DATE: July 2, 2024

TO: All Medicare Advantage Organizations (MA), Prescription Drug Plan Sponsors (PDP), Cost Plans, Program of All-Inclusive Care for the Elderly (PACE), and Demonstration Organizations

FROM: Jerry Mulcahy
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Center for Medicare

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Office of Information Technology

SUBJECT: Advance Announcement of January 2025 Software Release - Additions to the Model Individual Enrollment Request Form to Enroll in a Medicare Advantage Plan (MA) or a Medicare Prescription Drug Plan (Part D)

This memorandum announces the addition of new fields to the model Individual Enrollment Request Form (OMB No. 0938-1378) to enroll in an MA or Part D Plan. The additions include new fields to indicate sexual orientation and gender identity, fields to capture information relative to individuals who assisted enrollees in completing the application, and a field to indicate that an individual would prefer to receive information via a data compact disc (CD) format for accessibility purposes. This memo also provides high-level advance notice of the associated system changes scheduled for release in January 2025.

Additions to the Model Individual Enrollment Request Form (OMB No. 0938-1378)

The new fields on the model enrollment form must be included on the form; however, applicant response to these additional questions is optional. Responses to the new questions or lack of response will not impact an individual’s Plan eligibility, benefits, or premiums.

Sexual orientation and gender identity data fields
CMS expects Plans to submit the individual’s response to the new sexual orientation and gender identity fields, including confirming if the individual did not provide the optional data as part of the enrollment transaction. The field is not considered complete until all sexual orientation and gender identity data is accepted by CMS, including noting that the individual did not answer the question.

CMS is committed to addressing health inequities and the underlying disparities within the health care system. To reduce gaps, we must begin with accurate data collection. We believe collecting this data will meaningfully advance equity mandates by resulting in a more granular
and better understanding of the diversity of the Medicare population, including important
differences in health and health care needs and experiences. Having more detailed data will
allow CMS to better understand the needs of the communities that we serve and identify
solutions that close gaps in health and health care access, quality, and outcomes. The addition of
these questions will enable individuals to complete an enrollment form accurately in a way that
better reflects and affirms their identity.

**Enrollee assistance data fields**
CMS is also adding two (2) new data fields to capture information about individuals who help
applicants fill out the form. Individuals (for example, State Health Insurance Assistance Program
counselors, agents, and brokers) must indicate if they helped the applicant fill out the form and
must disclose their relationship to the applicant. Agents and brokers will also be expected to
provide their assigned National Producer Number (NPN) if they assisted the applicant with
completing the enrollment form. Previous versions of the model enrollment form requested
information about individuals providing assistance to applicants completing the form, and this is
a long-standing requirement codified in §§ 422.60(c) and 423.32(b). However, previous versions
of the form did not request information about an individual’s relationship to the applicant and the
agent or broker’s NPN.

**Accessible format preference data field**
Finally, we are adding data compact disc (CD) as an accessible format preference. Plans are
required to provide information to individuals in accessible/alternate formats (for example, Large
Print, Braille) upon request and thereafter, as outlined in Section 504 of the Rehabilitation Act of

**Effective Date:**
MA and Part D Plans are expected to use the new form for enrollment requests received on or
after January 1, 2025. Changes noted in this memo and the attachments apply to all model
enrollment forms in the enrollment guidance.

The enrollment form is considered a “model” for purposes of communication and marketing
review and approval1; therefore, MA and Part D Plans can modify the language, content, format,
or order of the enrollment form. The model form consists of the following parts outlined below.

1. **Cover Page**
The cover page includes information to help the applicant complete the enrollment form. Plans
can modify as needed, as they are not required to include this page with the enrollment form.

2. **Model Enrollment Request Form**
Section 1 of the model enrollment form includes the minimal amount of information needed to
process the enrollment and other limited information, located in Section 2, that includes
information that the MA and Part D Plans are required to include on the form (e.g., new sexual
orientation and gender identity data, accessible format preference), as well as optional
information the Plan can include on the form (e.g., premium payment information). All data
elements in Section 2 are optional for the applicant to complete. Plan enrollment will not be

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1 The enrollment form is considered communications and must be approved by CMS based on the requirements outlined in 42
CFR 422.2261 and 423.2261. Plans must submit the enrollment form with any changes to CMS under the 45-day “review”
period. If a document is submitted using the model without any changes to it, then it may be submitted via the 10-day “review”
period.
affected if the applicant does not complete this additional information in Section 2.

The Model MA and Part D Enrollment Request Forms are available in the ‘Download’ section at the links below:


A second memo will be released in Fall 2024, that will detail the transaction reply codes (TRCs) and MARx UI screens related to these updates for calendar year 2025; these updates will not impact the model enrollment form exhibits.

