



# Open Enrollment 2018 Updates Auto Re-enrollment / BAR



*October 6, 2017*

# Introduction

## Refresher on auto re-enrollment:

- ✓ Batch Auto Re-enrollment (BAR)
- ✓ Repeat passive re-enrollees
- ✓ Income on all eligibility determination notices
- ✓ Active re-enrollment using a pre-populated application
- ✓ Consumer requests to not be auto re-enrolled
- ✓ Plan selections and display of BAR plan

This presentation applies to annual redetermination and re-enrollment policies followed in states using the federal eligibility and enrollment platform (the Marketplace).

# Refresher

- Each year, Marketplaces must re-determine the eligibility of consumers enrolled in coverage through the Marketplace.
- To provide issuers enough time to ensure a smooth consumer re-enrollment experience, the Marketplace sends re-determined financial assistance data to issuers via reenrollment transactions in October for most re-enrollees.

For an enrollee who does not contact the Marketplace to obtain an updated eligibility determination and select a qualified health plan (QHP) by December 15, 2017, the **Marketplace will establish 2018 eligibility for advance payments of the premium tax credit (APTC) and cost-sharing reductions (CSRs) based on the most recent household income data available**, together with updated federal poverty level (FPL) tables and benchmark plan premium information. The Marketplace will re-enroll the enrollee effective January 1, 2018 in the same or a similar QHP, in accordance with 45 CFR 155.335(j).

# What is BAR?

- Auto re-enrollment, also referred to as Batch Auto Re-enrollment (BAR), is the process the Marketplace uses to ensure that current enrollees who do not make an active plan selection by December 15, 2017 can have coverage on January 1, 2018.
- **Active re-enrollment**, where an applicant updates the application and plan selection, is always preferred. Active re-enrollment:
  - Ensures that the enrollee receives a more accurate financial assistance eligibility determination and that the re-enrollment QHP reflects qualities that are important to the enrollee (e.g., cost, provider network, prescription drug formulary).
  - Some enrollees will lose their financial assistance unless they actively apply. The Marketplace Open Enrollment Notice sent to them by the Marketplace will include special language noting the need to actively apply.

# Auto Re-enrollment

Auto re-enrollment will run in two (2) rounds:

1. **October 10** (approximate): all enrollees eligible for renewal who are re-enrolled in a QHP offered by the same issuer or matched to an alternate QHP from a different issuer by CMS or a state Insurance Department. Goal is to complete by November 1.
2. **December 16**: new 2017 enrollees who enrolled after earlier October BAR; enrollees whose auto re-enrollment is updated because the enrollee reported, or the Marketplace otherwise obtained, new eligibility information after October BAR.



- NPNs of licensed agents/brokers who successfully completed their 2017 Marketplace registration generally will be sent to issuers as part of the BAR process.
- Pre-populated 2018 applications will be available to consumers with prior Marketplace applications beginning November by logging into their existing Marketplace account.
- The auto-reenrollment plan is not visible in consumers' accounts until December 16; however, enrollees can find their BAR plan highlighted in Plan Results after submitting an application during Open Enrollment (OE).

# Knowledge Check

Marketplace will establish 2018 eligibility for APTCs and CSRs based on the following:

- A. Most recent household income data available
- B. Updated FPL tables
- C. Benchmark plan premium information
- D. All of the above

# Knowledge Check Results

Marketplace will establish 2018 eligibility for APTCs and CSRs based on the following:

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# Marketplace Open Enrollment Notice (MOEN)

## The Marketplace Open Enrollment Notice alerts enrollees about the start of Open Enrollment.

- The MOEN welcomes current enrollees back to the Marketplace for Open Enrollment, provides a call to action for people who are at risk of losing eligibility for advance payments of the premium tax credit (APTC), and complements issuer notices.
- MOENs contain a special combined message for opt-out, special notice group, repeat passive, and failure to reconcile APTC groups that will lose eligibility for APTC on December 31 unless they come back to the Marketplace and are determined eligible.
- CMS will provide all MOENs to consumers by November 1, 2017.
- The MOEN does not contain financial assistance amounts nor does it identify the re-enrollment plan; that information comes from the issuer's renewal notice (or the 2018 issuer in the case of alternate enrollments).

