



Health Insurance Marketplace 2016 Open Enrollment

Open Enrollment Week 2

*Operational Updates and
Announcements for Agents and
Brokers Participating in the
Federally-facilitated
Marketplaces (FFMs)*

*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 State-based Marketplaces (SBMs), but some of the material in it might be relevant if you are in a state with an SBM that is using HealthCare.gov for eligibility and enrollment. Please review the guidance on our Agents and Brokers Resources webpage (<https://www.cms.gov/CCIIO/programs-and-initiatives/health-insurance-marketplaces/a-b-resources.html>) and [Marketplace.CMS.gov](https://www.cms.gov/Marketplace) to learn more.



Health Insurance Marketplace 2016 Open Enrollment



*Updates
and
Announcements*

Key Open Enrollment Dates for Plan Year 2016

November 1, 2015

- *HealthCare.gov is available for plan year 2016 Open Enrollment*

November 15, 2015 –
December 15, 2015

- *Employers signing up for SHOP Marketplace coverage do not have to meet participation rate requirement*

December 15, 2015*
(December 16 - 3:00 AM ET)

- *Deadline for consumers to enroll in coverage through the FFMs effective January 1, 2016*

January 1, 2016

- *Coverage begins for consumers who enrolled through the FFMs by December 15, 2015*

January 15, 2016*
(January 16 - 3:00 AM ET)

- *Deadline for consumers to enroll in coverage through the FFMs effective February 1, 2016*

January 31, 2016
(February 1 - 3:00 AM ET)

- *End of 2016 Open Enrollment for the Federally-facilitated Individual Marketplace; Deadline for consumers to enroll in coverage through the FFMs effective March 1, 2016*

February 1, 2016

- *Coverage begins for consumers who enrolled through the FFMs by January 15, 2016*

March 1, 2016

- *Coverage begins for consumers who enrolled through the FFMs by January 31, 2016*

**The monthly SHOP Marketplace deadline is always the 15th at 11:59 PM ET.*

Failure to File and Reconcile 2014 Advance Payments of the Premium Tax Credit

- For Open Enrollment 2016, the FFM's will discontinue advance payments of the premium tax credit (APTC) and cost-sharing reductions (CSR) for 2016 coverage for those who received APTC in 2014 but did not comply with the requirement to file an income tax return and reconcile APTC.
- According to Marketplace regulations, the FFM's must discontinue APTC and CSR for tax filers who received APTC but did not comply with the requirement to file an income tax return and reconcile APTC for 2014 (155.305(f)(4)).

Form 8962 Premium Tax Credit (PTC) (OMB No. 1545-0046)

Department of the Treasury
Internal Revenue Service

2014
Revised 12/13
OMB No. 1545-0046

▶ Attach to Form 1040, 1040A, or 1040NR.
▶ Information about Form 8962 and its separate instructions is at www.irs.gov/form8962.

▶ Your best security practice is to e-file your return.

Total (see instructions)

Part 1: Annual and Monthly Contribution Amount

1 Family Size: Enter the number of exemptions from Form 1040 or Form 1040A, line 6d, or Form 1040NR, line 7d **1**

2a Modified AGI: Enter your modified AGI (see instructions) **2a**

b Enter total of your dependents' modified AGI (see instructions) **2b**

3 Household Income: Add the amounts on lines 2a and 2b **3**

4 Federal Poverty Line: Enter the federal poverty amount as determined by the family size on line 1 and the federal poverty table for your state of residence during the tax year (see instructions). Check the appropriate box for the federal poverty table used: A Alaska B Hawaii C Other 48 states and DC **4**

5 Household Income as a Percentage of Federal Poverty Line: Divide line 3 by line 4. Enter the result rounded to a whole percentage. (For example, for 1.540 enter the result as 154, for 1.544 enter as 155.) (See instructions for special rules.) **5** %

6 Is the result entered on line 5 less than or equal to 400%? (See instructions if the result is less than 100%.)
 Yes. Continue to line 7.
 No. You are not eligible to receive PTC. If you received advance payment of PTC, see the instructions for how to report your Excess Advance PTC (repayment) amount.

7 Applicable Figure: Using your line 5 percentage, locate your "applicable figure" on the table in the instructions. **7**

8a Annual Contribution for Health Care: **8a**

b Monthly Contribution for Health Care: Divide line 8a by 12. Round to whole dollar amount. **8b**

Part 2: Premium Tax Credit Claim and Reconciliation of Advance Payment of Premium Tax Credit

9 Did you share a policy with another taxpayer or get married during the year and want to use the alternative calculation? (See instructions.)
 Yes. Skip to Part 4, Shared Policy Allocation, or Part 5, Alternative Calculation for Year of Marriage. No. Continue to line 10.

10 Do all Forms 1096-A for your tax household include coverage for January through December with no change in monthly amounts shown on lines 21–23, column A and 27?
 Yes. Continue to line 11. Compute your annual PTC. Skip lines 10–20. No. Continue to lines 10–23. Compute and continue to line 24. No. Continue to lines 10–23. Compute your monthly PTC and continue to line 24.

