



Helping Consumers Report a Life Event or Change in Circumstance



*Center for Consumer
Information and Insurance
Oversight*

April 2, 2015

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Agenda

- I. Overview of Why to Report a Life Change
- II. How to Report a Life Change in the Application
- III. Next Steps and Assister Tips



I. Overview of Why to Report a Life Change

Why Report a Life Change?

- Once you have Marketplace coverage, you **must** report certain life changes.
- This information may change the coverage or savings consumers are eligible for.
- Life changes can make a difference in the kind of coverage for which consumers qualify. If this is the case, consumers may be eligible for a Special Enrollment Period (SEP) to change plans outside of Open Enrollment.
- Changes can also make a difference in the amount of advance payments of the premium tax credit or cost-sharing reductions a consumer is eligible for and may impact the amount of premiums they pay.
- After consumers report changes to the Marketplace, they'll receive a notice explaining what they need to do next, like enroll in new coverage, or adjust their tax credit amounts.

Reportable Changes to the Marketplace

- Type of Life Change/Change in Circumstance
- New person on the application (e.g., birth, marriage, adoption)
- Relocation to a new address
- Loss of access to other coverage (e.g., employer coverage)
- Release from incarceration
- Change in citizenship or immigration status
- Removal of a person from the application (e.g., death, divorce)
- Become incarcerated
- New access to other coverage (e.g., employer coverage, Medicare, Medicaid)
- Pregnancy
- Change in tax filing status/tax household composition
- Change in status as an American Indian/Alaska Native or tribal status
- Change in disability status
- Correction to name, date of birth (DOB), or Social Security number (SSN)
- Increase or decrease in income
- Communication preferences:
 - Email address
 - Phone number
 - Language preferences
 - Add or remove phone text alert
 - Mailing of paper notices

When and How to Report a Life Change

- When changes occur, consumers should report them to the Marketplace as soon as possible.
- If these changes qualify consumers for a Special Enrollment Period to change plans, in most cases they have **60 days** from the life event to enroll in new coverage, or choose their same plan.
- Consumers can report these changes 2 ways:
 - Online: Consumers visit **HealthCare.gov** and log in to their Marketplace account (or create an account if they don't have one). Select their submitted application, then select "Report a life change" from the menu on the left.
 - By phone: Contact the Marketplace Call Center at 1-800-318-2596. TTY users should call 1-855-889-4325.

The Importance of Reporting a Change in Income

- If consumers' income changes or they gain or lose a member of their household, consumers must come back to the Marketplace and report a life change and provide updated information. All consumers are required to update their Marketplace account **within 30 days** of changes regarding eligibility standards.
- Consumers who have an increase or decrease in income or gain or lose a household member could qualify for more or less savings than they're getting now. This could change the amount they pay in monthly premiums. Consumers could also qualify for Medicaid or CHIP coverage.
- **If consumers don't report these changes, they could wind up having to pay back the difference when they file their federal tax return for the coverage year.**

After a Consumer Reports a Life Change

- After consumers report changes to the Marketplace, they'll get a new eligibility notice that will explain:
 - Whether they qualify for a Special Enrollment Period that allows them to change plans.
 - Whether they're eligible for lower costs based on their new income, household size, or other changed information.

Special Enrollment Period Eligibility

- **If a consumer is eligible for a Special Enrollment Period:**
 - The consumer will be able to shop for a different plan in the Marketplace. Consumers usually have 60 days from the date of the qualifying event to enroll in a new plan, or the consumer can remain in the same plan.
- Consumers that have a Special Enrollment Period, can change plans in two ways:
 - **Online:** Visit **HealthCare.gov** and log in to their Marketplace account
 - **By phone:** Contact the Marketplace Call Center at 1-800-318-2596. TTY users should call 1-855-889-4325.
- **Consumers that are not eligible for a Special Enrollment Period, but the amount of advance premium tax credit they qualify for has changed:**
 - Consumers can't change plans. But if their advance premium tax credit amount changes, they can choose to adjust the amount of tax credit to apply to their monthly premiums after they report their life change.



II. How to Report a Life Change

Step 1: Consumers Report Changes From Within Their Accounts

- Consumers should visit HealthCare.gov and log in to their Marketplace account (or create an account if they don't have one). Select, "my applications & coverage" from the menu on the left

The screenshot displays the user interface for a HealthCare.gov account. On the left, a navigation menu includes 'WELCOME', 'MY APPLICATIONS & COVERAGE', 'MY PROFILE', and 'MESSAGES (2)'. The main content area shows a message notification, a personalized greeting 'Andre, what would you like to do?', and a section for 'Get coverage for:' with dropdown menus for 'Select Year' and 'Select State', and an 'APPLY OR RENEW' button. Below this is a link for users not seeing their state. The 'Your existing applications:' section lists a '2015 Pennsylvania application for Individual & Family Coverage' with a status of 'Submitted' and ID# 105991722, and a 'REMOVE' button. A large red arrow points to the application entry.

