



DATE: August 5, 2020

TO: Certain Medicare Advantage Organizations That Offer Dual Eligible Special Needs Plan (D-SNP) “Look-Alikes”

FROM: Sharon Donovan, Director
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SUBJECT: Enrollment Process for Medicare Advantage Organizations with Approved Transition Requests for their D-SNP Look-Alike Membership Effective January 1, 2021

This memorandum provides information on the enrollment transition process and noticing requirements for Medicare Advantage (MA) organizations that responded to the June 8, 2020 HPMS memo “Dual Eligible Special Needs Plan (D-SNP) ‘Look-Alike’ Transitions for Contract Year (CY) 2021” and received an email from CMS approving those transitions.

Enrollment Processing

For coverage effective January 1, 2021, MA organizations notified CMS by June 30, 2020 of their intent to transition enrollees in a D-SNP look-alike into another MA plan or plans. CMS reviewed these requests and in late July emailed the MA organizations a determination of whether or not the requested transitions meet the requirements finalized at 42 CFR 422.514 in the CY 2021 Medicare Advantage and Part D Final Rule at the following link: <https://www.govinfo.gov/content/pkg/FR-2020-06-02/pdf/2020-11342.pdf>

Below is a brief description of when and how a MA organization with an approved transition request for CY2021 would transition enrollees from the D-SNP look-alike.

1. For MA organizations that intend to transition some or all of their beneficiaries, the following processes apply:
 - Enrollment Operations: Plans should follow instructions provided in CMS’ “End-of-Year Enrollment and Payment Systems Processing Information” HPMS memo, which CMS expects to release in August 2020. This memo provides the plans with instructions on how to submit plan rollover (POVER) transactions that will be effective January 1 of the following year. Under this process, the beneficiary is not required to fill out a new enrollment form.

IMPORTANT: The “End-of-Year Enrollment and Payment Systems Processing Information” memo usually states that only plans with approved HPMS crosswalk exceptions that require plan-submitted actions may submit such actions. MA organizations with D-SNP look-alikes that received CMS approval to transition beneficiaries do not require a crosswalk exception. All other instructions and timeframes provided in the memo will apply.

- Noticing Requirements: The MA organization must describe changes to MA-PD benefits and provide information about the MA-PD plan in the Annual Notice of Change, consistent with 42 CFR 422.111(a), (d), and (e).
2. If the MA organizations change course and decide to non-renew or terminate the D-SNP look-alike and *not* transition their beneficiaries to another plan within their parent organization, the following processes should be followed:
- Enrollment Operations: Plans should follow instructions provided in CMS’ “End-of-Year Enrollment and Payment Systems Processing Information” HPMS memo to be released in August 2020. Plans that are non-renewing or terminating their D-SNP look-alike as of December 31 do not need to submit MARx disenrollment transactions (TC 51) to complete the disenrollment effective December 31, 2020. Affected beneficiaries do not need to request disenrollment. In mid-October, CMS will reassign those enrollees with the Low Income Subsidy (“LIS,” which includes all those who are dually eligible) to a stand-alone Prescription Drug Plan effective January 1, 2021.
 - Noticing Requirements: The MA organization that is non-renewing or terminating a D-SNP look-alike will send written non-renewal notices to enrollees consistent with 42 CFR 422.506(a)(2). CMS will release the annual “Non-Renewal and Service Area Reduction Guidance and Enrollee Notification Models” HPMS memo in September. This memo will provide plans with templates of non-renewal notices they will need to submit to HPMS for approval by the plan’s account manager. Notices must be in enrollees’ hands no later than October 2nd.

Key Dates for Transition Processes

Below are key dates in 2020 for the transition process.

August – CMS releases the annual “End-of-Year 2020 Enrollment and Payment Systems Processing Information” HPMS memo. Please read the memo and reach out to your CMS Account Manager with any questions.

September – CMS releases the annual “Non-Renewal and Service Area Reduction Guidance and Enrollee Notification Models,” and the “Reassignment of Low Income Subsidy Beneficiaries in Non-Renewing Medicare Advantage Plans and Medicare Advantage Plans Reducing their Service Areas” HPMS memos. Please read the memos and reach out to your CMS Account Manager with any questions.

October – Plans must submit all January 1, 2021, POVER enrollment transactions to CMS in accordance with the “End-of-Year 2020 Enrollment and Payment Systems Processing Information” HPMS memo.

CMS will offer a specified window in early October for plans to submit these transactions and strongly encourages plans to submit them early in this submission window. Doing so will allow time to work with the CMS to re-submit corrected records, when appropriate, should any transactions reject or fail. In mid-October, CMS reassigns beneficiaries with LIS, including those in non-renewing or terminating PDPs. If an MA organization is non-renewing or terminating its D-SNP look-alike, any individuals for whom POVER transactions are not successful will be included in CMS reassignment.

November – For D-SNP look-alikes that are non-renewing or terminating effective January 1, 2021, CMS will conduct a second reassignment to capture transitioned individuals who cancelled their transitioned enrollment. CMS will reassign these individuals into a new PDP for coverage beginning on January 1, 2021. For D-SNP look-alikes that are renewing effective January 1, 2021, CMS will reinstate enrollment into the D-SNP look-alike for any individuals who cancelled their transitioned enrollment.

Coordinating Transition Activity with CMS

CMS will work closely with MA organizations that will transition their D-SNP look-alike membership effective January 1, 2021 to ensure as smooth a transition as possible for affected enrollees. This includes providing technical assistance on the POVER process and closely monitoring the submission of POVER transactions in early October. To that end, CMS requests MA organizations send an email with updated estimates on the number of transitioning enrollees (i.e., updates from the estimates provided in its original request in June). Please send the following information to the CMS Medicare-Medicaid Coordination Office (MMCO) at MMCO_DSNPOperations@cms.hhs.gov by **September 21, 2020**. Please include:

- An updated estimate of the number of enrollees for whom the MA organization will submit POVER transactions into each approved CY 2021 plan (please provide the contract and PBP numbers);
- If the MA organization anticipates transitioning membership into more than one MA plan, the contract and PBP numbers and an updated estimate and short description of the total number of enrollees to be transitioned into each contract (e.g., full-benefit dually eligible individuals transitioning into H1000-001 and partial benefit dually eligible individuals transitioning into H2000-001).

Please contact your CMS Account Manager and MMCO_DSNPOperations@cms.hhs.gov with any questions.