Please direct questions on enrollment policy and submitting enrollment forms first to your CMS Account Manager. If you need additional help, please submit your inquiry to the Division of Enrollment and Eligibility Policy mailbox at [https://enrollment.lmi.org](https://enrollment.lmi.org).

**Advance Notice of System Changes in the January 2025 release. New Fields for MARx - Medicare Advantage & Prescription Drug System (MARx) Enrollment Transactions**

Plans are encouraged to contact the MAPD Help Desk for any issues or questions during the systems update process. The MAPD Help Desk is available at 1-800-927-8069 or [mapdhelp@cms.hhs.gov](mailto:mapdhelp@cms.hhs.gov).

For technical assistance with the HPMS Online Enrollment Center (OEC) Management module, please contact the HPMS Help Desk at 1-800-220-2028 or [hpms@cms.hhs.gov](mailto:hpms@cms.hhs.gov).

For questions about the OEC form on Medicare Plan Finder, please contact [mpf_cms_support@adhocteamhelp.zendesk.com](mailto:mpf_cms_support@adhocteamhelp.zendesk.com).

The enrollment form will contain six (6) new fields for the addition of new sexual orientation and gender identity fields, enrollee assistance fields, and a data CD format option for enrollment processing. The fields are required to be included on the enrollment form; however, applicant response to these questions is optional. These fields must be included in the MARx enrollment transaction if the applicant includes this information on their enrollment request. Plans must submit a value for each of the questions in Section 2 even if the individual does not submit a response.

**Note:** Enrollment changes for the Online Enrollment Center (OEC) will be addressed in a separate memo.

The updates associated with these system changes are as follows:

- Update to Transaction Code 61 Layout ([Attachment A](#))
- Update to Transaction Code 92 Layout ([Attachment B](#))
- Updated Daily Transaction Reply Report (DTRR) Layout ([Attachment C](#))
## Attachment A: Updated Transaction Code 61

<table>
<thead>
<tr>
<th>Item</th>
<th>Field</th>
<th>Size</th>
<th>Position</th>
<th>Validation (Edits and TRCs for the transaction fields)</th>
<th>Is Item Required, Optional, or N/A</th>
</tr>
</thead>
</table>
| 30.  | Accessible Format          | 1    | 125      | MARx will provide an informational TRC 396 if the value provided is not valid. This represents an accessible format if chosen. Valid Values:  
  - B – Braille  
  - L – Large Print  
  - A – Audio CD  
  - D – Data CD  
  - Blank (Space)  
  Note: Both of the following personal information fields must be valid. If either of the fields are invalid, both are ignored:  
  - Preferred Language Other than English (field 28)  
  - Accessible Format (field 29)                                                                                                                                                          | Optional                            |
| 47.  | Gender                     | 1    | 292      | 1= Woman  
2= Man  
3= Non-binary  
4= I use a different term  
5= I choose not to answer  
6= Form left blank                                                                                                                                                                         | Required                            |
| 48.  | Different Gender           | 25   | 293-317  | Value of number 4 in field 47, Gender                                                                                                                                                                                                                            | Optional                            |
| 49.  | Self-Identify              | 1    | 318      | 1= Lesbian or gay  
2= Straight, that is, not gay or lesbian  
3= Bisexual  
4= I use a different term  
5= I don’t know  
6= I choose not to answer  
7= Form left blank                                                                                                                                                                        | Required                            |
| 50.  | Different Self-Identify    | 25   | 319-343  | Value of Number 4 in field 49, Self-Identify                                                                                                                                                                                                                 | Optional                            |
| 51.  | Relationship to enrollee   | 1    | 344      | 1= Agent  
2= Broker  
3= SHIP counselors  
4= Authorized representatives  
5= Other (third parties)  
6= Self  
7= Form left blank                                                                                                                                                                            | Required                            |
| 52.  | National Producer Number   | 10   | 345-354  | For agent/brokers only: Numeric only and can’t begin with a zero                                                                                                                                                                                              | Required when field 51 is 1 or 2 only |
| 53.  | Filler                     | 150  | 355-504  | N/A                                                                                                                                                                                                                                                             | N/A                                 |
## Attachment B: Updated Transaction Code 92

