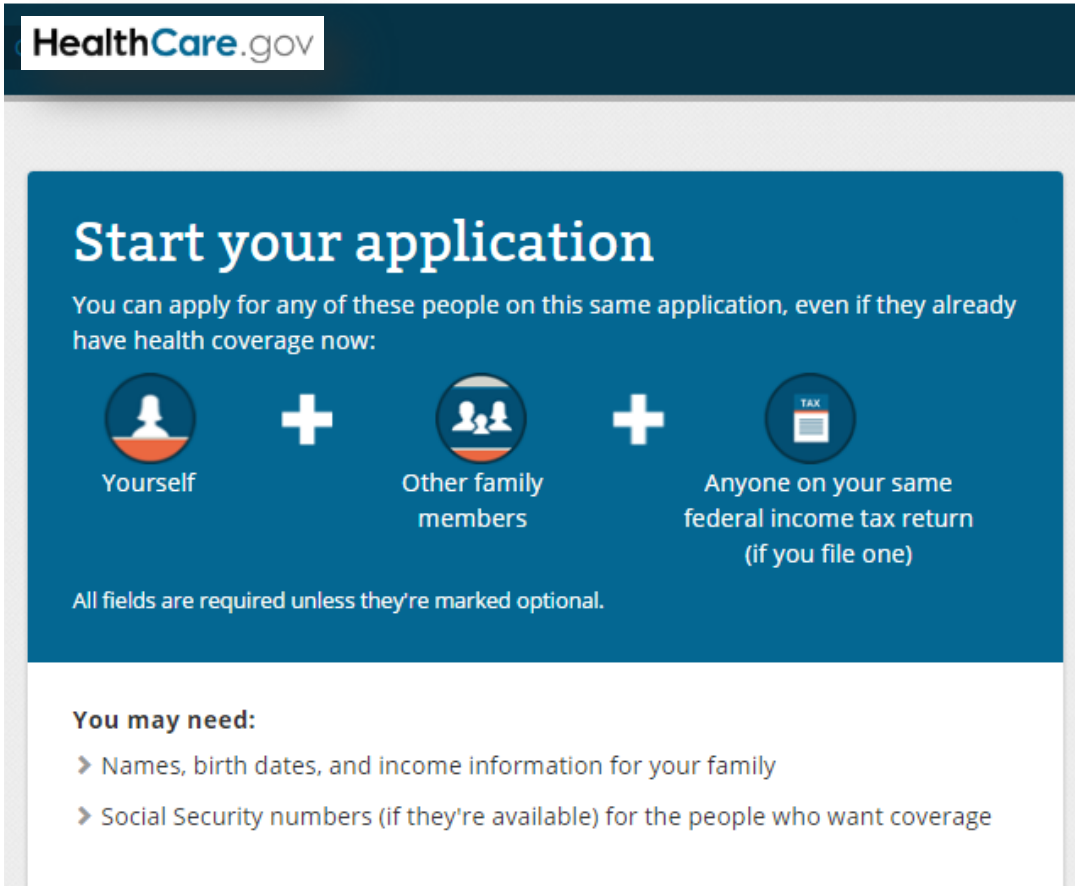
CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Preparing for Plan Year 2018 Open Enrollment



October 11, 2017

Centers for Medicare & Medicaid Services (CMS)
Center for Consumer Information & Insurance Oversight (CCIIO)

Disclaimer

The information provided in this presentation is intended only as a general informal summary of technical legal standards. It is not intended to take the place of the statutes, regulations, and formal policy guidance that it is based upon. This presentation summarizes current policy and operations as of the date it was presented. Links to certain source documents have been provided for your reference. We encourage audience members to refer to the applicable statutes, regulations, and other interpretive materials for complete and current information about the requirements that apply to them.

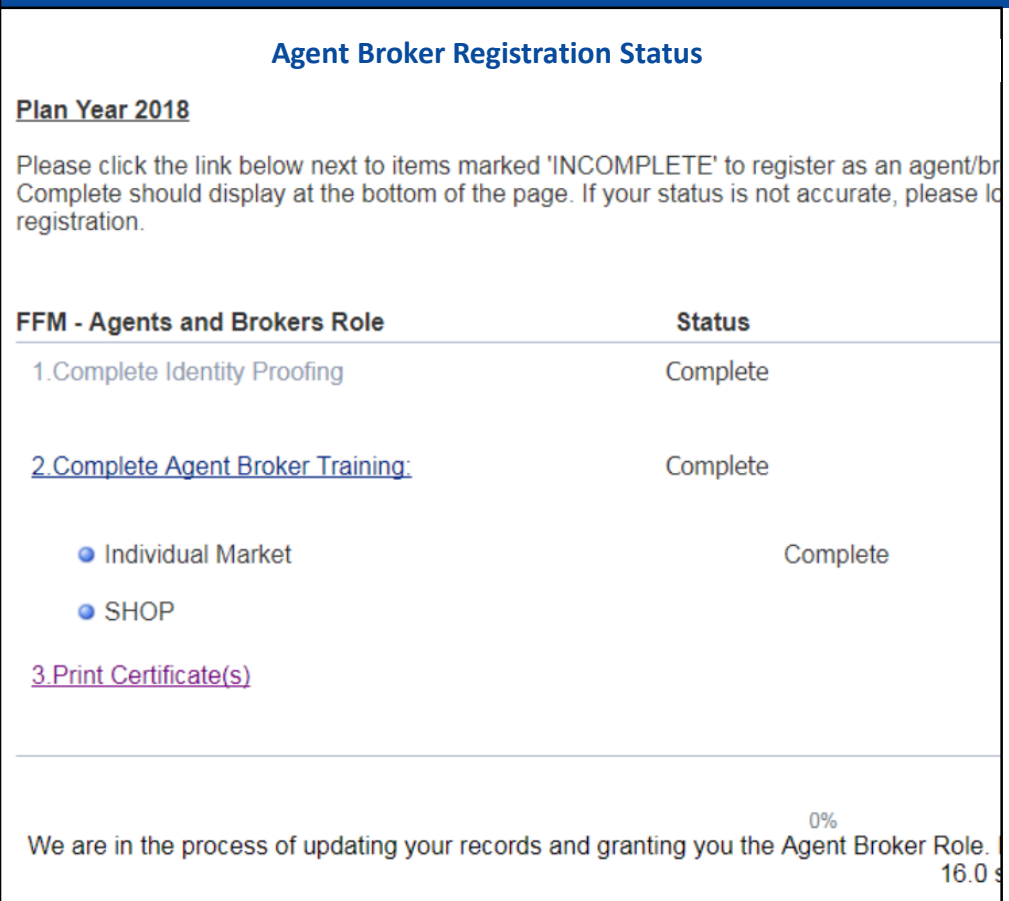
This document generally is not intended for use in the State-based Marketplaces (SBMs) that do not use HealthCare.gov for eligibility and enrollment. Please review the guidance on our Agents and Brokers Resources webpage (http://go.cms.gov/CCIIOAB) and Marketplace.CMS.gov to learn more.

Unless indicated otherwise, the general references to "Marketplace" in the presentation only includes Federally-facilitated Marketplaces (FFMs) and State-based Marketplaces on the Federal Platform (SBM-FPs).

Webinar Agenda

- Reminder of Agent/Broker Registration Requirements
- Overview of Pathways to Assist Consumers Enrolling in Coverage through the Individual Marketplace
- New Service to Help Consumers Connect with Agents and Brokers
- Compensation in the Marketplace
- Key Reminders and Resources
- How to Manage Marketplace and REGTAP Emails
- Questions and Answers

Preparing for Plan Year 2018 Open Enrollment



Agent Broker Registration Status

Plan Year 2018

Please click the link below next to items marked 'INCOMPLETE' to register as an agent/br
Complete should display at the bottom of the page. If your status is not accurate, please lo
registration.

FFM - Agents and Brokers Role	Status
1.Complete Identity Proofing	Complete
2.Complete Agent Broker Training:	Complete
• Individual Market	Complete
• SHOP	
3.Print Certificate(s)	

0%

We are in the process of updating your records and granting you the Agent Broker Role.
16.0 s

Reminder of Agent/Broker Registration Requirements

Do Not Lose Your Ability to Sell Marketplace Plans for 2018

- CMS will programmatically remove your FFM agent/broker role if you were registered for plan year 2017, but do not complete registration for plan year 2018 before plan year 2018 Open Enrollment begins **(prior to November 1, 2017)**.
- If CMS removes your FFM agent/broker role, you can re-establish it by completing plan year 2018 Marketplace registration via the CMS Enterprise Portal at https://portal.cms.gov.
  - You can complete training and sign the Agreement(s) any time, but cannot assist consumers prior to obtaining the role and completing all other applicable registration and training requirements for plan year 2018.

Note: If CMS removes your FFM agent/broker role, you will not be eligible for compensation by qualified health plan (QHP) issuers for assisting Marketplace consumers until this role is re-established. In addition, you will be systematically blocked from enrolling consumers through the Direct Enrollment Pathway, and new consumers will no longer be able to find you on HealthCare.gov using the Find Local Help tool.

Individual Marketplace Registration

Plan year 2018 Marketplace registration and training is available through the CMS Enterprise Portal: https://portal.cms.gov.

New Agents and Brokers

- Must take the full Individual Marketplace training for plan year 2018
- Must complete the Agent Broker General Agreement and the Individual Marketplace Privacy and Security Agreement via the Marketplace Learning Management System (MLMS)
- Check out these resources to help you through the steps:

Computer Based Training:

http://cbt.regtap.info/cbt/regtap/AB_2018TrainingNewAgentsBrokers_5CR_081717/story_html5.html?lms=1

Quick Guide:

https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Downloads/Guide-2018-Marketplace-New-AB.pdf

Returning Agents and Brokers (completed plan year 2017 registration)

- Can take streamlined Refresher Training for plan year 2018
- Must complete the Agent Broker General Agreement and the Individual Marketplace Privacy and Security Agreement via the MLMS
- Check out these resources to help you through the steps:

Computer Based Training:

http://cbt.regtap.info/cbt/regtap/AB_2018Registration_CBT_V2_5CR_081717/story_html5.html

Quick Guide:

https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Downloads/Guide-2018-Marketplace-Returning-AB.pdf

Small Business Health Options Program (SHOP) Registration

To register to participate in the SHOP, you:

- Must complete the SHOP Privacy & Security Agreement in the MLMS
- May complete the SHOP training and exam
  - CMS recommends that you complete SHOP training, but this training is not required.

