Annual Eligibility Redetermination, Product Discontinuation and Renewal Notices (CMS-10527/OMB Control Number: 0938-1254) Summary of Changes to Information Collection Instruments

• The following changes were made to **Attachment 1: Renewal notice for the individual** market where coverage is being renewed outside the Exchange.

Section Edited	Revision (Red indicates modified or new Language)
What's changing in – Other Changes	• You can review more details about your plan at [26 Issuer website] and in your [27 Year] Summary of Benefits and Coverage at [28 SBC web page].
Instructions for Attachment 1 – Item 28.	Item 28. Enter the SBC webpage for the applicable plan.
Instructions for Attachment 1 – Item 29.	Item 29. Enter plan name.
Instructions for Attachment 1 – Item 30.	Item 30. Enter "by" and due date for first premium for following policy year or omit and skip to item 3130.
Item Numbers in notice and instructions	Updated to correspond with changes.

• The following changes were made to **Attachment 2: Renewal notice for the individual** market where coverage is being renewed in a QHP offered under the same product through the Exchange.

Section Edited	Revision (Red indicates modified or new Language)
What's changing in -	• Starting in [9 Month], ¥your new monthly payment
Your new premium	(starting in [9 Month]) is estimated to be \$[10 Dollar amount].
What's changing in -	• [21 Exchange] may contact you about other reenrollment
Your new premium	options unless you pick your own plan.
	• [21 For enrollees currently enrolled in a bronze level QHP
	and the new plan to which the premium information above applies,
	is a bronze level QHP, insert]: Important: If you currently have a
	Bronze category plan and qualify for extra savings, [22 Exchange]
	may enroll you in a Silver plan from [23 issuer] so you'll get the
	most help to lower your costs in [24 Year]. The Silver plan has the
	same network and an equal or lower monthly payment as the new
	plan to which the premium information above applies, but covers
	more of your out-of-pocket costs, like copayments, coinsurance and
	deductibles. Enrolling in this (or another) Silver plan may save you
	thousands of dollars each year.

	• [25 Exchange] may contact you about [26 this and] other reenrollment options if you don't choose a different plan on your own during open enrollment.
Other changes	• You can review more details about your plan at [2328 Issuer website] and in your [2429 Year] Summary of Benefits and Coverage at [30 SBC web page].
What you need to do – 1.	Review and if necessary, update your
What you need to do – 2 I want to pick a different plan.	• You can choose a different plan between [33-39 Dates]. Enroll by [34-40 Date] for coverage to start January 1. [41 <i>Issuers on the Federally-facilitated Exchange or on a State-based Exchange on the Federal platform, insert:</i> If you choose a plan between December 16 and January 15, the new plan will start February 1.]
Here are some ways to look at other plans and enroll: - Note:	If the amounts are different, it may change the amount you owe or get back when you file your taxes. For more information about the premium tax credit, visit: https://www.irs.gov/affordable-care-act/individuals-and-families/the-premium-tax-credit-the-basics.
Instructions for Attachment 2 - Item 21.	Item 21. Include this paragraph if the enrollee is currently enrolled in a bronze level QHP, consistent with 45 CFR 155.335(j). Otherwise, omit and skip to item 34.
Instructions for Attachment 2 - Item 22.	Item 22. Enter the Exchange name. For a Federally-facilitated Exchange, enter "Marketplace."
Instructions for Attachment 2 - Item 23.	Item 23. Enter Issuer name.
Instructions for Attachment 2 - Item 24.	Item 24. Enter the following year, in format YYYY
Instructions for Attachment 2 - Item 25.	Item 25. Enter the Exchange name. For a Federally-facilitated Exchange, enter "Marketplace."
Instructions for Attachment 2 - Item 26.	Item 26. Enter "this and" if the enrollee is currently enrolled in a bronze level QHP. Otherwise, omit and skip to item 27.
Instructions for Attachment 2 - Item 30.	Item 25. Enter SBC web page for the applicable plan.
Instructions for Attachment 2 - Item 41.	Item 41. Issuers on the Federally-facilitated Exchange, or on a State-based Exchange on the Federal platform, enter the following phrase: "If you choose a plan between December 16 and January 15, the new plan will start February 1." Other issuers should omit, and skip to Item 42.
Item Numbers in notice and instructions	Updated to correspond with changes.