Step 2: Select Report a Life Change to Report Changes

○ My plans & programs

○ Eligibility & appeals

○ Applications details

○ **Report a life change**

○ Communication preferences

○ Authorized users

○ Exemptions

○ Tax forms

Report a life change

Do you want to report a change in circumstances that may qualify you or your dependents for a Special Enrollment Period?

What kinds of changes should be reported?

Changes in your household or income can affect the programs you qualify for to lower costs on health coverage. As soon as you have a change, come back here to report it.

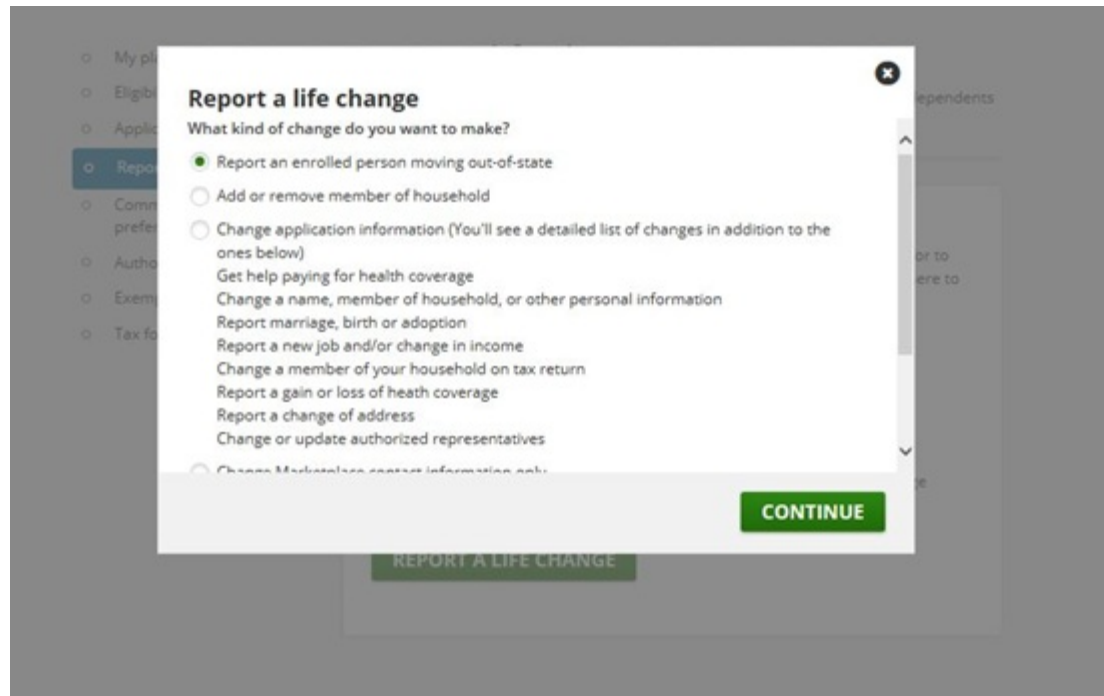
Here are some examples of the changes you should report:

- Change in citizenship or immigration status
- Add or remove members of household
- Change status as American Indian/Alaska Native, or member of federally recognized tribe
- Marriage, birth or adoption
- Gain or loss of health coverage

REPORT A LIFE CHANGE

Step 3: Consumers See the Changes They Can Report

- Once Consumers have navigated to the “Report Change” functionality on their My Account, they will select the type of change they want to report.
- Please note: Consumers who only want to adjust their APTC amount should select “Change application information” and should continue to click through the application without making any changes unless necessary, until the consumer gets to the eligibility determination screen.



The screenshot shows a web interface for reporting a life change. The main heading is "Report a life change". Below it, the question "What kind of change do you want to make?" is followed by a list of radio button options. The first option, "Report an enrolled person moving out-of-state", is selected. Other options include "Add or remove member of household", "Change application information (You'll see a detailed list of changes in addition to the ones below)", and "Change Marketplace contact information only". The "Change application information" option is expanded to show a list of sub-options: "Get help paying for health coverage", "Change a name, member of household, or other personal information", "Report marriage, birth or adoption", "Report a new job and/or change in income", "Change a member of your household on tax return", "Report a gain or loss of health coverage", "Report a change of address", and "Change or update authorized representatives". A green "CONTINUE" button is located at the bottom right of the form. The background shows a sidebar menu with "Report" selected and a "REPORT A LIFE CHANGE" button at the bottom.