For more information about participating in the SHOP, go to the SHOP Marketplace Resources Page: *https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/SHOP-Marketplace-Resources.html*.

Best Practices for Completing Registration and Training

- CMS Enterprise Portal passwords must be changed every 180 days. Follow these steps to change the password:
  - Visit the CMS Enterprise Portal at: https://portal.cms.gov/.
  - Click "Forgot Password?" on the right side of the home page.
  - Follow the instructions to complete the action.
  - Use these same steps to recover your user ID.
- If you are locked out of your account and do not know the answers to your security questions, contact the Marketplace Service Desk at CMS_FEPS@cms.hhs.gov or 1-855-267-1515, Monday through Friday, 9:00 AM to 8:00 PM ET or (October–November only) Saturday and Sunday 10:00 AM-3:00 PM ET.

Best Practices for Completing Registration and Training (Continued)

- The MLMS works best with Chrome or Firefox web browsers.
  - Use the Computer Configuration Quick Reference Guide at: https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Downloads/MLMS-Guide-2018-Computer-Requirements.pdf to prepare your system for the functional requirements of the MLMS.
- When taking the training on the MLMS, it is best to use the internal course navigation features and "Exit" button—not the browser back or close buttons—to navigate through the course.
  - Using the browser close ("X") button to exit may cause issues with saving your place in the course or exam.
- You should capture a screenshot of each course completion screen prior to exiting to save as a secondary record of your completion.

Best Practices for Completing Registration and Training (Continued)

- You must enter a correct National Producer Number (NPN) in your MLMS profile to receive credit for completing registration.
  - The NPN can be up to 10 digits long and must not begin with a zero (0).
  - The NPN must not include any special characters or letters.
  - The NPN is generally not the same as your state license number. You should be sure to use your NPN, not a state license number.
- To update the NPN, select the "Complete Agent Broker Training" link and update the information in your MLMS profile.
- Agent and broker NPNs can be found at: www.nipr.com/PacNpnSearch.htm.

You should confirm your NPN is correct in your MLMS profile. Entering an inaccurate NPN could result in denial of compensation or credit by an issuer.

You May Get An NPN Validation Warning When Entering NPN in MLMS Profile

- You will receive a "Cannot Be Found" pop-up warning if your NPN does not exist in the MLMS or Multidimensional Insurance Data Analytics System database.

NPN XXXXX was not found.
This could have occurred because of one of the following reasons:
You registered in a previous plan year under a different NPN.
You are a new agent or broker.
You are not a licensed agent or broker.

You may continue to take training and complete registration. However you should validate your NPN if seeking to receive issuer compensation and/or be listed on Find Local Help. For details on NPN validation, visit the Agent Broker Resources Webpage.

- You will receive an "Invalid" pop-up warning if:
  - You have an inactive license.
  - You are not approved by the applicable state for a health-related line of authority.

NPN XXXXX was found but is invalid.
This could have occurred because of one of the following reasons:
- Inactive license status
- Inactive line of authority
- Line of authority is not in a health-related field

You may continue to take training and complete registration. However you should validate your NPN if seeking to receive issuer compensation and/or be listed on Find Local Help. For details on NPN validation, visit the Agent Broker Resources Webpage.

Note: These NPN validation warnings will not prevent you from completing training and executing the applicable Agreement(s) with CMS. CMS will do an additional validation when adding your NPN to the Agent and Broker FFM Registration Completion List (RCL).

Validation of NPNs on the Agent/Broker Registration Completion List

- The RCL has a column that indicates when the NPN you entered in your MLMS profile has been validated for the current plan year.
- Validations include a check against the National Insurance Producer Registry database to confirm the NPN is associated with an active license and is approved by the applicable state for a health-related line of authority.
- Invalid NPNs remain on the RCL, but they do not display on the Find Local Help tool at HealthCare.gov; only agents and brokers with a validated NPN are searchable by consumers via Find Local Help.

Data.Healthcare.gov

Manage | More Views | Filter

	NPN	Applicable Plan Year	Individual Market Registration Completion Date	NPN Valid (Current Plan Year Only)
53	7647127	2018	08/10/2017	Yes
54	9478449	2018	08/01/2017	Yes
55	17587479	2018	08/10/2017	No
56	9161662	2018	08/10/2017	Yes
57	16554530	2018	08/06/2017	Yes

Make Sure You Are on the Registration Completion List Before Enrolling Customers

Data.HealthCare.gov

Sign In to Data.HealthCare.Gov

FFM Agent Broker Registration and Termination Status Page

Agent and Broker FFM Registration Completion List

Registration Completion List Disclaimer

The Centers for Medicare & Medicaid Services (CMS) is making the Agent and Broker Federally-facilitated Marketplace (FFM) Registration Completion List available to the public on a monthly basis pursuant to Section 1312(e) of the Affordable Care Act and 45 C.F.R. §155.220, and Routine Use No. 11 of the System of Records Notice required by the Privacy Act of 1974 (5 U.S.C. §552a), titled, "Health Insurance Exchanges (HIX) Program" (No. 09-70-0560), published at 78 Fed. Reg. 8,538 (February 6, 2013), as amended and published at 78 Fed. Reg. 32,256 (May 29, 2013), and at 78 Fed. Reg. 63,211 (October 23, 2013). The information within the Agent and Broker List may be used only for the following purposes:

1. To confirm that an agent or broker has successfully completed registration requirements for the FFM for the Individual Marketplace and/or the Small Business Health Options Program Marketplace (SHOP); and
2. To allow states and other stakeholders to conduct oversight, monitoring and enforcement activities related to agents and brokers, and to educate consumers about agents and brokers who may provide assistance to consumer who are interested in obtaining health care coverage through the FFM in their states.

The information contained in the Agent and Broker FFM Registration Completion List may be used and/or disclosed only to the extent necessary to accomplish these purposes and never to discriminate inappropriately.

Be aware that an agent's or broker's registration effective date for a particular plan year for a may fall before, during, or after a plan year's open enrollment period. Agents and brokers may only assist with or facilitate enrollment of qualified individuals, qualified employers or qualified employees in coverage in a manner that constitutes enrollment through the FFMs, or assist individuals in applying for advance payments of the premium tax credit or cost-sharing reductions to support enrollment in an FFM qualified health plan assist consumers with FFM transactions, while they have a valid registration status and current FFM agreement(s).

Plan Year 2014 registration and FFM agreements became available 8/30/2013 and expired 9/30/2014
Plan Year 2015 registration and FFM agreements became available 7/7/2014 and expired 11/12/2015
Plan Year 2016 registration and FFM agreements became available 9/15/2015 and expire 10/31/2016

Access Agent and Broker FFM Registration Completion List

Agent and Broker FFM Registration Termination List

TERMINATION LIST DISCLAIMER

The Centers for Medicare & Medicaid Services (CMS) is making the Agent and Broker Federally-facilitated Marketplace (FFM) Registration Termination List available to the public on a monthly basis pursuant to Section 1312(e) of the Affordable Care Act and 45 C.F.R. §1555.220, and Routine Use No. 11 of the System of Records Notice required by the Privacy Act of 1974 (5 U.S.C. §552a), titled, "Health Insurance Exchanges (HIX) Program" (No. 09-70-0560), published at 78 Fed. Reg. 8,538 (February 6, 2013), as amended and published at 78 Fed. Reg. 32,256 (May 29, 2013), and at 78 Fed. Reg. 63,211 (October 23, 2013).

Termination and suspension are described in regulation at 45 CFR § 155.220(f)-(g). Lifting of suspension and reconsideration of termination are described at 45 CFR § 155.220(g)(5)(i(B) and (h) respectively. The information within the Agent Broker FFM Registration Termination List may be used only to allow states and other stakeholders to conduct oversight, monitoring, and enforcement activities related to agents and brokers, and to educate consumers about agents and brokers who may not provide assistance to consumers who are interested in obtaining health coverage through the FFM in their states.

The information contained in the Agent Broker FFM Registration Termination List may be used and/or disclosed only to the extent necessary to accomplish this purpose and never to discriminate inappropriately.

Access Agent and Broker FFM Termination List

Upon successful completion of the registration requirements, you should confirm your information is included accurately in RCL.

- You can access the RCL and Agent and Broker FFM Registration Termination List at https://data.healthcare.gov/ffm_ab_registration_lists.
- This list is updated as frequently as daily.
- If your NPN does not appear for plan year 2018, send an email to: FFMProducer-AssisterHelpDesk@cms.hhs.gov.

Registration and Training Resources Available on Agent/Broker Resources Page

The following registration and training resources are available on the Plan Year 2018 Registration and Training webpage: https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Plan-Year-2018-Registration-and-Training.html

- What's New for Agents and Brokers for Plan Year 2018 Marketplace Registration and Training
- Plan Year 2018 Health Insurance Marketplace Registration and Training for New Agents and Brokers (Webinar Slides)
- Plan Year 2018 Health Insurance Marketplace Registration and Training for Returning Agents and Brokers (Webinar Slides)
- NPN Validation Frequently Asked Questions
- MLMS Quick Reference Guide: Plan Year 2018 Computer Configuration Requirements
- Avoiding the Creation of a Duplicate CMS Enterprise Portal Account

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Preparing for Plan Year 2018 Open Enrollment

Overview of Pathways to Assist Consumers Enrolling in Coverage through the Individual Marketplace

Overview of Pathways to Assist Consumers

There will be three pathways available during the 2018 Open Enrollment period to assist consumers with eligibility determinations, enrollments, and re-enrollments in Individual Marketplace QHPs.

