T2431 – Auto-renewal notice generated prior to OEP

Template ID: 2431

Recipient: Customer, Broker, Assister

Subject line : [Take Action] Important information regarding your health coverage for [year]

Trigger: Notice is triggered during running of renewal processing each year.

Additional Information: N/A

Notice content:

<HEADER>

\${name}

\${Address}

\${todayDate}

Application Date: \${submitDate}

\${PlanYear} Application ID: \${eligibilityID}

Dear \${primaryApplicantName},

#if health & Dental = RENEWED

You can be automatically renewed for another year of health coverage!

You are receiving this notice because you are eligible to be automatically renewed for another year of health coverage. <Exchange> has determined your eligibility for financial assistance based on your household's projected income for [year].

If you want to keep your coverage, <Exchange> will automatically enroll you in the plan below for coverage beginning January 1, [year]:

Enrolled individuals	Now enrolled in this plan	Will I get financial assistance for this plan in 2021?
Susan Griffith	[Plan name] Plan ID: [Number] Effective January 1, [year]	Yes. The full amount of your advanced premium tax credit will be applied to your

monthly insurance
premium: \$221.00.

What should I do next?

For each plan shown, continue to pay your premiums for the new coverage year. If you need to, check with your insurance provider to confirm your payment.

The full amount of financial assistance you qualify for is now being applied to your monthly premium. If you want to use less, take the following steps:

- Log-in to your <Exchange> account at <<u>Exchange URL></u>
- Select your **\${renewal_year}** application.
- When you continue to enrollment, you can reduce the amount of financial assistance you'll use.

Shop around

Even though you can renew last year's coverage, it is important to shop around to make sure you understand your health coverage options every year. It's especially important to shop for coverage this year, as Pennsylvania is in the process of transitioning away from the federal HealthCare.gov marketplace and will have its own state-based marketplace. <Exchange> will provide application, eligibility, and enrollment services for coverage beginning January, <YYYY> and beyond.

This year's Open Enrollment Period will take place from \${oep_start_date} and \${oep_end_date}. We encourage you to use this time to learn about your coverage options through <Exchange> at <Exchange url>, and take advantage of the resources available to help you enroll.

Get Help

Applications can sometimes seem confusing or complicated. We get it. If you need help filling out your application, you can access help over the phone or in-person. There are many resources available for you to get the help you need:

- Compare plans and enroll over the phone by calling <Exchange> Customer Service at <toll-free#> <TTY>.
- To find an assister or broker ready to help you enroll in a health plan that is right for you, please visit <find a broker/assister URL> or call <toll-free #>.

What if information from my application changes during the year?

Your life might change over the coming year. For example, you might get married, have a child, or start a new job. If you have a big life change this year, you need to let us know within 30 days of that change so you can continue to receive the correct amount of financial assistance to help pay for health coverage and care.

Changes may affect your eligibility for:

- 1. Financial assistance to help pay for coverage
- 2. Cost-sharing reductions that lower your copayments, coinsurance, and deductibles
- 3. Coverage through [Medicaid program name] or [CHIP program name] (CHIP)

elseif health = NOT TO CONSIDER & dental = NOT TO CONSIDER #and if reason code = HIE (household is ineligible)

#elseif health = MANUAL ENROLLMENT & dental = MANUAL ENROLLMENT

#and if reason code = crosswalk not available

You are not able to be automatically renewed for another year of health coverage for plan year \${renewal_year} because of \${reason code}

You are receiving this notice, because we were not able to automatically renew your previous year's health coverage for [year]. Our records show there are changes to your account which currently make you ineligible, or your current health coverage is no longer available in your area.

Household Members	Currently enrolled in this plan	Next steps
Susan Griffith	[Plan name] Plan ID: [Number] Effective January 1, [year]	 Not able to be automatically enrolled in [Plan name] due to \${reason code} If you have documentation which indicates otherwise, please submit it. Head to \${exchangeFullName} during Open Enrollment between \${oep_start_date} and \${oep_end_date} to apply and enroll in coverage for [year]

Follow the next steps below to enroll in health coverage that is right for you:

What should I do next?

For each plan you were unable to be automatically renewed for \${renewal_year}, if you have documentation indicating your continued eligibility, make sure to upload or mail documents as soon as possible. See the next section of this notice for how to submit your documents. Otherwise, please follow the steps below to enroll in <Exchange> coverage online or over the phone:

Online:

- Log into your account at <<u>Exchange URL></u>.
- If you don't already have a <Exchange> account, you'll need the Application ID that's printed on this notice.

- Continue to plan selection and choose a plan.
- Make the first month's premium payment to start coverage.

