

Enrollment Frequently Asked Questions

Selected Responses

Release Date: October 28, 2015

Enrollment FAQs

Frequently Asked Questions (FAQs) Released Date: October 28, 2015

- Q1: How often should issuers expect to receive Batch Auto-Reenrollment (BAR) files from Federally-facilitated Marketplaces (FFMs)?
- A1: FFMs expects to send BAR files in two (2) waves. The first wave will begin around October 15, 2015. During this wave, issuers may receive BARs over a span of several days. Similarly, the second wave will begin around December 16, 2015, and may span several days.
- Q2: If an issuer terminates a member's passive reenrollment into 2016 coverage based on the member's presence on the Switch File, will the issuer receive an 834 enrollment transaction if the member does not appear on the Switch File later?
- A2: Yes, if a consumer who is enrolled in 2015 coverage with one issuer switches to a different issuer for 2016 Marketplace coverage and later switches back to the 2015 issuer for 2016 Marketplace coverage, the 2015 issuer will receive an 834 enrollment transaction for 2016 Marketplace coverage.
- Q3: Will the Centers for Medicare & Medicaid Services (CMS) be sending any written communication to consumers that include their 2016 Advance Payments of the Premium Tax Credit (APTC) and Cost-Sharing Reduction (CSR) information?
- A3: The Eligibility Determination Notice (EDN) will include the updated 2016 APTC and CSR information, which will match the APTC and CSR information in the Batch Auto-Reenrollment (BAR) previously sent to the issuer. Federally-facilitated Marketplaces (Marketplaces) will provide an EDN and Enrollment Confirmation Message (ECM) to enrollees via their Marketplace account as of December 16, 2015 (or later, if the BAR is sent after December 16, 2015); the EDN will also be mailed if the enrollee request to receive notifications via mail. The ECN displays the Qualified Health Plan (QHP), QHP ID, and any APTC applied to the premium. This is in contrast to the Marketplace Open Enrollment Notice (MOEN), which is sent to current 2015 enrollees (who do not have a future termination effective date on file) before November 1, 2015. The MOEN does not include the 2016 APTC, but instead is primarily to announce the Open Enrollment Period and explain the redetermination process. Should an enrollee who has been passively reenrolled subsequently report a life change (i.e., Change in Circumstance, or "CiC") to update eligibility, he or she will receive a new EDN (as with any CiC) but will not receive a new ECM.

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- Q4: Are issuers allowed to enter two (2) billing addresses in the Health Insurance Oversight System (HIOS) Plan Finder?
- A4: Issuers should choose the billing address that would be the most appropriate for the consumer to enter in the HIOS Plan Finder. Issuers may need to reach out to the consumer to determine which address is most appropriate for billing purposes.
- Q5: How will the FFM communicate changes to 2016 enrollments to issuers after issuers receive a consumer's 2016 Batch Auto-Reenrollment (BAR) or active 2016 enrollment, how will Federally-facilitated Marketplaces (Marketplaces) communicate changes to those 2016 enrollments?
- A5: Depending on when and whether the consumer is changing a current enrollment, switching to a different issuer, or terminating 2016 Marketplace coverage, changes to a 2016 BAR or active enrollment may come in the form of an 834 cancellation transaction, an 834 termination transaction, paired cancel Change in Circumstance (CiC) and initial 834 transactions, paired termination CiC and initial 834 transactions, or a cancellation reflected on the Cancel Incremental Pre-Audit (IPA) file.
- Q6: Will the Switch File be cumulative? For example, if a member appears on the Switch File on November 4, 2015, if he or she does not switch back to the same issuer, will he or she appear on the Switch File on November 5, 2015, and November 6, 2015?
- A6: The Switch File is a point-in-time report that will identify current enrollees who have not yet been auto-reenrolled and have switched issuers as of their most recent plan selection on the day before the file was generated. However, if an enrollee who has switched issuers subsequently selects a plan offered by his or her original issuer, that enrollee will no longer be on the Switch File. In this scenario, Federally-facilitated Marketplaces will send an 834 enrollment transaction to the issuer.

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