

## FOR IMMEDIATE RELEASE

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## CMS's New Steps to Protect Consumers from Unauthorized Plan Switches

**Washington, D.C.** – The National Association of Benefits and Insurance Professionals (NABIP) commends the Centers for Medicare & Medicaid Services (CMS) for implementing robust new measures aimed at preventing unauthorized changes in consumers' Federally-facilitated Marketplace (FFM) enrollments by agents and brokers. These changes, effective immediately, are designed to safeguard consumer interests and ensure the integrity of the enrollment process.

Starting today, CMS will enforce the following key updates:

- 1. **Association Requirement:** Agents and brokers must be directly associated with a consumer's enrollment to make any changes. This existing enrollment association must be verified and documented to ensure legitimacy and transparency.
- 2. Three-Way Call Requirement: New agents and brokers must conduct a three-way call with the consumer and the Marketplace Call Center. Alternatively, they can direct consumers to make changes themselves via HealthCare.gov or through approved partners. This step is crucial in maintaining consumer control over their enrollment information and preventing unauthorized changes.
- 3. **Ongoing Monitoring:** CMS will continuously monitor for any malicious activity by agents or brokers on the Marketplace. The agency is committed to taking additional appropriate actions against those found engaging in misconduct to maintain the highest standards of ethical behavior.

Many NABIP members were adversely impacted by these unauthorized plan switches and made recommendations to CMS on an approach that protects consumers as well as trusted agents. Jessica Brooks-Woods, CEO of NABIP, expressed the association's strong support for these changes, stating, "We commend CMS for addressing this unethical behavior. NABIP has long been an advocate for ethical practices in the healthcare industry and believes that these updates will significantly enhance consumer protection. By preventing unauthorized changes to FFM enrollments, CMS is taking a decisive stand against fraudulent activities and reinforcing the importance of consumer consent and involvement in their healthcare decisions."

This decision also aligns with NABIP's Healthcare Bill of Rights, which aims to protect consumers and improve the healthcare delivery system for all Americans. Ensuring that consumers have full control over their enrollment information is a critical step towards greater transparency and trust in the Marketplace.

For more information and to read the full CMS press statement, please visit <u>here</u>.

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<u>NABIP</u> is the preeminent organization for health insurance and employee benefits professionals, working diligently to ensure all Americans have access to high-quality, affordable healthcare and related benefits. NABIP represents and provides professional development opportunities for more than 100,000 licensed health insurance agents, brokers, general agents, consultants, and benefit professionals through more than 200 chapters across America.