

**Beyond**   
**the Basics**

Part VII:  
HealthCare.gov  
Redetermination  
& Renewal  
Process for 2022

October 7, 2021

# Webinar Logistics

- All attendees are muted and in listen-only mode
- To ask a question:
  - Click on the Q&A icon in the control panel at the bottom of your webinar screen
  - Type your question into the box
- We will monitor questions and will pause for Q & A at the end
- You can also email questions to [beyondthebasics@cbpp.org](mailto:beyondthebasics@cbpp.org)
- All webinars are recorded and will be available for viewing at [www.healthreformbeyondthebasics.org](http://www.healthreformbeyondthebasics.org)

# Agenda

- Redeterminations of APTC/CSR for people who automatically enroll in 2022 coverage, including recent changes
- Re-enrollment in the same or a different plan in 2022
- Overview of the notices sent by HealthCare.gov and insurers

# 2022 Open Enrollment

- HealthCare.gov's open enrollment period is November 1 through January 15, 2022
- Automatic re-enrollment occurs **December 16** for January 1 coverage
- Enrollment after December 15 has coverage effective February 1

NOVEMBER 2021						
S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

DECEMBER 2021						
S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

JANUARY 2022						
S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

# 2022 SBM Open Enrollment

November 1, 2021

Maryland  
Vermont

Maine  
Idaho

Connecticut

**December 15**

Colorado  
Kentucky

Pennsylvania  
New Mexico

Washington  
Minnesota

Nevada

**January 15**

Massachusetts

**January 23**

California

New Jersey

DC

New York

Rhode Island

**January 31**

# Encourage Active Re-enrollment



# Where Did Enrollees Land in 2021?

- The American Rescue Plan (ARP) created big opportunities for higher APTC/lower premiums
  - Nationwide, **8 million** existing enrollees claimed higher APTC/lower premiums
    - **2.7 million** HealthCare.gov enrollees returned to their applications to get bigger discounts
    - **2.6 million** HealthCare.gov enrollees were automatically redetermined
    - **209,000** people benefited from the unemployment compensation provision that made them eligible for enhanced APTC/CSR, regardless of income
- Millions didn't claim the higher APTC
  - Could be pleasantly surprised if they shop for coverage this year
  - Will get higher 2021 APTC when they file taxes

# The Best Advice: Return to the Marketplace

## Why to Update

---

- Get the most accurate eligibility determination for:
  - Medicaid/CHIP
  - Advance premium tax credit (APTC)
    - Significant APTC increases for 2022
    - Avoid owing some or all of the credit back on their tax return
  - Cost-sharing reductions (CSR)
    - Get the highest up-front financial assistance possible

## What to Update

---

- Income
  - 2022 income projections might be significantly different than the 2020 tax return income in the data hub or the 2021 income projection
  - People who had unemployment compensation and a \$0 benchmark plan will no longer have their income calculated as being at 138% FPL
- Household size
- Offers of employer-sponsored coverage



# The Best Advice: Return to the Marketplace

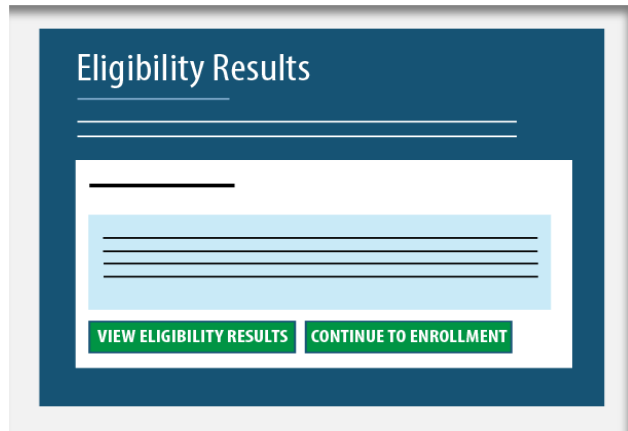
- Explore new health plan options
  - Changes to premiums and out-of-pocket costs
  - Provider network changes
  - Switching plans outside open enrollment is restricted and requires eligibility for a special enrollment period (SEP)
- Cancel unwanted plan
  - Includes canceling old plan when they enroll in Medicaid/CHIP

# Redetermination of APTC by HealthCare.gov



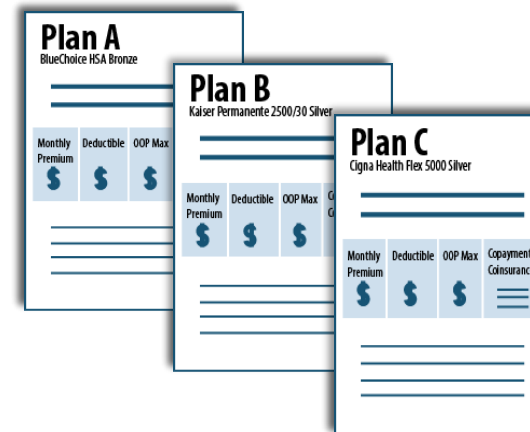
# Two-Step Process When No Action is Taken

