The Oct. 5 Healthcare Forum in Campbell sponsored by Senator Jim Beall generated many questions. Some participants posed questions regarding Covered California, the state's health insurance marketplace, that could not be immediately answered at the forum. Senator Beall, however, promised to take down their questions and seek answers from Covered California officials.

Below are the questions and Covered California's responses.

1. What tax year will Covered California use to determine a person's eligibility for a subsidy or plan?

An applicant who applies for any insurance affordability program must provide information about sources, amount, and payment frequency of his or her current gross income, including any tax-exempt income if applicable, on his or her application.

The applicant must also attest to his/her projected/expected income for the benefit year (i.e., 2014 for this open enrollment period) on the application.

Based on the information provided by the applicant, Covered California will calculate the applicant's annual household income for the benefit year and runs it against the federal data hub, which includes information from IRS on the applicant's tax return for the previous tax year (i.e., 2012 tax return information for this open enrollment period).

If the applicant's projected annual income is reasonably consistent with the income on the applicant's last year tax return, the income on the tax return will be used to determine the applicant's eligibility for and the amount of the premium tax credits for the benefit year.

But if the federal data hub is unavailable or the applicant's projected annual income is not reasonably consistent with the information obtained through the data hub, the applicant will be determined conditionally eligible for 90 days based on the applicant's attested projected annual income provided on the application. Covered California will request the applicant to provide satisfactory documents to resolve the inconsistency (e.g., current paystubs) within the 90-day period. The applicant will conditionally be enrolled in his/her selected plan (if they pay their premiums by the due date), and if eligible, the applicant can also receive premium tax credits during this 90-day period.

However, once the applicant's attested information is verified after 90 days, the consumer would either continue with their existing subsidy amount or the subsidy would be adjusted according to what was verified. The applicant who receives subsidies is subject to reconciliation at the end of the year when the applicant files his/her tax returns.

2. If a person's income status changes due to loss of employment or reduced employment hours how will their subsidy be calculated? Will you only use their previous tax returns or can they bring more up to date evidence of income?

Consumers or enrollees are required to report changes within 30 days from the date of the change. It is important for the enrollees to report any income changes that may affect their eligibility for, or the amount of, premium tax credits they may receive as soon as possible. Covered California will verify the reported changes and predetermine the enrollee's eligibility and will adjust the amount of premium tax credits accordingly.

To verify the reported changes, Covered California may request the consumer or enrollee to provide satisfactory evidentiary documentation, such as current pay stubs. Any advanced premium tax credits paid on behalf of the enrollees during the coverage year will be subject to reconciliation when the enrollees file their federal income tax returns for the coverage year.

3. My parents claimed me as a dependent on their 2012 tax returns, they are not claiming me in 2013. Will their income be counted against me?

If you will no longer be a tax dependent, you must attest (promise) on your application that you will file your own tax return for 2014 tax year. Then, you will be considered a separate tax household than your parents and only your own income will be counted to determine your eligibility for Covered California plans and premium tax credits. You will be subject to reconciliation of the premium tax credit with the advance credit payments paid to the on your federal income tax return for the benefit year.

4. If I move from one county to another, will I have re-enroll into a new program and will my premium change?

You must report any changes that may affect your eligibility, such as a permanent move, within 30 days from the date of the change. Premium rates change based on rating regions so your premiums may increase or decrease depending on the county you are moving to.

If the plan you are currently enrolled in is not available, or if you gain access to new plans, in the new county you are moving to, you will be eligible for a special enrollment period of 60 days from the date of your move to change your plan.

5. Do I have to reapply for a subsidy every year, or will it be automatic? What will the process entail?

On your application, you may authorize Covered California for up to 5 years to obtain your tax data from IRS to verify your income and re-determine your eligibility for subsidies every year during the annual enrollment periods. If you provide such an authorization, your enrollment in a plan and your subsidies will be automatically renewed each year; otherwise, you have to reapply each year during the open enrollment period.

6. If my employer is based in another state, where would I shop for insurance?

If a consumer's employer does not offer coverage for the consumer and/or the employer-sponsored coverage premium is more than 9.5% of the consumer's annual household income and the plan does not pay at least 60% of the cost of the consumer's covered benefits, then the consumer can apply for premium tax credits through the Exchange in the state in which they are a resident.

7. If you our currently on COBRA do you have to wait until it expires before you can enroll into a plan offered by the Covered CA or do you have to wait until COBRA expires?

You do not have to exhaust your COBRA to apply for premium tax credits through Covered California during open enrollment periods. However, you must make sure to cancel/terminate your COBRA coverage before the effective date of your coverage in a Covered California Plan. For example, if you apply now and enroll in a Covered California plan effective Jan. 1, 2014, the last day of your COBRA coverage must be Dec. 31, 2013.

8. How is Covered California preventing fraud?

Covered California has taken numerous steps to prevent fraud. Covered CA online accounts are secured with the latest technology and security questions in order to safeguard personal information. Additionally, in-person assistance personnel such as Certified Enrollment Counselors and Certified Insurance Agents can be verified on the coveredca.com website.

9. Explain the penalties and how they will be assessed and collected.

Non-exempt individuals who do not carry health insurance as of Jan. 1, 2014, will be subject to an annual tax penalty of $95 or 1 percent of the excess of the individual's annual household income over the individual's applicable filing threshold amount, whichever is higher. If the individual has coverage for part of the year, the individual will be responsible for 1/12th of the annual penalty amount explained above for every month without coverage, except for a short coverage gap of less than 3 months during each taxable year for which the individual will be exempt from the penalty. The penalty increases every year, so that by 2016, the penalty is $695 per person or 2.5 percent of the excess of the individual's annual household income over the individual's applicable filing threshold amount, whichever is higher.

However, you may be exempt from this penalty under certain circumstances. To find out more about exemption from the penalty, visit: *https://www.healthcare.gov/exemptions/*.