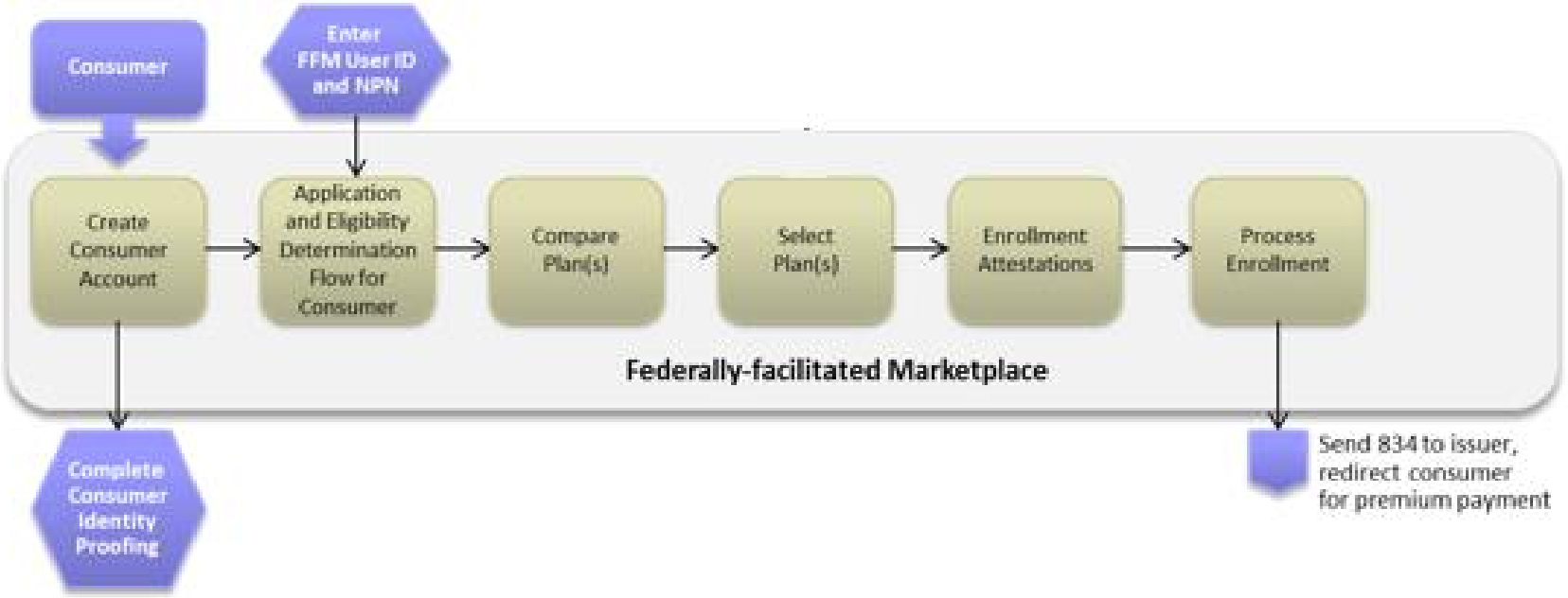
Marketplace Pathway (i.e., "Side-by-Side" Pathway on HealthCare.gov)

Direct Enrollment Pathway (i.e., Issuer/Web-broker website with consumer-facing secure redirect)

NEW

Direct Enrollment Proxy Pathway (i.e., Issuer/Web-broker website without consumer-facing secure redirect)

Marketplace Pathway

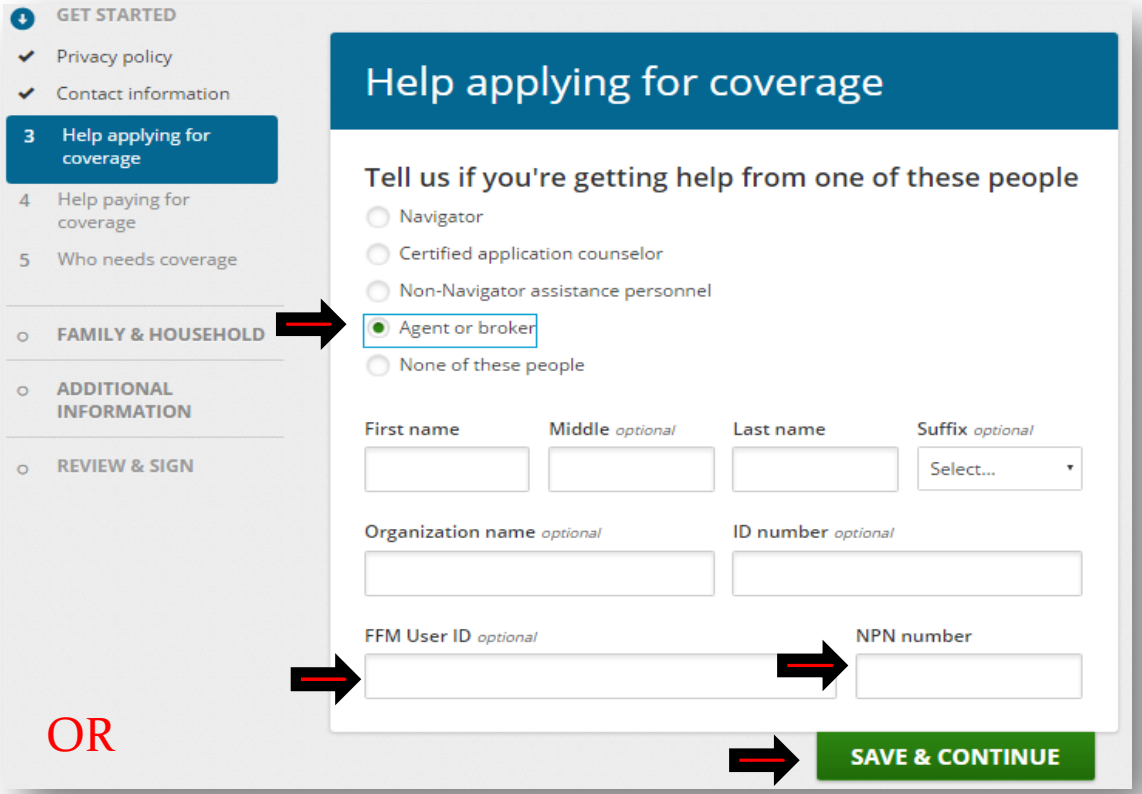


- The consumer logs directly into his or her HealthCare.gov account.
- You then work with the consumer to complete the eligibility application and QHP selection.

Prohibition on Creating Consumer Accounts

- Only a consumer or his or her legally authorized representative may create a username and password for a HealthCare.gov account and should not share this information with third parties, including agents and brokers.
- You can assist the consumer in creating his or her account.
- You may not log in to HealthCare.gov on a consumer's behalf (i.e., using the consumer's HealthCare.gov credentials).
- Violation of this prohibition is noncompliant with the FFM standards of conduct for agents and brokers, and may result in civil money penalties as described in 45 CFR §155.285 and suspension or termination of your Marketplace Agreement(s) with CMS.

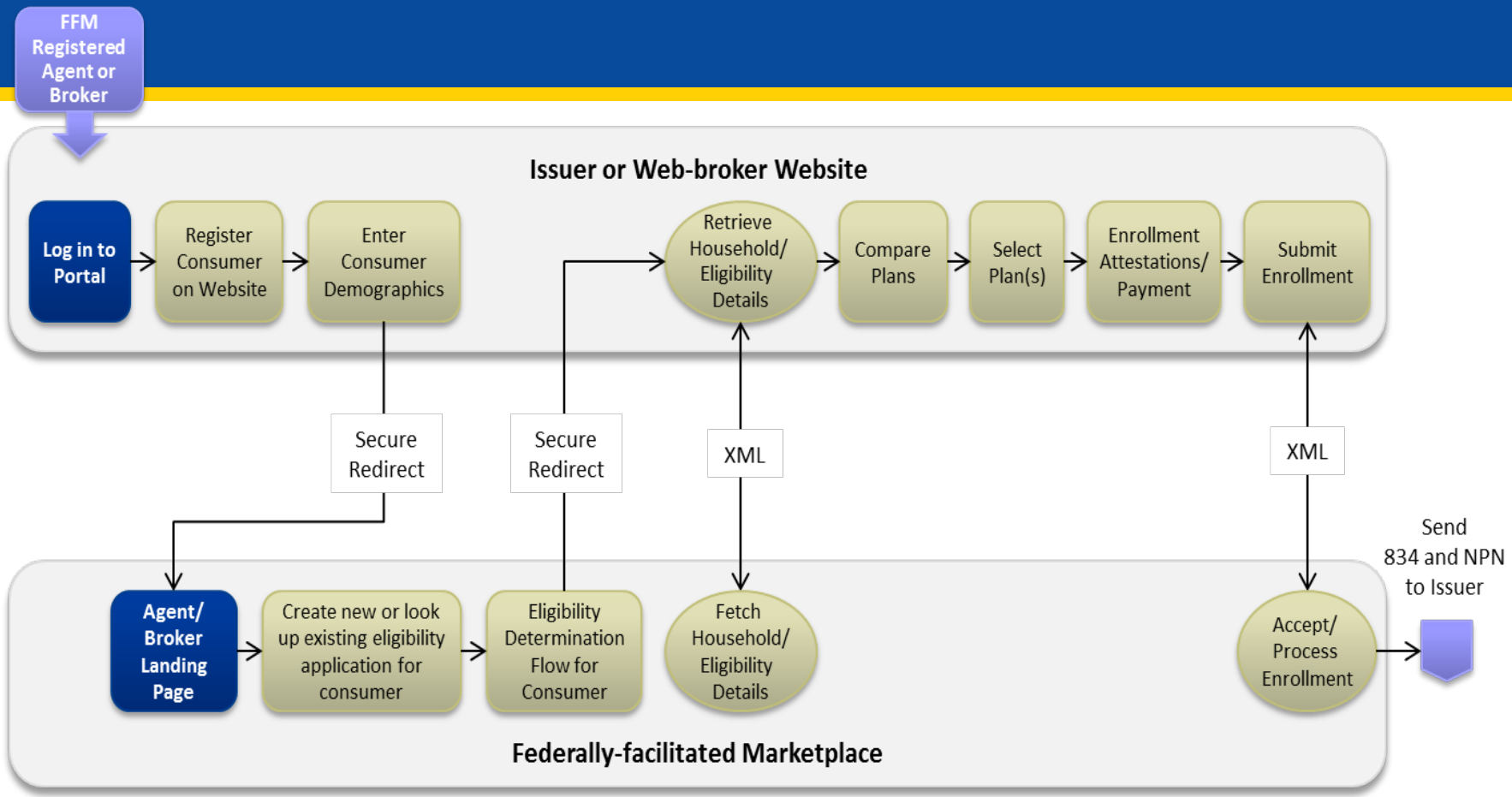
Marketplace Pathway (Continued)



OR

- If using the Long Application, the consumer should enter your FFM User ID and NPN when prompted to indicate that you provided assistance.
- If the consumer is using the Streamlined Application, the consumer should check the "Another person is helping me" box to enter your NPN.
- Note that if the consumer does not enter your correct NPN, you may not receive credit for the enrollment.