## Redetermination



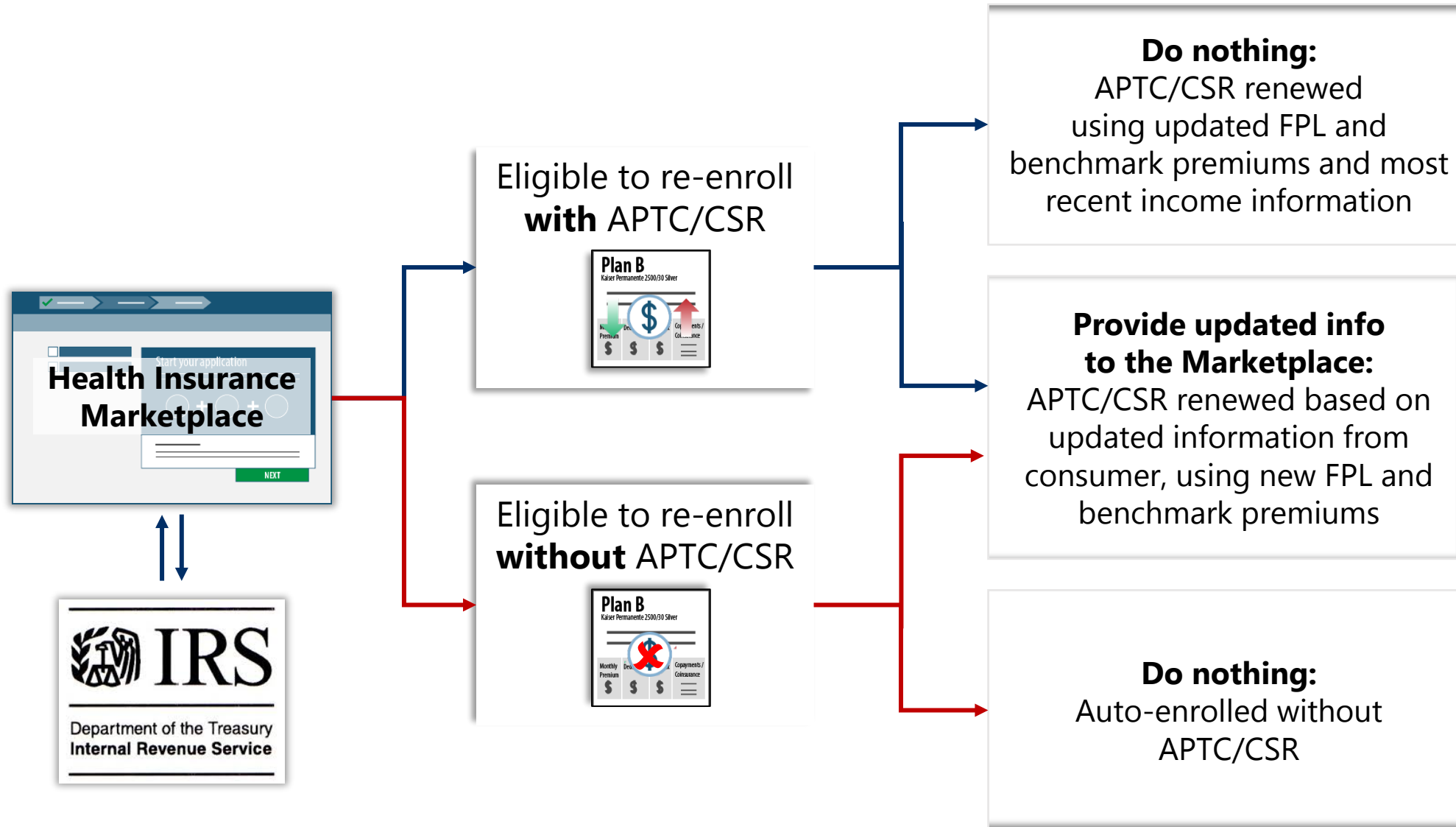
- Process HealthCare.gov uses to assess continued eligibility and amount of financial help

## Re-enrollment



- Process HealthCare.gov uses to assign a 2022 plan

# Redetermination Process for HealthCare.gov



# Notices About Redetermination Process

For more information on Marketplace notices, see sample notices from CMS: [marketplace.cms.gov/applications-and-forms/notices.html](https://marketplace.cms.gov/applications-and-forms/notices.html)

## Marketplace Open Enrollment Notice (MOEN)

- Description of redetermination and re-enrollment process based on the enrollee's situation
- Emphasizes the importance of updating application and comparing plan options
- If eligible, explanation of how amount of APTC/CSR will be determined for 2022 if enrollee does not contact HealthCare.gov
- For certain groups, they will include a warning that if no action is taken, they'll be re-enrolled but WITHOUT APTC or CSR

2021 Application ID: #####

### Open Enrollment starts November 1: Confirm your coverage & financial help for 2022

Review your Health Insurance Marketplace® coverage and costs for next year. The following people are currently enrolled in coverage with financial help through the Marketplace:

- Stacy Morgan

The Marketplace Open Enrollment Period is November 1, 2021 – January 15, 2022. During this time, you can shop for new Marketplace coverage or choose to stay in the same type of plan, if it's still right for you. You're currently getting financial help with the cost of health coverage each month. It's important to update your household income and other information to make sure you're getting the right amount of help.

