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CENTERS FOR MEDICARE & MEDICAID SERVICES
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Terminating Qualified Dental Plans (QDPs)



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NOTE: This guidance remains in effect post-release of the Federally-facilitated Marketplace (FFM) and Federally-facilitated Small Business Health Options Program (FF-SHOP) Enrollment Manual and until FFM system functionality allows for QDP-only termination.

Terminating Qualified Dental Plans (QDPs)

- Currently, an individual enrolled in both a Qualified Health Plan (QHP) and QDP cannot terminate his or her QDP without terminating his or her QHP as well.
- Until the system allows enrollees to terminate QDPs separately, the Centers for Medicare & Medicaid Services is instructing QDP issuers to terminate enrollees' QDPs in the issuers' systems when requested by an enrollee.
  - Other provisions outlined in 45 CFR 155.430 still apply.
  - Terminations should be included in the subsequent reconciliation file and the Federally-facilitated Marketplace (Marketplace) will be updated with the enrollee-requested termination date.
- Enrollees may request to terminate their QDP in three ways:
  - Directly with the issuer (at the issuer's discretion)
  - Through the Marketplace Call Center (a Health Insurance Casework System (HICS) ticket will be sent to the QDP issuer)
  - Through Regional Caseworkers (a HICS ticket will be sent to the QDP issuer)