| Annual Calculation | A. Premium Amount (Form 1096-A, line 23A) | B. Annual Premium Amount of SLICSP (Form 1096-A, line 23B) | C. Annual Contribution Amount (Line 8a) | D. Annual Maximum Premium Assistance (Subtract C from B) | E. Annual Premium Tax Credit Allowed (Smaller of A or D) | F. Annual Advance Payment of PTC (Form 1096-A, line 23C) |
|--|--|--|---|---|---|--|
| 11 Annual Total | | | | | | |
| Monthly Calculation | A. Monthly Premium Amount (Form 1096-A, lines 21–22, column A) | B. Monthly Premium Amount of SLICSP (Form 1096-A, lines 21–22, column B) | C. Monthly Contribution Amount (Amount from line 8b or alternative marriage monthly contribution) | D. Monthly Maximum Premium Assistance (Subtract C from B) | E. Monthly Premium Tax Credit Allowed (Smaller of A or D) | F. Monthly Advance Payment of PTC (Form 1096-A, lines 21–22, column C) |
| 12 January | | | | | | |
| 13 February | | | | | | |
| 14 March | | | | | | |
| 15 April | | | | | | |
| 16 May | | | | | | |
| 17 June | | | | | | |
| 18 July | | | | | | |
| 19 August | | | | | | |
| 20 September | | | | | | |
| 21 October | | | | | | |
| 22 November | | | | | | |
| 23 December | | | | | | |
| 24 Total Premium Tax Credit: Enter the amount from line 11E or add lines 12E through 23E and enter the total here | | | | | | |
| 25 Advance Payment of PTC: Enter the amount from line 11F or add lines 12F through 23F and enter the total here | | | | | | |
| 26 Net Premium Tax Credit: If line 24 is greater than line 25, subtract line 25 from line 24. Enter the difference here and on Form 1040, line 66; Form 1040A, line 46; or Form 1040NR, line 65. If you elected the alternative calculation for marriage, enter zero. If line 24 equals line 25, enter zero. (See line 10. If line 25 is greater than line 24, leave this line blank and continue to line 27.) | | | | | | |
| Part 3: Repayment of Excess Advance Payment of the Premium Tax Credit | | | | | | |
| 27 Excess Advance Payment of PTC: If line 25 is greater than line 24, subtract line 24 from line 25. Enter the difference here | | | | | | |
| 28 Repayment Limitation: Using the percentage on line 5 and your filing status, locate the repayment limitation amount in the instructions. Enter the amount here | | | | | | |
| 29 Excess Advance Premium Tax Credit (Repayment): Enter the smaller of line 27 or line 28 here and on Form 1040, line 46; Form 1040A, line 26; or Form 1040NR, line 44 | | | | | | |

For Paperwork Reduction Act Notice, see your tax return instructions. Cat. No. 31662Z Form 8962 (10-13)

Failure to File and Reconcile 2014 Advance Payments of the Premium Tax Credit (cont.)

Agents and brokers can take steps when working with enrollees:

- Encourage enrollees who received APTC in 2014 to file their 2014 federal income taxes and reconcile APTC as soon as possible, even if they missed the filing deadline or they are within their filing extension deadline.
 - Remind enrollees that even if they usually do not have to file an income tax return, if they received APTC in 2014, they need to file a tax return.
 - Consumers can file an amended return, so they may want to file now to ensure they continue to receive APTC, even if they think they may need to make changes in the future.
- Help enrollees who have not filed their taxes yet understand what steps to take, including helping them access their Form 1095-A and report any errors.
 - Enrollees can log in to their Marketplace accounts to view or download their Form 1095-A (see screenshots in the following slides).
 - CMS is processing 2014 Form 1095-A correction and reprint requests on an ongoing basis. If an enrollee recently requested a corrected or reprinted 1095-A for 2014, he or she should receive a response from CMS within a couple of weeks. Once an enrollee receives his or her corrected Form 1095-A, the enrollee should keep a copy in case the Internal Revenue Service (IRS) has follow-up questions regarding his or her corrected form.

Failure to File and Reconcile 2014 Advance Payments of the Premium Tax Credit (cont.)

How to help enrollees who are unsure whether they are at risk for losing APTC because they did not file a tax return and reconcile 2014 APTC:

- Encourage enrollees to check with the tax filer in their household to see if a 2014 tax return was filed.
- Encourage the enrollee to have the household tax filer use Interactive Tax Assistant at [http://www.irs.gov/uac/Interactive-Tax-Assistant-\(ITA\)-1](http://www.irs.gov/uac/Interactive-Tax-Assistant-(ITA)-1) or call the IRS call center at 1-800-829-1040.
- Note that in order to protect Federal Tax Information, the Marketplace Call Center will not be able to tell consumers whether they are at risk for losing APTC because they failed to file and reconcile.
- Encourage all enrollees to return to the Marketplaces during Open Enrollment.
- Providing updated household information, obtaining an updated eligibility determination, and browsing available plans may help enrollees find the best options for their families.
- Enrollees who have filed their 2014 tax returns can attest to having done so and keep APTC for 2016.

Failure to File and Reconcile 2014 Advance Payments of the Premium Tax Credit (cont.)

- The plan year 2016 Marketplace application includes a new tax filing-related question.
- This question displays on all 2016 applications and allows enrollees who received APTC for 2014 to attest, under penalty of perjury, to having filed a 2014 tax return and reconciled APTC.

The screenshot shows the Alabama Marketplace application interface. At the top, there is a navigation bar with the Alabama logo, the word "Alabama", and buttons for "Apply", "Get Results", and "Get Coverage". A "HELP" button is also visible. Below the navigation bar, the application ID "118305670" is displayed. On the left side, there is a vertical menu with the following items: "GET STARTED" (checked), "FAMILY & HOUSEHOLD" (checked), "INCOME" (checked), "ADDITIONAL INFORMATION" (selected), "1 John Carson" (selected), "2 Other questions", and "REVIEW & SIGN". The main content area displays a question: "Did your household file a 2014 tax return and reconcile any premium tax credit you used?" with the word "Optional" to its right. Below the question is a radio button labeled "Yes, 2014 premium tax credits were reconciled". Underneath, it says "Check the box above only if all of these apply to you:" followed by a bulleted list: "You used [advance payments of premium tax credits](#) (APTC) in 2014 to help lower your costs for Marketplace coverage.", "The tax filer for your household filed a federal income tax return for 2014.", and "The tax return filed compared the amount of APTC used in 2014 to the rest of the tax return information." Below the list, it says "If all of these **don't** apply to you, select 'SAVE & CONTINUE' without checking the box above." and includes a link "[Learn more about tax filing](#)". At the bottom right of the form, there is a green button labeled "SAVE & CONTINUE".

Tips to Ensure Your NPN is Retained for Plan Year 2016 Re-enrollments

Tip #1: When helping a consumer using the “Side-by-Side” (i.e., Marketplace) enrollment channel, check to see if your NPN is included on the application. If not, re-enter it before you close out the application. Also, when contacting the Marketplace Call Center about a consumer’s application, ensure your NPN is still associated with the consumer’s application. Finally, consumers contacting the Marketplace Call Center can add or re-enter your NPN on their application.

