

Proposed Rule: 2024 Payment Notice

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Notice of Benefit & Payment Parameters for 2024

- Context
 - Notice and Comment Rulemaking
 - Administrative Procedure Act
 - Proposed Rule
- Timeline
 - Publication Date: Dec. 21, 2022
 - Comment Window End: Jan. 30, 2023
- Effective Date: Plan Year 2024

Proposed Rule

- Improper Payment Pre-Testing and Assessment program in accordance with the Payment Integrity Information Act of 2019 (PIIA)
- Income and FTR Verification:
 - Expansion of FTR timeframe to two consecutive years
 - Income attestation accepted when no data is available from IRS
 - Automatic 60 –day extension to existing 90-day timeframe to provide documentation for income verification requests

Proposed Rule (continued)

- More expansive considerations for renewals cross-mapping/walking
- Door-to-door enrollment assistance permitted by assisters
- Loss of Medicaid or CHP+: Expansion of SEP window to 60 days before and 90 days after the loss

Proposed Rule (continued)

- Accelerated effective dates to avoid gaps in coverage in the event of a mid-month loss of coverage
- Allowing non-enrollees (stakeholders or other interested parties) to provide evidence of material plan display error
- Comment request on provider network issues

- **Timeline**
 - Comment Period ended Jan. 30, 2023
 - Review and Finalization
- **Sub-Regulatory Action**
 - Continuity as continuous coverage requirements unwind: guidance on noticing, outreach approaches, special enrollment, etc.
 - Health Equity
 - Program Integrity

Questions