



Centers for Medicare & Medicaid Services (CMS), HHS  
Department of the Treasury  
Washington, DC

The American Association of Ancillary Benefits (AAAB) is pleased to respond to the proposed rule by the Treasury Department and the Centers for Medicare & Medicaid Services dated 07/01/2021 entitled “Patient Protection and Affordable Care Act; Updating Payment Parameters, Section 1332 Waiver Implementing Regulations, and Improving Health Insurance Markets for 2022 and Beyond Proposed Rule.”

The AAAB is a nonprofit trade association that services the ancillary benefits industry. The mission of AAAB is to advocate for the ancillary benefits industry on behalf of carriers, vendors, third parties, and distributors, as well as to advocate for specialty carriers, prepaid legal services, and other niche products. AAAB will also coordinate ACA and Medicare issues for its members and other associations involved in this market, which includes agents and brokers. In addition to advocating for these matters, AAAB will also focus on thoughtful educational opportunities.

The AAAB has reviewed the aforementioned proposed rule and has significant concerns that the rule’s wording could be confusing so CMS should provide clarification. In the executive summary it says:

We also propose to remove § 155.221(j) and repeal the Exchange Direct Enrollment option which establishes a process for State Exchanges, State-based Exchanges on the Federal platform, and Federally-facilitated Exchanges to work directly with private sector entities (including QHP issuers, web-brokers, and agents and brokers) to operate enrollment websites through which consumers can apply for coverage, receive an eligibility determination from the Exchange, and purchase an individual market QHP offered through the Exchange with APTC and cost-sharing reductions (CSRs), if otherwise eligible.

This run-on sentence could be read in several ways. Talking to many association members who read this, they interpret it to mean that ALL direct enrollment is being eliminated. However, in discussions with current and former CMS insiders, they are saying the intent is simply to eliminate the so-called “Georgia model.” The association wants to believe what the insiders are saying so hereby requests that CMS simply clarify with verbiage saying all other direct enrollment channels remain unchanged.

Thank you for your time and consideration of this request.

Regards,

*Mike Camilleri*

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CEO