**Update your Marketplace application for 2022 coverage. You must enroll by December 15, 2021 for your plan's coverage to start on January 1, 2022.**

Visit [HealthCare.gov](https://HealthCare.gov) to update your Marketplace application during Open Enrollment. If you don't update your Marketplace application with your current household income and other information by December 15, 2021, we'll review your eligibility for coverage and financial help in 2022 based on information from the most recent income data sources we have for your household. Even if your situation hasn't changed, we might not have all of your up-to-date information. **This could mean you won't get the right amount of financial help, or you may owe money when you file your 2022 federal income tax return. If you use advance payments of the premium tax credit to help pay for your Marketplace premium, you must file a tax return to report these payments even if you don't usually file taxes.**

# Eligible for Redetermination of APTC

## Standard Group:

- Authorized HealthCare.gov to pull tax data related to income and household size
- Updated their application in 2020 or 2021
- Enrolled in 2021 coverage with APTC and/or CSR
- Don't fall into one of the special groups that cannot be redetermined

## Income-Based Outreach Group:

- One of the following applies:
    - Authorized HealthCare.gov to pull tax data but IRS didn't return any
    - 2020 tax data show income more than 20% higher or lower than most recent eligibility determination
    - 2020 tax data show income under 100% FPL
- ! *Likely had changes and may not receive correct subsidy in 2022 → Marketplace Open Enrollment Notice encourages individuals to return to HealthCare.gov*



**IF NO ACTION TAKEN: Auto-renewed with redetermined APTC/CSR**

# Eligible for Redetermination of APTC

## Unemployment Compensation (UC) Group:

- Reported they received or were approved to receive UC in 2021 (and therefore were eligible for APTC and CSR as if income were 138% FPL)
- ! *Likely to experience a reduction in or loss of financial assistance in 2022 → Marketplace Open Enrollment Notice encourages enrollees to return to HealthCare.gov*



### **IF NO ACTION TAKEN: Auto-renewed with redetermined APTC/CSR**

*\*Certain immigrant enrollees with incomes below 100% FPL will continue to be eligible for APTC/CSRs despite the expiration of ARP UC benefits*

**IF NO ACTION TAKEN: If income is below 100% FPL**, enrollees are still auto-renewed in the plan but not in APTC/CSRs. They could be responsible for a January premium if they don't terminate their plan

# Not Eligible for Redetermination of APTC

## Opt-Out Group:

- **Did not authorize** HealthCare.gov to pull tax data related to income and household size
- ! *HealthCare.gov cannot look up most recent income information to redetermine eligibility*

## Repeat Passive Group:

- **Auto-renewed for past two years**, did not return to the HealthCare.gov to update eligibility in those years, and no IRS information on income for those years
- ! *Available income information cannot be used to redetermine eligibility*

## Not Currently Receiving APTC/CSR:

- Enrolled at HealthCare.gov but not currently receiving APTC and/or CSR
- ! *Might be eligible for APTC/CSR but need to return to HealthCare.gov to claim it*

## Failure to File & Reconcile Group (FTR)\*:

*\*Will not be performed in 2021 or 2022*

- Received APTC in 2020 but **didn't reconcile APTC** received for that year
- ! *Not eligible for APTC until applicant files and attests in the application to reconciling 2020 APTC*
- ! *Will get a special paper-only FTR warning notice*



**IF NO ACTION TAKEN: Automatically re-enrolled but without APTC/CSR**



# What Happens if Someone is Renewed Without APTC?

- Someone who is ineligible for APTC and can't afford the full premium must terminate their plan to avoid auto-renewal and being billed for January

## Don't want your current coverage to continue into 2022?

You can choose to end all of your Marketplace coverage on 12/31/2021. If you do this, we won't automatically enroll you in coverage next year.

**STOP COVERAGE FOR 2022**

- Non-payment puts a person in a grace period
  - The enrollee must catch up on all premiums by the end of the third month of coverage
  - If all premiums aren't paid, coverage will be terminated back to the last day of the first month
  - If they use any services in the second and third months, the insurer won't pay the claims and the enrollee will be responsible for the provider's full charges
  - So, even if coverage is eventually terminated by the insurer, the enrollee is still liable for the January premium
- Non-payment could also mean that the insurer denies future enrollment in the plan

# Not Eligible for Auto-Renewal

## Member of Enrollment Group has Medicare Coverage:

- If an insurer learns that someone is entitled to Medicare Part A or enrolled in Medicare Part B, insurers will terminate Marketplace coverage for all enrollees on December 31, 2021.
- Any individual who shares a policy with a person enrolled in Medicare will not have coverage renewed for 2022 (even if they are still eligible for enrollment)
- ! *Individuals who are not enrolled in Medicare should return to the Marketplace and re-enroll in coverage*
- ! *If open enrollment has ended, a special enrollment period is available for eligible individuals to re-enroll in coverage*

*Should receive notices from:*

- **Insurer:** Informing about the termination of coverage and the non-renewal for 2022
- **Marketplace:** Informing individuals that they might be eligible to re-enroll in coverage during open enrollment or during a special enrollment period



