



Proposed Rule Would Update Benefit and Payment Parameters for 2022

On July 1, 2021, the Department of Health and Human Services (HHS) published a [proposed rule](#) that would revise several benefit and payment parameters under the Affordable Care Act (ACA) for the 2022 benefit year.

While many of the proposed changes primarily impact insurers and Exchanges, some provisions may affect employers.

Proposed Changes

- The rule proposes to **repeal the Exchange direct enrollment option**, which establishes a process for Exchanges to work directly with issuers, agents and brokers to operate enrollment websites through which consumers can apply for coverage, receive an eligibility determination and purchase a qualified health plan.
- For the 2022 coverage year and beyond, the rule proposes to **lengthen the annual open enrollment period for coverage through all Exchanges** to Nov. 1 through Jan. 15. The current annual open enrollment period runs Nov. 1 through Dec. 15. In addition, HHS proposes a new monthly special enrollment period through the federal Exchange for individuals who are eligible for the premium tax credit whose household income does not exceed 150% of the federal poverty level.
- The rule proposes **modifications to the Section 1332 State Innovation Waiver process**, including changes to many of the policies and interpretations of the guardrails recently issued in the 2022 Notice of Benefit and Payment Parameters, which provided more flexibility for states to apply for waivers from certain ACA provisions.

IMPORTANT DATES

Jan. 19, 2021

HHS partially finalized the 2022 Notice of Benefit and Payment Parameters.

May 5, 2021

The remainder of the 2022 Notice was finalized.

July 1, 2021

HHS issued proposed changes to the 2022 Notice.

2022 Benefit Year

If finalized, these proposed changes would apply for the 2022 benefit year.

The proposed rule would lengthen the annual Exchange open enrollment period to Nov. 1 through Jan. 15.