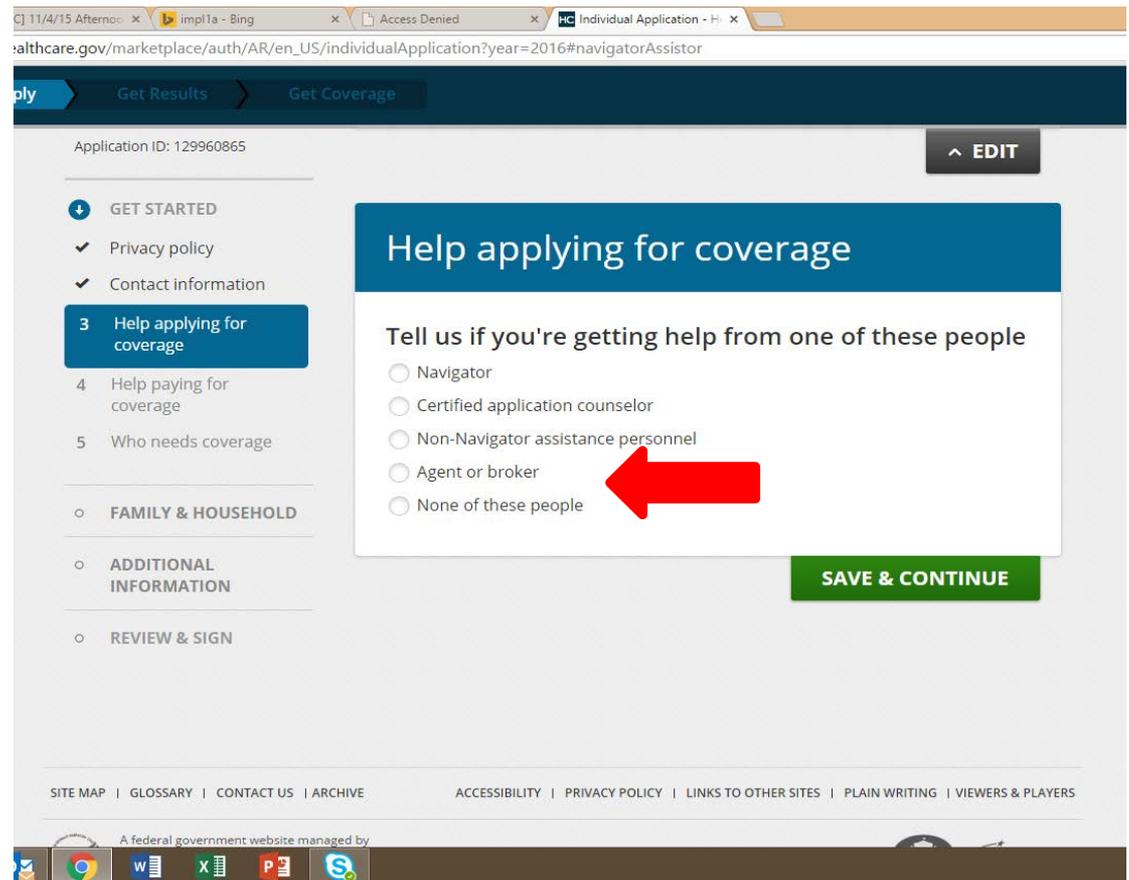
Tip #2: When helping a consumer with a renewal for plan year 2016 using Direct Enrollment, make sure to move the consumer through “Report a Life Change” to make updates and confirm information.

- If an application submitted via Direct Enrollment last year is not touched by the agent or broker this year, the auto re-enrolled application may not contain the agent’s or broker’s NPN and thus, this NPN may not be sent on the enrollment transaction sent to the issuer.
- If the agent or broker continues to the partner website after “Reporting a Life Change” and selects a Qualified Health Plan (QHP), his or her NPN will be generated on the enrollment transaction sent to the issuer.

Note: This guidance applies only to the Marketplace for Individuals and Families. NPNs are automatically carried over when brokers assist small employers when logged into the SHOP Marketplace Agent/Broker Portal.

Tips to Ensure Your NPN is Retained for Plan Year 2016 Re-enrollments (cont.)

When using the “Side-by-Side” (i.e., Marketplace) enrollment channel on HealthCare.gov, when the consumer is asked if he or she received help applying for coverage, direct the consumer to click “Agent or broker.”



The screenshot shows a web browser window with the URL healthcare.gov/marketplace/auth/AR/en_US/individualApplication?year=2016#navigatorAssistor. The page displays the application ID: 129960865 and an **EDIT** button. A sidebar on the left lists the application steps: GET STARTED, Privacy policy, Contact information, **3 Help applying for coverage**, Help paying for coverage, and Who needs coverage. Below this are sections for FAMILY & HOUSEHOLD, ADDITIONAL INFORMATION, and REVIEW & SIGN. A large blue dialog box titled "Help applying for coverage" is overlaid on the page, asking "Tell us if you're getting help from one of these people" and listing five options: Navigator, Certified application counselor, Non-Navigator assistance personnel, Agent or broker, and None of these people. A red arrow points to the "Agent or broker" option. A green **SAVE & CONTINUE** button is at the bottom right of the dialog box. The footer contains links for SITE MAP, GLOSSARY, CONTACT US, ARCHIVE, ACCESSIBILITY, PRIVACY POLICY, LINKS TO OTHER SITES, PLAIN WRITING, and VIEWERS & PLAYERS. The Windows taskbar at the bottom shows icons for Internet Explorer, Google Chrome, Word, Excel, PowerPoint, and Skype.

Tips to Ensure Your NPN is Retained for Plan Year 2016 Re-enrollments (cont.)

Application ID: 129960865

GET STARTED

- Privacy policy
- Contact information
- 3 Help applying for coverage**
- 4 Help paying for coverage
- 5 Who needs coverage

FAMILY & HOUSEHOLD

ADDITIONAL INFORMATION

REVIEW & SIGN

Tell us if you're getting help from one of these people

- Navigator
- Certified application counselor
- Non-Navigator assistance personnel
- Agent or broker
- None of these people

First name Middle *optional* Last name Suffix *optional*

Organization name *optional* ID number *optional*

FFM User ID *optional* NPN number

SAVE & CONTINUE

- HealthCare.gov will then display a set of fields for the consumer to populate with the assisting agent's or broker's information.
- Ensure that the consumer enters the correct NPN and then direct the consumer to click "Save & Continue" to move forward.