---

**IF NO ACTION TAKEN: Coverage will not be renewed for 2022**

---

# How is APTC/CSR Redetermined?

## Information used to redetermine 2022 APTC and CSR:

- Updated federal poverty guidelines
- 2022 benchmark plan premium information
- Most recent income information available, adjusted to 2022 (maintaining FPL level)
  1. 2021 projected income
  2. If no 2021 projection, use 2020 tax data
  3. If neither of the above, use projected 2020 income

- Katie updated her income information at open enrollment *or during the year* and re-enrolled in 2021 coverage
  - If Katie doesn't update her income for 2022, HealthCare.gov will adjust her most recent 2021 projected income so that her 2022 FPL matches her 2021 FPL

	2021 Projected Income	2022 Adjusted Income
<b>FPL</b>	<b>150%</b>	<b>150%</b>
<b>Adjusted Income</b>	\$19,140	\$19,320

- Sasha enrolled in 2020 and auto-renewed for 2021. She didn't update her projected income at any point in 2021.
  - HealthCare.gov will use 2020 tax data as most recent income to be adjusted

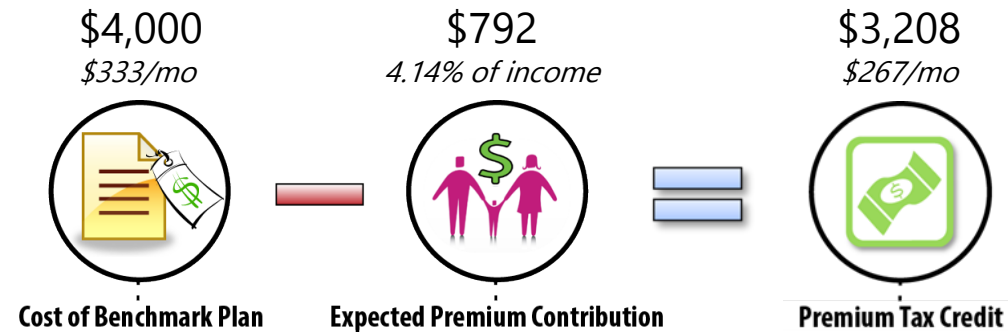
	2020 Tax Data	2022 Adjusted Income
<b>FPL</b>	<b>265%</b>	<b>265%</b>
<b>Adjusted Income</b>	\$33,814	\$34,132

# Example: Redetermining Katie's APTC (no income update)

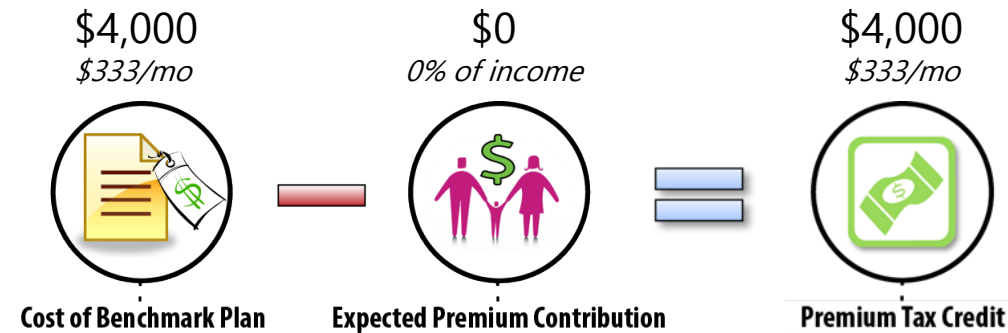


At OE, Katie's 2021 projected household income was **\$19,140 (150% FPL)**

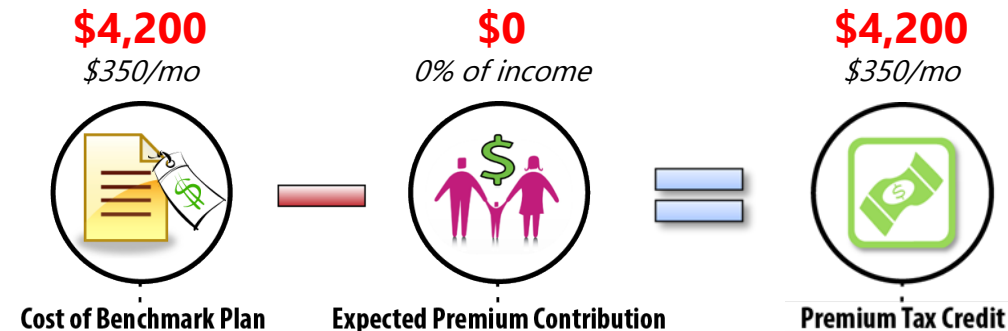
Her 2021 APTC (pre-ARP)



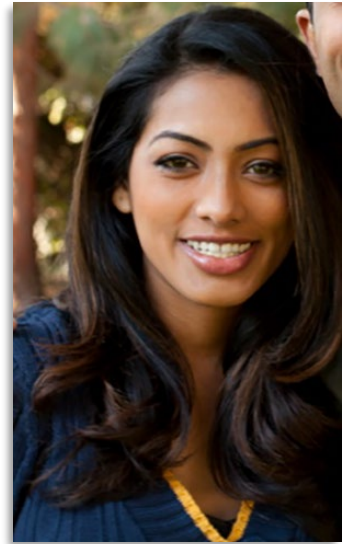
Her 2021 APTC post-HealthCare.gov redetermination (with no income change)



