



# KPIF Application for Health Coverage SEP Selection Guide

**KPIF Application:** Please select the “Determination by Covered CA of exceptional circumstances” qualifying life event (QLE) in Step 1 (Choose Special Enrollment Period) on the KP individual and families plan application and provide the date the QLE occurred on (1/7-3/8). Complete the remaining sections of the KPIF Application for Health Coverage as usual.

## STEP 1: Choose your enrollment period

Select one option:  Open enrollment (skip to Step 2)  A special enrollment period (continue below)

Choose your qualifying life event. If you had more than one, review your options because effective dates vary by event. **Proof of eligibility is also required within 10 calendar days.** Visit [kp.org/speciaenrollment](http://kp.org/speciaenrollment) or call 1-800-494-5314 (TTY 711) for more about qualifying life events or if you do not see your qualifying life event below.

- Loss of minimum essential health coverage (write the last full day you had coverage)\*
- Gaining or becoming a dependent through marriage or domestic partnership
- Gaining or becoming a dependent through the birth of a child, adoption, or placement for adoption or foster care  
**Note:** In this case, you also need to choose between 2 effective date options:
  - The date of birth, adoption, or placement for adoption or foster care
  - The first day of the month after we receive the application
- Losing a dependent through divorce, dissolution of domestic partnership, or legal separation
- Death of the subscriber or a dependent
- Child support order or other court order to cover a dependent  
**Note:** In this case, you also need to choose between 2 effective date options:
  - The date of the child support order or other court order to cover a dependent
  - The first day of the month after the court order date
- Permanent relocation with access to new plans
- Determination by Covered California of exceptional circumstances
- Eligibility to purchase an individual health plan through an individual coverage health reimbursement arrangement (ICHRA) or a qualified small employer health reimbursement arrangement (QSEHRA)
- Domestic violence or spousal abandonment occurring within the household
- Discontinuation of employer contribution or government subsidization of COBRA premiums
- Release from incarceration
- Misinformation about enrollment in minimum essential coverage
- Provider network changes
- Demonstrating that a qualified plan substantially violated a material provision of its contract in relation to the enrollee
- Eligibility for app-based transportation or delivery network company health care stipend

Please write the date of your qualifying life event.  /  /  (mm/dd/yyyy)

\*If your qualifying life event is loss of Kaiser Permanente coverage, we may review membership records to check when and why you lost coverage.

Visit [kp.org](http://kp.org) for [updates and resources](#) available to Southern California Kaiser Permanente members impacted by the wildfires.