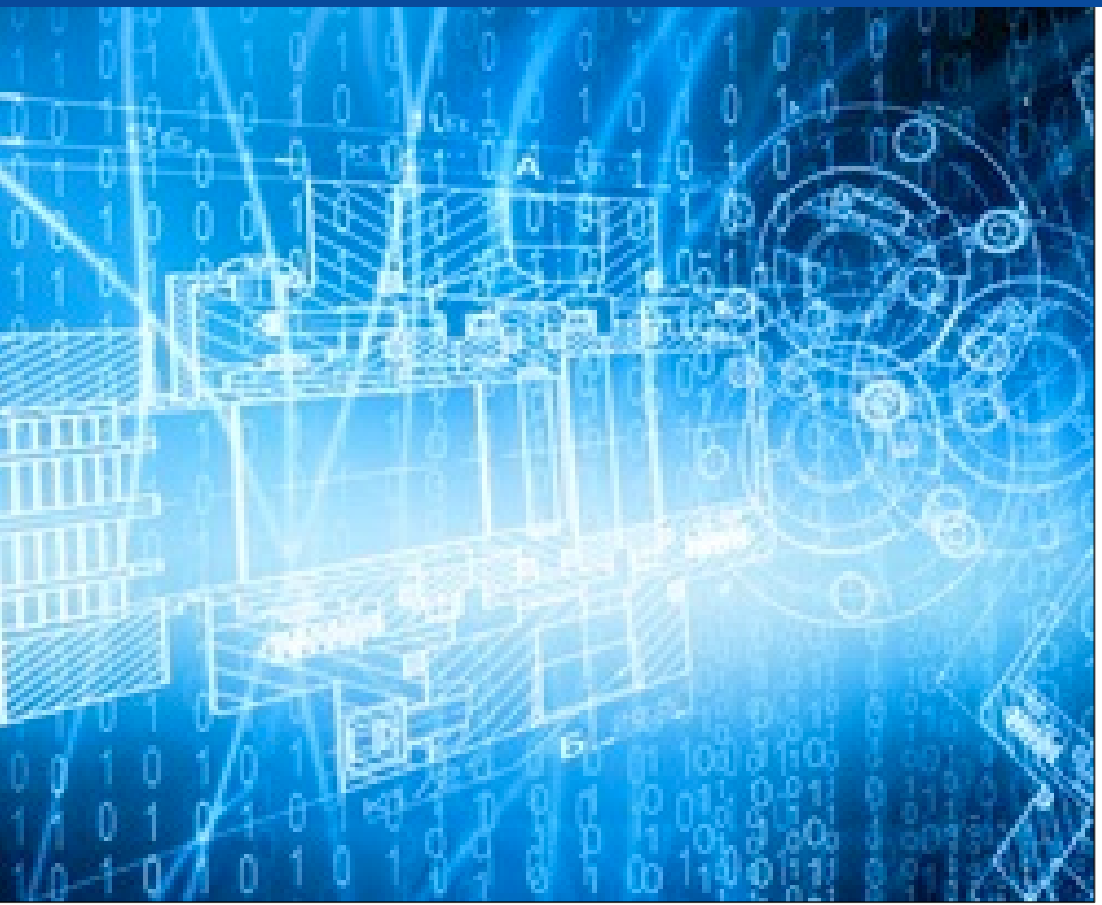
CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

2019 Batch Auto-Reenrollment Launch (10/15/18)



Consumer Information & Insurance Oversight (CCIIO)

October 15, 2018

https://www.regtap.info/FFENR.php

The information provided in this presentation is not intended to take the place of the statutes, regulations, and formal policy guidance that it is based upon. This material summarizes current policy and operations as of the date it was uploaded to REGTAP. Links to certain source documents may have been provided for your reference. We encourage persons taking the course to refer to the applicable statutes, regulations, and other interpretive materials for complete and current information

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Batch Auto-Reenrollment (BAR) begins

Week of October 15, 2018

- Some issuers will begin receiving auto-reenrollments for both regular BAR and alternate enrollments (if applicable) as soon as today 10/15/2018.
- A given issuer may receive its auto-renewals and alternate enrollments on the same day
  - Consumers matched to an alternate plan will receive a notice from CMS identifying the new issuer electronically in the same day that the issuer receives the transaction, and by mail within about a week
  - Issuers may want to wait prior to contacting alternate enrollments until a week after receiving the transaction if they want CMS to be the first messenger of the match. Issuers receiving cross-issuer enrollments should not send 2019 invoices until after November 1
  - For more information on the CMS notice to enrollees matched to an alternate plan see the "cross issuer notice" at https://marketplace.cms.gov/applications-and-forms/notices.html

Joining CMS Issuer Communications Daily E-mail

- Please check your CMS Issuer Communication emails daily for updates.
- To be added to the distribution list send an e-mail to:
  - CMS_Issuer_Communications@cms.hhs.gov
  - Subject line:
    - "Add POC to Distribution List"

BAR Progress Report

By request of issuers, CMS will deliver a daily tab-delimited report **via EFT code MISC9** that began 10/12/18 to health and dental plan issuers listing the following attributes:

Attribute	Definition
bar_eligible_policies	2018 coverage in initial or effectuated status with 12/31/18 Plan Benefit End Date & EOY = False (excludes 2018 policies with active 2019 reenrollments)
regular_auto_reenrolled	Total count to date of 2019 auto-renewals (policy origin = 11, and 2018 and 2019 HIOS match).
estimated_alternate_enrollments	[only applies to issuer who were notified by CMS] The count of new members (number of people) estimated by CMS to be matched to the issuer as of 10/4/18.
alternate_enrollments	The count of alternate enrollments (number of policies) sent to date (policy origin = 11, and 2018 and 2019 HIOS do not match

