



DATE: July 26, 2021

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

FROM: Nina Ashford, Acting Director
Program Alignment Group, Medicare-Medicaid Coordination Office

SUBJECT: Enrollment Process for Medicare Advantage Organizations with Transition Requests for their D-SNP Look-Alike Membership Effective January 1, 2022

This memorandum provides information on the enrollment transition process and noticing requirements for Medicare Advantage (MA) organizations that responded to the May 18, 2021 HPMS memo “Dual Eligible Special Needs Plan (D-SNP) ‘Look-Alike’ Transitions for Contract Year (CY) 2022” and received an email from CMS regarding those transitions.

Enrollment Processing

For coverage effective January 1, 2022, MA organizations notified CMS by June 7, 2021 of their intent to transition enrollees in a D-SNP look-alike into another MA plan or plans. CMS reviewed these requests and, in early July, emailed the MA organizations a determination of whether or not the requested transitions meet the requirements at 42 CFR 422.514.

Below is a brief description of when and how a MA organization would transition enrollees from the D-SNP look-alike for CY 2022.

1. For MA organizations that intend to transition some or all of their enrollees, the following processes apply:
 - **Enrollment Operations:** Plans should follow instructions provided in the upcoming CMS “End-of-Year Enrollment and Payment Systems Processing Information” HPMS memo. 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.

- Notice 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). The CY 2022 ANOC model template, Section 1, added language to existing plan instructions for member transitions from D-SNP look-alike plans.
2. If the MA organization chose 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 the upcoming CMS “End-of-Year Enrollment and Payment Systems Processing Information” HPMS memo. MA organizations 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, 2021. Affected beneficiaries do not need to request disenrollment. In 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, 2022, unless the beneficiary has otherwise selected another plan.
 - Notice 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, including a non-renewal notice tailored to D-SNP look-alike plans, which will need to be submitted to HPMS for approval by the plan’s account manager. Notices must be in enrollees’ hands no later than October 2nd.
3. If the MA organization intends to non-renew or terminate the D-SNP look-alike and transition only a portion of their enrollees, the following processes should be followed:
- Enrollment Operations: Plans should follow instructions provided in the upcoming CMS “End-of-Year Enrollment and Payment Systems Processing Information” HPMS memo. 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 for the portion of their enrollees that will be transitioned to another plan for 2022. For enrollees that will not be transitioned to another plan for 2022, due to the plan non-renewing or terminating and not having a plan into which these enrollees can transition, the MA organization does not need to submit MARx disenrollment transactions (TC 51) to complete the disenrollment effective December 31, 2021.

- **Notice Requirements:** For enrollees that will be transitioned to a new plan for 2022, 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). The CY 2022 ANOC model template, Section 1, added language to existing plan instructions for member transitions from D-SNP look-alike plans. For enrollees that will not be transitioned when the plan non-renews or terminates, the MA organization 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, including a non-renewal notice tailored to D-SNP look-alike plans, which will need to be submitted to HPMS for approval by the plan’s account manager. Notices must be in enrollees’ hands no later than October 2nd.

Coordinating Transition Activity with CMS

CMS will work closely with MA organizations that will transition their D-SNP look-alike membership effective January 1, 2022 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 October. If you do not hear from a member of the CMS transition team by July 30, 2021, please contact MMCOEnrollment@cms.hhs.gov

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 20, 2021**. Please include:

- An updated estimate of the number of enrollees for whom the MA organization will submit POVER transactions into each approved CY 2022 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 the MMCO Enrollment Team at MMCOEnrollment@cms.hhs.gov with any questions.