Health Insurance Marketplace

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
465 INDUSTRIAL BOULEVARD  
LONDON, KENTUCKY 40750-0001

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[First Name Last Name of Primary Contact] [Date of notice]  
[Address of Primary Contact]

2016 Application ID: [Application ID]

It's time to review your Health Insurance Marketplace coverage and make sure you're getting the right coverage and costs in the year ahead. The following people are currently enrolled in coverage with financial help through the Marketplace:

[First Name Last Name]

Action required: You could lose your eligibility for Marketplace coverage and/or your help with costs for 2016 and 2017. Our records show that you still need to upload or mail documents that the Marketplace requested for your 2016 application. To learn more, visit [HealthCare.gov/verify-information/](http://HealthCare.gov/verify-information/) or call the Marketplace Call Center.

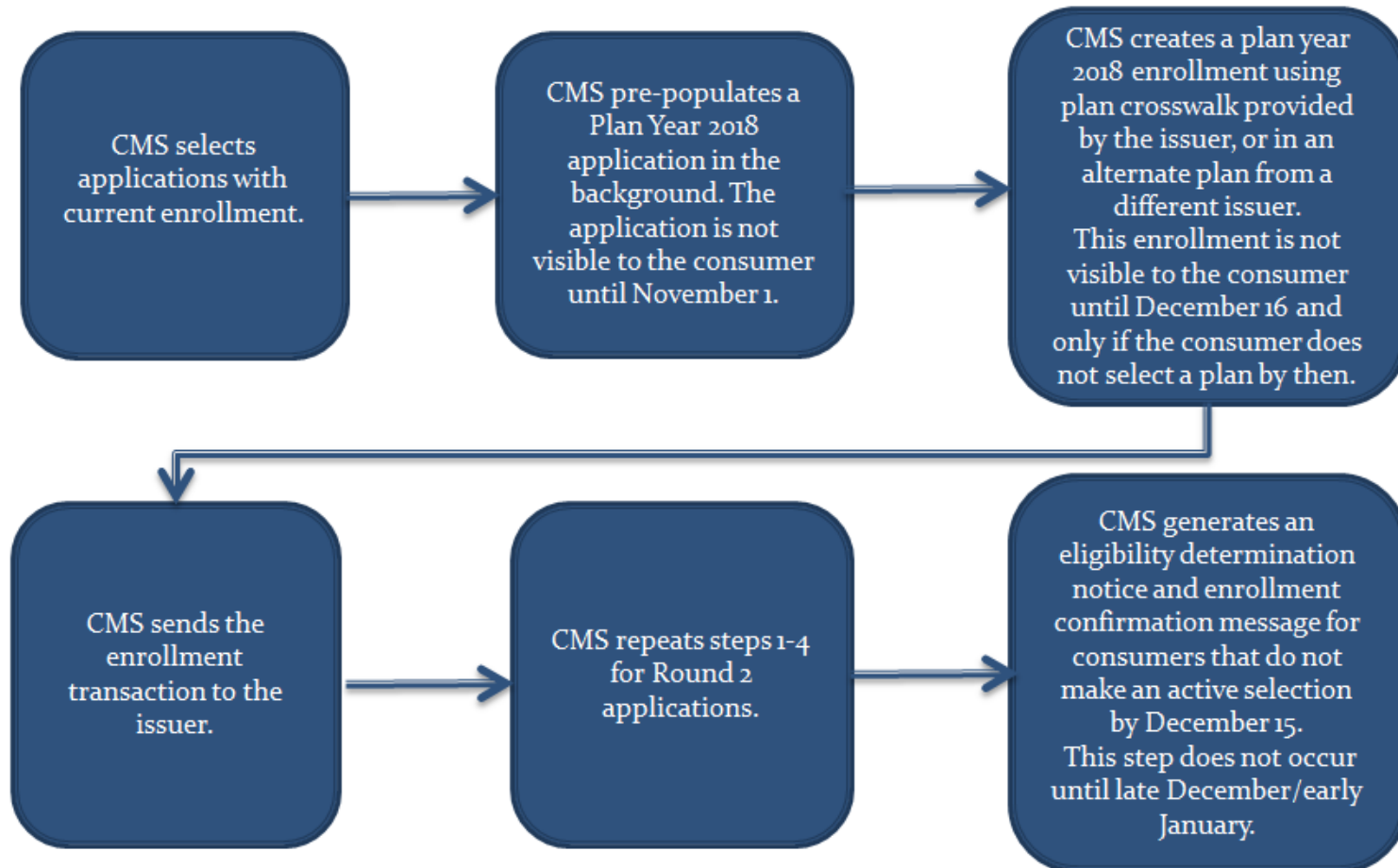
The following information is about your coverage for 2017. It applies only if your household sent the requested documents.