Step 4: Detailed List of Reportable Life Changes

Report a life change

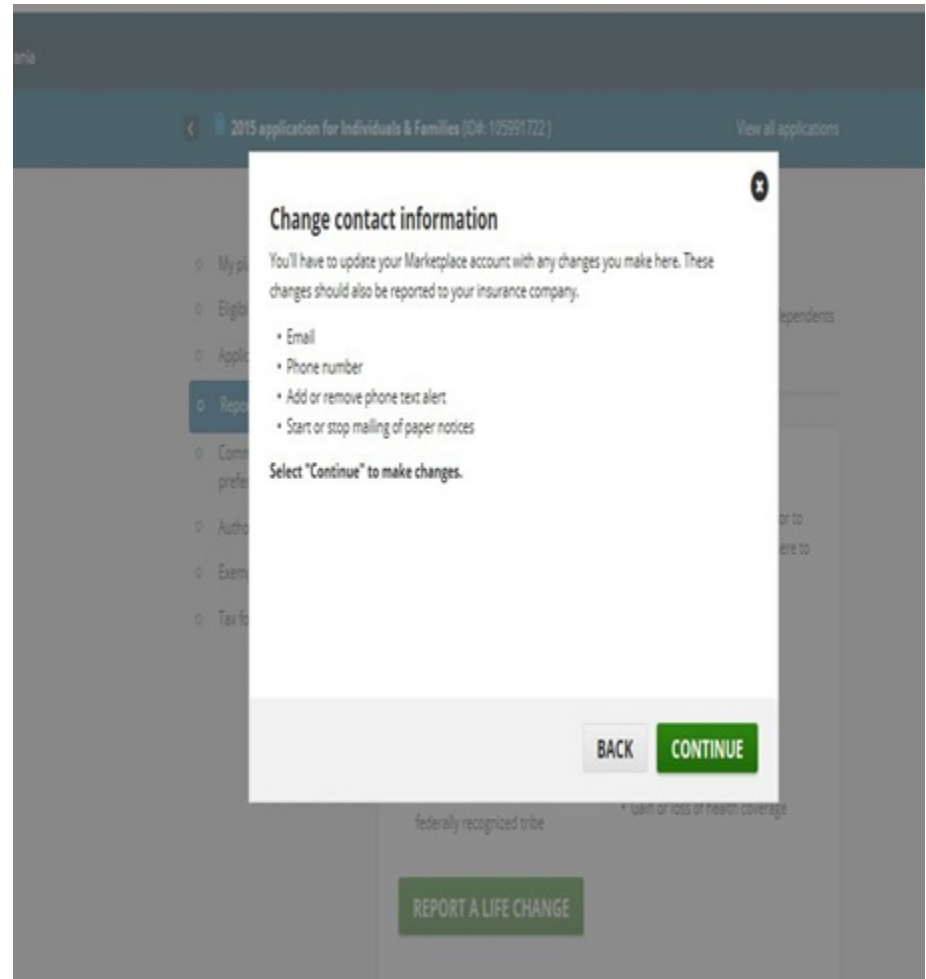
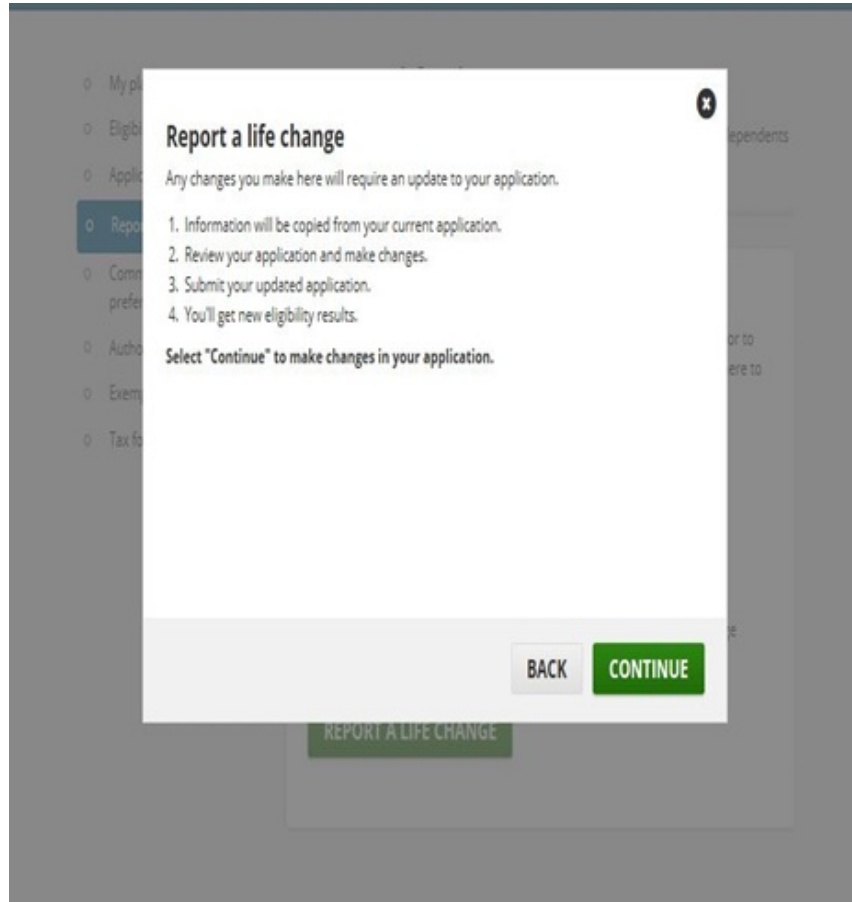
If you want help paying for health coverage or you already qualify for lower costs on coverage, it's important to keep the information below updated. As soon as you have a change, come back here to report it.

