

Frequently Asked Question (FAQ)

FAQ ID: 17398

Publish Date: 09/09/2016

Program Area: Agent Broker**Primary Category:** Other**Secondary Category:** Other**Question:** If a consumer turning 65 years old is the primary account holder on the account with other family members, when does the family need to contact the Marketplace to remove the Medicare-eligible person?**Answer:** Regardless of whether or not the consumer is the primary account holder, he or she should contact the Marketplace at least 15 days before his or her Medicare coverage will begin to end Marketplace coverage. To reach the Marketplace Call Center call 1-800-318-2596 (TTY: 1-855-889-4325).

Frequently Asked Question (FAQ)

FAQ ID: 17399 Publish Date: 09/09/2016

Program Area: Agent Broker**Primary Category:** Other**Secondary Category:** Other**Question:** I work with a consumer who called the Marketplace Call Center to cancel his health coverage because he was turning 65 years old. He called on the 10th of the month and was told that his Marketplace coverage would end that day and was told to wait until the end of the month to cancel his coverage. Is this correct?**Answer:** Please refer to <https://www.healthcare.gov/blog/transitioning-to-medicare/> for more information about transitioning from Marketplace to Medicare coverage.

Frequently Asked Question (FAQ)

FAQ ID: 17400 Publish Date: 09/09/2016

Program Area: Agent Broker**Primary Category:** Other**Secondary Category:** Other**Question:** Does the Medicare periodic data matching (PDM) process also apply to Medicare beneficiaries who are under age 65?**Answer:** For the initial round of Medicare PDM, consumers receiving PDM notices will only be those who are age 65 and older, and dually enrolled in minimum essential coverage (MEC) Medicare and a Marketplace plan with financial assistance.

Frequently Asked Question (FAQ)

FAQ ID: 17401 Publish Date: 09/09/2016

Program Area: Agent Broker**Primary Category:** Other**Secondary Category:** Other**Question:** What coverage is considered minimal essential coverage (MEC) Medicare?**Answer:** Enrollment in Medicare Part A and Part C is considered MEC Medicare. Consumers enrolled in Medicare Part A or Medicare Part C are not eligible for financial assistance for Marketplace coverage, but may remain enrolled in Marketplace plans without financial assistance, if they wish.

There are a small number of consumers who are eligible for Medicare because of age, but who did not work the necessary quarters of coverage to be eligible for premium-free Medicare. For consumers eligible for, but not enrolled in Medicare Part A with the premium, that is not considered MEC, they can enroll in Marketplace coverage and still be eligible for financial assistance. However, if consumers who pay a premium for Medicare Part A coverage choose to enroll in Medicare coverage and pay the premium, they are now no longer eligible for financial assistance on the Marketplace.

All of these instructions are included in the Periodic Data Matching (PDM) notice consumers receive who are affected by Medicare PDM, depending on what type of Medicare coverage the consumer may have. The notice includes instructions for what consumers should do in those various situations.

Frequently Asked Question (FAQ)

FAQ ID: 17402 Publish Date: 09/09/2016

Program Area: Agent Broker**Primary Category:** Other**Secondary Category:** Other**Question:** What if a consumer is enrolled in Medicare Part A only (i.e., not enrolled in Medicare Part D or Part C and does not have Part B) will they receive a periodic data matching (PDM) notice?**Answer:** Consumers aged 65 and up that are dually enrolled in minimal essential coverage (MEC) Medicare and Marketplace coverage with financial assistance will receive the Medicare PDM notice. Enrollment in Medicare Part A is considered MEC and a consumer enrolled in Medicare Part A (but not Part B, C, or D) will receive the PDM notice if they are aged 65 and up and also enrolled in a Marketplace plan with financial assistance.

Frequently Asked Question (FAQ)

FAQ ID: 17403 Publish Date: 09/09/2016

Program Area: Agent Broker**Primary Category:** Other**Secondary Category:** Other**Question:** What is the difference between Medicare eligibility prior to Marketplace enrollment and Medicare eligibility after Marketplace enrollment?**Answer:** If a consumer is eligible for or enrolled in minimal essential coverage (MEC) Medicare, they are not eligible for financial assistance on the Marketplace. If a consumer is eligible for MEC Medicare, he or she should enroll in Medicare coverage and does not need to enroll in Marketplace coverage. If a consumer is already enrolled in Marketplace coverage and later becomes eligible for or enrolled in MEC Medicare, he or she should return to the Marketplace and report this change on their application. A consumer enrolled in a Marketplace plan and eligible for or enrolled in MEC Medicare is not eligible to receive financial assistance to help pay for plan premiums or covered services.

