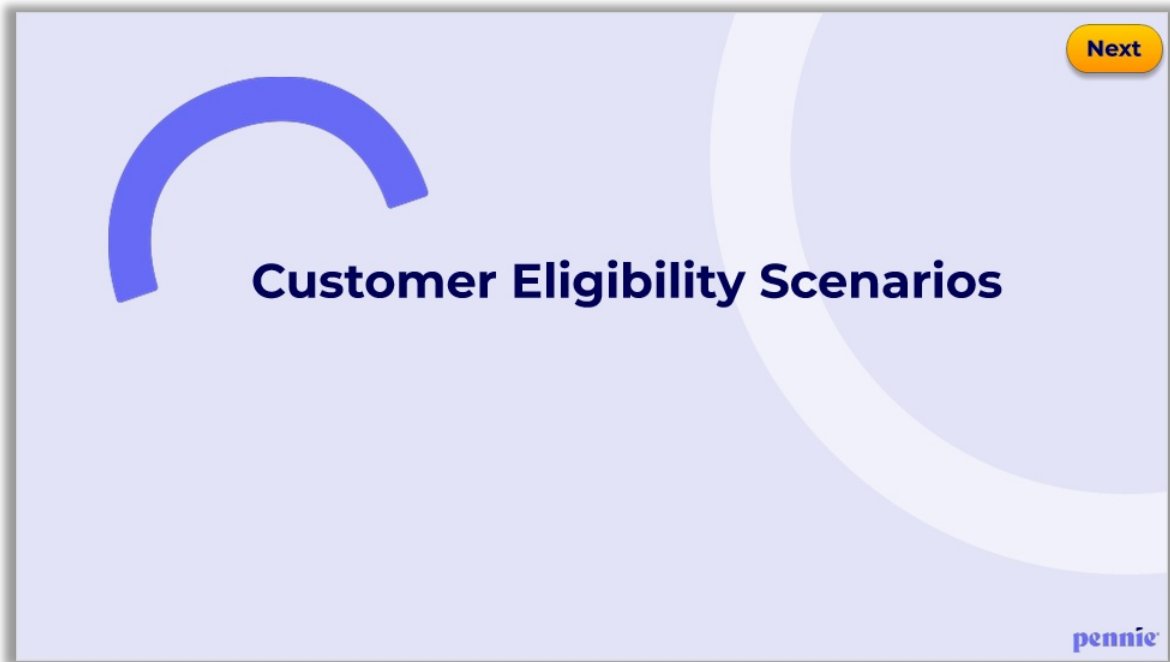
1. Title Slide

1.1 Title Slide



2. Customer Eligibility Scenarios

2.1 Customer Eligibility Scenarios



2.2 Self-Employed Individuals

Self-Employed Individuals

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Individuals working as a freelancer, consultant, independent contractor, or other self-employed worker, can enroll through Pennie.

Business owners are permitted to enroll themselves and/or their family members. However, because Pennie only offers individual and not group coverage, the employees of a business are not permitted to enroll together.

Note: **Individual Coverage / Qualified Small Employer Health Reimbursement Arrangements (ICHRAs / QSEHRAs)** are considered individual coverage despite the reimbursement originating from an employer.

Eligibility for financial savings is based on the estimated net self-employment income. This amount is reported on Schedule C of their federal tax return.

For customers with fluctuating or uncertain income, they can apply using their best estimate. However, if they realize their actual income is going to be different from what was originally estimated, they must update their application as soon as possible.

