

Title	Customer Request for Plan Change During Open Enrollment
Last Revised	December 18, 2017
Status	Final
Contributors	Mike Stanek, Jim Byers, and Carrie Wolfe
Approver(s)	Joanna Donbeck and Randi Schaff
Location	<a href="#">Training and Operations – Business Process SharePoint Site</a>
See Also	

## **Customer Request for Plan Change During Open Enrollment**

### REFERENCES:

- **Applicable Law**
  - [Populated by Policy](#)
  - [45 C.F.R. § 155.420](#)
  - [Affordable Care Act](#)
  - [REG-131491-10: Health Insurance Premium Tax Credits](#)

### OVERVIEW:

Customers can enroll in 2018 Qualified health plan and Qualified dental plan coverage from November 1, 2017 through January 15, 2018. During open enrollment for 2018 coverage, customers may change their plan selections as described in this process. Washington Health Benefit Exchange strongly encourages customers to shop carefully before choosing a plan to minimize changing plans after a plan has been selected. Customers are cautioned that changing plans after previously selecting a plan in *Washington Healthplanfinder* – either before or after coverage has begun – could create confusion between carrier communications and invoicing, and could delay the effective date of their coverage.

Customers may change their plan for January coverage in *Washington Healthplanfinder* after previously selecting a plan or being auto-renewed, through 11:59 PM PST on December 15, 2017. This is accomplished by selecting the **Shop Plans** button from their **Account Home** tab. After December 15, 2017, customers may still change their plan during the open enrollment period, but they must contact the Customer Support Center to request the change. The following process describes the steps to process these requests.

### PROCESS:

<b>Actor</b>	<b>Step</b>	<b>Activity</b>
<i>Person/system/thing performing step</i>	<b>#</b>	<i>Step being performed</i>
<b>Customer</b>	1	Contacts the Customer Support Center between December 16 <sup>th</sup> and January 15 <sup>th</sup> to request a change to their coverage plan; and
<b>Customer Service Representative</b>	2	Notifies the customer that they will create a ticket to process the request; and
	3	Submits a Zendesk ticket to <b>L1 Customer Support</b> (CARE Team) using the relevant “Special Enrollment” macro; and
<b>CARE Team Member</b>	4	Reviews the Zendesk ticket to confirm the customer is requesting a change in plan; and

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	5	Opens a Special Enrollment Period manually using the customer’s dashboard “Open SEP” button using the SEP code of “EX – Exceptional Circumstance” using November 16 <sup>th</sup> as the SEP open date; and
	6	Conducts customer outreach needed to inform customer of the change in plan and the effective date of February 1 <sup>st</sup> (following the 15 <sup>th</sup> cutoff rule); and
	7	Closes the Zendesk ticket.

**EXCEPTION:**

During the 2017-18 Open Enrollment Period, the OIC issued a cease and desist order to Coordinated Care Corporation to stop sales of individual health plans effective December 12, 2017. On December 15, 2017, the Office of the Insurance Commissioner removed the cease and desist order on Coordinated Care plans. As a result, the Washington Health Benefit Exchange will allow individuals who request a change in plans to Coordinated Care between December 16<sup>th</sup> and December 31<sup>st</sup>, to have an retroactive effective date of January 1, 2018.