• The following changes were made to Attachment 3: Discontinuation notice for the individual market outside the Exchange and the issuer is automatically enrolling the enrollee in a different plan outside the Exchange.

Section Edited	Revision (Red indicates modified or new Language)
Box	Important: Your plan will no longer be offered next year. Take
Your new plan for - Other changes	• You can review more details about this plan at [29 Issuer website] and in your [30 Year] Summary of Benefits and Coverage at [31 SBC web page].
What you need to do - Here are some ways to look at other plans and enroll:	Remember, you won't get financial help unless you qualify and enroll through [41 Exchange].
What you need to do - Here are some ways to look at other plans and enroll:	• Remember, you won't get financial help unless you qualify and enroll through [41 Exchange].
Instructions for Attachment 3 - Item 31.	Item 31. Insert SBC web page for the applicable plan.
Instructions for Attachment 3 - Item 41.	Item 41. Enter the Exchange name. For a Federally-facilitated Exchange, enter "Marketplace."
Item Numbers in notice and instructions	Updated to correspond with changes.

• The following changes were made to Attachment 4: Notice for the individual market where coverage was in a QHP offered through the Exchange and the issuer is automatically enrolling the enrollee in a plan under a different product offered through the Exchange.

Section Edited	Revision (Red indicates modified or new Language)
Box	Your plan will not be offered through the [3 Exchange] [4 in your
	area] next year.
Your new plan for -	• Starting in [21 Month], ¥your new monthly payment
Your new premium	(starting in [21 Month]) is estimated to be: \$[22 Dollar amount].
What's changing in -	• [33 Exchange] may contact you about other reenrollment
Your new premium	options unless you pick your own plan.
	• [33 For enrollees currently enrolled in a bronze level QHP,
	and the new plan to which the premium information above applies,
	is a bronze level QHP, insert]: Important: If you currently have a
	Bronze category plan and qualify for extra savings, [34 Exchange]
	may enroll you in a Silver plan from [35 issuer] so you'll get the
	most help to lower your costs in [36 Year]. The Silver plan has the

	same network and an equal or lower monthly payment as the new plan to which the premium information above applies, but covers more of your out-of-pocket costs, like copayments, coinsurance and deductibles. Enrolling in this (or another) Silver plan may save you thousands of dollars each year. • [37 Exchange] may contact you about [38 this and] other reenrollment options if you don't choose a different plan on your own during open enrollment.
What's changing in – Other Changes	• You can review more details about this plan at [3540 Issuer website] and in your [3641 Year] Summary of Benefits and Coverage at [42 SBC web page].
What you need to do – 1.	Review and if necessary, update your
What you need to do – 2. – I want to enroll in this plan	Update your [42 Exchange] application information, and then select [43 Select [48 Plan name and ID] to enroll.
What you need to do – 2. – I want to pick a different plan	• You can choose a different plan between [4853 Dates]. Enroll by [4954 Date] for coverage to start [5055 Date]. [56 Issuers on the Federally-facilitated Exchange or on a State-based Exchange on the Federal platform insert: If you choose a plan between December 16 and January 15, the new plan will start February 1.]
Here are some ways to look at other plans and enroll: Note:	If the amounts are different, it may change the amount you owe or get back when you file your taxes. For more information about the premium tax credit, visit: https://www.irs.gov/affordable-care-act/individuals-and-families/the-premium-tax-credit-the-basics.
Instructions for Attachment 4 - Item 33.	Item 33. Include this paragraph if the enrollee is currently enrolled in a bronze level QHP, consistent with 45 CFR 155.335(j). Otherwise, omit and skip to item 34.
Instructions for Attachment 4 - Item 34.	Item 34. Enter the Exchange name. For a Federally-facilitated Exchange, enter "Marketplace."
Instructions for Attachment 4 - Item 35.	Item 35. Enter Issuer name.
Instructions for Attachment 4 - Item 36.	Item 36. Enter the following year, in format YYYY.
Instructions for Attachment 4 - Item 37.	Item 37. Enter the Exchange name. For a Federally-facilitated Exchange, enter "Marketplace."
Instructions for Attachment 4 - Item 38.	Item 38. Enter "this and" if the enrollee is currently enrolled in a bronze level QHP. Otherwise, omit and skip to item 39.