Resolving NPN Issues

- If an agent or broker has a legitimate reason to believe he or she should be credited for an FFM enrollment, but has not been credited for it, the agent or broker should contact the respective QHP issuer directly to discuss the specific situation.
- If the QHP issuer believes that the FFM-registered agent or broker did in fact assist a consumer, but the NPN was erroneously left off of the 834, the QHP issuer may pay the commissions accordingly.
- Please note that agents and brokers must meet registration requirements prior to assisting with an FFM application in order to be credited for the enrollment transaction.

Searching for Existing Applications

- If a consumer has enrolled in coverage through the FFMs for 2015, an agent or broker may not need to create a new application.
- Prior to assisting a consumer, the agent or broker should determine whether an individual has an existing application to avoid creating more than one application for the same consumer.
- There are three steps an agent or broker should take to prevent creating a new application unnecessarily:
 - First, select “Look Up Application” from the HealthCare.gov main agent/broker landing page and enter the consumer’s information to see if he or she has an existing 2016 application.
 - If an application exists for plan year 2016, it will be pre-populated using information from the consumer’s plan year 2015 application.
 - **At this time, the agent or broker should move the consumer through “Report a Life Change” to make updates and confirm information.**

Note: While an agent or broker can select “Look Up Application” to find a 2015 application, he or she will not be able to pre-populate a 2016 application from that flow.

Searching for Existing Applications (cont.)

- Second, if the consumer had coverage through the FFMs for plan year 2015 and a plan year 2016 application is not found by selecting “Look Up Application,” then the agent or broker should go back to the main agent/broker landing page and select “Start Application” to search for the consumer’s existing 2015 application to start a pre-populated 2016 application.
- Third, the agent or broker should start a new application if he or she confirms that the consumer does not have an existing plan year 2015 or plan year 2016 application.

Searching for Existing Applications (cont.)

Important: Select "Look Up Application" to see if the person has an existing 2016 application:

- If there **is** a 2016 application, it will be pre-populated, but you can make changes by selecting "Report a life change."
- If there **isn't** a 2016 application, select his or her 2015 application, then the 2016 option to pre-populate their application for 2016. Don't select "Start Application" unless a person doesn't have a 2015 or 2016 application.

Start a client's new application

To start a new application, enter the state in which your client wishes to purchase Marketplace coverage.

Select Year

Application state

Select Year ▼

Select State ▼

START APPLICATION

Look up a client's existing application

To find client's existing Marketplace application, click the button below and enter the requested information on the page that follows. (This is for applications that have already been started. If you are starting a new application, please refer to the 'Start Application' feature on the left.)

LOOK UP APPLICATION

Small business employers and employees

This application is only for helping consumers get coverage for individuals and families.

Searching for Existing Applications (cont.)

“Look Up Application”

Find an application

To find a client's existing Marketplace application, enter his or her information. (The easiest way to find an application is to enter their Marketplace application ID.)

Application ID *optional*

Coverage year 

State 

First name

Last name

Date of birth 

Social Security Number (SSN) *optional*

MM/DD/YYYY XXX-XX-XXXX

SEARCH

Searching for Existing Applications (cont.)

“Start Application”

Find an application , or [start a new one](#)

To find a client's existing Marketplace application, enter his or her information. (The easiest way to find an application is to enter their Marketplace application ID.)

Application ID *optional* Coverage year State

2015 ME

First name Last name

Date of birth Social Security Number (SSN) *optional*

MM/DD/YYYY XXX-XX-XXXX

New Doctor Lookup Feature at HealthCare.gov

HealthCare.gov is piloting a new beta feature that allows consumers to look up their preferred providers and see in plan results if their providers are covered by each plan.

- This new feature is an enhancement of **See Plans & Prices** located on the home page of HealthCare.gov, and is currently not available for the SHOP Marketplaces.
- HealthCare.gov has been phasing in visibility of this new feature over time to visitors at random on HealthCare.gov.
- Consumers can access the lookup feature if they see a page indicating they can search for doctors then select “Continue” to search for and add their providers.

The screenshot shows the HealthCare.gov website interface. At the top, there are navigation links for "Individuals & Families" and "Small Businesses", along with "LOG IN" and "ESPAÑOL" buttons. The main heading is "2016 health insurance plans & prices". Below this, a progress bar shows several steps completed: ZIP CODE, HOUSEHOLD, EXPECTED INCOME, SAVINGS ESTIMATE, and EXPECTED MEDICAL USE. The current step is "DOCTORS & FACILITIES", and the next is "REVIEW". A central notification box contains an orange flag icon and the text: "This year, for the first time we've asked insurance companies for information about which doctors their plans cover." Below this, a smaller note states: "In this early stage, some data may be missing or inaccurate. We'll be updating it regularly. Check with the insurance company to verify network coverage." At the bottom of the notification box are two buttons: a green "CONTINUE" button and a white "NOT NOW" button. A large red arrow points upwards to the "CONTINUE" button.

New Doctor Lookup Feature at HealthCare.gov (cont.)

The consumer can enter his or her doctor's name and click "Search" to review a list of doctors and choose the appropriate one to add. When consumers reach plan results, they'll see whether the doctor(s) they entered are in network or out of network for each plan.

- HealthCare.gov has access to data from over 90% of insurance companies on the Marketplaces.
- If a health insurance company has not provided validated data, consumers will see in their plan results on a particular plan that there is "no data from insurance company."



The screenshot shows the HealthCare.gov website interface. At the top, there are navigation links for "Individuals & Families" and "Small Businesses", along with "LOG IN" and "ESPAÑOL" buttons. Below this is a dark blue header with the text "2016 health insurance plans & prices". A horizontal menu contains several options: "ZIP CODE", "HOUSEHOLD", "EXPECTED INCOME", "SAVINGS ESTIMATE", "EXPECTED MEDICAL USE", "DOCTORS & FACILITIES", and "REVIEW". The "DOCTORS & FACILITIES" option is highlighted with a white arrow pointing to a pop-up form. The form contains the text "Do you want to see if your doctors are covered?" followed by a "BETA" badge. Below this is a sub-header "Add your doctors. When you compare plans, you'll see if they're covered." and a "Search" button. A text input field labeled "Doctor" is present, with a "SEARCH" button to its right. A red arrow points to the "Doctor" input field. At the bottom of the form is a "NOT NOW" button.