Auto-Reenrollment Files and Delivery Dates

(Dates are Subject to Change)

File	Description	Delivery Date(s)	EFT Code & File Layout
Batch Auto-Reenrollment (BAR) Files	Will re-enroll current Marketplace enrollees into future year coverage.	1st Wave: Begins c 10/10 2nd Wave: December	I834AR (Alternate Enrollments sent I834)
Outreach File	Will identify enrollees (but not why they are on the list) who will lose financial assistance in 2019 if they don't return to FFM because they either 1) **Opt-Outs.** Did not authorize the Federally-facilitated Marketplace (Marketplace) to obtain updated tax return information from the Internal Revenue Service (IRS); or 2) **Special Notice Group**. Have incomes above 500% of the federal poverty level when checked against IRS updated income information; or 3) **FTR**. Received APTC for 2017 but didn't file a tax return for that year and reconcile the APTC using IRS Form 8962; or 4) **Repeat Passive Re-enrollee Group**. Were auto-reenrolled into 2017 and 2018 coverage with APTC, did not submit any application updates in 2017 or 2018, and have no available tax data (income or FTR) from 2016 or 2017 Optional issuer outreach to direct these enrollees to actively apply and enroll in Marketplace coverage during Open Enrollment to maintain financial assistance.	10/03	IOUTRC https://zone.cms.gov/document/ioutrc-file-layout
Switch File	Will list current year subscribers who have not yet been auto-reenrolled and have actively switched to a different issuer for future year Marketplace coverage. Current year issuers should non-renew subscribers if on the Switch File	Daily from 11/3 to 12/15	SWTFL (same as previous) https://zone.cms.gov/document/reenrollment-transaction-summary-issuers-2016-coverage
Passive Cancels (BARCN9 in Incremental Pre-Audit File layout)	Will cancel passive reenrollments that duplicate active enrollments for future year Marketplace coverage. This is primarily associated with disconnected applications created when enrollees or their assisters fail to access their existing pre-populated future year application	BARCN9 Weekly 11/21,11/28, 12/05,12/20 Check Overlaps on 11/15 & 12/18 Pre-Audit Files	BARCN9 See https://zone.cms.gov/system/files/documents/standard_issuer_enrollment_data_files_v2_0.pdf

Auto-Reenrollment Files and Delivery Dates

(Dates are Subject to Change)

File	Description	Delivery Date(s)	EFT Code & File Layout
Carry Forward Cancels	Will cancel auto-reenrollments that are subsequently ineligible for BAR due to late terminations of current year Marketplace coverage. Active reenrollments or auto-reenrollments that have been updated by the enrollee will NOT be cancelled in this job, though in some scenarios issuer may still cancel active reenrollment (see Exchange Enrollment Manual, Chapter 6).	Intermittent Late November thru Dec 16+, then monthly January thru March	I834
BAR Daily Progress Report	This report is individualized to each returning issuer and counts the number of BAR-eligible policies as of the time the control documents for BAR were set against the actual BAR policies ever sent, with similar counts for issuers receiving alternate enrollments. The report compares the delivered vs eligible/projected counts to arrive at a completion percent. It is intended to help issuers detect and report issues preventing auto-renewal.	Daily once BAR begins until end of BAR with pause in delivery between waves of BAR.	MISC9
Missing Outbound 834 IPA	This file is a special Incremental Pre-Audit File that will contain full information for enrollment transactions that failed to convey to the Issuer via the standard EDI 834. This IPA File will contain the full Pre-Audit information for all enrollment transactions that failed to convey successfully to the Issuer during the period covered by the ISUIPA.	11/6 11/20 11/26 12/10	MOIPA9 https://zone.cms.gov/system/files/documents/standard_issuer_enrollment_data_files_v2_0.pdf
BAR Failures	A list of enrollments delivered to issuers that because of processing issues were not auto-renewed; impacted issuers are encouraged to do outreach to get the enrollees, who are flagged for SEPs at the Marketplace Call Center, to actively reenroll	One delivery in early January	IOUTRC https://zone.cms.gov/document/ioutrc-file-layout
Post-BAR Reinstatements	A list of enrollments delivered to issuers where the 2018 coverage was reinstated by the issuer in Enrollment Data Alignment after 2019 BAR concluded and there is no apparent 2019 active reenrollment. These enrollees are flagged for 2019 SEPs at the Marketplace Call Center and issuers are encouraged to conduct voluntary outreach	Likely one in February and one in March	IOUTRC https://zone.cms.gov/document/ioutrc-file-layout

Batch Auto-Reenrollment (BAR)

Reminders:

- **Issuers will receive 2019 reenrollment transactions for regular BAR (EFT I834AR) and alternate enrollments (EFT I834) in October BAR**
    - Only late 2018 enrollments (e.g., enrolled for the first time with effective date of 12/1/18) and active reenrollees who have started an application before being BARed are the only major groups that an issuer would receive for the first time in December BAR
- **For more information on OE 2019**, see https://www.regtap.info/reg_librarye.php?i=2606
- **Issuer Outreach File** was distributed to issuers 10/03/18 for voluntary outreach to encourage the active reenrollment of your members who will otherwise lose financial assistance in 2019

Medicare Non-Renewal Operations

Reminder: QHP issuers that must non-renew a policy to comply with the Anti-duplication Provision of the Social Security Act may begin sending the necessary transactions to the FFE, as noted in previously provided guidance provided below:

- For additional information on non-renewal operations see https://www.regtap.info/reg_librarye.php?i=2622