

As the World Turns to 2014: Outreach and Enrollment Evolve

November 2, 2011

Anne Marie Costello

Centers for Medicare & Medicaid Services
Department of Health and Human Services



What will the “MAGI” Consumer Experience be Like in 2014?

- Consumers will be able to access the appropriate coverage across multiple programs through a single application and eligibility process.
- No matter how an application is submitted or which program receives the application, an individual will experience a consistent process and receive a consistent eligibility determination without the need to submit information to multiple programs.
- This seamless, coordinated process ensures that people obtain the coverage they need and minimizes administrative burden on individuals, states, and health plans.

Creating a Seamless, Coordinated Eligibility Process

Guiding principles related to eligibility and enrollment:

- Ensure access to coverage
- Provide high-quality, responsive customer service
- Coordinate all coverage options seamlessly
- Maximize the use of technology and data matching
- Ensure accuracy
- Minimize burden
- Make real-time determinations

Seamless, Streamlined Eligibility and Enrollment

Submit single, streamlined application

- Online
- Phone
- Mail
- In Person

Verify and determine eligibility

- Data-driven verification process supported in part by the Federally-managed data services hub
- Eligibility for:
 - Qualified health plans (QHPs)
 - QHPs with tax credits and cost-sharing reductions
- Medicaid and CHIP

Enroll in affordable coverage

- Online plan comparison tool available to inform QHP selection
- Advance payment of the premium tax credit is transferred to the QHP
- Enrollment in a QHP or Medicaid/CHIP

Coordination between the Exchange, Medicaid, and CHIP

- The Exchange and State agencies will work together to ensure that the seamless, coordinated eligibility process is executed regardless of where an application is submitted or for which program an individual is determined eligible.
- Data sharing between the Exchange and State agencies will occur through secure interfaces, subject to privacy and security standards to protect information

When can Consumers Enroll?

Initial Open Enrollment

- 10/1/13 – 2/28/14

Annual Open Enrollment

- 10/15 – 12/7

Special Open Enrollment

- Similar to those found in Medicare Part D and the Internal Revenue Code (related to SEPs for group health insurance).

Medicaid and CHIP

- Can enroll at any time

Supporting Streamlined Enrollment Modernized, Efficient Systems

- Joint IT Guidance for Medicaid and the Exchanges
- Enhanced FMAP for Medicaid Eligibility Systems
 - 90% FFP for eligibility and enrollment system design and development until 12/31/15
 - 75% FFP for system maintenance
 - 7 Conditions & Standards
- Exchange Innovator Grants Issued