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2.3 Part-time Individuals

Part-time Individuals

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Pennie is a great source of coverage for part-time employees as well. Part-time employees may be able to access coverage through Pennie if their employer:

- Does not offer insurance coverage
- Offers coverage that does not meet affordability standards
- Offers coverage that does not meet minimum coverage standards

Unless they have a Qualifying Life Event (QLE), individuals can apply and enroll in coverage through Pennie during the annual Open Enrollment Period (OEP). By submitting a Pennie application, they will find out if they are:

- Eligible to purchase health coverage through Pennie and receive financial savings based on their household size and income
- Potentially eligible for no-cost MA coverage, based on income and other factors

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2.4 Employer-sponsored Coverage Affordability

Employer-sponsored Coverage Affordability

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If an employer offers a plan that meets the **Minimum Value Standard** and is considered **affordable**, the customer will not be eligible for APTC or CSR if they choose to enroll in coverage through Pennie. To meet the Minimum Value Standard, the plan must:

- Pay at least 60% of the total cost of medical services for a standard population
- Include substantial coverage of physician and inpatient hospital services

Family members who have an offer of job-based coverage through a spouse or parent that is unaffordable **will qualify for financial savings**, even if "self-only" coverage for the employer is considered affordable. For 2027, job-based coverage is unaffordable if the cost of self-only or family coverage is more than **10.22%** of household income.

Note: The employer-sponsored minimum essential coverage affordability standard is updated by the IRS annually.

For more information, please refer to one of our multiple FAQs on calculating affordability at [FAQs | Pennie.com](#).

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2.5 Customers Losing MA/CHIP

Customers Losing MA/CHIP

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Those currently enrolled in MA/CHIP will receive an annual renewal from the Pennsylvania DHS which they must complete to see if they still qualify for coverage. Customers will receive notifications and their renewal packet beginning 90 days prior to the end of their coverage period.

Customers may respond to the packet any time throughout the 90 days. If they are found eligible, they will continue with their MA coverage. If they are not found eligible, **DHS will securely transfer their information to Pennie**, and an account will be created on their behalf.

Note: Customers transferred to Pennie are not automatically enrolled in a plan – they will still need to initiate and complete an application to enroll.

If a customer does not respond to their MA renewal packet, they will lose their coverage.

Note: If a customer (or someone in their household) chooses to voluntarily end MA or CHIP coverage, they can still enroll through Pennie, but they will not qualify for financial savings.

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3. Citizenship Requirements

3.1 Citizenship Requirements



Citizenship Requirements

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3.2 Citizenship Requirements

Citizenship Requirements

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To be eligible to enroll in health coverage through Pennie, the customer:

- Must be a U.S. citizen, U.S. national, or have a qualifying immigration status
- Must hold citizenship or "lawfully present" immigration status for the duration in which they are seeking coverage
- Must be a resident of Pennsylvania
- Must not be incarcerated (unless pending disposition of charges)



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3.3 U.S. Citizenship Requirements

U.S. Citizenship Requirements

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A U.S. citizen is someone who was born in the United States (including U.S. territories, except for American Samoa), or was born outside the U.S., and:

- Was naturalized as a U.S. citizen
- Derived citizenship through the naturalization of his or her parent(s)
- Derived citizenship through adoption by U.S. citizen parents, provided certain conditions are met
- Acquired citizenship at birth because he or she was born to U.S. citizen parent(s)
- Became a U.S. citizen by operation of law



A U.S. national is someone who is a U.S. citizen or owes permanent allegiance to the U.S. With limited exception, most non-citizen U.S. nationals are people born in American Samoa.

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3.4 Defining “Lawfully Present”

Defining “Lawfully Present”

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The term “**lawfully present**” includes immigrants who have:

- “**Qualified non-citizen**” **immigration status** without a waiting period
- **Humanitarian statuses or** circumstances (including Temporary Protected Status, Special Juvenile Status, asylum applicants, Convention Against Torture, or victims of trafficking)
- Valid **non-immigrant visas**
- **Legal status** conferred by other laws (temporary resident status, LIFE Act, Family Unity individuals)



There are many immigration statuses – permanent and temporary – that a person may have and qualify for coverage through Pennie.

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3.5 Lawful Presence Guidelines

Lawful Presence Guidelines

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On June 25, 2025, the Department of Health & Human Services (HHS) and Centers for Medicare & Medicaid Services (CMS) issued the 2025 Marketplace Integrity and Affordability Final Rule proposing multiple changes to individual health insurance regulations. In July, H.R.1 (the “One Big Beautiful Bill Act”) was passed, codifying many of these changes into law.

