

URL - Pennie FAQ's

NOTE: See Pennie for additional Pennie FAQ's at https://pennie.com/learn/faqs/

Q: When is the Pennie Open Enrollment Period?

A: The Pennie Open Enrollment Period runs from November 1st through January 15th. Enroll by December 15th to be covered starting New Years Day. If enrolling between December 16th and January 15th, the effective date will be February 1st.

Q: What is the differences between an Agency Manager account and an Agent account?

A: The Pennie platform provides the producer community with two account options. These account options provide producers the flexibility they need to manage their book of business while also managing their agency. The two accounts available are:

Agency/Agency Manager Account (for producers who work on their own or are a supervisor inside a larger agency),

and

Broker Account (for producers within an agency that do not supervise other agents).

Q: If my client missed Open Enrollment for Pennie and doesn't currently have a Qualifying Life Event (QLE) and therefore would not have a Special Enrollment Period (SEP) to use, are there any options for enrolling my client in Pennie?

A: Yes, Path to Pennie connects uninsured Pennsylvanians with health coverage offered through Pennie, PA's official health insurance marketplace. If you missed open enrollment and need health coverage, fill out Tax Form REV-1882, 'Health Insurance Coverage Information Request.' on your Pennsylvania state income tax return. Then, Pennie will mail you a letter on next steps so you can get the lowest costs on high quality health coverage through Pennie. Visit Pennie for more information at https://pennie.com/learn/pathtopennie/



Q: I filled out REV-1882 but I did not receive a letter from Pennie yet. Can I apply without the unique access code?

A: Yes, you can apply for coverage through Pennie even if you haven't yet received your unique access code. Just call the Pennie contact center and attest to having submitted REV-1882 on your PA tax return, and you will have access to the Tax Filer Special Enrollment Period to enroll in coverage!

Q: If approved for the Path to Pennie SEP after filing REV-1882, how long do clients have to apply for the coverage on Pennie?

A: Your client can apply sixty (60) days from the printed date on the letter you receive from Pennie in the mail.

Q: When Pennie sends a member or their dependent to Medicaid or CHIP for eligibility review, will the effective date be back dated on Pennie if denied by Medicaid or CHIP?

A: Regarding Backdating when Pennie sends a member to Medicaid or CHIP, and they are then denied by one of those entities and sent back to Pennie:

Pennie updated the ruling on this, they have changed it that consumers are no longer able to backdate their effective date if the initially enrollment happens OUTSIDE of Open Enrollment OEP.

If the client originally applied through Pennie during OEP then contact Pennie and request that the coverage start date be moved back to the date it would have started if Pennie had originally determined them eligible for a plan through Pennie (provided complete premium payment is made for the retroactive period).



Q: If a spouse is moving to Medicaid or another coverage and needs to be removed from Pennie, but the other spouse needs to remain on Pennie, how do I accomplish this in Pennie's system, without causing the remaining spouse issues with their coverage?

A: When the main applicant needs to be removed from the Pennie plan but keep the spouse on the plan, you edit the current application from the dashboard, change the main applicant to not seeking coverage and then just go through and save and sign the rest of the application. Once saved return to the members dashboard and click on "Confirm Event" and select what the event was that caused to no longer seek coverage.

Once that is saved the member will receive a notification and it will appear that both the main member and the spouse were disenrolled however that is not true, if you go look at the members "my enrollments" you will see the remaining member was disenrolled from the original enrollment but then reenrolled on the plan by themselves.

Q: Can family members who are on the same application, select different plans from one another?

A: Yes. Below is a screenshot showing the Shop Health Plans page, in order to shop separately for different plans uncheck the member who you are not shopping for at the moment and click shop, complete that persons shopping and then you will need to shop again for the person you originally unchecked by leaving them checked for shopping and unchecking the people you previously shopped for:





NOTE: Keep in mind the APTC will be applied to members individually, so it will appear different that the full amount being applied to all when separate plans are selected for members of the same family/application.

Q: I made changes to a clients Pennie application on October 2nd, and when I looked later only the members current enrollment was updated and the coming plan year application still had old information, why?

A: The Pennie system auto renewal process every year, uses the application information that was in the system as of 10/01. If you make changes to the current plan year application after they already pulled them for auto renewal, the information you changed will not carry over to the new plan year. You will need to go into the new plan year application after 11/1 and edit it again to reflect the correct information. For example: for if a client or agent changes a clients address on 10/15/25 they will need to make sure they change it in 2025 and 2026.



Q: When there is a QLE of losing employer coverage, how long does a client have to apply on Pennie?

A: When a person loses employer health coverage, they have 60 days before the loss and 60 days after the loss of coverage to apply on Pennie. Once they apply and are approved for an SEP they will have 60 days to choose a plan and enroll.

Q: How do my clients get their 1095-A from Pennie?

A: Form 1095-A: Health Insurance Marketplace Statement has been delivered to customers' Pennie Secure Inboxes.

Q: Why is the 1095-A Tax form important?

A: • If a customer received advance premium tax credits (APTC) to help lower their monthly premium payment, they MUST file a federal tax return and complete Form 8962: Premium Tax Credit to reconcile the APTC they received during the year with the final amount they were eligible to receive based on their actual household income. Form 8962 is available from the IRS at https://www.irs.gov/affordable-care-act or from a customer's tax preparer.

Q: What if your customer feels there is an error in Pennie?

A: If customers feel there is an error, or if they haven't received their 1095-A, they should contact Pennie Customer Service (844-844-8040) as quickly as possible, as it may take up to 30 days to complete research and correction. If you would like more information about 1095-A forms, please visit <u>https://pennie.com/learn/1095aform/</u>

Q: Can consumers enroll in dental only on Pennie without enrolling in any medical plan on Pennie.

A: Yes, but they can't change it if they don't like it until open enrollment or qualifying event. I always suggest going outside of Pennie (direct with the carrier off exchange). If they are Medicare age, they can't enroll for anything on Pennie including stand-alone Dental.



Q: Does the consumer have to take all the APTC credit being offered to them?

A: No, a consumer is not required to use all the APTC credit being offered to them. See Pennie's help page for directions on how to adjust the amount of APTC being applied to their coverage at <u>https://help.pennie.com/hc/en-us/articles/1500009378041-How-do-l-</u> adjust-the-amount-of-advance-premium-tax-credits-that-are-being-applied-to-mymonthly-premiums

NOTE: For any FAQ addition suggestions, please fill out a contact form on our URL website at <u>https://files.urlinsgroup.com/acton/media/1878/deena-berrell-contact</u> and provide your suggestions for consideration.