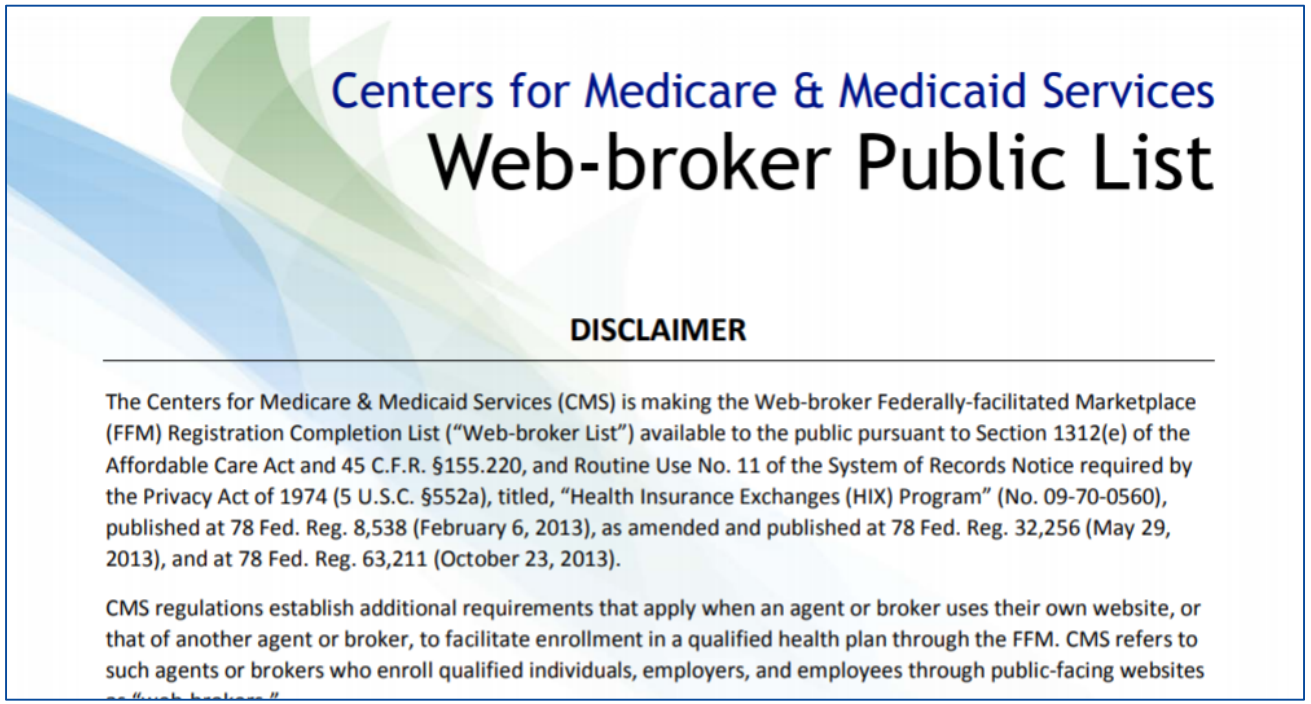
Direct Enrollment Pathway (DE Classic)



- This pathway is available to DE entities (i.e., QHP issuers and web-brokers) and their contractual partners.
- It starts on a DE entity's website and leverages the "double redirect" for consumer enrollment.
- You use your own FFM User ID and password to log in to the agent/broker landing page when redirected from a web-broker's or issuer's website.

Direct Enrollment Pathway (Continued)

- This pathway is available to all participating Direct Enrollment issuers and web-brokers and their contractual partners.
- For a list of current web-brokers, click here to review the Public FFM Web-broker Entity List.



Centers for Medicare & Medicaid Services

Web-broker Public List

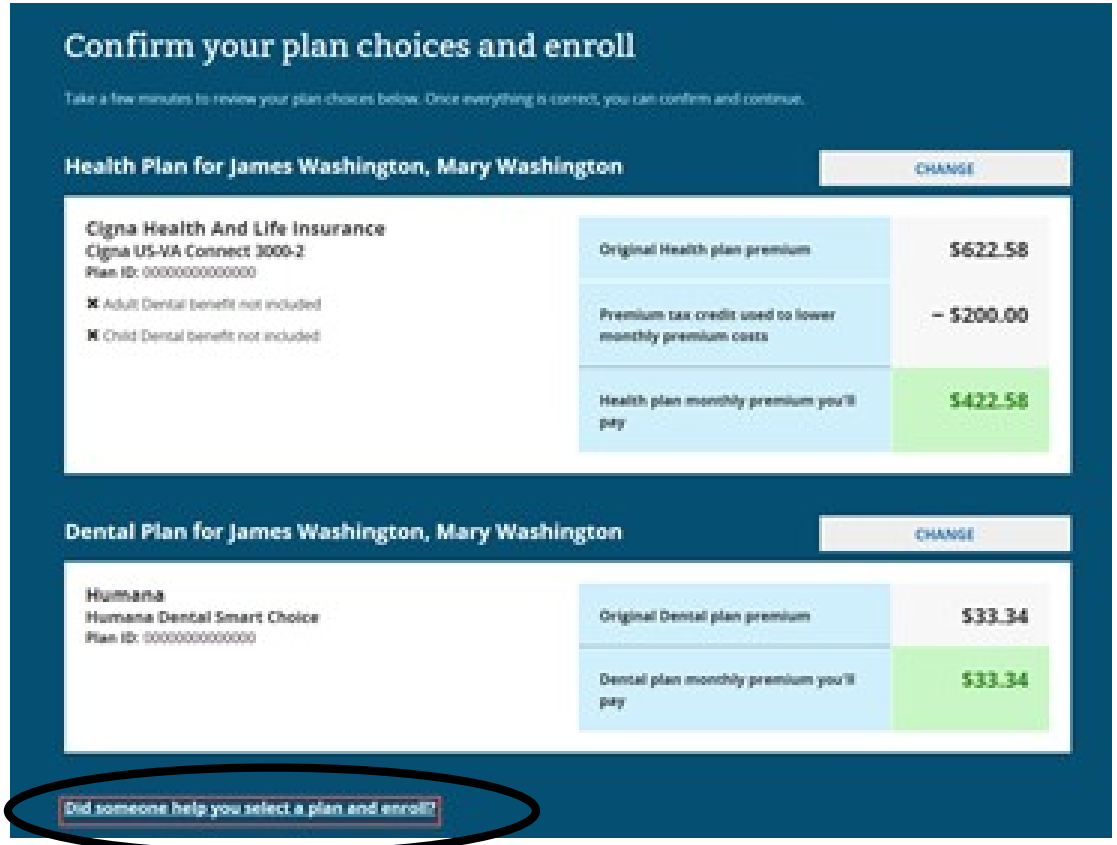
DISCLAIMER

The Centers for Medicare & Medicaid Services (CMS) is making the Web-broker Federally-facilitated Marketplace (FFM) Registration Completion List ("Web-broker List") available to the public pursuant to Section 1312(e) of the Affordable Care Act and 45 C.F.R. §155.220, and Routine Use No. 11 of the System of Records Notice required by the Privacy Act of 1974 (5 U.S.C. §552a), titled, "Health Insurance Exchanges (HIX) Program" (No. 09-70-0560), published at 78 Fed. Reg. 8,538 (February 6, 2013), as amended and published at 78 Fed. Reg. 32,256 (May 29, 2013), and at 78 Fed. Reg. 63,211 (October 23, 2013).

CMS regulations establish additional requirements that apply when an agent or broker uses their own website, or that of another agent or broker, to facilitate enrollment in a qualified health plan through the FFM. CMS refers to such agents or brokers who enroll qualified individuals, employers, and employees through public-facing websites

NPN Entry During Plan Compare Removed for Plan Year 2018 Enrollments

- In both the Marketplace and Direct Enrollment Pathways, the consumer no longer has the option to enter your name and NPN during the QHP selection process to indicate that you assisted him or her.
- CMS has removed the hyperlink stating "Did someone help you select a plan and enroll?" from the Plan Compare screen.
- You should instruct consumers to enter your NPN when completing the eligibility portion of the application (see page 18).