Do you want to make any of the life changes below?

- Job changes
- Increase or decrease in income
- Changes to employer coverage (premiums changed or employer is no longer offering coverage)
- Add or remove member of household
- Change household member's name or household contact
- Update marital status or other family relationships

REPORT A LIFE CHANGE

Step 5: Additional Pop-ups on Reporting a Life Change



Step 6: Consumers Answer Questions that Determine Their Eligibility for an SEP, Ex. 1

- Consumers will then get access to their applications and can make edits.
- For example, in the “Additional Information” section, consumers can make changes that may make them eligible for a special enrollment period. In this screenshot, Andre is reporting that he and Bridget recently got married on March 15, 2015.

The screenshot displays a web application interface for an application with ID 105991722. On the left, a navigation menu includes sections: GET STARTED, FAMILY & HOUSEHOLD, INCOME, ADDITIONAL INFORMATION (with a plus icon), and REVIEW & SIGN. Under ADDITIONAL INFORMATION, there are checkboxes for Andre Hill and Bridget Hill, and a blue button labeled '3 Other questions'. An 'EDIT' button is located in the top right corner. The main content area features a question: 'Did any of these people recently get married?' with the word 'optional' in italics. Below this, there are two checked checkboxes for Andre Hill and Bridget Hill. For each, there is a date input field containing '03/15/2015' and a calendar icon, with the label 'When did [Name] get married?' and the format 'MM/DD/YYYY' below it. At the bottom of the form, there is an unchecked checkbox labeled 'None of these people'. A green 'SAVE & CONTINUE' button is positioned at the bottom right of the form area.

Step 6, cont'd: Consumers Answer Questions that Determine Their Eligibility for an SEP, Ex. 2

- Consumers can also report that they or someone on their application will be losing coverage within the next 60 days.

The screenshot displays a web application interface for applying for a SEP. The top navigation bar includes 'Apply', 'Get Results', and 'Get Coverage'. The main content area is divided into a left sidebar and a main form area. The sidebar shows the application ID '96765971' and a progress list with four steps: 'GET STARTED' (completed), 'FAMILY & HOUSEHOLD' (completed), 'ADDITIONAL INFORMATION' (active), and 'REVIEW & SIGN'. Under 'ADDITIONAL INFORMATION', there is a sub-step '1 Other questions'. The main form area contains two questions. The first question is 'Did any of these people recently lose health coverage?' with radio button options for 'Jared Weaver', 'Kiddo A', and 'None of these people'. The second question is 'Are any of these people losing health coverage in the next 60 days?' with a checked radio button for 'Jared Weaver'. Below this, there is a date input field for 'When will Jared Weaver's health coverage end?' with the value '05/31/2014' and a calendar icon. At the bottom right of the form is a green 'SAVE & CONTINUE' button.

Application ID: 96765971

GET STARTED

FAMILY & HOUSEHOLD

ADDITIONAL INFORMATION

1 Other questions

REVIEW & SIGN

Did any of these people recently lose health coverage? *optional*

Jared Weaver

Kiddo A

None of these people

EDIT

Are any of these people losing health coverage in the next 60 days? *optional*

[Learn more about losing health coverage](#)

Jared Weaver

When will Jared Weaver's health coverage end?

