

Proposed Rule: 2027 Payment Notice

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Notice of Benefit & Payment Parameters for 2027

- **Context**
 - Notice and Comment Rulemaking
 - Administrative Procedure Act
 - Proposed Rule
- **Timeline**
 - Publication Date: Feb. 9, 2026
 - Comment Window End: Mar. 13, 2026
- **Effective Date: Plan Year 2027**

Proposed Rule

- Failure-to-Reconcile (FTR) Verification
 - 2027: 2 – year timeframe
 - 2028: 1 – year timeframe
- Income verification required when:
 - Projected income is in APTC range but IRS data shows income below 100% FPL.
 - Tax return data is unavailable.

Proposed Rule (continued)

- Improper Payment Measurement Program for SBEs
- Comments sought on Pre-Enrollment Eligibility Verification
- Special Enrollment Periods (SEPs)
 - Verification Requirement for the FFE and SBE-FPs
 - Prohibition of the monthly SEP for households with income below 150% FPL

Proposed Rule (continued)

- APTC Eligibility limited to “eligible noncitizens” rather than lawfully present individuals.
- Prohibition on APTC receipt for applicants with income below 100% FPL.

Proposed Rule (continued)

- Health Insurance Market Reforms:
 - Allowing Non-Network plans to be considered QHPs.
 - Expanding Catastrophic plans:
 - Permitting multiple consecutive year plans (up to 10 years), possibly including variable rates by year.
 - Allowing hardship exemptions for applicants who are APTC- or CSR-ineligible, consistent with guidance that was released in September 2025.
 - Increasing Maximum Out of Pocket (MOOP) rates.

Proposed Rule (continued)

- Health Insurance Market Reforms:
 - Requiring states to bear the cost of additional mandated benefits.
 - Prohibiting issuers from including adult dental benefits as Essential Health Benefits.
 - Restoring Network Adequacy authority to states by removing federal time and distance standards.
 - Reducing Essential Community Provider minimum participation and documentation requirements for issuers.
 - Removing standardized plan requirements for the FFE and SBE-FPs.

Proposed Rule

- Expansion of mandatory issuer reporting of CSR enrollments, focused on permitting CMS to better understand and assess silver loading.
- A reduction in requirements for states transitioning to the SBE model and new establishment of a State Exchange Enhanced Direct Enrollment Option.
- Expanded regulations on broker marketing and eligibility review practices, focused on FFM and SBE-FP states.

- **Timeline**
 - Comment Period ends March 13, 2026
 - Review and Finalization
- **Coordination with our Partners**
 - Division of Insurance
 - Board Advisory Group
 - Internal Teams

Questions