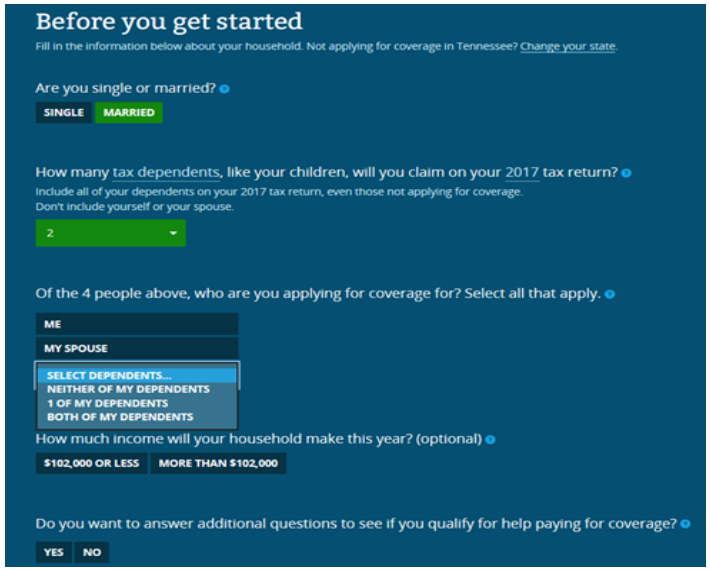


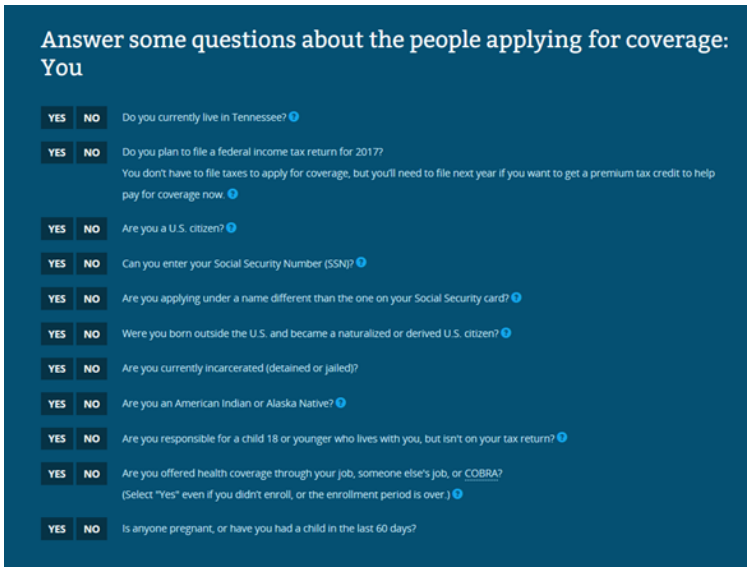
NEW

Direct Enrollment Proxy (DE Proxy) Pathway: Overview

- QHP issuers or web-brokers approved to participate in the DE Proxy Pathway (i.e., DE Proxy Partners) and their contractual partners may process applications for eligible consumers on their websites without using the consumer-facing secure redirect to HealthCare.gov to complete the eligibility determination.
- All of a consumer's information can be collected and the application can be completed on a single DE Proxy Partner's website using a replica of the FFM Streamlined Application user interface.
- This pathway does not require a log in to HealthCare.gov's agent/broker landing page.

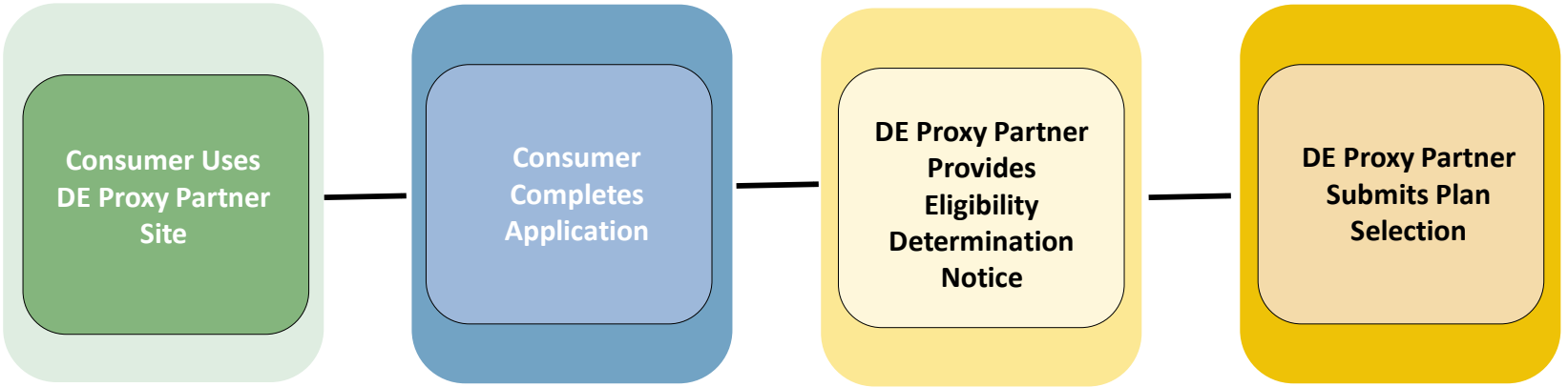
DE Proxy Pathway: Verify Consumer Eligibility for Proxy





- A screener is available to help determine which consumers are eligible to use the DE Proxy Pathway.
- If the consumer has a complex enrollment or wishes to terminate coverage, he or she is not eligible to use the FFM Streamlined Application user interface and therefore cannot use the DE Proxy Pathway.
- These consumers should be directed to use the Marketplace or DE Classic Pathway (double redirect to HealthCare.gov).

DE Proxy Pathway: Complete Application and Select Plan



- DE Proxy Partner will confirm that agents and brokers who wish to use its DE Proxy Pathway have completed Marketplace registration via the Agent and Broker FFM RCL.

- Consumer will complete a replica of the FFM Streamlined Application user interface.
- DE Proxy Partner will check for existing applications to prevent duplicates.

- FFM completes eligibility determination and generates Eligibility Determination Notice (EDN).
- DE Proxy Partner provides the EDN to the consumer.

- DE Proxy Partner submits consumer's selection to the FFM.

Where is the DE Proxy Pathway Available?

- Issuers and web-brokers are currently submitting applications to CMS to become DE Proxy Partners.
- CMS anticipates there will be roughly 15 entities approve as DE Proxy Partners for plan year 2018, including DE issuers and web-brokers.
- Issuers and web-brokers who do not participate in the DE Proxy Pathway will continue to have the classic Direct Enrollment Pathway available to use.

DE Proxy Pathway: Important Considerations for Agents and Brokers

- Consumers may not have to log in to their HealthCare.gov accounts as part of the DE Proxy Pathway, but they will continue to receive email messages and notices from the Marketplace.
- DE Proxy Partners play an important communications role.
  - Help educate consumers on Marketplace awareness
  - Encourage consumers to create or update their HealthCare.gov accounts to receive important notices (Notices may also be received via mail.)

What You Can Expect DE Proxy Partners to Communicate to Consumers

Introduction

Here at [DE Proxy Partner Name], we work with the Health Insurance Marketplace to help you get the health coverage you need. Read below to learn important information about how to get coverage through [DE Proxy Partner Name] and the Marketplace.

What's the Health Insurance Marketplace?

The Marketplace is a shopping and enrollment service for health coverage created by the Patient Protection and Affordable Care Act. The official Marketplace website is HealthCare.gov. The Marketplace helps people find out if they qualify for lower premiums or savings on out-of-pocket costs based on their income, or to see if they're eligible for free or low-cost coverage through Medicaid or the Children's Health Insurance Program.

How do I apply for and enroll in coverage?

You can apply and enroll with us. We'll send your information to the Marketplace through HealthCare.gov and let you know which programs and savings for which you're eligible.

What if I'm eligible for Medicaid or CHIP?

If you fill out an application and learn that you're eligible for coverage through Medicaid or CHIP, the Marketplace will automatically send your information to your state. We'll give you an eligibility results notice with more information.

What else do I need to know?

Even if you get coverage through [DE Proxy Partner Name], it's important to remember that you'll still get information directly from the Marketplace. Look for notices in the mail from the Health Insurance Marketplace and emails from HealthCare.gov. It's important to read these notices and emails because they contain important information about your coverage that you'll only get from the Marketplace. We'll tell you how to set up a Marketplace account after you finish applying for and enrolling in coverage.

Eligibility Results Requirements for DE Proxy Partners

- Provide the Marketplace Application ID
- Present at least the same summary level eligibility information displayed on HealthCare.gov, grouped together for persons with the same eligibility, and information included within the three sections on HealthCare.gov
- Ensure content provided in the second section of the screen is displayed to the consumer in connection with downloading the consumer's EDN
  - This content is dynamic and includes things like SEP, SEP Verification Issues, and other important information.
  - Consumers need to save the EDN PDF before being able to complete enrollment.
- Provide all the information below results, including the full Medicaid determination option (if displayed on HealthCare.gov), appeals content, and voter registration (If the consumer opts for full Medicaid determination, the DE Proxy Partner must select the names and submit them on HealthCare.gov's eligibility results page.)

EDN Requirement for DE Proxy Partners

- Download the consumer's EDN PDF and provide it to the consumer to review and save.
- The EDN should be presented in a similar way to HealthCare.gov (Consumers need to download the EDN PDF before being able to complete enrollment).
- Do not provide the EDN during enrollment or subsequent activities while enrolling whenever making a Fetch Eligibility web service transaction, because the notice could be outdated.
- Do provide updated eligibility information to the consumer.

DE Proxy Partner Communicates Next Steps After QHP Selection

Congratulations! You've enrolled in Marketplace coverage through [DE Proxy Partner Name]. Read below for more information on next steps.

What should I do now?

1. Set up a Marketplace account on HealthCare.gov. Follow these steps to set up your account:
   - Visit [HealthCare.gov/create-account] and enter some basic information, like your name, address, and email address
   - Choose a user name and password
   - Create and answer security questions for added protection
   - Select "Create Account"
   - Verify your identity by answering some basic questions based on information in your credit report
   - Enter your Application ID 123456789 to find your application

   It's very important that you set up a Marketplace account, so you're able to:
   - Read your notices and get important emails.
   - Upload documents. You may need to submit documents to confirm information on your application. In some cases, you'll need to submit these documents before your coverage can start.
   - Download forms you'll need when you file your federal income tax return.

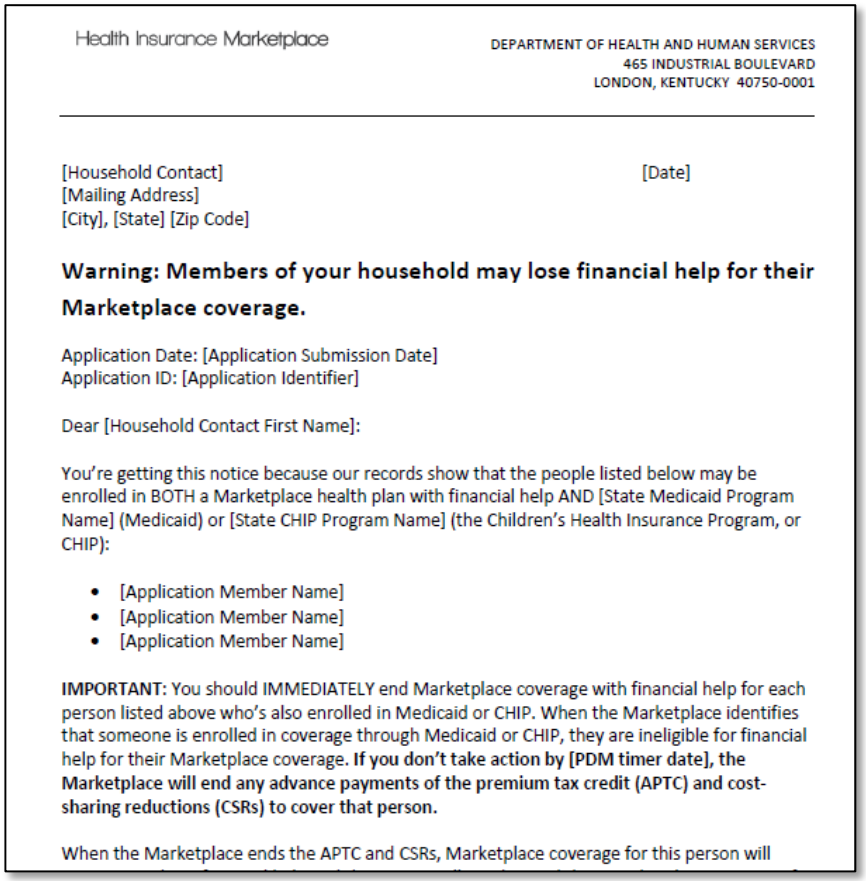
2. Pay your premiums. To do this, [DE Proxy Partner's instructions].

