

Transitions and Terminations

Post-Application Process: Part 1 of 2



Introduction

People may transition between different types of coverage or need to terminate their coverage due to life circumstances.

Generally, when Marketplace enrollees become eligible for other minimum essential coverage (MEC), they will terminate their Marketplace coverage.

Note: BeWell generally uses the term “cancelation” for terminating coverage before it is effectuated/begins, and “termination” for canceling coverage once it has already begun. Consumers can also terminate their coverage in their member portal.

Main Topics

- Insurance Coverage Transitions: Medicaid to Marketplace
- Insurance Coverage Transitions: Marketplace to Medicaid
- Transitioning Marketplace to employer-sponsored insurance (ESI)
- Medicare transitions
- Terminating Marketplace coverage

Insurance Coverage Transitions Medicaid to Marketplace



- There are several points of note consumers should be aware of when transitioning from Medicaid to Marketplace coverage through BeWell.
 - Insurance coverage start dates
 - Consumers who report their upcoming coverage end date and select a Marketplace plan through BeWell before their coverage ends will have their new coverage begin on the first day of the month after enrollment. This date may be as soon as the first of the month after their coverage ends.
 - This process helps to prevent a gap in coverage.
 - Maintaining continuity
 - Some health insurance plans have specific programs in place to help people who are in the course of treatment to maintain continuity of care and transition to new providers.

Insurance Coverage Transitions: Marketplace to Medicaid



- Consumers can terminate their Marketplace coverage once they are enrolled in Medicaid. They can do this:
 - For all household members, through the “My Enrollments” screen in their online accounts.
 - With the help of their authorized assister.
 - By calling the Customer Engagement Center (CEC).

Insurance Coverage Transitions: Marketplace to Medicaid (Continued)



- Consumers should terminate their Marketplace coverage in the month they are notified Medicaid coverage has begun or in the month before it begins.
- Consumers can terminate their coverage through their online account.
- Consumers can also contact BeWell to request a termination. The request must be made through a phone call (not an email or chat) since BeWell must authenticate the person requesting termination of coverage.
- Consumers who do not terminate their Marketplace coverage may be billed the full premium amount.

Transitioning Marketplace to ESI



- Marketplace enrollees who become eligible for other minimum essential coverage (MEC) should terminate their Marketplace coverage.
- Enrollees receiving advance payments of the premium tax credit (APTC) who are newly eligible for ESI that meets minimum value (MV) and affordability standards are no longer eligible for APTC and should report this change to BeWell.
- Consumers can continue to receive APTC during an employer waiting period, up to 90 days.
- Consumers who are newly eligible for affordable ESI but want to stay enrolled in Marketplace coverage will have to pay full price for the Marketplace plan.

Transitioning Marketplace to ESI (Continued)



Consumers making the transition to ESI should consult their Human Resources Department or the assister responsible for their new coverage to understand the timeframes, deadlines, and new coverage considerations.



Medicare Transitions (1 of 4)



- Some consumers will be automatically enrolled in Medicare.
 - Consumers receiving Social Security retirement or disability benefits are automatically enrolled in Medicare Part A and B and will receive their Medicare card in the mail at the address the Social Security Administration (SSA) has on file.
 - Consumers can also see their benefits in their online account at the [Social Security Administration](#).

Medicare Transitions (2 of 4)



Before Medicare coverage begins, enrollees should report to BeWell their enrollment in and/or eligibility for premium-free Part A Medicare, the policy number or member ID, and the coverage start date.

Enrolled in Medicare. Or, qualifies for a Medicare Part A plan with no monthly premium.

What is the policy number or member ID? *

Test

Coverage Start Date (MM/DD/YYYY): * Coverage End Date (MM/DD/YYYY):

09/01/2023

Medicare Transitions (3 of 4)

Impact of Medicare on APTC Eligibility

If the consumer is enrolled in a Marketplace plan and becomes:	Is the consumer eligible to continue receiving tax credits and CSR?
Entitled to Premium-free Part A	No. Any tax credits the consumer is receiving in the Marketplace will be discontinued once Part A coverage begins.
Eligible to buy Premium Part A and Part B	Yes, if the consumer enrolls in Part B, because Part B does not constitute MEC. No, if the consumer is enrolling in Premium Part A.

Medicare Transitions (4 of 4)



- Medicare eligibility and enrollment impacts APTC eligibility. Consumers who fail to report eligibility changes may face reconciliation at tax time. To avoid duplicate coverage, consumers should request termination of their Marketplace plan prior to the month they are eligible to receive Medicare.
- The decision not to enroll in Medicare when eligible should not be taken lightly. Consumers with questions should consult the [State Health Insurance Assistance Programs \(SHIP\) office](#) or their assister.

Terminating Marketplace Coverage



- Terminating a Marketplace plan will cancel the plan for all household members. If specific individuals or members need to be removed from a plan, they should contact the CEC.
- Termination of Marketplace coverage may be either voluntary (i.e., initiated by the enrollee) or involuntary (i.e., initiated by BeWell).
- If coverage is terminated, the health plan must cover the enrollee and the covered services that the enrollee received from the coverage effective date until the termination date.
- A member may voluntarily terminate their medical coverage without terminating their dental coverage or terminate their dental coverage without terminating their health coverage.
- A termination can be effective in the future (e.g., a termination requested by the enrollee up to 60 days prior to the termination date), or retroactively (e.g., the enrollee died, or failed to pay premiums due by the end of a grace period).

Terminating Marketplace Coverage (Continued)



- An enrollee may request to have their policy, or coverage for a household member, retroactively terminated. BeWell will allow retroactive terminations in the following circumstances:
 - The individual obtained other MEC and requests termination within 60 days of enrollment in the other MEC.
 - The individual experienced a technical error that did not allow them to terminate their enrollment and requests termination within 60 days of discovering the technical error.
 - The individual demonstrates to BeWell that their enrollment was unintentional, inadvertent, or erroneous and requests cancellation within 60 days of discovering the enrollment.
 - Death of a member.
- Requests for retroactive termination outside of these circumstances will be reviewed and approved or denied at the sole discretion of BeWell.

Key Points

- Consumers should be aware of coverage start dates and maintaining continuity when transitioning from Medicaid to the Marketplace.
- Marketplace consumers who become eligible for other MEC, such as ESI, Medicaid, or Medicare, should terminate their Marketplace coverage.
- Consumers who do not enroll in Medicare during their initial enrollment period may have to wait to enroll and face a late enrollment penalty.



Bewell

New Mexico's
Health Insurance
Marketplace