New Doctor Lookup Feature at HealthCare.gov (cont.)

HealthCare.gov will then show a list of the plans available in the Marketplace and whether the provider(s) is in-network with information on each plan including the plan name, level of generosity, plan type, plan ID, premium amount, deductible amount, and the out-of-pocket maximum associated with the plan.

The screenshot displays the details for the 'ABC Health Plan' (Plan ID: 12345678901234). The interface includes a sidebar with filters, a main content area with key cost metrics, and a doctor lookup section. Two red arrows highlight the 'ABC Health Plan' title and the 'Doctors' section.

57 plans available | SORT BY: Premium | PLAN TYPE: Health plans

FILTERS

- Monthly premium**
 - less than \$300 (28)
 - less than \$400 (54)
 - less than \$500 (57)
- Plan category**
 - Bronze plans (13)
 - Silver plans (33)
 - Gold plans (11)
- Plan type**
 - EPO (52)
 - POS (5)
- Medical management programs**
 - Asthma (57)
 - Heart Disease (52)
 - Depression (52)

ABC Health Plan
Category Type | Plan ID: 12345678901234

| | | |
|--|---|--|
| Estimated monthly premium \$264 | Deductible \$6,500 Estimated individual Total | Out-of-pocket maximum \$6,850 Estimated Individual Total |
|--|---|--|

Estimated total yearly costs

| | |
|---|----------------|
| Total premiums for the year | \$3,163 |
| Deductible, copayments, and other costs | \$1,549 |
| Total | \$4,712 |

Doctors

- Dr. ABC
 - In-network in these locations
- Dr. EFG
 - Out of Network

Copayments / Coinsurance

- Primary doctor: 50% Coinsurance after deductible
- Specialist doctor: 50% Coinsurance after deductible
- Emergency room care: \$300 Copay before deductible/50% Coinsurance after deductible
- Generic drugs: 50% Coinsurance after deductible

EDIT | Understand this | **EDIT** | **BETA**

New Doctor Lookup Feature at HealthCare.gov (cont.)

HealthCare.gov asks consumers to opt-in to use the search feature to be sure they understand the limitations of the new feature's data.

- Consumers are reminded that health plans can change which doctors are in their networks on a continual basis and providers can change locations and affiliations frequently.
- CMS encourages consumers to check with their providers and/or health insurance companies to confirm the providers accept the plans.
- Consumers will be able to leave comments directly through the website on the new data.

In the coming weeks, CMS expects to pilot the Prescription Drug Check feature, which will allow consumers to search for their drugs and see which plans cover their prescriptions and the Facility Lookup feature which will allow consumers to search for hospitals and other facilities and see which plans include them in network.

New Call Center Support for Agents and Brokers

Agents and brokers can call **1-855-CMS-1515 (855-267-1515)** and select option “1” to speak with Agent and Broker Call Center Representatives during the following times:

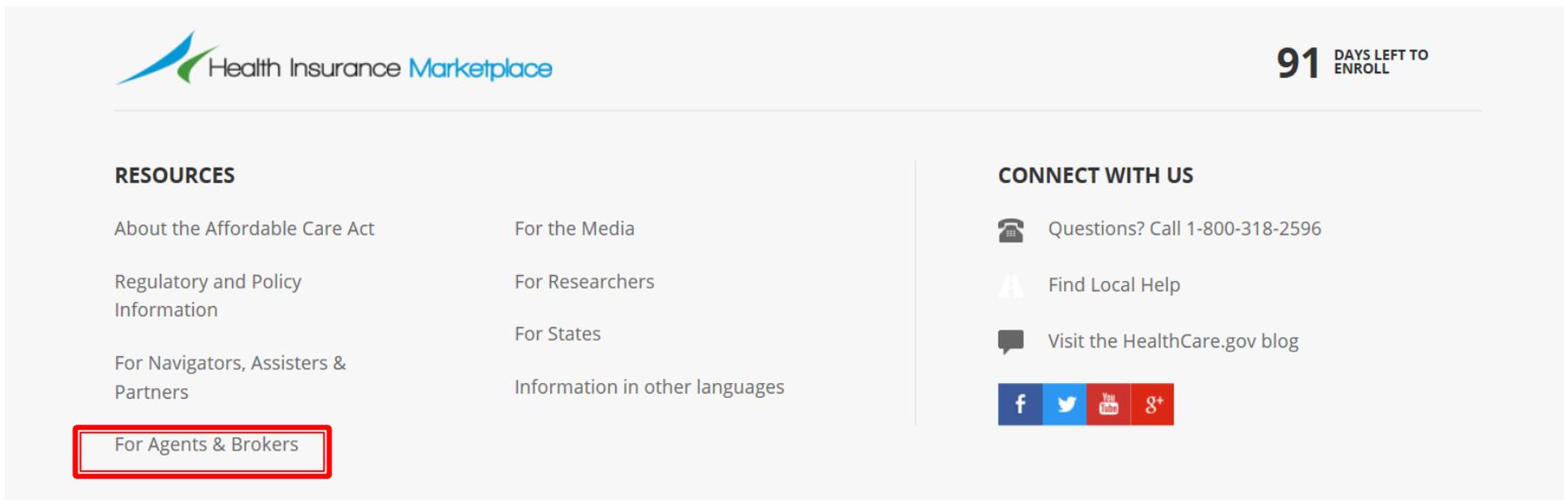
- Monday through Saturday from 8:00 AM–10:00 PM Eastern Time (ET). In November, Call Center Representatives will also be available on Sundays and holidays during the following hours:
 - Wednesday, November 11 (Veterans Day): Open 8:00 AM–10:00 PM ET
 - Sunday, November 15: Open 8:00 AM–5:00 PM ET
 - Sunday, November 22: Open 8:00 AM–5:00 PM ET
 - Thursday, November 26 (Thanksgiving Day): Open 8:00 AM–5:00 PM ET
 - Sunday, November 29: Open 8:00 AM–5:00 PM ET
- The Call Center will be open Monday through Saturday from 8:00 AM–10:00 PM ET in December and January, and will be closed on Sundays and holidays with the following exception:
 - The Call Center will be open 24 hours on Sunday, January 31, 2016.

