



# **Understanding the New CMS Rules for PY26: A Broker's Guide**



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# Key Provisions You Should Know

The Centers for Medicare & Medicaid Services (CMS) has issued new rules for Plan Year 2026 (PY26) in the ACA Marketplace. This brief guide highlights what brokers need to know – key changes, common questions, and recommended next steps to stay informed and compliant.

Provision	What You Should Know	What You Should Consider
Provisions to Consider for OE26		
<b>Enhanced subsidy expiration</b>	<p>Premiums are projected to increase.</p> <p>Enrollees with incomes slightly above 400% of the federal poverty level (FPL) could face a “subsidy cliff,” where they lose their subsidies and must pay the full price of a Marketplace plan.</p> <p>Consumers who qualify for \$0 premium plans today may be expected to pay some premium.</p>	<p>Set expectations for members around subsidy reductions and corresponding increases in member share of premium owed.</p> <p>For members with little to no subsidy in OE26, consider off-exchange plan options.</p> <p>For especially premium sensitive members, consider UHC’s Bronze Essential plan, or Copay Focus plans for cost certainty related to care.</p>
<b>Verification needed for APTC (Advanced Premium Tax Credit)</b>	<p>Without an updated application demonstrating that members qualify for a fully subsidized plan, enrollees will pay a nominal \$5 monthly premium until they confirm or update their eligibility determination, ensuring they are aware of their enrollment in this coverage.</p>	<p>Inform renewing members who may qualify for \$0 premium plans that they must actively renew in order to guarantee their full APTC.</p> <p>Remind all members that they may be prompted to submit income verification in order to receive APTC (renewing and new).</p>
<b>Increased scrutiny for applicants reporting income above 100% FPL, when trusted data sources show income below 100% FPL</b>	<p>To ensure accurate eligibility determinations, a Data Matching Issue (DMI) will be generated when an applicant attests to annual income above 100% of the Federal Poverty Level (FPL), but trusted data sources (e.g., IRS, wage databases) indicate income below 100% FPL. Applicants flagged with a DMI must provide acceptable documentation within 90 days to verify their income and resolve the discrepancy in order to maintain enrollment and eligibility for subsidies.</p> <p>Members who fall under 100% FPL will be required to pay back the subsidy in full if the final year income falls too low. This could mean thousands of dollars in tax penalties for households below the federal poverty line.</p>	<p>Educate members about common causes of income-related DMIs, particularly discrepancies between attested income and data from trusted sources. Members should be reminded of the types of documents they may need to resolve a DMI, ideally before the start of Open Enrollment.</p> <p>Utilize the CMS Guide to Confirming Your Income Information for more knowledge: <a href="https://www.cms.gov/marketplace/outreach-and-education/household-income-data-matching-issues.pdf">cms.gov/marketplace/outreach-and-education/household-income-data-matching-issues.pdf</a></p> <p>Educate members on the increased risk in 2026 if their income lands below the federal poverty line.</p>

This document outlines regulatory changes that are subject to revision and should not be interpreted as legal advice. The information provided, whether written or discussed verbally, is for general informational purposes only. It is not a substitute for guidance from qualified legal counsel, and should not be relied upon when making legal or compliance-related decisions.



Provision	What You Should Know	What You Should Consider
Provisions to Consider for OE26 (cont.)		
<p><b>Removal of the automatic 60 day extension, in addition to the 90 day period to provide income verification documents</b></p>	<p>CMS has discontinued the automatic 60-day extension currently granted in addition to the standard 90-day period for resolving income-related Data Matching Issues (DMIs). Under this change, enrollees will have a single 90-day window – beginning upon receipt of the temporary eligibility notice, typically at the time of enrollment – to submit required income verification documents. This reduces the total timeframe from 150 days to 90 days and represents a return to prior ACA policy.</p>	<p>Remind members of the types of documents that may be required to resolve income-related Data Matching Issues (DMIs). Given the shortened 90-day timeframe to submit verification, members should be encouraged to gather and organize necessary documentation in advance, ideally before the start of OEP.</p>
<p><b>Eliminate the monthly Special Enrollment Period (SEP) for members with incomes at or below 150% FPL</b></p>	<ul style="list-style-type: none"> <li>Members with income <math>\leq</math>150% of the Federal Poverty Level (FPL) will no longer be able to switch plans or carriers on a monthly basis. Members that meet standards for other qualifying life events would still be eligible for other SEPs.</li> <li>To get or keep coverage, these members must enroll during the annual Open Enrollment Period (OEP).</li> </ul>	<p>Encourage individuals to enroll in an ACA plan starting November 1st. Emphasize that if they miss the OEP deadline, they won't have access to the monthly SEP anymore.</p>
<p><b>Pre-enrollment SEP verification for Exchanges on the Federal platform</b></p>	<p>CMS is expanding pre-enrollment verification requirements to include multiple Special Enrollment Period (SEP) types, beyond just those triggered by the loss of Minimum Essential Coverage. This change is intended to ensure that reported life events are verified and that SEP eligibility is accurately confirmed prior to enrollment. This marks a return to earlier ACA policy.</p>	<p>Assist members in gathering their verification documents for all SEP enrollments.</p> <p>Encourage members to submit their documentation as soon as possible.</p>