



# The Enrollment Coalition

Dr. Mehmet Oz  
Administrator  
Centers for Medicare & Medicaid Services  
U.S. Department of Health and Human Services  
200 Independence Avenue SW  
Washington, D.C. 20201

## **RE: CMS-9883-P, HHS Notice of Benefit and Payment Parameters for 2027**

The Enrollment Coalition appreciates the opportunity to comment on the HHS Notice of Benefit and Payment Parameters (NBPP) for 2027 proposed rule (CMS-9883-P).

The Enrollment Coalition is a group of organizations across the health care community, including consumer advocates, patient advocates, health plans, health care providers, employers, and technology and data organizations. Our mission is to collaboratively identify, develop, and advance actionable policy recommendations for federal policymakers aimed at improving enrollment data, systems, and processes to foster the enrollment of uninsured Americans under age 65 into existing health coverage plans and programs for which they are otherwise eligible. Our members are listed on our [website](#).

The Enrollment Coalition believes that a top policy priority for the coming years should be making sure that those eligible for health care coverage are enrolled and retained appropriately. Enrolling people in coverage they are eligible for can improve health outcomes as well as lower health care premiums for everyone.

The Enrollment Coalition's comments on the specific proposed policies in the 2027 NBPP Proposed Rule are below:

### **Agents and Brokers Oversight**

CMS proposes to establish new standards of conduct and additional consumer protection standards related to agents, brokers, and web-brokers, including codifying a list of seven prohibited marketing practices, requiring the use of HHS-approved consumer consent forms, and clarifying acceptable methods for documenting consumer consent and eligibility application review.

The Enrollment Coalition continues to believe there is a role for agents and brokers in advancing the shared goal of enrolling people in (or maintaining their enrollment in) health coverage for which they are eligible. We also remain concerned about reports of unauthorized and fraudulent activity by agents and brokers and appreciate the steps CMS has taken and continues to take to address these issues.

We support the proposal to codify prohibited marketing practices, including prohibitions on providing cash or gift cards to consumers, falsely asserting consumers will qualify for zero-dollar premiums, using facsimiles of government logos, miscommunicating enrollment timelines and

deadlines, misconstruing legislation or regulations, and using untruthful endorsements from public figures. Clearly defining prohibited practices provides agents and brokers with greater clarity on expectations, ensures consumers receive accurate rather than misleading information, and strengthens CMS's enforcement capabilities. We also support holding agents, brokers, and web-brokers responsible for marketing content created, written, or released on their behalf.

The Enrollment Coalition also supports ensuring consumer consent has been provided for enrollment in a health plan. We appreciate that a standardized form would help ensure all regulatory requirements are included in documentation provided to and reviewed by consumers or their authorized representatives. The rule also proposes to disallow typed signatures or filled-in checkboxes as acceptable methods for documenting consumer consent and eligibility application review. While we understand these proposals are intended to help HHS verify that the consumer or their authorized representative personally reviewed and confirmed information, we are concerned with prohibiting typed signatures. For consumers with limited digital literacy, this could pose a barrier to enrollment. We also request that CMS clarify acceptable methods of documenting consumer consent, including electronic written signatures, emails, and recorded verbal conversations.

#### **Income Verification When Data Sources Indicate Income Below 100 Percent FPL**

CMS proposes to permanently require Exchanges to create a data matching issue (DMI) and collect documentation to verify income when an applicant attests to household income at or above 100 percent of the FPL, but IRS data indicates income below 100 percent of the FPL.

The Enrollment Coalition supports measures to improve the accuracy of eligibility determinations and to protect consumers from accumulating tax liabilities that may result from inaccurate income information on their applications. Given that the Working Families Tax Cut Act legislation removes APTC repayment caps beginning with PY 2026, income verification protections take on added importance for consumers who may face increased financial exposure from excess APTC payments.

Under current law, premium tax credit eligibility is determined for a particular plan year by predicting what an individual or family's income will turn out to be by the end of that year. Other programs ranging from post-secondary school assistance to the Child Tax Credit base current year eligibility for assistance on previous federal income tax returns, while leaving room for people to claim additional help by demonstrating reduced income or increased household size since the prior year. As long as APTC eligibility is conditioned on the upcoming year's income, CMS should consider how to account for forthcoming changes to income that an enrollee may be aware of but are not captured by previous year's tax data. In the proposed rule, CMS references a recommendation from the Government Accountability Office that the agency should implement a verification process for "when attested income amounts significantly exceed income amounts reported by IRS or other third-party sources." So, for example, a verification trigger at 100 percent FPL could risk excluding individuals who may have routine and modest income fluctuations. An increase from 99 to 110 percent FPL represents less than a \$1,000 change in annual income, and does not "significantly exceed" the amount reported to the IRS—a scenario like this is neither

unusual nor indicative of misreporting. CMS could instead consider a reasonable verification threshold, such as a percentage or dollar amount above prior-year income for consumers whose tax data indicates an income below 100 percent FPL, but that predict they will earn more in the coming year.

### **Implementation of Section 71303 of the WFTC Legislation**

CMS seeks comment on considerations for implementing Section 71303 of the Working Families Tax Cut Act legislation, which imposes new requirements on Exchanges related to eligibility verification effective with PY 2028, including a requirement that Exchanges establish a pre-enrollment verification process no later than August 1, 2027.

The Enrollment Coalition appreciates that CMS is seeking input from stakeholders on operational considerations for implementation. We encourage CMS to work closely with State Exchanges, issuers, agents and brokers, navigators and assisters, and consumer advocates to ensure that implementation is carried out in a manner that protects consumers and maintains enrollment access while meeting the statutory requirements. Given the complexity of these provisions and the August 1, 2027, deadline, we encourage CMS to provide timely guidance and technical assistance to support States and other stakeholders in implementation.

Thank you for your consideration of these comments.

Sincerely,  
The Enrollment Coalition