Her 2022 redetermined income is **\$19,320** (holding 150% FPL constant)

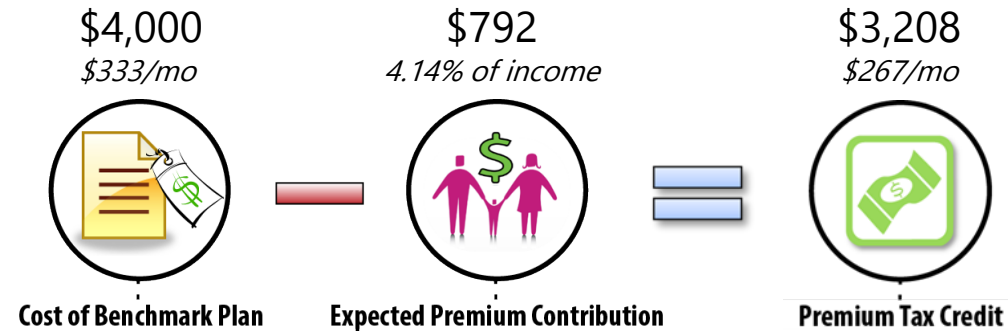


# Example: Redetermining Katie's APTC (income update)

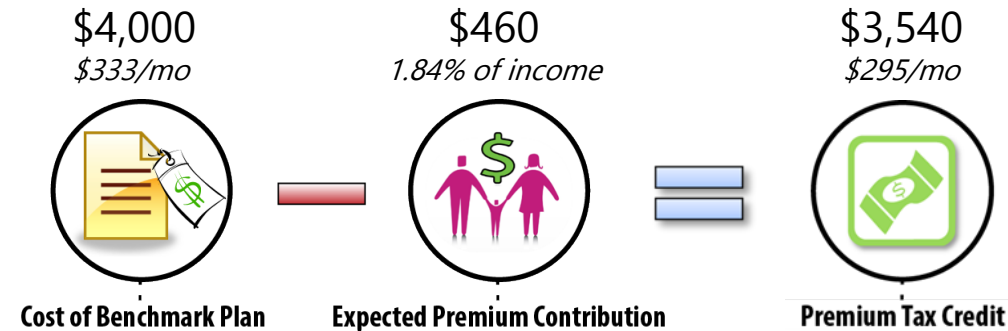


At OE, Katie's 2021 projected household income was **\$19,140 (150% FPL)**

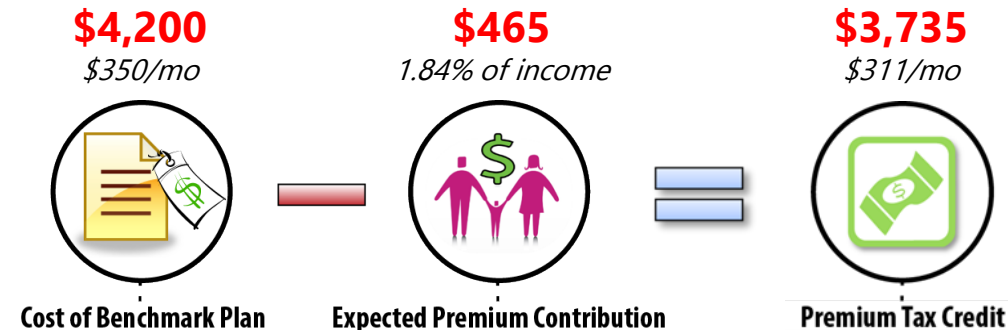
Her 2021 APTC (pre-ARP)



She updated her income to **\$25,000 (196% FPL)** when she claimed her ARP savings



Her 2022 redetermined income is **\$25,245** (holding 196% FPL constant)



