

Enrollment Questions & Answers

Frequently Asked Questions

Release Date: October 4, 2013



Medicare and the Marketplace Frequently Asked Questions

Frequently Asked Questions (FAQ) #9

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Q1: Can individuals who have Medicare enroll in coverage through the Marketplace?

A1: No. Consistent with the longstanding prohibitions on the sale and issuance of duplicate coverage to Medicare beneficiaries (section 1882(d) of the Social Security Act), it is illegal to knowingly sell or issue a Qualified Health Plan (QHP) to a Medicare beneficiary. This prohibition does not apply in the Small Business Health Options Program (SHOP) market.

Q2: What should Agents and Brokers do to comply with this guidance?

A2: Consistent with the longstanding prohibitions on the sale of duplicate coverage to Medicare beneficiaries (section 1882(d) of the Social Security Act), agents and brokers are prohibited from knowingly selling a Medicare beneficiary a Marketplace plan. Agents and brokers may wish to protect themselves by asking each applicant about Medicare status. CCIIO will update the training materials provided to agents and brokers to reflect this clarification.

Q3: What do Medicare beneficiaries need to know about Medicare and the Marketplace?

A3: Individuals with Medicare need to know that if they have Medicare, a Marketplace plan is not appropriate for them. If individuals are seeking supplemental coverage for their Medicare, and do not have retiree coverage, they should consult Medicare.gov about enrolling in a Medicare Advantage plan or purchasing a Medigap policy. CMS will continue to work to have these messages included in our outreach for Medicare's annual open enrollment.



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Q4: Can Medicare beneficiaries whose employer purchases insurance coverage through the SHOP be enrolled in a SHOP Qualified Health Plan?

A4: Yes, Medicare beneficiaries whose employer purchases SHOP coverage are treated the same as any other person with employer coverage. The prohibition only applies to coverage sold by an Issuer to an individual. SHOP coverage is sold to the employer. For Medicare beneficiaries who have coverage based on their or a spouse's current employment and are enrolled in SHOP coverage, the Medicare Secondary Payer rules, which govern the coordination of benefits between Medicare and the employer coverage, apply to employers with at least 20 employees.