05/31/2014

MM/DD/YYYY

Kiddo A

None of these people

SAVE & CONTINUE

Changes to Communication Preferences

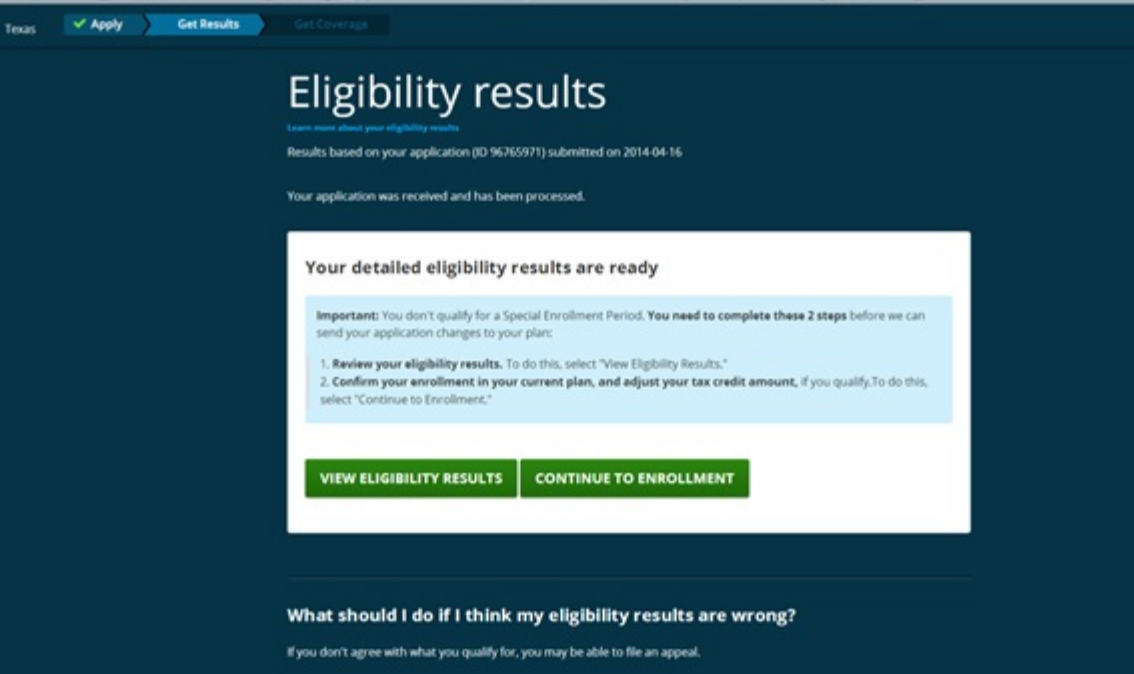
- Some changes don't affect your coverage or savings, but you still need to report them to the Marketplace (i.e. home address, email address, phone number)
- Note: Previously you had to report these changes to your insurance company and the Marketplace, but now you only have to report them the Marketplace, which will share the information with the insurance company.

The screenshot shows a web interface for a 2015 application for Individuals & Families (ID#: 105991722). The page is titled 'Communication preferences' and includes a sidebar with navigation options: My plans & programs, Eligibility & appeals, Applications details, Report a life change, Communication preferences (highlighted), Authorized users, Exemptions, and Tax forms. The main content area contains the following information:

Email address	bahtester1065@gmail.com	EDIT
Phone number	517-371-5887	EDIT
Second phone number		ADD
Notifications	<input checked="" type="checkbox"/> Email <input checked="" type="checkbox"/> Text messages to 517-371-5887	EDIT
Notices	<input checked="" type="checkbox"/> HealthCare.gov Message Center	EDIT

Step 7: Consumers Review Eligibility Results

- Once consumers complete their application (sign and re-submit), their eligibility results will be automatically generated. Consumers can view their Eligibility Results, and then can continue to enroll in a plan.



The screenshot displays the 'Eligibility results' page on the Texas HealthCare.gov website. At the top, there is a navigation bar with 'Texas' on the left and three steps: 'Apply' (with a green checkmark), 'Get Results' (highlighted in blue), and 'Get Coverage'. The main heading is 'Eligibility results' in white text on a dark blue background. Below the heading, there is a link 'Learn more about your eligibility results' and text stating 'Results based on your application (ID 96765971) submitted on 2014-04-16'. A message indicates 'Your application was received and has been processed.' A white box contains the heading 'Your detailed eligibility results are ready' and an 'Important' notice: 'You don't qualify for a Special Enrollment Period. You need to complete these 2 steps before we can send your application changes to your plan: 1. Review your eligibility results. To do this, select "View Eligibility Results." 2. Confirm your enrollment in your current plan, and adjust your tax credit amount, if you qualify. To do this, select "Continue to Enrollment."' Below this box are two green buttons: 'VIEW ELIGIBILITY RESULTS' and 'CONTINUE TO ENROLLMENT'. At the bottom, there is a section titled 'What should I do if I think my eligibility results are wrong?' with the text 'If you don't agree with what you qualify for, you may be able to file an appeal.'

Eligibility Results

Dear Andre:

Thank you for reporting a change in circumstance to the Marketplace.

What are the results of my application?

Review the table below with your eligibility results.

Family Member(s)	Results	Next Steps
Andre Hill	<ul style="list-style-type: none">Eligible for a special enrollment period	
Andre Hill	<ul style="list-style-type: none">Eligible to purchase health coverage through the Marketplace, but more information is neededEligible for a tax credit (\$65.00 each month, which is \$780.00 for the year), but more information is needed	<ul style="list-style-type: none">Send the Marketplace more information
Bridget Hill	<ul style="list-style-type: none">Eligible for a special enrollment period	
Bridget Hill	<ul style="list-style-type: none">Eligible to purchase health coverage through the Marketplace, but more information is neededEligible for a tax credit (\$65.00 each month, which is \$780.00 for the year), but more information is needed	<ul style="list-style-type: none">Send the Marketplace more information

If you have questions: Go to [HealthCare.gov/marketplace](https://www.healthcare.gov/marketplace). Or, call 1-800-318-2596. TTY users should call 1-855-889-4325. The call is free. You can also find out how to talk to someone in person, online or through the help line.