The Marketplace Open Enrollment Period is from November 1, 2016 - January 31, 2017. During this time you can shop for new Marketplace coverage or decide to stay in the same type of plan, if it's still right for you. You're currently getting help with the cost of health coverage each month. It's important to update your household's income and other information to make sure you're getting the right amount of help.

For 2017 coverage, update your Marketplace application by December 15, 2016  
It's important for you to come to the Marketplace and provide updated information during Open Enrollment. If you don't update your Marketplace application with your current household income and other information by December 15, 2016, we'll review your eligibility for coverage and help with costs in 2017 based on information from the most recent income data sources we have for your household.



# Auto Re-enrollment Process



# Auto Re-enrollment for Enrollees with Discontinued Plan (Alternate Enrollment)

- BAR will occur for most enrollees whose current issuer has no re-enrollment QHP option available to them.
- The applicable state authority (e.g., Department of Insurance (DOI)) or CMS will select an alternate QHP from a different issuer.
- The enrollee will receive:
  1. A discontinuation notice from the old issuer;
  2. A notice and emails from his/her Marketplace encouraging active selection and enrollment in a new plan; and,
  3. An acknowledgment of the pending enrollment from the new DOI/CMS-selected plan issuer.
- For the first time, in Plan Year 2018, alternate enrollments will be sent by the Marketplace to issuers in the October BAR wave.
- The enrollee must make the first premium payment to effectuate enrollment (in contrast to same-issuer auto-renewals, where binder isn't required).

# Knowledge Check

The Marketplace Open Enrollment Notice contains which of the following:

- A. Financial assistance amounts
- B. An opt-out option
- C. A call to action for people who are at risk of losing eligibility for advance payments of the premium tax credit (APTC)
- D. None of the above

# Knowledge Check Results

The Marketplace Open Enrollment Notice contains which of the following:

- A. Financial assistance amounts
- B. An opt-out option
- C. A call to action for people who are at risk of losing eligibility for advance payments of the premium tax credit (APTC)
- D. None of the above

# Messages for Discontinued Enrollees Matched to An Alternate Plan

Emphasize OE dates and encourage active choice in selecting a new plan (whether it's the alternate or something else that better meets their needs).

If you don't act, you may be automatically enrolled in X plan. Don't wait—contact us to review this plan and other options before December 15 and choose what works best for you.

We know your plan is no longer available to you. We're here to help. You've been matched with X plan.

Let's check your doctors, benefits, and coverage.

Update your application with the Marketplace and say you're losing coverage December 31. You can then confirm this alternate plan or choose a new one.

If you like the alternate plan the Marketplace has matched you with, be sure to pay the premium bill this insurance company sends you.

Contact us and we'll help you review and find the plan that's right for you.

# Auto Re-enrolled Consumer EDNs

- All consumers who are auto re-enrolled by the Marketplace receive an Eligibility Determination Notice (EDN) after December 15.
- Consumers who are auto re-enrolled in 2018 coverage will see the household income that the Marketplace used to re-determine their eligibility in the results box in the notice.
- As a reminder, enrollees who actively apply will receive an EDN upon submitting the application and never see the BAR EDN.

