

**Administrative Information Bulletin 02-15:  
Guidance Regarding Special Enrollment Periods  
February 17, 2015**

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Pursuant to federal regulations at 45 C.F.R. §155.100 et seq. and state authority at M.G.L. c.176Q, s.2, the Commonwealth Health Insurance Connector Authority (the “Connector”) is issuing this Administrative Information Bulletin (“Bulletin”) to provide guidance in connection with the closed enrollment period, which begins on February 16, 2015 for the commercial non-group market. This Bulletin provides (a) administrative information regarding additional circumstances that would allow a person to enroll in coverage after February 15, 2015 and (b) clarification on the parameters of this special enrollment period.

Once open enrollment closes, a person may only enroll in or make changes to their health insurance plan if they experience a triggering event. *See* 45 C.F.R. §155.410. Triggering events include, but are not limited to the following: birth or adoption of a child, marriage, loss of insurance through a job, recently moved to the state, or recently gained an eligible immigration status. *See* 45 C.F.R. §155.420; 956 CMR 12.10(5).

The Connector is designating the loss of temporary MassHealth coverage granted in 2014 as an additional circumstance triggering a special enrollment period. (Loss of other types of MassHealth coverage that are considered Minimum Essential Coverage, such as MassHealth Standard, CommonHealth, or CarePlus, is already considered a qualifying event under 45 C.F.R. § 155.420(d)(1).) If someone meets this circumstance, they will have sixty (60) days from the date of the triggering event to enroll in coverage through the Connector. The Connector is designating this triggering event in accordance with its authority pursuant to federal regulations at 45 C.F.R. §155.420(d).

People applying for coverage with help paying for insurance and are determined eligible for MassHealth, Children’s Medical Security Plan (CMSP), or Health Safety Net, can enroll at any time during the year. If the person is determined eligible for one of these programs, that person will not have to wait until next year’s open enrollment period to enroll. People determined newly eligible for ConnectorCare can enroll within 60 days of their eligibility determination date if shopping during closed enrollment. If the person is only determined eligible for tax credits or is determined not to be eligible for any help paying for the cost of their health insurance, that person must experience a triggering event to shop before the next open enrollment period. In certain circumstances, an enrollment waiver may be available through the Office of Patient Protection at the Health Policy Commission.

This Administrative Bulletin takes effect immediately.