Consumers Ineligible for an SEP Continue to Enrollment

- Enrolled consumers who have updated their information can confirm their current coverage if they are not eligible for an SEP.
- Please note that consumers should ensure that they have selected a new plan or continued to confirm their current coverage after updating their information before logging out of their account. Consumers that log out after receiving their new eligibility results have not completed the enrollment process.

Enroll To-Do List
You're not enrolled yet.
You must complete each step in order to enroll. Work at your own pace. You can come back to complete these tasks later.

You're not eligible for a Special Enrollment Period (SEP), so you'll stay enrolled in your current plan. You need to complete the tasks below, so we can send updates to your plan.
Complete each unlocked task below. You may need to update your tax credit usage. Once you've finished, select "Review & Confirm."

If you received a notice for a hardship exemption that may qualify you for Catastrophic coverage, please report this exemption(s) before you continue. This allows you to shop for Catastrophic health plans for the people who qualify. [Report an exemption](#)

Task	Status
Choosing a Health Plan	
Set premium tax credit usage (Bridget and Andre)	SET
Answer questions about your household	LOCKED
Select a health insurance plan 1	LOCKED
Set up your dental plan preferences (optional)	LOCKED
Select a dental insurance plan 1 (optional)	LOCKED
Review and confirm your coverage	LOCKED

Adjusting the Amount of APTC

Do you want to use all of your \$65 premium tax credit each month?

YES

NO

Change the tax credit amount you want to use each month by sliding the arrow on the bar OR typing an amount in the monthly tax credit box. You can use up to \$65 toward monthly premium (for the year) credit on your federal income tax return

Monthly usage:

\$65

\$65

\$0/month

\$65/month

$\$65/\text{month} \times 12 \text{ months} = \780 towards monthly premiums
+ \$0 tax credit on your Federal tax return

\$780 total premium tax credit

USE THIS AMOUNT

- Reminder: Consumers who only want to adjust their APTC amount after they have submitted their application should continue to click through the application without making any changes unless necessary. Once the consumer gets to the eligibility determination screen, gets their eligibility determination and then selects the “Set premium tax credit usage” option on the “Enroll To-Do List” page, the consumer will get to the screen above where he or she can adjust the APTC amount.
- Also note that regular coverage effective dates apply. For example, if a consumer changes the APTC amount between January 1, 2015 and January 15, 2015, the new APTC will be effective on February 1, 2015. If a consumer changes the APTC amount between January 16, 2015 and January 30, 2015, the new APTC will be effective on March 1, 2015.

Consumers Eligible for an SEP Continue on to Plan Compare

- If consumers are eligible for a SEP, they can select from all QHPs available in their service area.


The screenshot displays a web interface for selecting a health plan. At the top, there are navigation tabs: 'Application', 'Eligibility Results', and 'Enroll'. Below these, a breadcrumb trail shows 'Select a health plan for Group 0' with a back arrow, followed by 'Eligible Plans', 'Saved Plans 0', and 'Compare plans 0'. A warning message states: 'If you confirm your plan today, your coverage start date will be 03/01/2014.' The main content area shows '6 health plans' with a 'Sort by...' dropdown. The first plan is 'Blue Cross and Blue Shield of Alabama Blue Saver Bronze'. It includes a table of costs and benefits:

Monthly premium	Deductible	Out-of-pocket maximum	Copayments / Coinsurance
\$487.91/mo.	\$6,350 group total	\$6,350	No Charge After Deductible Primary doctor No Charge After Deductible Specialist doctor \$20 Generic prescription

Additional details for the first plan include: Plan ID: 46944AL0460001, PPO, Bronze, National provider network, and a 'Dental: Child' benefit. There are buttons for 'Compare', 'Save', 'DETAILS', and 'ENROLL'. Below the first plan, there are links for 'Plan Brochure', 'Summary of Benefits', and 'Provider directory'. The second plan, 'Blue Cross and Blue Shield of Alabama Blue Value', is partially visible at the bottom of the screen.

Consumers Eligible for an SEP Confirm Plan Choice

Confirm your health plan selection

 If you confirm your plan today, your coverage start date will be 04/01/2015.

Bridget and Andre will be enrolled in the following health plan:

UPMC Advantage Bronze \$6,000/\$25 - Partner Network

Plan ID: 16322PA0050007

Monthly premium

\$287.43/mo.

If you want to enroll in this plan, select "Confirm." If you don't want to enroll in this plan, select "Cancel" and choose a new plan.

