

# CMS Enrollment & Disenrollment Regulatory Compliance

San Francisco Region IX  
Centers for Medicare & Medicaid Services



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## MA Enrollment Elements Part C

- ER01 – Correct Enrollment Election
- ER02 – Enrollment Election Receipt
- ER03 – Enrollment Eff Date (Timeliness)
- ER04 – Enrollment Election Completion Process
- ER05 – Enrollment Acknowledgement (Timeliness)
- ER06 – Enrollment Acknowledgement (Notice Content)
- ER07 – Denial of Enrollment (Timeliness)
- ER08 – Denial of Enrollment (Notice Content)

\* Sample Elements Only



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## MA Enrollment Elements Part C

- ER11 – Submission of Enrollment Transactions to CMS
- ER12 – Retroactive Enrollment Request
- ER13 – Employer Group Retroactive Enrollment
- ER15 – Appropriate Follow-Up on SCC Changes
- ER17 – Working Aged Survey

\* Sample Elements Only



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## MA Enrollment Elements Part C

- ER16 – Prohibition of Health Screening

\* Ongoing elements



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## MA Disenrollment Elements Part C

- DN01 – Compliant Disenrollment Process
- DN02 – Voluntary Disenrollment (Timeliness)
- DN03 – Voluntary Disenrollment (Notice Content)
- DN04 – Refund of Premium
- DN05 – Involuntary Disenrollment (Nonpayment)
- DN06 - Involuntary Disenrollment (Move)

\* Sample Elements Only



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## MA Disenrollment Elements Part C

- DN07 – Compliant Retroactive Disenrollment Request
- DN08 – Involuntary Disenrollment for Disruptive Behavior
- DN09 – Involuntary Disenrollment for Fraud or Abuse
- DN10 – Inappropriate Encouragement to Disenroll

\* Ongoing elements



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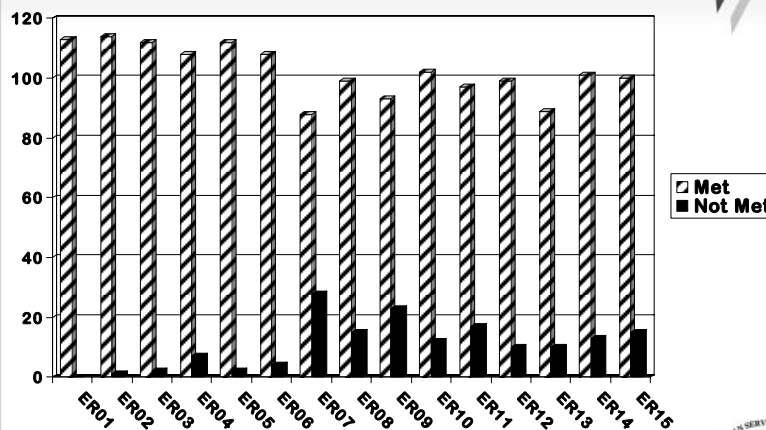
## MA-PD Enrollment Elements Part D

- ER09 – Auto & Facilitated-Enrollment of Full Benefit Dual Eligible Beneficiary & Other Low Income Subsidy Eligible Beneficiary.
- ER13 – Confirmation of Enrollment for Members of Employer/Union Group Receiving Employer Subsidy.



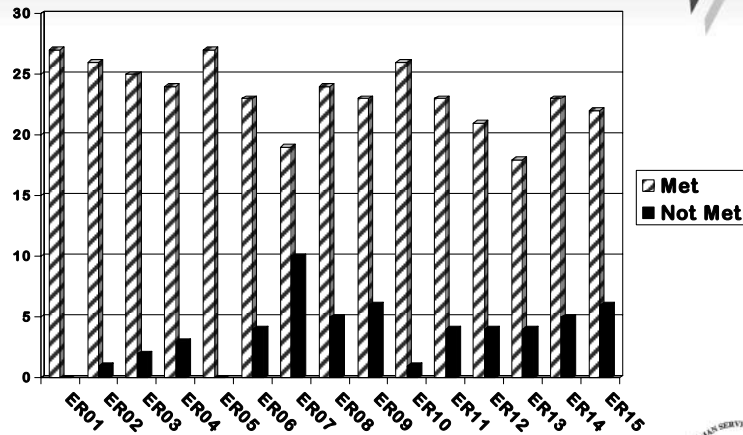
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## Enrollment Findings – National 2003, 2004, 2005