Instructions for Attachment 4 - Item	Item 42. Enter SBC web page for the applicable plan.
42.	
Instructions for Attachment 4 - Item 48.	Item 48. Enter plan name and HIOS Plan ID of plan into which the enrollee will be enrolled.
Instructions for Attachment 4 - Item 56.	Item 56. Issuers on the Federally-facilitated Exchange, or on a State-based Exchange on the Federal platform, enter the following phrase: "If you choose a plan between December 16 and January 15, the new plan will start February 1." Other issuers should omit, and skip to Item 57.
Item Numbers in notice and instructions	Updated to correspond with changes.

• The following changes were made to **Attachment 5: Discontinuation notice for the** individual market outside the Exchange and the issuer is not automatically enrolling the enrollee in a different plan.

Section Edited	Revision (Red indicates modified or new Language)
Box	Important: Your health coverage is ending.

• The following changes were made to Attachment 6: Discontinuation notice for the individual market where coverage being discontinued was in a QHP offered through the Exchange and the issuer is not automatically enrolling the enrollee in a different plan

Section Edited	Revision (Red indicates modified or new Language)
Box	Important: Your health coverage is ending.
What you need to do – 1.	Review and if necessary, update your
What you need to do – 2 Here are some ways to look at other plans and enroll:	[20 Exchange] may pick a plan for you. If you don't enroll in a plan on your own, [21[20 Exchange] may automatically enroll you in a plan it picks for you.
plans and enron:	[21 For enrollees currently enrolled in a bronze level QHP, insert:] Also, if you currently have a Bronze category plan and qualify for extra savings, [22 Exchange] may enroll you in a Silver plan so you'll get the most help to lower your costs in [23 Year].
	• Check with [2224 Issuer] to see what other plans may be available, including whether the plan you now have can be purchased directly through [23-25 Issuer].
	[26 Issuers on the Federally-facilitated Exchange or on a State-based Exchange on the Federal platform, insert: If you choose a

	plan between December 16 and January 15, the new plan will start February 1.] [27 Important: You may be able to keep your current coverage, but in [28 Year], it won't be offered [29 as a Silver plan] [30 through the Exchange]]. Remember, you won't get financial help [31 to lower your out-of-pockets costs] unless you qualify and enroll [32 in a Silver plan] through [33 Exchange].
Here are some ways to look at other plans and enroll: - Note:	If the amounts are different, it may change the amount you owe or get back when you file your taxes. For more information about the premium tax credit, visit: https://www.irs.gov/affordable-care-act/individuals-and-families/the-premium-tax-credit-the-basics.
Instructions for Attachment 6 – Item 20.	ItemsItem 20 – 21. Enter the
Instructions for Attachment 6 – Item 21.	Item 21: Include this paragraph if the enrollee is currently enrolled in a bronze level QHP, consistent with 45 CFR 155.335(j). Otherwise, omit and skip to item 24.
Instructions for Attachment 6 – Item 22.	Item 22. Enter the Exchange name. For a Federally-facilitated Exchange, enter "Marketplace."
Instructions for Attachment 6 – Item 23.	Item 23. Enter the following year, in format YYYY.
Instructions for Attachment 6 – Item 24 and Item 25.	Item 24 and Item 25. Enter the issuer name.
Instructions for Attachment 6 – Item 26.	Item 26. Issuers on the Federally-facilitated Exchange, or on a State-based Exchange on the Federal platform, enter the following phrase: "If you choose a plan between December 16 and January 15, the new plan will start February 1." Other issuers should omit, and skip to Item 27.
Item Numbers in notice and instructions	Updated to correspond with changes.