# Example: Redetermining Katie's APTC (passive 2021 enrollment)

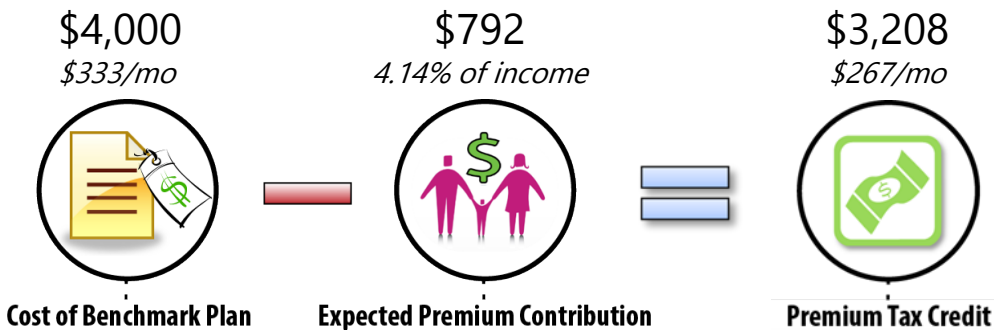


**In 2020:** Katie enrolled with projected income of \$18,735 (150% FPL) for PY 2020

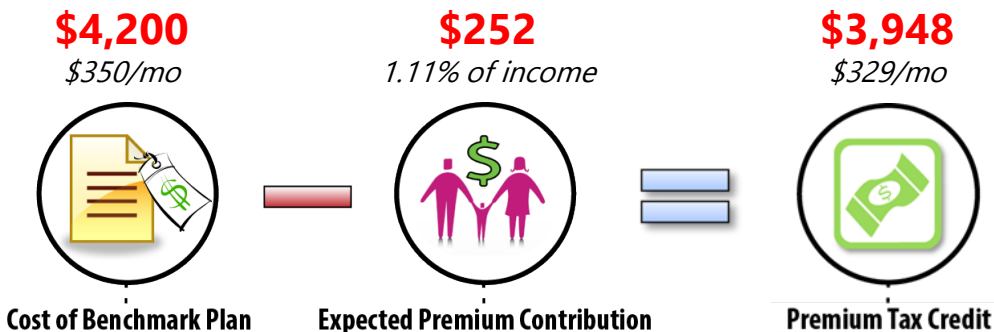
**In 2021:** Katie passively re-enrolled for PY 2021 with income redetermined as \$19,140 (150% FPL). Also in 2021, she filed her 2020 taxes. Her 2020 household income was \$22,000 (176% FPL).

**In 2022:** What is Katie's redetermined income?

Her 2021 income projection was redetermined as \$19,140. (Pre-ARP)



Her 2022 redetermined income will be **\$22,669** (2020 tax return data, holding 176% FPL constant)

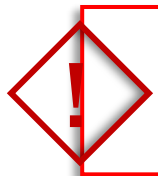


# Auto-Enrollment for 2022 Plans in HealthCare.gov



# Auto-Enrollment Process

- If no action by December 15, 2021, a person will be auto-enrolled in a plan starting January 1, 2022
  - Subsidies will be adjusted in accordance with the redetermination process for APTC and CSR
- Hierarchy to determine plan for auto-enrollment
  - **First option:** Same plan as previous coverage year
  - **Second option:** If same plan is not available, new plan with same insurer that is as similar as possible to current plan
  - **Third option:** If no plans available from same insurer, new plan with different insurer that is as similar as possible to current plan



*A person can go back to the HealthCare.gov at any time during open enrollment and pick a different plan (up to Jan 15)*



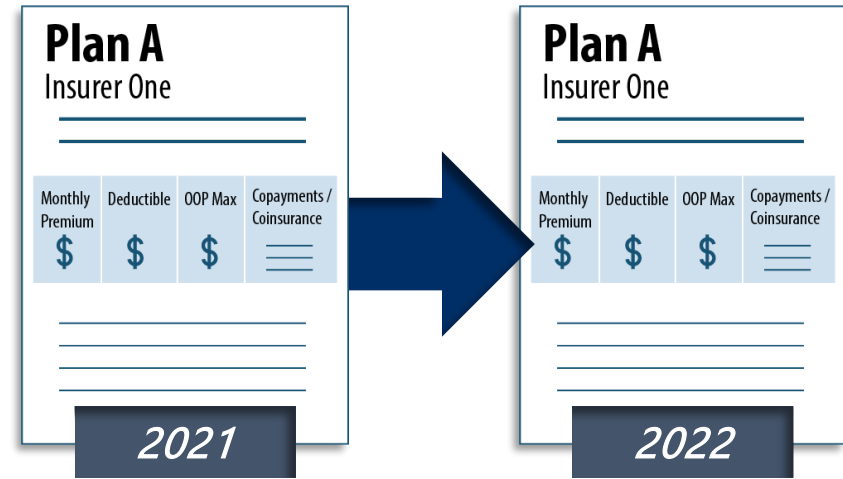
# Auto-Enrolled Into the Same Plan

If current plan is still available:

- Will be auto-enrolled in **same plan as previous year**

## Notice will contain:

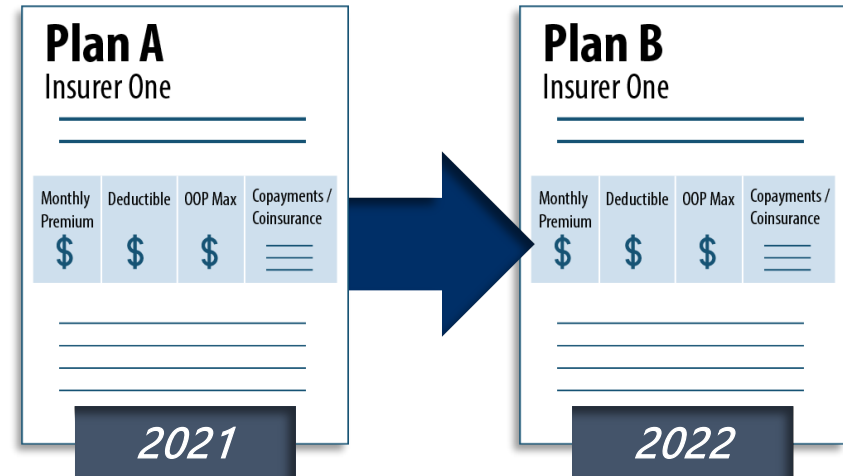
- Premiums, benefits, and cost sharing changes
  - ! Premium will be based on the monthly APTC amount a person currently receives *or* redetermined APTC, depending on the timing of the insurer's notice
- Changes to the plan
- Can return to HealthCare.gov until January 15th to pick a different plan
  - If the enrollee doesn't return by December 15th, they will be auto-enrolled in the same plan starting January 1, but they have the option to change plans until January 15
- Have until December 31st to cancel coverage without incurring any 2022 premiums
  - If the plan isn't canceled, the enrollee will have a January premium