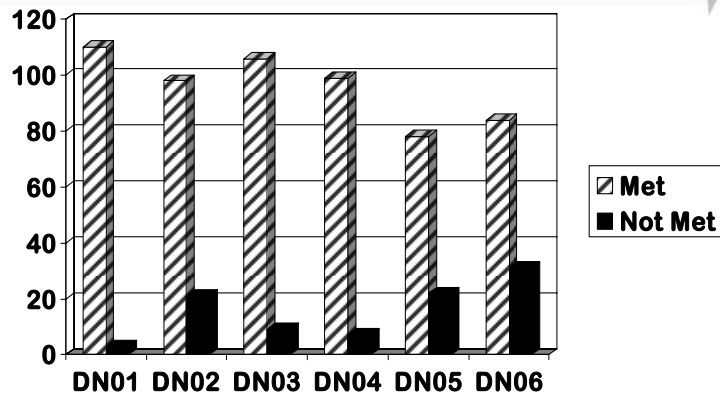
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## Enrollment Findings – Region IX 2003, 2004, 2005



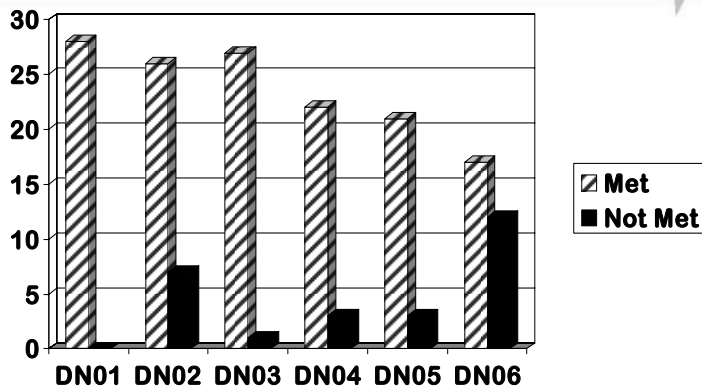
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## Disenrollment Findings – National 2003, 2004, 2005



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## Disenrollment Findings – Region IX 2003, 2004, 2005



## “Top 2” Enrollment Findings Region IX

- ER07 – Denial of Enrollment (Timeliness)
- ER15 – Appropriate Follow-Up on SCC Changes

## ER07 Requirement

### Section 40.2.3 Chapter 2

The organization must send notice of the denial to the individual that includes an explanation of the reason for denial. The notice must be sent within ten calendar days of either 1) receipt of the enrollment request or 2) expiration of the time frame for receipt of requested additional information.

Note – this requirement was revised in the June 20, 2007 update to Chapter 2.



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## ER07 Denial of Enrollment

### Common Problems

- Denial notice not sent
- Denial notice sent late
- Denial notice sent too soon
- Request for additional info sent, no response from applicant, no further action taken



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## ER15 Requirement

### Section 50.2.1 Chapter 2

The MAO reviews the CMS Transaction Reply/Monthly Activity Report listing and the Maintenance Records upon receipt and appropriately follows-up on notification of a potential change in residence for its member reported to it by CMS.

Was appropriate and timely action taken?



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## ER15 Follow Up on SCC Changes

### Common Problems

- No reaction to monthly reply listing\*
- Inadequate address verification form
- Incomplete verification process

\* Weekly reply listings effective 2006



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## “Top 2” Disenrollment Findings Region IX

- DN02 – Voluntary Disenrollment (Timeliness)
- DN06 – Involuntary Disenrollment (Move Out of Service Area)



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## DN02 Requirement

### Section 50.1.4 Chapter 2

- After the member submits a request, the MAO must provide the member with a disenrollment notice within ten calendar days of receipt of the request to disenroll.
- Except for disenrollment in which the member has disenrolled directly through the MAO, MAOs must send a disenrollment confirmation notice to the member within ten calendar days of the availability of the transaction reply report.



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## DN02 Voluntary Disenrollment (Timeliness)

### Common Problems

- Disenrollment acknowledgment notice not sent or sent late
- Disenrollment confirmation notice not sent or sent late



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## DN06 Requirement

### Section 50.2.1 Chapter 2

MAO must disenroll members who permanently leave the approved plan service area, or who reside outside the approved plan service area for more than six (6) months, unless they move into an approved plan continuation area and the member has elected the continuation of enrollment option, or the plan offers a visitor/traveler program.



