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**Press Contact**

Kelly Loussedes, SVP Public Relations  
[kloussedes@nabip.org](mailto:kloussedes@nabip.org) or 703.496.0624

**NABIP Applauds Consumer Protection Victories in 2027 ACA Marketplace Final Rule**

*Washington, D.C.* — The National Association of Benefits and Insurance Professionals (NABIP) welcomed several provisions included in the 2027 HHS Notice of Benefit and Payment Parameters Final Rule that align with the association's longstanding advocacy priorities to strengthen Marketplace integrity, protect consumers, and preserve access to care.

**NABIP-supported policies finalized by CMS include:**

- Permanent removal of the 150% Federal Poverty Level Special Enrollment Period (SEP), a policy vulnerable to misuse and unauthorized enrollments.
- Restoration of the one-year Failure to File and Reconcile (FTR) requirement for premium tax credit eligibility.
- Preservation of the Essential Community Provider (ECP) participation threshold at 35%, helping maintain access to safety-net providers and vulnerable populations.
- Return of primary network adequacy oversight authority to State-Based Exchanges and State-Based Exchanges on the Federal Platform beginning in Plan Year 2027.
- Restoration of standards governing state-mandated health benefits beginning in Plan Year 2028.

"NABIP has consistently advocated for stronger safeguards against fraud while ensuring consumers maintain access to quality coverage and care," said NABIP President Susan Rider. "These provisions represent meaningful progress toward those goals."

**NABIP continues to evaluate several provisions that may create additional challenges for agents, brokers, and consumers, including:**

- Mandatory HHS consumer consent form requirements beginning January 1, 2028.
- Elimination of the third-party training vendor pathway for Marketplace certification.
- Expanded eligibility verification requirements that may increase documentation burdens.

"NABIP appreciates CMS's decision to delay implementation of the consent form requirement, which provides additional time for agents and agencies to prepare," Rider said. "However, documentation requirements alone are unlikely to prevent large-scale fraud. We continue to support stronger safeguards, including enhanced identity verification and authentication tools that better protect consumers from unauthorized enrollments."

NABIP is also monitoring potential future changes to the federal Medical Loss Ratio (MLR) standard and will continue advocating for policies that promote market stability, consumer choice, and access to professional guidance.

NABIP remains committed to helping consumers navigate an increasingly complex healthcare system. Our [Healthcare Bill of Rights](#) promotes consumer choice, affordable coverage, transparency, and access to

professional guidance. We will continue advocating for policies that protect healthcare consumers and strengthen the role of licensed agents and brokers.

For more information, please review the CMS 2027 Notice of Benefit and Payment Parameters Final Rule: <https://www.cms.gov/files/document/cms-9883-f-patient-protection.pdf>

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*The National Association of Benefits and Insurance Professionals (NABIP) is the leading organization for health insurance and employee benefits professionals. NABIP represents more than 100,000 licensed agents, brokers, general agents, consultants and benefits professionals through more than 150 chapters nationwide. The association works to advance access to high-quality, affordable health care and related benefits through advocacy, education and professional development. For more information, visit [www.nabip.org](http://www.nabip.org).*