Consumers Ineligible for an SEP

Confirm Current Plan Choice

Results > **Enroll**

< Review & Confirm

Confirm your plan choices

You must confirm your plan choices below in order to enroll.

~~Plan ID: 99002710460000~~

Health plan for
Kiddo A

Health plan monthly premium **\$145.04**

Estimated effective date
05/01/2014

Total \$145.04
Monthly premium total

CONFIRM

Review and Confirm Plan

Enroll To-Do List

You're not enrolled yet.

You must complete each step in order to enroll. Work at your own pace. You can come back to complete these tasks later.

You're eligible for a Special Enrollment Period (SEP). You need to complete the tasks below before your SEP ends to get coverage. You can find your SEP dates in your "Eligibility Results."

Complete each unlocked task below. Once you've finished, select "Review & Confirm."

If you received a notice for a hardship exemption that may qualify you for Catastrophic coverage, please report this exemption(s) before you continue. This allows you to shop for Catastrophic health plans for the people who qualify. [Report an exemption](#)

Choosing a Health Plan

✓ Set premium tax credit usage (Bridget and Andre)	? Explain this task	CHANGE
✓ Answer questions about your household.		CHANGE
✓ Select a health insurance plan 1 (Bridget and Andre)		CHANGE
Set up your dental plan preferences (optional)	? Explain this task	SET
Review and confirm your coverage	? Explain this task	SET

Confirm Tax Credits and Plan

You've chosen how much of your premium tax credit to use each month.

As you compare plans, the amount of your tax credit will be applied to the monthly premium of each plan.

You may get up to **\$0** as a credit on your federal income tax return at the end of the year. This amount is based on a 12-month coverage year starting in January. But the amount you may get depends on when you enroll. For example, if you enroll in September, the amount of tax credit you may get will be based on 4 months (September-December), instead of 12 months.

After you file your federal tax return, you'll find out if you might get money back based on the actual amount of tax credit you qualified for, and how much of the credit you used. If you didn't use all of the tax credit you qualified for, you may get money back. If you used more tax credit than you qualified for, you may owe money.

If you have income or family size changes, report them to the Marketplace as soon as possible, because life changes can affect your tax credit eligibility status. **To report changes, come back to HealthCare.gov and log in to your Marketplace account.**

CONFIRM YOUR TAX CREDIT AMOUNT

Confirm your plan choices

You must confirm your plan choices below in order to enroll.

To change the tax credit amount you want to use each month, return to the [To-Do List](#) and select "change" next to the set premium tax credit task.

UPMC Advantage Bronze \$6,000/\$25 - Partner Network

Plan ID: 16322PA0050007

Health plan for
Bridget Hill
Andre Hill

Estimated effective date
04/01/2015

Health plan monthly premium	\$352.43
Premium tax credit	\$65.00

Health plan monthly premium	\$287.43
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CHANGE SELECTION

[Is someone helping you select a plan and enroll?](#)

Total \$287.43

Monthly premium total (with tax credit)

- I understand that I'm not eligible to get a premium tax credit if I'm found eligible for other minimum essential coverage, like Medicaid. I also understand that if I'm eligible for other minimum essential coverage, I must contact the Marketplace to end my Marketplace coverage and premium tax credit. If I don't, the person who files taxes in my household may need to pay back my premium tax credit.

⚠ To continue, check the box to confirm that you've read the statement above.

CONFIRM

Paying for Your Health Plan

- Once consumers have confirmed their advance payment of the premium tax credit amounts, they will pay for the plan. When a consumer clicks “Pay for Health Plan”, they will be taken to the health insurance company’s website.

The screenshot displays a dark blue interface with a white content area. At the top, a green banner reads "Enroll to-do list" and "Congratulations! You've successfully completed all steps of your application. See below for next steps or return to [My Account](#)." Below this, the section "Your Plans" is visible, listing "UPMC Advantage Bronze \$6,000/\$25 - Partner Network Health Insurance plan for Andre, Bridget". A red warning box contains instructions: "To activate your new coverage, you must pay your first month's premium by your plan's due date. Your plan will contact you in the next few days with details on how to pay, or visit your health plan online to make your payment now if your plan accepts online payment. Your payment must be received and processed by the effective date to be fully enrolled. Contact the plan's customer service if you have any payment questions or issues. Don't send payment to the Health Insurance Marketplace." Below the warning, the "Submit Payment to" section shows "Amount Due: \$287.43" and "Customer Service:". It also states "Your plan will confirm your final premium amount with you." and "Estimated Effective Date: 04/01/2015". A prominent green button labeled "PAY FOR HEALTH PLAN" is at the bottom.