Family member(s)	Results	Next steps
John Smith	<ul style="list-style-type: none"><li>• Eligible to purchase health coverage through the Marketplace, but more information is needed</li><li>• Eligible for a tax credit (\$53.00 each month, which is \$636.00 for the year, for your tax household), but we need more information from you. This calculation is based on the yearly household income of <u>\$30,000.00</u>. This is the amount that you provided on your Marketplace application or the amount that came from the most recent income data sources available.</li></ul>	<ul style="list-style-type: none"><li>• Send the Marketplace more information</li></ul>

# Resources

Guidance on Annual Eligibility Redetermination and Re-enrollment for Exchange Coverage for 2018 MOEN examples can be found online under the heading of Open Enrollment Notices at:

<https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Guidance-Redetermination-Exchange-2018.pdf>

# Reminder: The Applicant Should Always Log-In To Their Existing Account To Access A Pre-populated Application

It's important to use an enrollee's existing account to re-enroll to avoid creating a duplicate enrollment.

## Review & update your 2018 application

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**We started your 2018 application for you. You need to take a few steps to get coverage for 2018:**

1. Review your application, and make any necessary updates to your information, like changes to your income or household.
2. Submit your application.
3. View your "Eligibility Results."
4. Enroll in a plan by **December 15** to ensure you have coverage for 2018, even if you want to keep the same plan. It's the last day to enroll in coverage for 2018.

[REVIEW MY APPLICATION](#)



# Enrollee's Pre-populated Application

“Update My Application” to begin reviewing and editing the enrollee's pre-populated application.

See below for the information we have about the people on your application. If you need to make changes, check the box next to the type of change you need to make. You can check more than one box.

Full Name	Date of birth	Social Security Number (SSN)	Relationship	Sex	Applying
Susan Griffith	01/01/1980	XXX-XX-	Self	Female	Yes

- Update a person's information or add a new person
- Remove a person
- Update income or other information

**UPDATE MY APPLICATION**

# New for 2018: Extended Opportunity to Opt Out of BAR

An enrollee has until December 31 to tell the Marketplace that they don't want to be auto re-enrolled.

- Confirming “stop coverage for 2018” will send a 2017 termination that day, with a termination date of 12/31/17; simultaneously, the 2018 BAR policy, if already sent, will be cancelled

*For Plan Year 2017, BAR Opt Out was only available until December 15 and did not simultaneously cancel the future year policy.*

## **Don't want your current coverage to continue into 2018?**

You can choose to end all of your Marketplace coverage on 12/31/2017. If you do this, we won't automatically enroll you in coverage next year.

**STOP COVERAGE FOR 2018**

# BAR Opt Out

## You've chosen to stop your Marketplace coverage for 2018

Your Marketplace coverage in these plans will end on 12/31/2017:

- HealthKeepers, Inc(Anthem BCBS) Anthem HealthKeepers Bronze X 6350
- FMLoadTest0946 Select Plan Basic

We won't automatically enroll you in coverage next year. **If you want Marketplace coverage in 2018**, you'll need to complete an application during Open Enrollment. [Learn more about stopping your coverage.](#)

- I understand that I'm ending Marketplace coverage for all members of my household after December 31, 2017, and the Marketplace won't automatically enroll me in coverage for 2018. If I don't enroll in qualifying health coverage, like Marketplace coverage, for 2018, I understand that I may owe money back when I file my federal income taxes.

GO BACK

STOP COVERAGE FOR 2018

# Auto Re-enrollment Plan Display and Active Plan Selection

Healthcare.gov User Interface	November 1 – December 15	December 16+
Marketplace Account – <i>My Plans and Programs</i>	Not Visible	Visible
Plan Results after submitting QHP-eligible application (regular same-issuer BAR)	Displayed as “your current plan” at top of plan results	Displayed as “your current plan” at top of plan results

- Active 2018 plan selections through December 15 automatically cancel any auto re-enrollment already sent to the enrollee.
- 2017 enrollment updates after BAR will be carried forward to the 2018 BAR policy in December BAR.
- If an enrollee hasn't yet been BAR-ed and makes an active plan selection, they will not be BAR-ed; likewise, if an enrollee makes an update to the BAR policy, subsequent 2017 updates will **not** be carried forward to the 2018 policy in December BAR
- Absent a Special Enrollment Period (such as Loss of Minimum Essential Coverage due to 2017 issuer discontinuing coverage), active plan selections cease December 15.