What if I have a life change during the year?

If you have a life change, like you move, have a change in income, or get married, please let us know right away. To do this, [DE Proxy Partner's instructions].

Access to Marketplace Notices: Where to Find Them

- Even when using the DE Proxy Pathway, Marketplace notices for consumers will be accessible only though HealthCare.gov or mail.
- Clients must log in to HealthCare.gov to access Marketplace notices and tax forms.
- DE Proxy Partners will not have access to Marketplace notices other than the EDN.



Health Insurance Marketplace

DEPARTMENT OF HEALTH AND HUMAN SERVICES
465 INDUSTRIAL BOULEVARD
LONDON, KENTUCKY 40750-0001

[Household Contact]
[Mailing Address]
[City], [State] [Zip Code]

[Date]

Warning: Members of your household may lose financial help for their Marketplace coverage.

Application Date: [Application Submission Date]
Application ID: [Application Identifier]

Dear [Household Contact First Name]:

You're getting this notice because our records show that the people listed below may be enrolled in BOTH a Marketplace health plan with financial help AND [State Medicaid Program Name] (Medicaid) or [State CHIP Program Name] (the Children's Health Insurance Program, or CHIP):

- [Application Member Name]
- [Application Member Name]
- [Application Member Name]

IMPORTANT: You should IMMEDIATELY end Marketplace coverage with financial help for each person listed above who's also enrolled in Medicaid or CHIP. When the Marketplace identifies that someone is enrolled in coverage through Medicaid or CHIP, they are ineligible for financial help for their Marketplace coverage. **If you don't take action by [PDM timer date], the Marketplace will end any advance payments of the premium tax credit (APTC) and cost-sharing reductions (CSRs) to cover that person.**

When the Marketplace ends the APTC and CSRs, Marketplace coverage for this person will

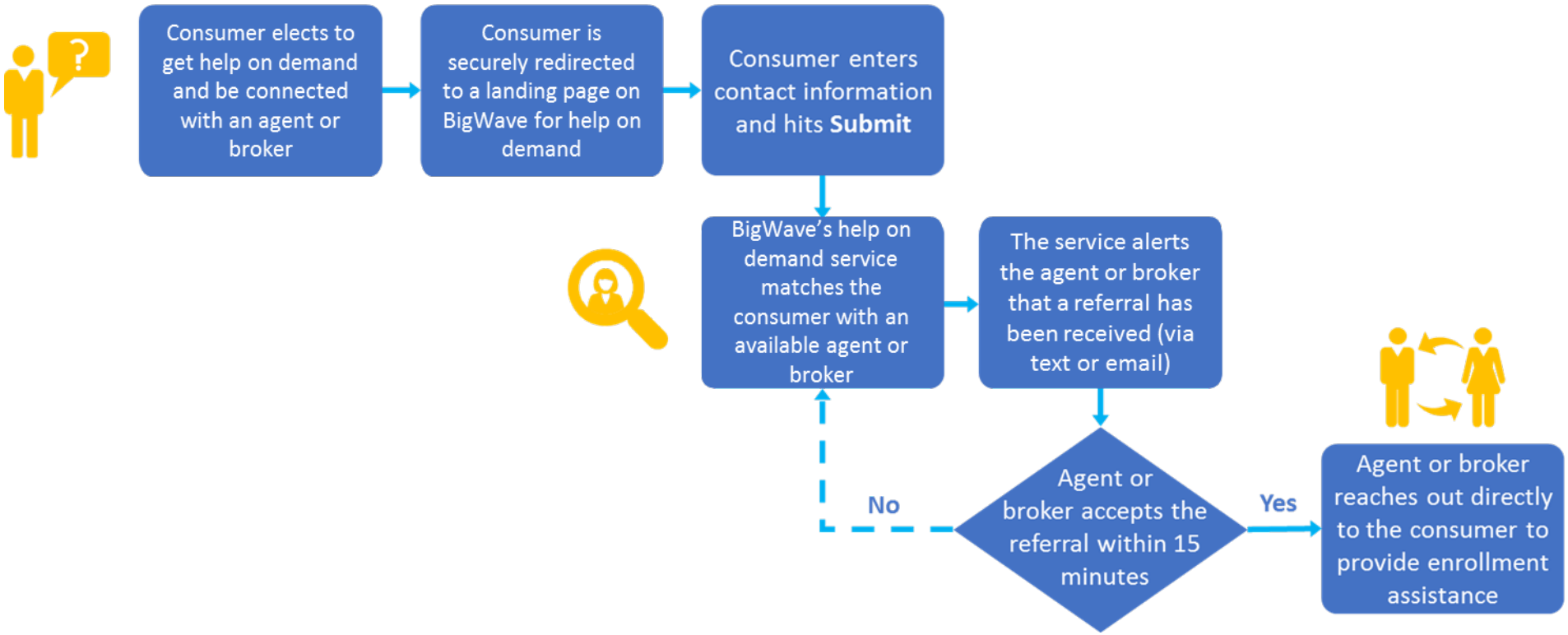
Preparing for Plan Year 2018 Open Enrollment

New Service to Help Consumers Connect with Agents and Brokers

What is the help on demand service?

- **As part of the Find Local Help tool,** a new feature is being added to provide a real-time referral system through BigWave Systems. The help on demand feature connects consumers seeking application and enrollment assistance with Marketplace-registered, licensed agents and brokers in their area who can provide immediate assistance with Marketplace plans and enrollments.
  - BigWave's system asks for the consumer's contact information and then matches them with an agent or broker who is available, speaks the consumer's language, and is licensed in the consumer's state. If more than one agent or broker meets these criteria, the service directs the referral to the agent or broker who is geographically closest to the consumer.
  - These referrals are not provided by CMS or the Marketplace and they do not constitute an endorsement by the Department of Health & Human Services (HHS) or the US Government.
- Only licensed agents and brokers with a valid health line of authority who have completed Marketplace registration and training for plan year 2018, and signed the applicable Agreements with CMS, are eligible to participate in the service.

How does help on demand work?



Note: Referrals through BigWave's help on demand service are not provided by CMS or the Marketplace and they do not constitute an endorsement by HHS or the US Government.

Benefits of help on demand

- **Maintain a flexible schedule**. You can set standard operating hours on through BigWave's help on demand service, or sign on whenever you are available to help consumers – 24 hours a day, 7 days a week.
- **Connect with consumers instantly.** Consumers who request assistance through the help on demand service are matched with an agent or broker who accepts their referral in less than 15 minutes.
- **Convert referrals into enrollments.** You can capitalize on help on demand's hot referrals and convert more business into enrollments.
- **Avoid unnecessary costs.** Unlike other industry services, referrals through this service are available to you at no cost.

Get ready to participate in help on demand

- Training & registration for the help on demand service will open late October 2017.
- In order to register to participate in the help on demand service, you must:
  - Complete Marketplace registration and training for plan year 2018 on https://portal.cms.gov.
  - Ensure that you have an active state license and health line of authority for the state(s) where you plan to sell coverage.
  - Confirm that your NPN is listed as valid on the Agent and Broker FFM RCL.
  - Successfully complete the self-paced help on demand training and certify completion by providing your name, email address, and NPN on the last slide of the training.
- After successfully completing the training, you will receive a secure link to activate your account with BigWave, complete your profile, and begin receiving referrals from consumers in real time. Additional details on this training will be forthcoming.
- Consumers can begin using the service when Open Enrollment begins on November 1, 2017.

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Preparing for Plan Year 2018 Open Enrollment

Compensation in the Marketplace

Compensation in the Marketplace

- The Marketplace does not directly appoint or compensate agents or brokers.
- Agents and brokers who participate in the Marketplace receive compensation directly from QHP issuers in accordance with their agreements with those issuers and any applicable state-specific requirements.

- Unlike CMS in the Medicare Advantage program, the Marketplace does not set compensation levels.

Working with QHP Issuers

- To become appointed with a particular QHP issuer, we recommend you contact the QHP issuer directly.
- To get compensated for actively assisting a consumer with enrollment in a Marketplace QHP, you need to:
  - Be appointed and have a compensation arrangement with that QHP issuer in accordance with state law;
  - Have completed FFM registration for the applicable plan year at the time of enrollment; and
  - Be licensed with an active, CMS-approved health related line of authority in the state(s) where the QHP is offered.
- Issuers have the discretion to compensate you if you do not have an appointment at the time you assisted with an enrollment, but you otherwise comply with federal and state standards.

Working with QHP Issuers (Continued)

- If you have reason to believe that your NPN (or agency/brokerage NPN) should have been included on a Marketplace enrollment transaction, but was not, you may contact the respective QHP issuer directly to discuss the situation.
- CMS expects that a QHP issuer would issue compensation if it is determined from the issuer's or your records that you did in fact assist the consumer, but the NPN was erroneously left off of the enrollment.
- Such records may include a consent form from the consumer, an issuer's broker of record form, or similar documentation to demonstrate that the consumer was your client for the enrollment in question.

Issuer Marketing Practices That May Impact Compensation

Equivalence

• A QHP issuer must pay the same compensation for QHPs offered through the Marketplace as it does for similar health plans offered in the state but outside the Marketplace (See 45 CFR §156.200(f)).