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## DN06 – Involuntary Disenrollment (Move Out of Service Area)

### Common Problems

- Disenrollment without evidence that member resides out of service area
- Premature disenrollment
- Confirmation of OOA – no disenrollment
- Use of P&P for failure to pay plan premiums



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## Potential Problems Elements

- ER12 – Retroactive Enrollment Request
- DN04 – Refund of Premium
- ER09 – Auto & Facilitated-Enrollment of Full Benefit Dual Eligible Beneficiary & Other Low Income Subsidy Eligible Beneficiary.
- ER13 – Confirmation of Enrollment for Members of Employer/Union Group Receiving Employer Subsidy.



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## ER12 Requirement Part C Element

### Section 60.4 Chapter 2

The MAO request retroactive enrollments, when appropriate, and adheres to CMS requirements in requesting retroactive enrollments from the Regional Office or Program Safeguard Contractor (IntegriGuard).



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## DN04 Requirement Part C Element

### Section 60.1 Chapter 8

The MAO must refund all amounts incorrectly collected from its Medicare members or from others on their behalf.



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## ER09 Requirement Part D Element

The Part D sponsor must accept auto - and facilitated-enrollments and distribute plan materials in accordance with CMS procedures for full beneficiaries who have failed to enroll in a Part D plan.



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## ER13 Requirement Part D Element

The Part D sponsor must meet CMS requirements for obtaining a confirmation of the intent to enroll from any individual who attempts to enroll in the Part D plan, but whose enrollment is conditionally rejected by CMS due to a detected match indicating that the beneficiary may have existing employer or union drug coverage.



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## Tools/Best Practices

- Technical Assistance from CMS
- Retroactive Adjustments
  - IntegriGuard submissions versus RO submissions
  - Submission Checklists
- Audit Case File Checksheets
- Chapter 2 (MA) Timeframes



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## Resources

- 2006 MA Audit Guide Version 4  
<http://www.cms.hhs.gov/HealthPlansGenInfo/28MAGuide.asp#TopOfPage>
- Medicare Health Plan Enrollment/Disenrollment  
[http://www.cms.hhs.gov/MedicareMangCareEligEnrol/01\\_Overview.asp](http://www.cms.hhs.gov/MedicareMangCareEligEnrol/01_Overview.asp)
- Health Plan Management Systems (HPMS)  
<https://32.90.191.19/>



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## Resources (cont'd)

- Plan Communications User Guide  
[http://www.cms.hhs.gov/MMAHelp/02\\_Plan\\_Communications\\_User\\_Guide.asp#TopOfPage](http://www.cms.hhs.gov/MMAHelp/02_Plan_Communications_User_Guide.asp#TopOfPage)

## Case Studies



## Case Study # 1

- **Enrollment Requests**

Mr. Broker works for ABC Health Plan. He meets with Ms. Smith on October 31<sup>st</sup> and takes an enrollment form with him after meeting with her. He submits the enrollment form to the plan office on November 10 and the plan transmits the request to CMS on November 15 with an effective date of January 1.



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## Case Study # 2

- **MA-OEP**

Mr. Jones enrolled in an MA-PD during the AEP for a 1/1/08 effective date. In January, he decides he doesn't want Part D because he doesn't take any drugs and has a pharmacy discount card. He submits an enrollment request to an MA-only plan in March.



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## Case Study # 3

- **PDP Changes**

Mr. Garcia is enrolled in an MA-PD plan that has a \$25 premium. Since he has VA benefits that include drug coverage, he decides he wants to disenroll from the MA-PD in June. He submits a disenrollment request in June. The plan tells him he will have to wait until the next AEP in November to disenroll.



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## Case Study # 4

- **Request for Additional Information**

ACME HMO plan received a paper enrollment form on March 31, 2007, from Ms. Bison. However, the enrollment form wasn't signed. The plan attempted to contact her on March 31<sup>st</sup>, which was the end of the MA-OEP. The plan sent out a denial of enrollment notice promptly, since it was unable to reach her to complete the enrollment by the end of the enrollment period.



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# Q&A