# Auto-Enrolled Into a New Plan

If current plan is **not** available:

- Will be auto-enrolled in **new plan with same insurer**



**Notice will contain:**

- All elements of the notice for re-enrollment in the same plan, plus eligibility for a special enrollment period due to discontinuation of the previous year's plan

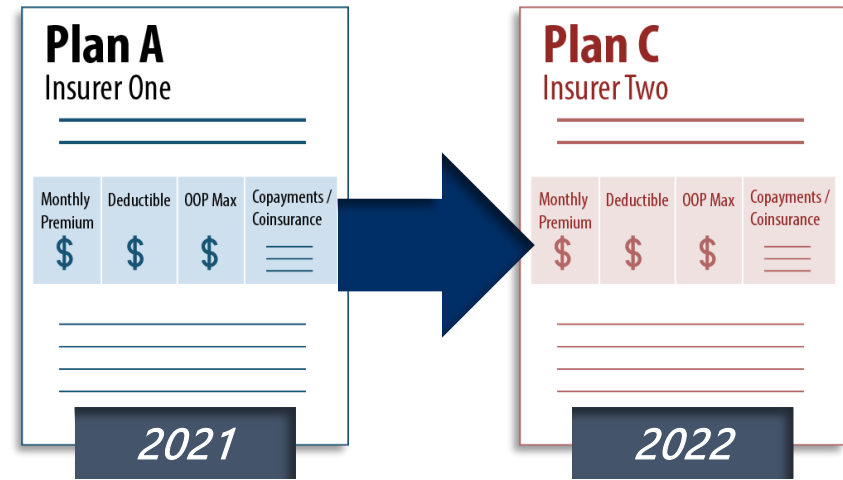
# Auto-Enrolled Into a New Plan With New Insurer

If current plan is not available and insurer is no longer selling plans in the HealthCare.gov marketplace:

- Will be matched with **a new plan with different insurer**

## Notices to expect:

- A discontinuation notice from the current insurer
  - Eligible for a special enrollment period due to discontinuation of previous year's plan
- A notice from HealthCare.gov that it matched enrollee with a different plan with a different insurer
- A notice from the new insurer ("cross-issuer notice") on new plan and details on paying first month's premium
  - Must pay first month's premium to effectuate coverage (if no January premium payment, enrollment will not go into effect)
  - Have until January 1st to pay first month's premium



# SEP When Auto-Enrolled in New Plan

For more on SEPs, see the  
Special Enrollment Period  
Reference Chart:  
[www.healthreformbeyondthebasics.org/sep-reference-chart](https://www.healthreformbeyondthebasics.org/sep-reference-chart)

- If an enrollee's 2021 plan is discontinued, the enrollee is eligible for a SEP based on loss of other qualifying coverage
- People who are auto-enrolled in a new plan (with a new insurer or with the same insurer) can still change plans up to 60 days BEFORE or AFTER the discontinuation date of 2021 plan (December 31, 2021)
  - If before, the effective date is the first date after loss of coverage
  - If after, the effective date is the first day of the month following plan selection

# Example: Auto- Enrollment



## **Katie's plan is no longer available at HealthCare.gov:**

- She receives
  - A notice from her insurer about discontinuation of her plan
  - A notice that HealthCare.gov matched her with a new plan with a different insurer
  - A notice from the new issuer about the matched plan

## **Katie checks her HealthCare.gov account on December 20 and sees two issues:**

- She has been auto-redetermined for APTC of \$300/month for 2022
  - She expects to make more money in 2022 and updates her application so her APTC eligibility is now \$150/month
- Katie has been matched with a new plan with a new insurer
  - When she updates her application, the matched plan is shown at the top of her options during plan selection
  - She likes the plan and wants to enroll
  - She must pay the first month's premium to effectuate coverage, which begins January 1

# Example: Auto- Enrollment



## But what if Katie wants to change plans?

- When she updates her application, she will note that she is losing coverage December 31, 2021
- Because her plan was discontinued, she is eligible for an SEP

## Changing plans after January 1st:

- *If she auto-enrolled in the plan she was matched with:*
  - She will have 60 days after the end of her 2021 plan to use the SEP
  - Coverage will be effective the first day of the month following plan selection
- *If renewal plan is never effectuated:*
  - Katie doesn't pay the first month's premium for the plan she's been matched with and she is not auto-enrolled in any plan
  - She can still use the SEP to enroll in coverage after January 1, but she may have a gap in coverage

# Notices About Renewal Process

For more information on Marketplace notices, see sample notices from CMS: [marketplace.cms.gov/applications-and-forms/notices.html](https://marketplace.cms.gov/applications-and-forms/notices.html)