Included in these changes was the definition of lawful presence. Previously, lawful presence contained language which allowed for the inclusion of the **Deferred Action for Childhood Arrivals (DACA)** population in the eligibility rules for marketplace coverage. This new definition removes this language, **making DACA recipients ineligible for coverage through Pennie.**

In addition, customers who have been lawfully present for less than 5 years were previously eligible to enroll in marketplace coverage – potentially with financial savings – even with incomes below 100% FPL despite being ineligible to enroll in MA. As of Tax Year 2026, **lawfully present non-citizens with an income of 100% FPL or less** – and who are not eligible for MA due to their immigration status – **are no longer eligible for financial savings.**

Note: If parents not lawfully present in the U.S. give birth to a child in the U.S., that child is a U.S. citizen and may be eligible for health coverage.

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4. Enrollment Periods

4.1 Enrollment Periods



4.2 Open Enrollment

Open Enrollment

All eligible Pennsylvanians looking to apply for health and/or dental coverage through Pennie, but who do not have a QLE, can do so during Pennie's annual **Open Enrollment Period (OEP)**.

Pennie's OEP begins on **November 1st and ends January 15th**. There are two windows within OEP that will determine the coverage effective date:

- Customers seeking a **January 1st effective date** need to shop and enroll between **November 1st and December 15th**
- Customers who enroll between **December 16th and January 15th** will have a **February 1st effective date**

Enrollment is open year-round for customers applying directly through the [COMPASS \(dhs.pa.gov\)](https://dhs.pa.gov) application for MA and CHIP, or for those who apply through Pennie but are referred to the Pennsylvania DHS through Pennie's "No Wrong Door Policy".

For additional information on Medicare, please refer to [Medicare.gov](https://www.medicare.gov) or [PA MED!.](#)

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4.3 QLEs & SEPs

QLEs & SEPs

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Some changes in circumstances are referred to as **Qualifying Life Events (QLEs)**. These changes open a limited-duration **Special Enrollment Period (SEP)** based on the date the event occurred. **These SEPs give customers a window to enroll in – or change – coverage outside of the annual OEP.**

Most SEP windows are open for **60 days**, during which, the customer(s) must shop and enroll. If they do not enroll within this window, **they will lose their opportunity and will need to wait until the annual OEP (or another QLE).**

As of 2026, most QLEs require customers to submit supporting documents to verify their eligibility. Once their eligibility is verified, the SEP will be opened and the customer can shop and enroll.

Customers must report QLEs promptly. Customers will not be granted an SEP if they fail to report the QLE within the corresponding SEP window.

Note: While losing MA/CHIP is an SEP, simply applying for – and being denied – MA/CHIP outside of OEP is not considered a QLE and therefore does not trigger an SEP.



4.4 Verifying Eligibility for an SEP

Verifying Eligibility for an SEP

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When a customer applies for coverage through Pennie via an SEP, they will likely be asked to provide supporting documentation to confirm the QLE that makes them eligible. The types of documents the customer must submit to prove eligibility depend on the SEP and QLE.

Should a customer's coverage be terminated during the year, **the customer will require a new QLE and SEP to re-enroll.** Otherwise, they will need to wait to enroll during the annual Open Enrollment Period (OEP).

Note: The "Loss of MEC" SEP is strictly for customers who have lost minimum coverage, **not for customers who have had their coverage terminated due to lack of action or change in eligibility.**



4.5 Examples of QLEs

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Examples of QLEs

Examples of Qualifying Life Events	
Loss of health coverage - Losing existing health coverage, including job-based coverage, individual, and student plans - Losing eligibility for Medicaid or CHIP - Turning 26 and losing coverage through a parent's plan	Changes in household - Getting married or divorced - Having a baby or adopting a child - Death in the family
Changes in residence - Moving to a different service area within Pennsylvania - A permanent move from another state into Pennsylvania - A student moving to or from the place they attend school - A seasonal worker moving to or from the place they both live and work - Moving to or from a shelter or other transitional housing	Other qualifying events - Changes in your income that affect the coverage you qualify for - Gaining membership in a federally recognized tribe or status as an Alaska Native Claims Settlement Act (ANCSA) Corporation shareholder - Gaining a qualifying immigration status - Leaving incarceration (jail or prison) - AmeriCorps members starting or ending their service