### 92 Tx Layout for Personal Information Change Transaction

<table>
<thead>
<tr>
<th>Item</th>
<th>Field</th>
<th>Size</th>
<th>Position</th>
<th>Validation (Edits and TRCs for the transaction fields)</th>
<th>Is Item Required, Optional, or N/A</th>
</tr>
</thead>
</table>
| 17.  | Accessible Format      | 1    | 125      | MARx will provide an informational TRC 396 if the value provided is not valid. This represents an accessible format if chosen. Valid Values:  
- B – Braille  
- L – Large Print  
- A – Audio CD  
- D – Data CD  
- Blank (Space)  
Note: Both of the following personal information fields must be valid. If either of the fields are invalid, both are ignored:  
- Preferred Language Other than English (field 28)  
- Accessible Format (field 29) | Optional |
| 19.  | Gender                 | 1    | 142      | 1= Woman  
2= Man  
3= Non-binary  
4= I use a different term  
5= I choose not to answer  
6= Form left blank | Required |
| 20.  | Different Gender       | 25   | 143-167  | Value of number 4 in field 19, Gender | Optional |
| 21.  | Self-Identify          | 1    | 168      | 1= Lesbian or gay  
2= Straight, that is, not gay or lesbian  
3= Bisexual  
4= I use a different term  
5= I don’t know  
6= I choose not to answer  
7= Form left blank | Required |
| 22.  | Different Self-Identify| 25   | 169-193  | Value of number 4 in field 21, Self-Identify | Optional |
| 23.  | Relationship to enrollee| 1    | 194      | 1= Agent  
2= Broker  
3= SHIP counselors  
4= Authorized representatives  
5= Other (third parties)  
6= Self  
7= Form left blank | Required |
<p>| 24.  | National Producer Number| 10   | 195-204  | For agent/brokers only: Numeric only and can’t begin with a zero | Required when field 23 is 1 or 2 only |</p>
<table>
<thead>
<tr>
<th>Item</th>
<th>Field</th>
<th>Size</th>
<th>Position</th>
<th>Validation (Edits and TRCs for the transaction fields)</th>
<th>Is Item Required, Optional, or N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>25.</td>
<td>Plan Transaction Tracking ID</td>
<td>15</td>
<td>205-219</td>
<td>Fifteen-character tracking ID</td>
<td>Optional</td>
</tr>
<tr>
<td>26.</td>
<td>Filler</td>
<td>150</td>
<td>220 – 369</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**NOTE:** Spaces are substituted for all fields marked as “N/A”.
## Attachment C: DTRR Data File Detail Record

The following table provides a detailed description of various fields in the DTRR Data File Detail Record:

<table>
<thead>
<tr>
<th>Item</th>
<th>Field</th>
<th>Size</th>
<th>Position</th>
<th>Description</th>
</tr>
</thead>
</table>
| 49   | Accessible Format            | 1    | 197      | Present only when Transaction Code is 61 or 92 and the Accessible Format was provided.  
      |                              |      |          | ‘B’ = Braille  
      |                              |      |          | ‘L’ = Large Print  
      |                              |      |          | ‘A’ = Audio CD  
      |                              |      |          | ‘D’ = Data CD  
      |                              |      |          | ‘X’ = remove current value in MARx and set to Blank (Space)  
      |                              |      |          | Space = not applicable (no update)                                          |
| 93   | Gender                       | 1    | 472      | 1 = Woman  
      |                              |      |          | 2 = Man  
      |                              |      |          | 3 = Non-binary  
      |                              |      |          | 4 = I use a different term  
      |                              |      |          | 5 = I choose not to answer  
      |                              |      |          | 6 = Form left blank                                                       |
| 94   | Different Gender             | 25   | 473 – 497| Value of number 4 in field 93, Gender                                       |
| 95   | Self-Identify                | 1    | 498      | 1 = Lesbian or gay  
      |                              |      |          | 2 = Straight, that is, not gay or lesbian  
      |                              |      |          | 3 = Bisexual  
      |                              |      |          | 4 = I use a different term  
      |                              |      |          | 5 = I don’t know  
      |                              |      |          | 6 = I choose not to answer  
      |                              |      |          | 7 = Form left blank                                                       |
| 96   | Different Self-Identify      | 25   | 499 - 523| Value of number 4 in field 95, Self-Identify                                |
| 97   | Relationship to enrollee     | 1    | 524      | 1 = Agent  
      |                              |      |          | 2 = Broker  
      |                              |      |          | 3 = SHIP counselors  
      |                              |      |          | 4 = Authorized representatives  
      |                              |      |          | 5 = Other (third parties)  
      |                              |      |          | 6 = Self  
      |                              |      |          | 7 = Form left blank                                                       |
| 98   | National Producer Number     | 10   | 525 - 534| For agent/brokers only: Numeric only and can’t begin with a zero            |
| 99   | Filler                       |      | 535 – 684| spaces                                                                     |
| 100  | System Assigned Transaction  | 11   | 685 - 695| System assigned transaction tracking ID.                                   |
|      | Tracking ID                  |      |          |                                                              |
| 101  | Plan Assigned Transaction    | 15   | 696 - 710| Plan submitted batch input transaction tracking ID.                        |
|      | Tracking ID                  |      |          |                                                              |