• If you have evidence demonstrating that QHP issuers are not compensating agents and brokers inside and outside the Marketplace the same, send your concerns, along with the supporting documentation, to the Agent/Broker Email Help Desk at FFMProducer-AssisterHelpDesk@cms.hhs.gov.

Prohibition on Discriminatory Marketing Practices

QHP issuers are prohibited from structuring agent/broker compensation arrangements to discourage marketing to and enrolling consumers with significant health needs (e.g., paying lower commission for higher metal level plan (platinum and gold), which are associated with higher utilization).

If you believe an issuer's compensation arrangement or marketing practice is discriminatory, contact CMS at marketconduct@cms.hhs.gov or your state Department of Insurance.

This guidance can be found at https://www.cms.gov/CCIIO/Resources/Fact-Sheets-and-FAQs/Downloads/Agent-Broker-Compensation-and-Discriminatory-Marketing-Practices.pdf.

Key Reminders and Resources

Upcoming Activities

- The slides from this webinar are available on REGTAP at www.REGTAP.info and will be available on the Resources for Agents and Brokers webpage at http://go.cms.gov/CCIIOAB in the coming days.
- In addition, this webinar will be available for on-demand training on REGTAP.
- Weekly webinars will continue on Wednesdays at 1 PM ET through October 25 to help you prepare for Open Enrollment and answer your questions.

Upcoming Webinars
October 18: Complex Cases: Calculating Past-Due Premium Payments and Resolving Data Matching Issues
October 25: Making the Most of Your Marketplace Participation During this Open Enrollment Period

Plan Year 2018 Open Enrollment

- The Open Enrollment period for plan year 2018 begins on November 1, 2017 and runs through December 15, 2017.
- There are no opportunities to make an Open Enrollment plan selection after December 15.

- Marketplace Agent/Broker Open Enrollment Office Hours will take place on Wednesdays 1:00-1:30 PM ET starting November 8 throughout Open Enrollment to help you stay informed, notify you of important updates and deadlines, answer your questions, and give you an opportunity to provide real-time feedback to CMS on what you are experiencing with the Marketplace this Open Enrollment period.

Site Availability

- In general, HealthCare.gov will be available 24 hours a day during Open Enrollment.
- As in previous years, there are several days on which teams are permitted to conduct maintenance that will result in site downtime. This maintenance is critical to ensure that the site performs at a high level.
- This year, planned maintenance will be permitted on the following days/times:
  - Sunday 11/5 12am-12pm
  - Sunday 11/12 12am-12pm
  - Sunday 11/19 12am-12pm
  - Sunday 11/26 12am-12pm
  - Sunday 12/3 12am-12pm
- There is also a possibility that the FFM will perform high-priority maintenance on Sunday 12/10 from 12 am to 7 am.
- PLEASE NOTE that CMS also retains the right to perform emergency maintenance at other times if absolutely necessary. CMS will attempt to communicate all planned and unplanned maintenance that will impact site availability.

Reporting Potential Fraud or Abuse

- You play an important role in observing and reporting any potentially fraudulent practices taking place in relation to the Marketplace.
- If you suspect that a consumer or another agent or broker has engaged in fraud or abusive conduct, report your concerns to one of the following:

Examples of Potential Fraud or Abuse

A client tells you he has been contacted by an individual seeking his personal and financial information.

A consumer submits false documentation to the Marketplace.

An agent or broker is enrolling consumers without their consent.

An agent or broker is assisting consumers without a valid license or without completing Marketplace registration.

An agent or broker has disclosed a consumer's personally identifiable information.

Name	Contact	Topics
Department of Health & Human Services (HHS) Office of Inspector General Hotline	1-800-HHS-TIPS (1-800-447-8477) or https://forms.oig.hhs.gov/hotlineoperations/index.aspx	HHS employee fraud or misconduct Grant and contract fraud Submission of false information
Federal Trade Commission	https://www.ftccomplaintassistant.gov	Identity theft • Contact from someone posing to be from the government
Agent/Broker Email Help Desk	FFMProducer-AssisterHelpDesk@cms.hhs.gov	• Unregistered agents or brokers operating in the Marketplace • Inappropriate agent or broker marketing practices

Health Insurance Marketplace
Direct Agent/Broker Partner Line

Agents and brokers **who have completed plan year 2018 Marketplace registration** may access this enhanced service for assistance with questions related to Individual Marketplace consumer enrollments by following the steps below.

1. Call 855-788-6275.
2. Enter your National Producer Number (NPN).
   - Only agents/brokers registered with the Marketplace can use this.
   - Valid NPNs will be updated weekly (typically on Fridays).
3. When a valid NPN is entered, you will be presented with three options:
   - Assist consumers with HealthCare.gov account password resets
   - SEPs that are not common/available through the application
   - Other issues

- If you enter an invalid NPN, you will be transferred to the main Marketplace Call Center line.
- **The Direct Agent/Broker Partner Line is most helpful for password resets and non-standard Special Enrollment Periods.**

Agent/Broker Marketplace Help Desks and Call Centers

Help Desk Name	Phone # and/or Email Address	Types of Inquiries Handled	Hours of Operation (Closed Holidays)
Direct Agent/Broker Partner Line	855-788-6275 Note: Enter your NPN to access this line	Inquiries related to specific consumers: • Assist consumers with HealthCare.gov account password resets • SEPs not available on the consumer application • Eligibility and enrollment issues related to the Individual Marketplace	Monday-Sunday 24 hours/day
Agent/Broker Email Help Desk	FFMProducer-AssisterHelpDesk@cms.hhs.gov	• General enrollment and compensation questions • Identity proofing/Experian issues requiring manual verification • Escalated general registration and training questions (not related to a specific training platform) • Agent/Broker Registration Completion List issues • Find Local Help issues	Monday-Friday 8:00 AM-6:00 PM ET

Agent/Broker Marketplace Help Desks and Call Centers (Continued)

Help Desk Name	Phone # and/or Email Address	Types of Inquiries Handled	Hours of Operation (Closed Holidays)
Marketplace Service Desk	855-CMS-1515 855-267-1515 CMS_FEPS@cms.hhs.gov	• Password resets and account lockouts on the CMS Enterprise Portal (used to access the Marketplace Learning Management System (MLMS), the agent/broker training and registration system) • Login issues on the agent/broker landing page used for Direct Enrollment (often due to FFM User ID not populating correctly when the agent or broker is redirected from an issuer's or web-broker's site) • Other CMS Enterprise Portal account issues, requests, or error messages • 501 Downstream Error message on HealthCare.gov website issues • General registration and training questions (not related to a specific training platform)	Monday-Friday 8:00 AM-8:00 PM ET Saturday-Sunday 10:00 AM-3:00 PM ET (October–November only)

Agent/Broker Marketplace Help Desks and Call Centers (Continued)

Help Desk Name	Phone # and/or Email Address	Types of Inquiries Handled	Hours of Operation (Closed Holidays)
Agent/Broker Training and Registration Email Help Desk	MLMSHelpDesk@cms.hhs.gov	• Technical or system-specific issues related to the agent/broker training and registration system (i.e., the MLMS) • User-specific questions about maneuvering in the MLMS site, or accessing training and exams	Monday-Friday 8:00 AM-5:30 PM ET
SHOP Call Center	800-706-7893	• All inquiries related to the SHOP • SHOP agent/broker portal access questions	Monday-Friday 9:00 AM-7:00 PM ET
Direct Enrollment (formerly Web-Broker) Email Help Desk	DirectEnrollment@cms.hhs.gov	• All inquiries specifically related to becoming and/or operating as a direct enrollment web-broker in the Marketplace	Monday-Friday 9:00 AM-5:00 PM ET

Agent/Broker Marketplace Help Desks and Call Centers (Continued)

Help Desk Name	Phone # and/or Email Address	Types of Inquiries Handled	Hours of Operation (Closed Holidays)
America's Health Insurance Plans (AHIP) Training Help Desk	support@ahipinsuranceeducation.org 800-984-8919	All inquiries specifically related to the AHIP agent/broker training platform	**Call Center/Email** Monday-Friday: 8:00 AM-7:00 PM ET Saturday: 8:30 AM-5:00 PM ET
Litmos Training Help Desk	cmsffmsupport@litmos.com 844-675-6565	All inquiries specifically related to the Litmos agent/broker training platform	**Call Center** Monday-Friday 9:00 AM-5:00 PM PT (12:00 PM-8:00 PM ET) **Email** 24 hours/day
National Association of Health Underwriters (NAHU) Training Help Desk	NAHU-FFM@nahu.org 844-257-0990	All inquiries specifically related to the NAHU agent/broker training platform	**Call Center:** Monday-Friday: 9:00 AM-5:00 PM ET **Technical Support:** Monday-Friday: 8:00 AM-9:00 PM ET Saturday-Sunday: 8:00 AM-8:00 PM ET

Tips from the Marketplace Call Center

- In most cases, you can use self-service options at HealthCare.gov to assist consumers enrolling in individual market QHPs through the Marketplace without contacting the Marketplace Call Center. Using self-service options frees up Call Center Representatives (CCRs) for more complex cases and reduces wait times for everyone.
- If you need help assisting a consumer, you may contact the Marketplace Call Center.
  - Available in English and Spanish 24 hours a day, seven days a week
  - Closed on Memorial Day, July 4th, Labor Day, Thanksgiving Day, and Christmas Day
- When you need to contact the Marketplace Call Center, try to avoid the following:
  - Calling during peak times—especially between 10:00 AM and 2:00 PM ET
  - Calling around the enrollment deadline (i.e., December 10-15)
  - Calling during HealthCare.gov outages (CCRs use the same tool for application/enrollment assistance)

Tips from the Marketplace Call Center (Continued)

- When contacting the Marketplace Call Center, consumers can grant permission to allow you to access their account information.
  - This Marketplace Call Center authorization is not the same as ensuring your NPN is on the consumer's application for payment purposes with issuers.
- Consumers will be asked to:
  - Provide the Marketplace Call Center with your full name and NPN
  - Elect the length of time the authorization is valid—this can be one call or up to 365 days
  - Update the authorization as needed prior to the beginning of Open Enrollment
- This authorization allows you to:
  - Call the Marketplace Call Center and access a consumer's information on the consumer's behalf
  - Participate in a three-way call with a Marketplace CCR and the consumer

When Is It Appropriate for Agents and Brokers to Seek Marketplace Call Center Assistance?

