

Updating Payment Parameters, Section 1332 Waiver Implementing Regulations, and Improving Health Insurance Markets for 2022 and Beyond Final Rule

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Notice of Benefit & Payment Parameters for 2022

Context

- Disruption of typical rulemaking cadence
- Administrative Procedure Act
- Final Rule

Timeline

- Comment Window End: Dec. 30, 2020
- Part 1: Publication Date: Jan. 19, 2021
- Part 2: Publication Date: May 5, 2021
- Part 3: Publication Date: Sept. 17, 2021



- Reduction of the FFE user fee to 2.25% (down from 3.0%) and further reduction of the SBE-FP user fee to 1.75% (down from 2.5%).
- A new option for Exchanges to satisfy ACA requirements through Direct Enrollment via private sector-operated websites.
- Codification of existing administration guidance on 1332 waiver applications and ongoing monitoring that relaxes ACA requirements.



- Premium Adjustment Percentage methodology reverted to prior approach (based on less volatility).
- Premium Adjustment Percentage updated to 1.3760% (down from proposed 1.4409%).
- Maximum Annual Limitation on Cost Sharing updated to \$8,700 for self-only coverage and \$17,400 for other-than-self-only coverage (down from \$9,100 for self-only coverage and \$18,200 for family coverage).
- Required Contribution Percentage update to 8.09% (down from proposed 8.47228%).

- Special Enrollment Period changes: COBRA enrollees, those who are unaware of experiencing a qualifying event.
- Continued non-enforcement of Employer-Sponsored Coverage Verification requirements.
- Extension of CMS review authority to issuers in all states (regardless of FFE, SBE-FP or SBE status).
- Increased clarity on definitions for direct enrollment and enhanced direct enrollment entities to better codify the increasing role of tech vendors in this space, review how a single entity may fit multiple definitions, and how to comply with the plethora of regulations.

Consistent with Executive Order 14009 and the Administrative Procedure Act, CMS reversed these changes

- Reduction of the FFE user fee to 2.25% (down from 3.0%) and further reduction of the SBE-FP user fee to 1.75% (down from 2.5%).
 - CMS finalized a new FFE user fee rate of 2.75 percent of total monthly premiums; and a new SBE-FP user fee rate of 2.25 percent of monthly premiums.
- A new option for states to satisfy ACA requirements through Direct Enrollment via private sector-operated websites.
 - CMS repealed the Direct Enrollment option.
- Codification of existing administration guidance on 1332 waiver applications and ongoing monitoring that relaxes ACA requirements.
 - CMS rescinded the Trump era approach and reiterated that statutory guardrails.

- Extension of Open Enrollment Period: November 1 January 15
- Reinstatement of Navigator Program Requirements
- Rescission of "Double Billing" Rule for Non-Hyde Abortion Coverage
- Monthly SEP for Low Income Enrollees



Questions