Consumers Can See Their Existing and Past Enrollments Under My Plans and Programs

The screenshot displays the lthCare.gov website interface. At the top left is the logo "lthCare.gov". Navigation tabs include "Learn" and "Get Insurance". The user is identified as "SUSAN" with a profile icon, a "Logout" link, and a "Español" language option. The state "Alabama" is shown in the top left, and a "HELP" icon is in the top right. A dark blue banner contains a document icon, the text "2014 application for Individuals & Families (ID#: 95870455)", and a "View all applications" link. A left sidebar lists navigation options: "My plans & programs", "Eligibility & appeals", "Applications details", "Report a life change", "Communication preferences", and "Authorized users". The main content area is titled "MY COVERAGE" and features a "My plans & programs" section with two entries: "Blue Cross and Blue Shield of Alabama Blue Saver Bronze SUSAN" with a status of "Initial enrollment", and "Blue Cross and Blue Shield of Alabama Blue Saver Bronze SUSAN" with a status of "Terminated". Below this is a blue button labeled "PAY YOUR FIRST PREMIUM". A "Need to remove your application?" section provides instructions and a link: "Learn more before removing this application." A "Live Chat" button is located in the bottom right corner.

lthCare.gov

Learn Get Insurance

SUSAN | Logout Español

Alabama

2014 application for Individuals & Families (ID#: 95870455) View all applications

- My plans & programs
- Eligibility & appeals
- Applications details
- Report a life change
- Communication preferences
- Authorized users

MY COVERAGE

My plans & programs

Blue Cross and Blue Shield of Alabama Blue Saver Bronze
SUSAN
Status: Initial enrollment

Blue Cross and Blue Shield of Alabama Blue Saver Bronze
SUSAN
Status: Terminated

PAY YOUR FIRST PREMIUM

Need to remove your application?
You may need to remove this application if there were errors or issues that stopped you from editing, completing, or submitting it. Then you can start over with a new, blank application. [Learn more before removing this application.](#)

Live Chat



III. Next Steps and Resources

Reminder: Coverage Effective Dates

SEP Event	QHP Effective Date
Loss of coverage	If loss of coverage is in the past, 1 st of the month following QHP selection. If loss is in the future, 1 st of the month following the loss of coverage
Marriage	1 st of the next month following plan selection
Denial of Medicaid or CHIP	1 st of the next month following plan selection
Birth, Adoption, Foster Care	Date of birth, adoption, placement for adoption or placement in foster care
Gaining lawfully present status	Within 1 st 15 days of the month: 1 st of the month On or after 16 th of the month: 1 st of the month after next
Newly eligible or ineligible for APTC, change in cost share reductions	Within 1 st 15 days of the month: 1 st of the month On or after 16 th of the month: 1 st of the month after next
Moving & Incarceration Release	Within 1 st 15 days of the month: 1 st of the month On or after 16 th of the month: 1 st of the month after next
Native American status	Within 1 st 15 days of the month: 1 st of the month On or after 16 th of the month: 1 st of the month after next

Assister Tip: Reporting Income Changes and Taxes

- Tip: If at the end of the year you've taken more advance payments of the premium tax credit than you're eligible for based on your final 2015 income, you may have to pay money back when you file your federal income tax return. That's why it's important to report income changes as soon as they happen, and to adjust the amount of tax credit you take in advance.

Assister Tip: Income Data Matching Issues

- Consumers whose expected annual household income changes during the year **should report this change to the Marketplace** by returning to their application and entering a “change in circumstance.” This may help consumers avoid receiving an incorrect amount of financial assistance or having an income data matching issue.

For More Information

- Reporting a Life Change: <https://www.healthcare.gov/how-do-i-report-life-changes-to-the-marketplace/>
 - Fact Sheet: <https://marketplace.cms.gov/outreach-and-education/report-life-changes.pdf>
 - Post Card: <https://marketplace.cms.gov/outreach-and-education/report-changes-postcard.pdf>
 - Helping New Parents and their Children Enroll: <https://marketplace.cms.gov/technical-assistance-resources/helping-new-parents-enroll.pdf>
 - Tips for Assisting Young Adults: <https://marketplace.cms.gov/technical-assistance-resources/assisting-young-adults.pdf>
 - Tips for Assisting Consumers who are Losing Employer-Sponsored Coverage: <https://marketplace.cms.gov/technical-assistance-resources/assisting-consumers-losing-coverage.pdf>
- Qualifying for an SEP: <https://www.healthcare.gov/coverage-outside-open-enrollment/special-enrollment-period/>
- Tax Information: <https://www.healthcare.gov/taxes/how-coverage-affects-taxes/>
- Terminating Coverage: https://marketplace.cms.gov/technical-assistance-resources/12-12-14-select-different-cancel-terminate-plan-presentation-final-12-12-14v3_for508.pdf

Disclaimer

Please note that the information included in this presentation is solely illustrative. Several slides contain screenshots with names and/or specific issuers/plans. The purpose of these screenshots are to provide examples. Names presented are made up and issuer/plan names displayed were selected at random. These examples do not include personally identifiable information and are not an endorsement of specific issuers/plans.