- You may direct consumer application questions or issues to the Marketplace Call Center.
- The following complex consumer situations may require support from the Marketplace Call Center:
  - You need to check the status of a consumer's data matching or SEP verification issue.
  - The consumer is part of a multi-tax household, and requires guidance on which household members should be part of different application groups.
  - You or the consumer are having technical difficulties completing the online application.
- For password resets for consumer HealthCare.gov accounts and SEPs not available on the consumer application, use the Direct Agent/Broker Partner Line (855-788-6275). You will need to enter your NPN to gain access.

When Is It Not Appropriate for Agents and Brokers to Seek Marketplace Call Center Assistance?

- The consumer (or you with the consumer's assistance) has not attempted to complete all required data fields in the online application.
  - Note the Marketplace Call Center is not staffed to enter consumer information for multiple applications.
- The consumer does not have ready access to personal information and/or specific documentation required to complete enrollment.
  - Use the Marketplace Application Checklist when helping consumers complete their applications and to be sure they are prepared to contact the Marketplace Call Center.
- You do not have a current Marketplace Call Center authorization and the consumer is not on the line.
  - Remember, Marketplace Call Center CCRs will not provide you any information about a consumer's application if the consumer is not part of the three-way call or has not previously authorized you to work on his or her behalf.

Agent and Broker Resources

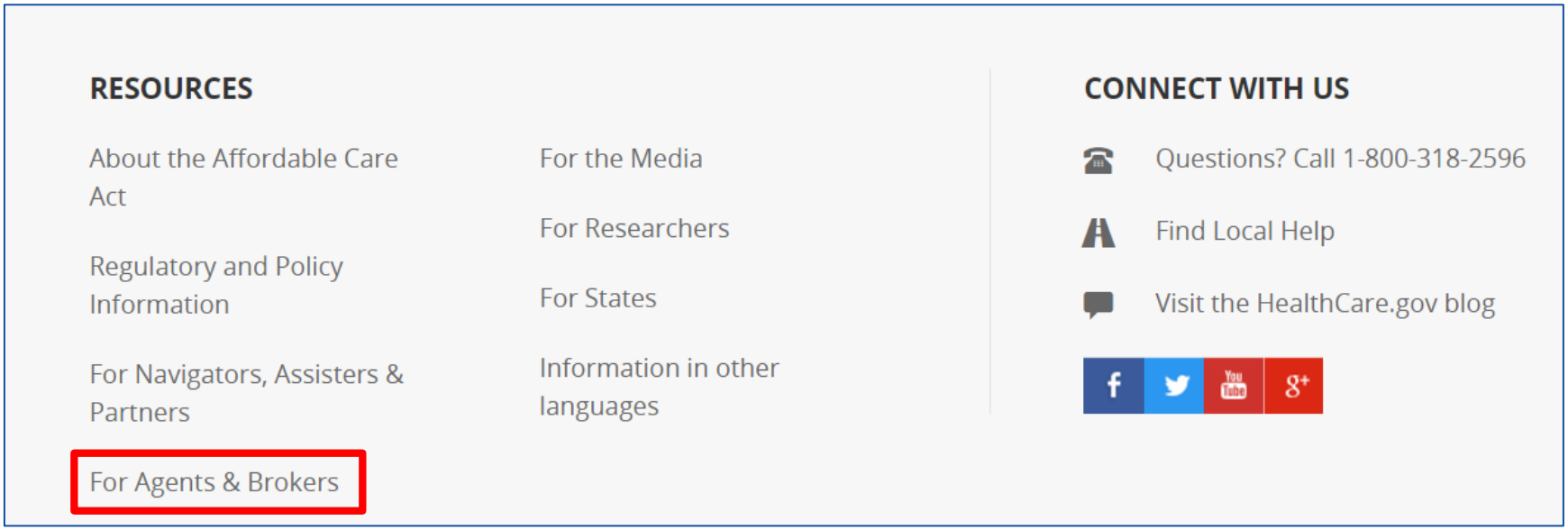
Resource	Link
Agents and Brokers Resources webpage	http://go.cms.gov/CCIIOAB
HealthCare.gov	https://www.healthcare.gov/
Outreach and Education Materials on Marketplace.CMS.gov	https://marketplace.cms.gov/outreach-and-education/outreach-and-education.html
Plan Year 2018 Marketplace Registration and Training for Agents and Brokers	https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Plan-Year-2018-Registration-and-Training.html
Registration Completion List on Data.HealthCare.gov	https://data.healthcare.gov/ffm_ab_registration_lists
Twitter updates @HealthCareGov	https://twitter.com/search-home
"News for Agents and Brokers" Newsletter	Distributed via email and available on the Agents and Brokers Resources webpage at http://go.cms.gov/CCIIOAB

Agent and Broker Resources (Continued)

Resource	Link
SHOP at HealthCare.gov	https://www.healthcare.gov/small-businesses/
SHOP Agent/Broker Portal	https://healthcare.gov/marketplace/small-businesses/agent
Find Local Help Tool	https://localhelp.healthcare.gov/
Agent and Broker National Producer Numbers	www.nipr.com/PacNpnSearch.htm
Regulation 45 CFR 155.220 authorizing agents and brokers to assist consumers with selecting and enrolling in QHPs offered through the Marketplaces	https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=&SID=a53964f7a759ab782238698f8ad60a0c&mc=true&r=SECTION&n=se45.1.155_1220
Regulation 45 CFR 156.200(f) on requirements for equivalence in broker compensation	https://www.ecfr.gov/cgi-bin/text-idx?SID=0dc5e73c3aa775e91e0ac62caea99397&mc=true&node=pt45.1.156&rgn=div5#se45.1.156_1200
Patient Protection and Affordable Care Act Market Stabilization Final Rule	https://www.gpo.gov/fdsys/granule/FR-2017-04-18/2017-07712/content-detail.html

Shortcut to Agent/Broker Resources Page from HealthCare.gov

- HealthCare.gov contains a link to make it easier for you to get to the Agents and Brokers Resources webpage (http://go.cms.gov/CCIIOAB).



How to Manage Marketplace and REGTAP Emails

Marketplace Emails

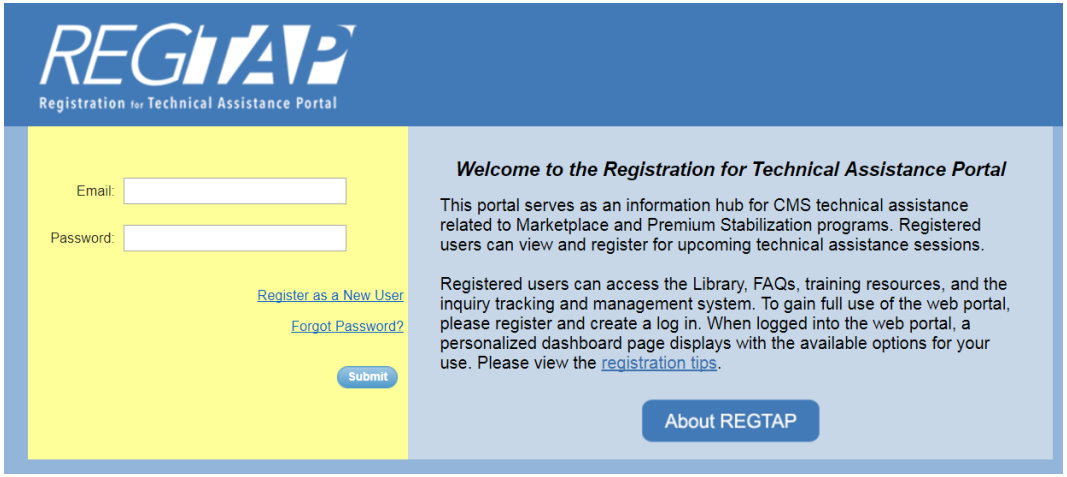
- The Marketplace strives to keep you updated on the most valuable information relating to enrollment, registration and training reminders, deadlines, and more.
- You are automatically subscribed to emails once you complete registration and training for the current plan year.
- If you have not completed registration and training and would like to receive general updates, you can subscribe to Marketplace emails at https://www.healthcare.gov/lp/agents-and-brokers/.

Managing Marketplace Emails

You can manage your Marketplace email communication preferences and the specific topic lists you subscribe to via the Subscriber Preferences page at https://public.govdelivery.com/accounts/USCMSHIM/subscriber/new?preferences=true.

- To receive fewer emails from the Marketplace:
  - Select the tab for "Email Frequency"
  - Next to "Send me fewer emails" select "Yes"
  - Select "Save"
  - You can change your preferences at any time by following these same steps and updating your selection.
- To unsubscribe from all emails from the Marketplace:
  - Select the tab for "Manage Subscriptions"
  - Select "Delete my account"

Managing REGTAP Email Notifications



- A Registration and Technical Assistance Portal, or REGTAP account provides access to other resources, such as agent/broker frequently asked questions and on-demand training.
  - There is a consolidated view of all agent/broker REGTAP resources through the dedicated Agent/Broker Program Area page.
  - Visit www.regtap.info/ to register for a REGTAP account.
- REGTAP will send automated email notifications about events that you have registered for.
- If you already have a REGTAP account and would like to opt out of REGTAP email notifications, please contact REGTAP Registration Support by phone at 800-257-9520 from 9:00 AM to 5:00 PM ET Monday through Friday, or by email at registrar@REGTAP.info.

Acronym Definitions

Acronym	Definition
AHIP	America's Health Insurance Plans
CCR	Call Center Representative
CCIIO	Center for Consumer Information and Insurance Oversight
CFR	Code of Federal Regulations
CMS	Centers for Medicare & Medicaid Services
DE	Direct Enrollment
EDN	Eligibility Determination Notice
FFM	Federally-facilitated Marketplace
HHS	Department of Health & Human Services
MLMS	Marketplace Learning Management System

Acronym Definitions (Continued)

Acronym	Definition
NAHU	National Association of Health Underwriters
NPN	National Producer Number
QHP	Qualified Health Plan
RCL	Registration Completion List
REGTAP	Registration for Technical Assistance Portal
SBM	State-based Marketplace
SBM-FP	State-based Marketplace on the Federal Platform
SEP	Special Enrollment Period
SHOP	Small Business Health Options Program