Applicable Rules

If you're enrolled in a Marketplace plan first and then become eligible for Medicare, you can choose to remain enrolled in your Marketplace plan at least through the end of the plan year. However, there are important considerations:

- You no longer qualify for APTC or cost-sharing reductions (CSRs) once your premium-free Medicare Part A begins or the first full month after your IEP ends, even if you do not enroll in premium-free Medicare Part A.
- You will be paying for potentially duplicative coverage.
- Medicare doesn't coordinate benefits with Marketplace plans.
- If you choose to terminate your Marketplace plan, pay close attention to disenrollment timeframes.

Medicare Periodic Data Matching (PDM): Notices to Dually-Enrolled Consumers

- The Marketplace sends Medicare PDM notices to consumers who may be dually enrolled in Medicare that is MEC (referred to as MEC Medicare) and Marketplace coverage with APTC and CSRs. Medicare Part A is MEC Medicare. Notices are uploaded to the consumer's My Account or mailed via the US Postal Service, depending on the consumer's stated preference.
- Medicare PDM Notices will include:
 - Name(s) of consumer(s) found to be dually-enrolled.
 - A recommendation that individuals found to be enrolled in MEC Medicare and a Marketplace plan should end their Marketplace coverage.
 - Instructions on how to end Marketplace coverage or Marketplace financial assistance.
 - Where to find contact information to confirm if they are enrolled or if they have any questions about Medicare.

Medicare PDM (Cont.)

PDM process updates occurred in 2019. Applicants now have the option to provide written consent for the Exchange to end their Marketplace coverage if they are later found to be enrolled in Medicare through the Medicare PDM process by using a newly added attestation to the Marketplace application.

If anyone on your application is enrolled in Marketplace coverage and is later found to have other qualifying health coverage (like Medicare, Medicaid, or the Children's Health Insurance Program (CHIP)), the Marketplace will automatically end their Marketplace plan coverage. This will help make sure that anyone who's found to have other qualifying coverage won't stay enrolled in Marketplace coverage and have to pay full cost.

I agree to allow the Marketplace to end the Marketplace coverage of the people on my application in this situation.

I don't give the Marketplace permission to end Marketplace coverage in this situation. I understand that the affected people on my application will no longer be eligible for financial help and must pay full cost for their Marketplace plan.

Medicare PDM Process

- If you have both Medicare and a Marketplace plan with APTC and CSR, you'll now have 30 days from receipt of the notice to return to the Marketplace to either end:
 - APTC and CSRs, or
 - > Your Marketplace plan, if you so choose.
- You'll get specific instructions in your PDM notice based on your Medicare enrollment status.
- You'll also have the option to:
 - Disagree with the results of the Medicare PDM notice if you think you aren't enrolled in Medicare; or
 - Change your attestation response from agree to disagree if you no longer want the Marketplace to end your coverage.

Medicare PDM Process (Cont.)

- If you don't take any action after the 30-day period ends, the Marketplace will either:
 - End APTC and CSRs, or
 - End Marketplace coverage (if you permitted the Marketplace to act on your behalf and end your Marketplace coverage if found to be enrolled in both Medicare and the Marketplace at a later date).
- The rules around eligibility for Medicare Part A and APTC differ depending on whether the consumer must pay a premium for Medicare Part A and when they sign up.