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4.6 SEP & QLE Resources

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SEP & QLE Resources

Each year, Pennie updates our SEP Quick Reference Guide to include the most up-to-date information pertaining to QLEs and SEPs. The guide lists each valid QLE, along with:

- Who is eligible for the respective SEP
- When the coverage would begin
- If the QLE is able to be reported in advance
- If verifying documentation is required
- Additional helpful notes

The guide can be found at [Resources | Pennie.com](https://www.pennie.com/resources).

Qualifying Life Event Quick Reference Chart

❗ 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 unless otherwise specified.
⚠️ 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. Check your "SEP Types Customer Service at 1-800-800-1113."

Event	Availability			Required Documentation	Processing		Additional Notes
	New Enrollment	Current Enrollment	60-Day Event		Coverage (Effective Date)	Coverage (Waiting Period)	
Change in Market Status							
Marriage	✓	✓	✗	Date, Approval of Coverage before Date Occurrence Provide proof of length coverage for at least one spouse from the last 60 days.	First of month (after plan choice)	Enrollers must show at least one spouse had prior coverage before enrollment.	
Divorce	✗	✓	✗	Date, Approval of Coverage before Date Occurrence.	First of month (after plan choice)	The event date is the date the enrollment change has been finalized by the court (not that divorce decree is signed by court).	
Adding a Dependent							
Birth	✓	✓	✗	Date, Approval of Coverage before Date Occurrence.	Event Date		
Adoption	✓	✓	✗	Date, Approval of Coverage before Date Occurrence.	Event Date		
Gain a court-appointed dependent	✓	✓	✗	Date, Approval of Coverage before Date Occurrence.	Event Date		

Documents to Verify Qualifying Life Events 4 of 29

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4.7 Employer Coverage & COBRA Eligibility

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Additional information on COBRA and Pennie can be found at [COBRA | Pennie.com](https://www.pennie.com/cobra).

Pennie also has a flier specific to COBRA which can be found at [Marketing Materials | Pennie.com](https://www.pennie.com/marketing-materials).



When in Doubt, Reach Out!
Not sure if you qualify to switch through Pennie? Don't hesitate to reach out with questions. You can even reach local support and work with a Pennie professional to help find the best plan for you.

Cost Savings
Quality Coverage
Local Support

4/5 of Pennie customers qualify for financial savings through Pennie.

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5. Autorenewal

5.1 Autorenewal

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5.2 Renewals

Renewals

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As mentioned, Pennie's OEP begins on November 1st and ends January 15th. Plans for the upcoming plan year are available on the site beginning November 1st. For customers to get the most comprehensive coverage for their situation – and the most financial savings possible each year – **it is imperative that all facets of their account be reviewed and updated prior to the Open Enrollment Period.**

Consider the following questions to help determine what actions may be needed:

- What services do you use most frequently?
- What doctors and facilities do you use most often?
- Was the plan sufficient for your needs? Why or why not?
- Have there been any changes to your household? Income?
- Did you move?
- What questions do you have about using your current plan?

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5.3 Renewals: Autorenewal Process

Renewals: Autorenewal Process

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Pennie is mandated by federal law to perform an **autorenewal process** which **automatically re-enrolls eligible customers into coverage for the 1st of the upcoming plan year.**

A snapshot of all enrollments in the system is taken in September – this is what is used to run the eligibility checks for the autorenewal process. **Changes made to customer accounts after that time will not carry over to the new policy, and a separate change will need to be submitted.**

At least one "catch-up" process is run before the end of OEP. However, this is primarily for new customers who enrolled after the enrollment snapshot occurred, **not to carry over changes made to the prior year policy.**