New Call Center Support for Agents and Brokers (cont.)

- Call Center Representatives can help you with questions on topics like:
 - Agents' and brokers' user IDs for FFM registration and training
 - The new Marketplace Learning Management System (MLMS) and CMS-approved vendor training options
 - NPNs
 - Password resets and account lockouts on the CMS Enterprise Portal
 - Log in issues at the [HealthCare.gov](https://www.healthcare.gov) landing page (when an agent or broker is redirected from an issuer's or web-broker's site)
 - [HealthCare.gov](https://www.healthcare.gov) website issues
- Note: Agents and brokers should direct specific questions or issues with a consumer's Individual Marketplace application to the Marketplace Call Center at **1-800-318-2596**. Agents and brokers should direct questions related to SHOP Marketplace coverage to the SHOP Call Center at **1-800-706-7893**.

New Agent and Broker Resource Link on HealthCare.gov

- A new “For Agents and Brokers” link has been added to HealthCare.gov, making it easier for agents and brokers to get to the Agents and Brokers Resources webpage (<http://go.cms.gov/CCIIOAB>)



The screenshot shows the Health Insurance Marketplace website. At the top left is the logo for Health Insurance Marketplace. At the top right, it says "91 DAYS LEFT TO ENROLL". Below the logo, there are two main sections: "RESOURCES" and "CONNECT WITH US".

RESOURCES

- About the Affordable Care Act
- Regulatory and Policy Information
- For Navigators, Assisters & Partners
- For the Media
- For Researchers
- For States
- Information in other languages

CONNECT WITH US

- Questions? Call 1-800-318-2596
- Find Local Help
- Visit the HealthCare.gov blog

At the bottom of the "RESOURCES" section, the link "For Agents & Brokers" is highlighted with a red rectangular border.

Agent and Broker Health Insurance Marketplace Open Enrollment Weekly Updates and Announcements UPDATED WEBINAR SCHEDULE

- Based on agent and broker feedback, we will be meeting weekly on Tuesdays; we have dropped the originally scheduled Thursday webinars moving forward.
- To register for any of these sessions, please log in to www.REGTAP.info and complete the following steps:
 - Select "Training Events" from "My Dashboard."
 - Select the "View" icon next to the event title for the webinar you are interested in attending.
 - Select "Register Me."

| Tuesdays – 3:00–4:00 PM ET |
|----------------------------|
| November 17 |
| November 24 |
| December 1 |
| December 8 |
| December 22 |
| December 29 |
| January 5 |
| January 12 |
| January 19 |
| January 26 |

Dos and Don'ts of Working with Navigators and Other Assisters

DO:

- ✓ Understand the constraints Navigators and other assisters (certified application counselors and non-Navigator assistance personnel in FFMs) must adhere to:
 - See <https://marketplace.cms.gov/technical-assistance-resources/agents-and-brokers-guidance-for-assisters.PDF>
- ✓ When you are unable to assist a consumer with, for example, a Medicaid enrollment, make sure your client knows about local Navigators and other assisters for assistance.
- ✓ Find Navigators and other assisters in your area by going to Find Local Help on HealthCare.gov.
- ✓ Participate in community events.

Dos and Don'ts of Working with Navigators and Other Assisters (cont.)

DO:

- ✓ Ensure your information is up to date on Find Local Help to ensure consumers can find you when a Navigator or other assister recommends to consumers that they use agents or brokers.
 - Please note that assisters and Navigators generally cannot refer consumers to agents or brokers as a substitute for fulfilling their federally-required duties.
 - If you need to make changes, you can make these changes in the new MLMS.

Dos and Don'ts of Working with Navigators and Other Assisters (cont.)

DO NOT:

- × Attempt to establish an exclusive referral relationship with Navigators and other assisters. Assisters and Navigators are strictly forbidden from endorsing specific agents or brokers or referring consumers to specific agents and brokers.
- × Offer consideration of any kind (direct or indirect, cash or in-kind) that could be tied to the compensation received by you from a health insurance or stop loss insurance issuer for enrolling a person in a QHP or non-QHP.

HealthCare.gov Find Local Help Tip

- For plan year 2016, agents and brokers have an option of what information Find Local Help displays about them.
- Agents and brokers can make their selections on what to display when updating their profile information on the MLMS.
- Agents and brokers selecting “I don’t want my contact information displayed” will NOT be searchable by consumers on Find Local Help.

Portal Help & FAQs Print

Please fill out the following profile fields with your business/professional contact information. This information is required for CMS to maintain an accurate agent/broker registration completion list. In addition, after you complete all CMS agent/broker registration requirements, your professional contact information will be displayed on HealthCare.gov’s “Find Local Help” feature. Find Local Help is a tool accessible on HealthCare.gov to enable consumers, small businesses, and small business employees to identify a local registered agent or broker to assist them with the Federally-facilitated Marketplace, including the SHOP Marketplace.

IMPORTANT: If you completed FFM training on a third-party vendor’s site, please copy and paste your confirmation code(s) here. You should have received your confirmation code(s) via email from the vendor.

Please select your preference regarding the display of your contact information on Find Local Help. *

-Select One-

- I would like all my contact information displayed.
- I would like all my contact information displayed, except my street address.
- I don't want my contact information displayed.

Business Street Address * 101 test lane

Health Insurance Marketplace 2016 Open Enrollment



*Common
Eligibility and
Enrollment
Questions*

Question 1

If a consumer decides to keep his or her existing plan (assuming the plan is still available), will his or her APTC be re-calculated during auto re-enrollment if the consumer does not update his or her financial information online?



Question 1: Answer

- *Yes—assuming the consumer has previously authorized the Marketplace to check with the IRS for updated income information for the purposes of annual redetermination. Based on the plan year 2016 annual redetermination and re-enrollment guidance released by CMS on April 22, 2015, the amount of financial assistance a consumer is eligible for will be recalculated based on the most recent income and family size information available to the Marketplace, updated federal poverty level tables, and 2016 plan premiums.*
- *A consumer will be auto re-enrolled in the same plan or, if the same plan is unavailable, a similar plan available to the consumer based on the 2016 plan crosswalk provided by the issuers.*
- *For more details, review the guidance at <http://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/annual-redeterminations-for-coverage-42215.pdf>.*

Question 2

Will consumers have a 90-day grace period when making a payment to an issuer, even if they lose APTC?