By phone:

- Call <Exchange> Customer Service at <toll-free#> <TTY#>.
- If you don't already have a <Exchange> account, you'll need the Application ID that's printed on this notice when you contact <Exchange> Customer Service.
- Continue to select the right health coverage for your health needs and budget.
- Pay the first month's premium to enroll in coverage.

How to submit documents

There are two ways to send documents to <Exchange>:

- 1. The fastest option is to **upload documents online**.
 - Log in to your <Exchange> account on <Exchange URL> by clicking on "Log in" at the top of the page.
 - Once you're logged in, select your current application and then use the menu on the left side of your screen to click on Application Details. On the next screen, you'll see a list of any data matching issues (called "inconsistencies" on the screen) in your application.
 - Follow the directions to resolve each inconsistency to upload the documents needed to fix the issue.

OR

2. Mail a copy of the documents to the address below. Please write your name and application ID on all your documents. You should keep the original documents.

Send a copy of the documents to: < The Exchange mailing address>

#elseif health = RENEWED & dental = MANUAL ENROLLMENT

#and if reason code = crosswalk not available OR

#elseif health = MANUAL ENROLLMENT & dental = RENEWED

#and if reason code = crosswalk not available

You are able to be automatically renewed for another year of <health or dental> coverage for plan year \${renewal_year}, but not for <health or dental> coverage because of \${reason code}

You are receiving this notice because you are eligible to be automatically renewed for another year of <health or dental> coverage, but not for <health or dental> coverage.

<Exchange> has determined your eligibility for financial assistance based on your household's projected income for [year].

If you want to keep your <health or dental> coverage, <Exchange> will be automatically enroll you in the plan below for coverage beginning January 1, [year]:

Enrolled individuals	Now enrolled in this plan	Will I get financial assistance for this plan in 2021?
Susan Griffith	[Plan name] Plan ID: [Number] Effective January 1, [year]	Yes. This full amount of your advanced premium tax credit will be applied to your monthly insurance premium: \$221.00.

However, we were unable to renew your <health or dental> enrollment for \${renewal_year} because of \${reason code}. Follow the next steps below to enroll in the coverage that is right for you:

Household Members	Currently enrolled in this plan	Next steps
Susan Griffith	[Plan name] Plan ID: [Number] Effective January 1, [year]	 Not able to be automatically enroll in [Plan name] due to \${reason code} If you have documentation which indicates otherwise, please submit it. Head to \${exchangeFullName} during OEP between \${oep_start_date} and \${oep_end_date} to apply and enroll in different coverage for [year]

What should I do next?

For each plan you are eligible to be automatically renewed for another year of coverage , continue to pay your premiums for the new coverage year. If you need to, check with your insurance provider to confirm your payment.

The full amount of financial assistance you qualify for is now being applied to your monthly premium. If you want to use less, take the following steps:

- Log-in to your <Exchange> account at <Exchange URL>
- Select your **\${renewal_year}** application.

• When you continue to enrollment, you can reduce the amount of financial assistance you'll use.

For each plan you were unable to be automatically renewed for \${renewal_year}, if you have documentation indicating your continued eligibility, make sure to upload or mail documents as soon as possible. See the next section of this notice for how to submit them. Otherwise, please follow the steps below to enroll in coverage online or over the phone:

Online:

- Log into your account at <<u>Exchange URL></u>.
- If you don't already have a <Exchange> account, you'll need the Application ID that's printed on this notice.
- Continue to plan selection and choose a plan.
- Make the first month's premium payment to start coverage.

By phone:

- Compare plans and enroll over the phone by calling <Exchange> Customer Service at <toll-free#> <TTY>.
- If you don't already have a <Exchange> account, you'll need the Application ID that's printed on this notice when you contact <Exchange> Customer Service.
- Continue to select the right health coverage for your health needs and budget.
- Pay the first month's premium to enroll in coverage.

Shop around

Whether you are able to automatically renew your current coverage or not, you can review your coverage options during Open Enrollment on <Exchange>, beginning \${oep_start_date}. It's especially important to shop around for coverage this year, as Pennsylvania is in the process of transitioning away from the federal HealthCare.gov marketplace and will have its own state-based marketplace. <Exchange> will provide application, eligibility, and enrollment services for coverage beginning January, <YYYY> and beyond.

This year's Open Enrollment Period will take place from \${oep_start_date} to \${oep_end_date}. We encourage you to use this time to apply and enroll in health coverage on <Exchange> at <Exchange url>.

Get Help

Applications can sometimes seem confusing or complicated. We get it. If you need help filling out your application, you can access help over the phone or in-person. There are many resources available for you to get the help you need:

• To find an assister or broker ready to help you enroll in a health plan that is right for you, please visit <find a broker/assister URL> or call <toll-free #>.