## Eligibility Determination Notice (EDN)

- Everyone gets an EDN
  - Eligibility determination for the upcoming plan year
  - Confirmation of plan name, plan ID, and financial assistance
- No EDN if not successfully re-enrolled
- *Read closely!* Multiple versions of the EDN:
  - Eligible for a QHP and APTC (and cost-sharing reductions)
  - Eligible for a QHP without APTC
  - Mixed eligibility (Medicaid/APTC)
  - Assessed eligible for Medicaid

### Eligibility notice: Take action to enroll & use your financial help

Household member(s)	Results	Next steps
Michael Jones	<ul style="list-style-type: none"><li>• Eligible to buy a 2021 Marketplace plan.</li><li>• Eligible for advance payments of the premium tax credit to help pay for a Marketplace plan. You can use up to this much of the tax credit:<ul style="list-style-type: none"><li>• \$[amount] each month, which is \$[amount] for the year, for your tax household.</li></ul></li><li>• This is based on the yearly household income of \$[amount]—the amount that you put on your application, or that came from other recent information sources.</li><li>• Can choose a Silver plan with lower copayments, coinsurance, and deductibles (cost-sharing reductions).</li></ul>	<ul style="list-style-type: none"><li>• Choose a plan and pay your first month's premium.</li><li>• You must choose a Silver plan to get cost-sharing reductions, which provide extra savings on out-of-pocket costs.</li></ul>

# Notices About Renewal Process

For more information on Marketplace notices, see sample notices from CMS: [marketplace.cms.gov/applications-and-forms/notices.html](https://marketplace.cms.gov/applications-and-forms/notices.html)

## Enrollment Confirmation Message

- Sent if enrollee has not returned to the Marketplace for an active plan selection by December 15
  - Eligibility determination for the upcoming plan year
  - Confirmation of plan name, plan ID, and financial assistance
- *Read closely!* Multiple versions of the Enrollment Confirmation:
  - Standard auto-renewal
  - Enrolled with another insurer
  - Enrolled without financial assistance
  - Enrolled but need to submit documents

You're automatically enrolled in the Marketplace plan(s) below for coverage beginning January 1, 2021.

Enrolled individuals	Now enrolled in this plan	Will I get financial help for this plan in 2021?
Alice Conway	[Plan name] Plan ID: [Number] Effective January 1, 2021	Yes. This full amount of your premium tax credit will be applied to your monthly insurance premium: \$108.00. This plan has lower copayments, coinsurance, and deductibles (cost-sharing reductions).



# Terminating Coverage

## Don't want your current coverage to continue into 2022?

You can choose to end all of your Marketplace coverage on 12/31/2021. If you do this, we won't automatically enroll you in coverage next year.

[Stop coverage for 2022.](#)

## Terminate coverage

You can terminate (end) your Marketplace coverage.

To end your coverage in **all** plans and programs (including dental plans), select "END (TERMINATE) ALL COVERAGE."

To end your coverage in all or some **dental** plans, select "END (TERMINATE) DENTAL COVERAGE."

Enrolled in 1 plan(s)

**END (TERMINATE) ALL  
COVERAGE**

**END (TERMINATE) DENTAL  
COVERAGE**

- Enrollees have until December 31<sup>st</sup> to cancel 2022 coverage and stop auto-renewal
- If coverage isn't stopped, the enrollee may be responsible for January's premium

# Tips for Assisters

- Emphasize the importance of updating information and shopping for plans
  - Help people more accurately project 2022 income, especially if their circumstances fluctuate.
- Remind people that auto-enrollment happens after December 15 for January 1 coverage
- Remind people they only have until January 15 (the end of open enrollment) to change plans, unless they qualify for a SEP
  - Look out for people eligible for cost-sharing reductions who choose or are auto-enrolled into a non-silver plan
- Remind people to cancel their plan if they don't wish to re-enroll

# Resources

- Guidance on Annual Eligibility Redetermination and Re-Enrollment
  - [Guidance on Failure to Reconcile \(2021\)](#)
  - [Guidance for Coverage Year 2019 and Beyond \(PDF\)](#)
  - [Guidance for Coverage Year 2018 \(PDF\)](#)
  - [Guidance for Coverage Year 2017 \(PDF\)](#)
  - [Guidance for Coverage Year 2016 \(PDF\)](#)
- Notices:
  - [Insurer template notices](#): Coverage renewals or discontinuation
  - [Marketplace notices](#): See *Open Enrollment Notices*

# Upcoming Webinars

## Part VIII: Tying It All Together

- Tuesday, October 12 | 1 pm ET (10 am PT)

## Part IX: Best Practices for Assisting People with Disabilities

- Thursday, October 14 | 1 pm ET (10 am PT)

**Register for upcoming webinars at**  
**[www.healthreformbeyondthebasics.org/events](http://www.healthreformbeyondthebasics.org/events)**

# Contact

- Tara Straw, [tstraw@cbpp.org](mailto:tstraw@cbpp.org)  
→ Twitter: @TaraStraw
- Inna Rubin, [irubin@cbpp.org](mailto:irubin@cbpp.org)
- General inquiries: [beyondthebasics@cbpp.org](mailto:beyondthebasics@cbpp.org)

*This is a project of the Center on Budget and Policy Priorities*  
[www.cbpp.org](http://www.cbpp.org)