Question 2: Answer

- *If an enrollee who is receiving APTC enters a three-month grace period for non-payment of premium and, during months one or two of the grace period, loses APTC, the remaining length of the grace period is governed by state rules.*
- **Example:** *If an enrollee loses APTC during month two of the three-month grace period, and the termination of APTC takes effect on the first day of the third month of the grace period, the remaining grace period would be governed by state rules. If the same situation occurred during the third month of the APTC grace period, the APTC termination would take effect on the day after the APTC grace period expires and would not give rise to an additional state-rules grace period.*

Question 3

If a consumer enrolled in coverage for plan year 2015 in September, will he or she need to re-enroll for plan year 2016 coverage?



Question 3: *Answer*

- *If a consumer enrolled in September 2015 for plan year 2015 coverage, he or she will be included in the auto re-enrollment group for plan year 2016 coverage.*
- *However, the consumer is encouraged to return to the Marketplaces during Open Enrollment starting November 1 to view the QHPs available to him or her for plan year 2016 coverage.*



Health Insurance Marketplace 2016 Open Enrollment



*Common FFM
Plan Year 2016
Registration
and Training
Questions*

Question 1

I believe I have completed all the plan year 2016 registration and training requirements for the FFM's. How can I confirm this?



Question 1: Answer

- *New for plan year 2016, CMS has created an Agent Broker Registration status page on the CMS Enterprise Portal. This page enables you to check the status of your completion of each registration component in real time.*
- *You can check this page to confirm that you have completed both identity proofing and training for the Marketplaces in which you plan to participate.*

Agent Broker Registration Status

Plan Year 2016

Please click the link below next to items marked 'Incomplete' to register as an agent/broker for the 2016 plan year.

FFM - Agents and Brokers Role

1. Complete Identity Proofing

Status

Complete

2. Complete Agent Broker Training:

Complete

- Individual Market
- SHOP

Complete

3. Print Certificate(s)

Registration Complete

You have successfully completed the registration process and have been granted the FFM Agent/Broker role. You may access training and print your certificate at any time returning to this page.

Question 1: Answer (cont.)

- *The other way to confirm that you have completed all of the registration and training requirements for the FFMs for plan year 2016 is to check the Agent and Broker FFM Registration Completion List for Plan Year 2016 on the Agents and Brokers Resources webpage at <http://go.cms.gov/CCIIOAB>.*
- *This list includes the NPNs of agents and brokers who have completed the plan year 2016 registration and training requirements for the FFMs and is updated twice a month.*

DISCLAIMER

The Centers for Medicare & Medicaid Services (CMS) is making the Agent-Broker Federally-facilitated Marketplace (FFM) Registration Completion List ("AB 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 AB 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 market and/or the Federally-facilitated Small Business Health Options Program (FF-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 AB list may be used and/or disclosed only to the extent necessary to accomplish these purposes and never to discriminate inappropriately.

All AB List national producer numbers (NPNs) are self-reported by the agent or broker and should be validated against state and/or other NAIC records to confirm state licensure.

NPN(s) Marketplace(s) Registration Completion Date(s)

Question 2

I completed identity proofing for a previous plan year. However, when I log in to the CMS Enterprise Portal the Agent Broker Registration Status page says that the identity proofing step is “incomplete.” Do I need to recomplete identity proofing for plan year 2016?



Question 2: Answer

- *If you completed identity proofing for a previous plan year, you do not need to complete identity proofing again for plan year 2016.*
- *However, in order for the page to display “Complete” for identity proofing, you must log in using the existing user ID and password that you used when you completed identity proofing.*
- *If you do not log in using your existing credentials, your new account will not show that you have completed identity proofing and the existence of the original account may prevent you from being able to complete identity proofing for the newly created account.*

Question 3

I created a CMS Enterprise Portal account for a previous plan year, but I have forgotten my user ID and/or password. What should I do?



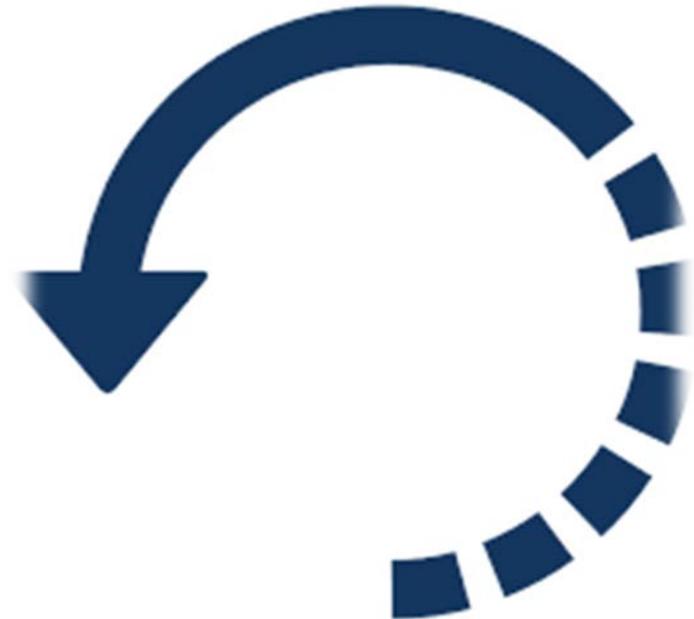
Question 3: Answer

- *If you previously created a CMS Enterprise Portal account at <https://portal.cms.gov>, it is vital that you log in using your existing account to complete registration and training for plan year 2016.*
- *If you cannot recall your user ID or password, you can recover that information and do not need to create a new account.*
- *The CMS Enterprise Portal homepage includes two links on the right hand side for “Forgot User ID” and “Forgot Password.”*
- *Click on the link applicable to your situation and follow the instructions provided to recover your account information.*



Question 4

I did not complete identity proofing for a previous plan year. Can my completion of this step for plan year 2016 be applied retroactively?



