

Questions and Answers: Eligibility and Enrollment Issues

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Q1: How do I help consumers find out if they qualify for subsidies that will help them afford Marketplace coverage?

A1: Consumers can find out if they qualify for subsidies by going through the Marketplace application process which requires that the application filer provide information about their household members and income. The Marketplace application includes detailed instructions and makes calculations based on the information consumers provide to determine if they are eligible for subsidies that will help them afford coverage through the Marketplace. To learn more about how to report household members and estimating income, see ["What income and household information do I provide when I apply for Marketplace coverage?"](#)

Q2: What is the correct address for consumers to submit paper applications to the Marketplace?

A2: Paper applications should be sent to:

Health Insurance Marketplace
Dept. of Health and Human Services
465 Industrial Blvd.
London, KY 40750-0001.

This address is on the bottom of the paper application form.

Q3: Are there any resources that will help me better understand income guidelines related to eligibility to obtain coverage through the Marketplace?

A3: HealthCare.gov has information about the [Federal Poverty Level \(FPL\)](#), which is a measure of income level used to determine eligibility for certain programs like Medicaid and for tax credits that may be available to consumers who wish to obtain coverage through the Marketplace.

Q4: How can I best serve a consumer with a pre-existing condition?

A4: You should explain to consumers that an applicant will not be denied coverage or pay more for premiums solely because of a pre-existing condition and plans will not place annual or lifetime limits on essential health benefits. You may then help the consumer explore the plan options in the Marketplace that best meet his or her health needs.

Q5: Can minors sign up for coverage on their own or must a parent/guardian act on their behalf?

A5: The application filer must be 18 years or older, unless he or she is an emancipated minor.

Q6: If an applicant is exempted from paying a penalty for failure to maintain minimum essential coverage as required by the Affordable Care Act, does that mean that he or she is ineligible for coverage through the Marketplace?

A6: No. The Marketplace is intended as an “open door” for consumers to access both public and private programs. For example, a consumer may qualify for a hardship exemption from the penalty for not having minimum essential coverage, but still may be found eligible for health insurance coverage or for Medicaid. And even if a consumer is exempt from the penalty, they may still choose to buy coverage through the Marketplace.

Privacy and Security

Q7: CMS provided a sample authorization form which CACs may provide to consumers who wish to allow CACs to assist the consumer with Marketplace enrollment. Do I need to provide the consumer with a copy of this form?

A7: Although CMS provided a sample authorization form for use by CACs, it is up to the CAC Designated Organization to establish procedures that ensure applicants provide authorization to CACs before the applicant discloses personally identifiable information to them. While we encourage CACs to provide a copy of a consumer’s authorization form to the consumer as a best practice, there is no federal requirement that a copy of a consumer’s written authorization be provided to the consumer.



Medicaid

Q8: Can an individual be eligible for Medicaid if they already have private insurance—for example, through an employer?

A8: Yes. An individual can be eligible for Medicaid even if they already have insurance through an employer, as long as the individual meets the applicable Medicaid requirements.

Miscellaneous

Q9: May a CAC Designated Organization supply applicants with an envelope and stamp to mail the paper application?

A9: Yes. A CAC Designated Organization is not required to provide an envelope and stamp to applicants but may do so, provided that it is an allowable use of the organization's funds.