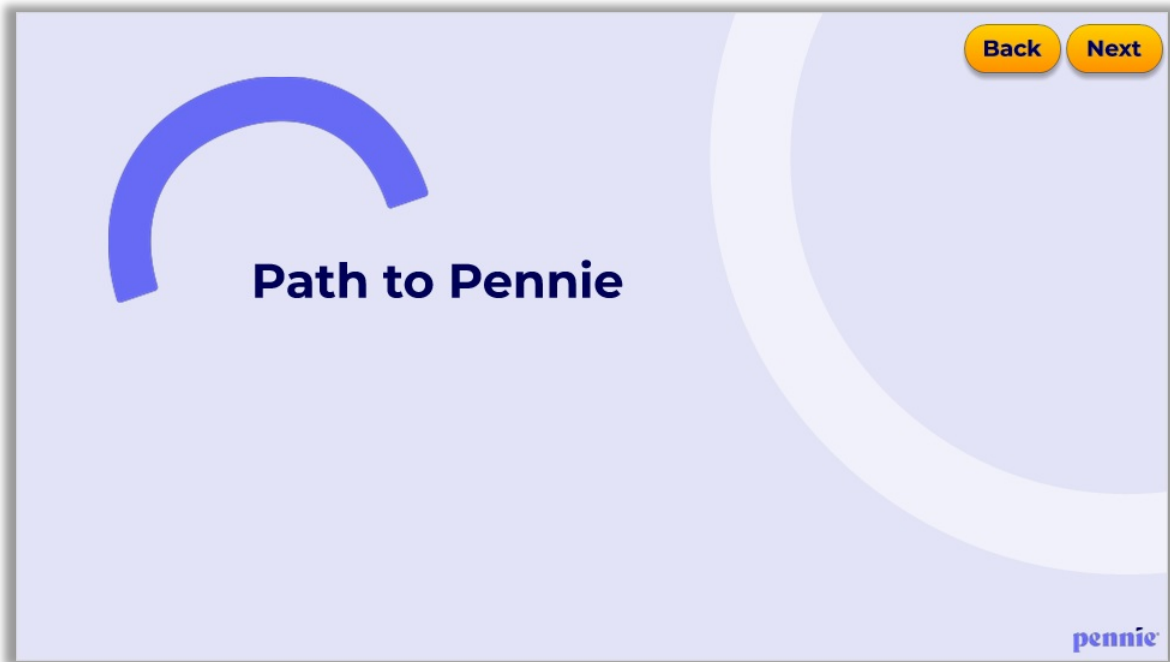
In the event one of the following situations applies, a customer's coverage **would not be autorenewed:**

- The eligibility determination performed prior to autorenewal concludes they are eligible for MA or CHIP
- They aged-out of dependent coverage under a parent's plan

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6. Path to Pennie

6.1 Path to Pennie



6.2 Path to Pennie

Path to Pennie

The **Path to Pennie** program easily connects uninsured tax filers with medical and dental insurance offered through Pennie.

Uninsured tax filers must complete and submit **Tax Form REV-1882** along with their state income tax return. Upon receipt of this tax form, the Pennsylvania Department of Revenue forwards the tax filer request to Pennie.

Pennie sends the tax filer a postal mail notice with information on how to apply for, shop, and enroll in health coverage.

This image shows a preview of the Tax Form REV-1882, titled "HEALTH INSURANCE COVERAGE INFORMATION REQUEST". The form includes sections for personal information, household members, and a declaration of eligibility. To the right of the form is a document titled "Instructions for REV-1882" which provides detailed guidance on how to complete the form, including line-by-line instructions and a checklist of required information.

6.3 Path to Pennie

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Take the Path to Pennie at Tax time!

- 1 Start here**
Fill out form **REV-1882**
Health Insurance Coverage
Information Request within
your PA state tax return.
- 2** PA Department of Revenue
will securely send your info
to Pennie to create an account
on your behalf.
- 3** Pennie will send a notice to tax filers
who completed this form with more
info on how to shop, apply and enroll
in coverage.

Learn more at
pennie.com/learn/pathtopennie

Path to pennie

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7. Final Slide

7.1 Final Slide

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