



Unmatched Issuer Record (UIR) and Unaffiliated Issuer Enrollment (UIE) Guidance Reminder (5/13/2019)

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

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UIR Guidance Reminder

- CMS's terminology and guidance regarding Unaffiliated Issuer Enrollments (UIEs) provides specific categorization, allowing for clearly defined steps for resolving unmatched "I" records.
- ***Unmatched "I" Record (UIR)***: An "I" record in which the Reconciliation process is unable to match the issuer reported record to a Federally-Facilitated Marketplace (FFM) record. UIRs include two (2) categories:
 - ***Misaligned Issuer Enrollments (MIE)***: An issuer record that is not directly matched with an FFM record through the Data Reconciliation process, but, after additional analysis, appears to be an FFM match. Issuer action is still needed to bring the record into alignment.
 - ***Unaffiliated Issuer Enrollment (UIE)***: An issuer record that is not matched with an FFM record and the UIR analysis process is unable to identify an FFM record for the consumer.
- CMS provides regular UIR reports containing the granular categories resulting from the analysis of all "I" records in the RCNO.
- The UIR Master Guidance slide deck provides details on the UIR process. The deck is available on CMS zONE: <https://zone.cms.gov/document/enrollment-resolution-and-reconciliation>

Unaffiliated Issuer Enrollments (UIE)

- UIEs are placed in the following categories:

| UIE Category | UIR Guidance |
|-------------------------------|---|
| <u>Ineligible Newborns</u> | No Issuer Action Needed |
| <u>FFM Timing Issue</u> | No Issuer Action Needed |
| <u>FFM Enrollment Blocker</u> | Issuer Action Needed – ER&R Dispute Needed |
| <u>Prior Year</u> | Issuer Action Needed – Consumer outreach |
| <u>Prior Year BAR Failure</u> | Issuer Action Needed – Consumer outreach |
| <u>Persistent UIE</u> | Issuer Action Needed – Consumer outreach |
| <u>No Records Found</u> | Issuer Action Needed – Recon and/or consumer outreach |
| <u>Dental Prior Year</u> | Issuer Action Needed – Recon |

- The Prior_Year category indicates that there is no valid health enrollment for the current year. The most recent enrollment within the FFM was for a prior year.
- For certain Prior_Year UIE records that cannot be resolved through standard FFM Reconciliation processes, CMS intends to make manual payments through July 31, 2019, and generate manual Form 1095-As.
- Issuers are directed to perform consumer outreach to active enrollees for UIE records in the Prior_Year category.

2019 UIE Guidance and Background

- **2019 UIE Payment Policy Guidance:**

- On April 19, 2019, CMS posted an issuer letter to CMS zONE detailing how CMS will handle payment for the 2019 Prior Year UIEs. The letter was also distributed to issuers by the FMCC issuer outreach team. The letter is posted on CMS zONE at https://zone.cms.gov/system/files/documents/2019_uie_issuer_letter_.pdf.

NOTE: Some letters were sent to issuers regarding Stand Alone Dental Plans (SADPs). Please disregard those letters, as this only applies to Qualified Health Plans (QHPs).

- Issuers should not re-enroll UIEs for 2020, as Advanced Premium Tax Credit (APTC) payments will not be made for these enrollments.

- **Previously Released Guidance:**

- In presentations on issuer calls during October 2016, now available on CMS zONE, CMS announced that it would make Marketplace financial assistance payments and generate Form 1095-As for certain 2016 UIEs. This guidance further instructed issuers **not** to automatically re-enroll UIEs into 2017 QHPs.
- As outlined in *Unaffiliated Issuer Enrollments (UIEs)*, dated December 9, 2016, issuers were required to terminate UIE coverage effective December 31, 2016.
- On August 6, 2018, CMS posted an issuer letter to CMS zONE that detailed how CMS would handle payment for 2018 UIEs. The letter is posted on CMS zONE at https://zone.cms.gov/system/files/documents/uie_issuerletter_august_2018.pdf.

UIE Guidance

- At the end of the 2019 coverage year, CMS will make manual payments for any remaining 2019 Prior_Year UIEs for coverage through July 31, 2019. Form 1095-As will also be generated for these policies reflecting coverage through July 31, 2019.
- After July 31, 2019, issuers are directed to terminate FFM coverage for any outstanding UIEs.
- Issuers must perform consumer outreach by June 1st 2019 to inform consumers of the following:
 - The consumer is entitled to a 60-day Marketplace Error Special Enrollment Period (SEP).
 - The consumer must call the Marketplace Call Center at **1-800-318-2596** to utilize the SEP.
 - If the consumer does not utilize the available SEP, coverage ends on July 31, 2019.
 - The consumer has the option to roll their coverage onto a non-Marketplace plan, if applicable.

SEP Eligible UIE Cases Process

The issuer process for completing a UIE case that is eligible for an SEP is as follows:

1. The issuer advises the consumer to call the Marketplace Call Center to request the SEP.
2. The consumer contacts the Marketplace Call Center and requests the SEP.
3. The Marketplace Call Center approves the SEP and establishes a prospective enrollment, sending an I834 to the issuer.
4. The Marketplace Call Center creates a Category 2 HICS case instructing the issuer to retroactively process the new enrollment start date.
 - a. Issuers can identify these cases by looking for the narrative **“SEP - consumer is eligible for a retroactive start date”**.
5. After receiving the I834, the issuer must update their internal records as needed and then submit the corrected start date from the HICS case through Recon.
6. The issuer should notate the Recon updates on the HICS case and close the case.
7. The issuer should monitor RCNO data to confirm that the changes processed correctly. Once the update has been confirmed, the issuer may note the confirmation on the closed HICS case.

If issuers have questions about this process, contact the ER&R Support Center at ERRSupportCenter@Cognosante.com.

Manual Payment Process for 2019 UIEs – Records Ineligible for Payment

- CMS will exclude the UIE records in the following categories from processing for payment and IRS Form 1095-A generation:
 - **Ineligible_Newborns:** Newborn UIE record that is presumed to reflect an issuer operational workaround related to state laws requiring 31 days of free coverage for a newborn under the subscriber's policy
 - **FFM_Timing_Issue:** Enrollment record created after the 15th of the current month
 - **FFM_Enrollment_Blocker:** Enrollment record that has a corresponding HICS case in which an Enrollment Blocker was identified
 - **Persistent_UIE:** Current year "I" record that was reported as a Prior_Year "I" record within the previous coverage year; unique to the current coverage year
 - **No_Records_Found:** "I" record cannot be associated to an application or an FFM enrollment record
 - **Dental_Prior_Year:** "I" record with no valid SADP enrollment for the current year; the most recent SADP enrollment within the FFM was for a prior year
- CMS will also exclude MIEs and In_Process UIRs from payment processing.