

CENTERS FOR MEDICARE & MEDICAID SERVICES (CMS)

Changes to Enrollment Data Authorized for Issuers

Once a Qualified Individual (QI) has enrolled with a Qualified Health Plan (QHP) offered by an issuer, the enrollee may experience a life change requiring an application update. Such a change may or may not affect eligibility to remain enrolled with the QHP as well as eligibility for any advanced payments of the premium tax credit (APTC) or cost sharing reduction (CSR). Additionally, the enrollee or the QHP may discover discrepancies in the data that the QHP has on file for the enrollee. Both situations require an update to the enrollment data that is on record with both the Marketplace and the issuer.

The Marketplace is the official System of Record, and as such, enrollees should make changes/updates/corrections to their application through the Marketplace. As we progress to online functionality to accommodate application changes, the Marketplace is establishing an interim short-term policy to allow enrollees to make certain specific changes to their enrollment data directly with issuers.

ADDING A DEPENDENT

Enrollees who desire to add dependents as a result of birth, adoption, or placement for adoption, should contact the QHP issuer's call center. If the enrollee happens to call the Marketplace call center, the call center representative will instruct the enrollee to contact the QHP issuer in order to add the dependent to their policy. When the issuer adds the dependent child, they will only change the total premium to reflect the new dependent, and will not recalculate APTC/CSR. Issuers will follow Marketplace rules for assigning effective date of coverage when adding dependents.

Subject to any applicable State laws regarding premium proration, QHP issuers can bill the subscriber for the new total premium. The issuer will also have to set the payment due date. As previously indicated, CMS anticipates this will be a short-term policy and process. Once the appropriate functionality is in place, and the Marketplace notifies the QHP issuer regarding any APTC/CSR recalculation, the QHP issuer will need to make appropriate adjustments to account for any premium over-payments by applying those over-payments against future billing.

CHANGES NOT AFFECTING ELIGIBILITY

Enrollees can contact the QHP issuer to make changes and/or corrections to certain data that do not affect eligibility for coverage in a QHP or eligibility for APTC/CSRs. QHP issuers are permitted to implement those changes within their own systems as necessary. Those circumstances are as follows:

1. Name spelling corrections
2. Email address changes
3. Phone number changes
4. Address changes within the same zip code and county
5. Spelling corrections to street name, or city name.
6. Contact method preference changes
7. Authorized representative changes

The consumer can go directly to the issuer to make these non-eligibility related changes. The Marketplace will reconcile these changes during the monthly reconciliation process.