

Health Connector Policy: Coverage Effective Dates

Policy #: **NG-5B**

Date revised: **11/4/14**

Category: **Enrollment**

Effective date: **1/1/2015**

Approved by: **Ed DeAngelo**

Applicable to all Non-Group products (Qualified Health Plan or QHP/Qualified Dental Plan or QDP)

A. Coverage effective dates will be determined as follows:

- a. If a qualified individual/family seeking non-group coverage completes enrollment in a non-group product on or prior to the 23rd calendar day of the month, coverage will be effective the first day of the following month; if after the 23rd calendar day, then coverage will be effective the first day of the second month;
- b. For a qualified individual/family who is eligible for federal and/or state financial support, if that qualified individual/family completes enrollment in a non-group product on or prior to the 23rd calendar day of the month, coverage will be effective the first day of the following month including the federal and/or state financial support; if after the 23rd calendar day, then coverage will be effective the first day of the second month including the federal and/or state financial support;
- c. If an enrollee(s) enrolled in non-group coverage through the Health Connector experiences a Mid-Year Life Event, coverage will be effective in accordance with the Mid-Year Life Events Policy.¹

B. Coverage ends on the last calendar day of the month specified in the termination notice.

¹ Please reference the policy Mid-Year Life Events (NG-1E)