Frequently Asked Question (FAQ)

FAQ ID: 17404 Publish Date: 09/09/2016

Program Area: Agent Broker

Primary Category: Other

Secondary Category: Other

Question: When will the Medicare periodic data matching (PDM) notices be sent out?

Answer: Medicare PDM notices should reach consumers mailboxes in early September. The Medicare PDM notice will not be uploaded to a consumers online Marketplace account.

Frequently Asked Question (FAQ)

FAQ ID: 17405 Publish Date: 09/09/2016

Program Area: Agent Broker**Primary Category:** Other**Secondary Category:** Other**Question:** If a consumer is enrolled in Medicare Part A, is he or she able to drop the coverage to enroll in Marketplace coverage with or without financial assistance?**Answer:** If a consumer is eligible for or enrolled in premium-free Medicare Part A he or she is not eligible to receive advance payments of the premium tax credit (APTC) or income-based cost-sharing reductions (CSR). If a consumer is enrolled in Medicare Part A with a premium, he or she can compare plans to see what best meets their needs and budget. In either case the consumer should also follow the instructions listed on his or her Medicare periodic data matching (PDM) notice.

Frequently Asked Question (FAQ)

FAQ ID: 17406 Publish Date: 09/09/2016

Program Area: Agent Broker**Primary Category:** Other**Secondary Category:** Other**Question:** Do consumers have to pay back advance payments of the premium tax credit (APTC) or income-based cost-sharing reductions (CSR) back for periods when they are dually eligible for or enrolled in Marketplace plans and Medicare?**Answer:** If consumers were dually-enrolled in minimal essential coverage (MEC) Medicare and Marketplace coverage with financial assistance, they may have to pay back some or all of the APTC they received during the time they were dually enrolled. The purpose of receiving the periodic data matching (PDM) notice is to notify consumers of that possibility, and to remind them they should end their financial assistance to avoid paying a larger penalty.

Frequently Asked Question (FAQ)

FAQ ID: 17407 **Publish Date:** 09/09/2016

Program Area: Agent Broker

Primary Category: Other

Secondary Category: Other

Question: How is the consumer's coverage canceled: prospective or retrospectively?

Answer: Consumers who receive Medicare periodic data matching (PDM) notices will need to take action to end their coverage. The coverage termination will be prospective.

Frequently Asked Question (FAQ)

FAQ ID: 17408 Publish Date: 09/09/2016

Program Area: Agent Broker**Primary Category:** Other**Secondary Category:** Other**Question:** What if Medicare-eligible consumers want to keep their Federally-facilitated Marketplace (FFM) coverage? Can they keep the Marketplace coverage?**Answer:** If consumers receive the Medicare periodic data matching (PDM) notice, CMS advises they follow the instructions listed on the notice; however, if consumers are enrolled in both minimal essential coverage (MEC) Medicare and a Marketplace plan with financial assistance, they can terminate just their financial assistance and remain enrolled in their Marketplace plan. The consumer would have to pay the full price for his or her plan premium and covered services.

Frequently Asked Question (FAQ)

FAQ ID: 17409

Publish Date: 09/09/2016

Program Area: Agent Broker**Primary Category:** Other**Secondary Category:** Other**Question:** What happens if a consumer is eligible for Medicare coverage, but wants to remain enrolled in his or her Marketplace plan?**Answer:** Consumers eligible for minimal essential coverage (MEC) Medicare are no longer eligible for financial assistance to help pay for his or her Marketplace plan premium and covered services. A consumer eligible for MEC Medicare can choose to remain enrolled in their Marketplace plan without financial assistance if they so desire.

Frequently Asked Question (FAQ)

FAQ ID: 17410 **Publish Date:** 09/09/2016

Program Area: Agent Broker

Primary Category: Other

Secondary Category: Other

Question: If I am a consumer who has Marketplace coverage, but is eligible for Medicare, do I wait until the day before I am eligible for Medicare to terminate my Marketplace plan, or should I terminate the Marketplace coverage before the 15th of the month so it will end on the last day of month?

Answer: Please refer to <https://www.healthcare.gov/blog/transitioning-to-medicare/> for more information about transitioning from Marketplace to Medicare coverage.
