

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

TO <i>Supra</i>	DATE <i>1-3-14</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000225</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Mr. Kee K, Kost, Daps, CMS file</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input type="checkbox"/> FOIA DATE DUE _____
	<input checked="" type="checkbox"/> Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850



CMCS Informational Bulletin

DATE: January 3, 2014
FROM: Cindy Mann
Director
SUBJECT: Account Transfer Flat File Enrollment Options

Log - Supra
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For document only
Sent electronically
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We are writing to let you know that the Centers for Medicare & Medicaid Services (CMS) has recently made additional enhancements to the account transfer flat files that states can use to enroll individuals who have applied through the Federally Facilitated Marketplace (FFM) into Medicaid and the Children's Health Insurance Program (CHIP). Based on state feedback, we added data fields for income and gender to facilitate enrollment from the flat files into the proper eligibility category. Those fields are included in the files that were sent to states on December 31. We have also started sending states a weekly quality assurance (QA) list to identify those cases where because information is missing, or for other reasons, our quality assurance review suggests that enrollment based on the information in the flat file would not be appropriate.

As outlined in our November 29th letter to State Health Officials (<http://www.medicare.gov/Federal-Policy-Guidance/downloads/SHO-13-008.pdf>) states can enroll individuals in Medicaid and CHIP based on the account transfer flat files transmitted by CMS to states served by the FFM for a transition period, through the waiver authority provided under section 1902(e)(14)(A) of the Social Security Act (the Act). While we continue to work with states on final testing of the account transfer functionality, we strongly encourage all FFM states to consider enrolling eligible individuals based on the information now being shared with states. This will expedite enrollment for individuals and help states address workload issues. In addition, some states are not ready to receive and/or process account transfers and for them, enrollment based on the flat files is a key mitigation strategy. CMS has developed a one-page application letter template that states can use to apply for this temporary authority and we are working closely with states to tailor the authority in a way that works for them.

As long as states follow the procedures outlined in the November 29, 2013 guidance and other applicable rules with respect to eligibility and claiming, federal funding, including the potential enhanced federal matching rate, is available for this temporary enrollment. Federal funding is not at risk for states that follow appropriate procedures to enroll beneficiaries based on the FFM's determination or assessment of eligibility. This topic and other frequently asked questions are addressed at <http://www.medicare.gov/State-Resource-Center/FAQ-Medicare-and-CHIP-Affordable-Care-Act-Implementation/Downloads/FAQs-by-Topic-FFM-Account-Transfer-Flat-Files.pdf>.

If you have questions or would like to discuss this option, please contact Anne Marie Costello at AnneMarie.Costello@cms.hhs.gov.