Question 4: Answer

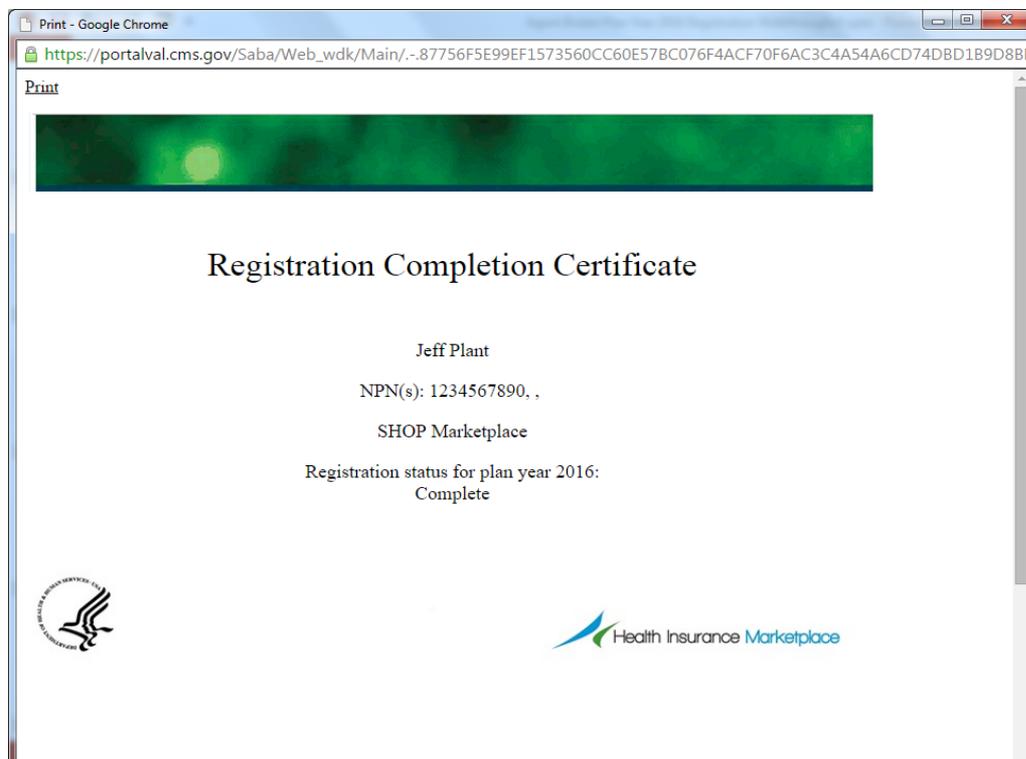
- *Completion of plan year 2016 FFM registration and training cannot be applied retroactively to plan year 2015 enrollments. Agents and brokers can only receive compensation or credit from a QHP issuer for enrollments if they complete all registration and training requirements prior to assisting the consumer.*
- *Pursuant to 45 C.F.R. § 156.340, CMS advises Marketplace issuers to withhold compensation from agents and brokers who:*
 1. *Do not complete registration with the Marketplaces at the time that they assist consumers with enrollment through the Marketplaces.*
 2. *Do not have valid state licensure for the state(s) in which they are assisting consumers.*
- *Additional details on these requirements can be found in the 2016 Letter to Issuers.*

Question 4: *Answer (cont.)*

- *Effective July 1, 2015, agents and brokers were no longer able to complete identity proofing for plan year 2015 on the CMS Enterprise Portal. Your completion status for plan year 2015 cannot be changed.*
- *You can complete registration and training for plan year 2016 to assist consumers who are eligible for plan year 2015 special enrollment periods and all eligible consumers during Open Enrollment. **You must complete the entire registration and training process, which includes identity proofing, PRIOR to assisting consumers.***

Question 5

Where can I access and
print my FFM
registration completion
certificate(s)?



Question 5: Answer

Agents and brokers can access their completion certificate(s) by selecting “Print Certificate(s)” on the Agent Broker Registration Status page on the CMS Enterprise Portal and then selecting “Print your Registration Completion Certificate” once redirected to the MLMS landing page.

IDM Navigator

Agent Broker Registration

Plan Year 2016

Please click the link below next to items marked **Incomplete** to register as an agent/broker for t

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



Agent Broker Resources

- **Print your Registration Completion Certificate**
 - **Agent Broker FF-SHOP Marketplace Agreement**
 - **Agent Broker IM General Agreement**
 - **Agent Broker IM Privacy and Security Agreement**
 - **Agent Broker Training Resources**
- 

Question 6

My NPN is listed incorrectly on my plan year 2015 certificate, preventing me from being compensated. Can this be fixed retroactively?



Question 6: *Answer*

- *Agents and brokers are no longer able access their accounts to make any corrections to NPNs or other profile data for a previous plan year.*
- *However, if you entered an incorrect NPN on your user account, you can change your NPN for plan year 2016 to ensure that it is correct for future transactions.*
- *You can make any necessary updates to your profile on the MLMS, including updates to your NPN, by logging in to the CMS Enterprise Portal.*

Question 7

I was a registered agent or broker for plan year 2015 and completed identity proofing last year. My name has since changed (marriage, divorce, etc.). Can I update my name for plan year 2016?



Question 7: Answer

- *If you have completed identity proofing on the CMS Enterprise Portal, you cannot change the information that has been approved for your profile.*
- *In addition to other fields, this includes your name, Social Security Number, and date of birth.*
- *Even if you entered your name incorrectly in your CMS Enterprise Portal profile, be sure that consumers enter your name correctly when they type your information in the Marketplace pathway.*

Question 8

What do I do after I have completed training through a CMS-approved vendor and entered my confirmation code(s) in the MLMS?



Question 8: Answer

- *If you completed training through a CMS-approved vendor and entered your confirmation code(s) into the MLMS, you need to execute the Marketplace Agreement(s) in the “Current Learning” section on the MLMS landing page within the CMS Enterprise Portal.*
- *The instructions for how to proceed are located in the “How to Get Started” section on the MLMS landing page.*

How to Get Started



If you completed **vendor training**, you need to complete the agreement(s) in the “Current Learning” section below. Click “Launch” next to the first module to begin.

To complete **CMS training in English**, find the “Training Options” section below, hover over “Actions” beside the applicable curriculum, and click “Enroll” to begin.

Para completar el entrenamiento de **CMS en Español**, vaya a la sección “Opciones de Entrenamiento” abajo, en la línea de currículo correspondiente seleccione “Acciones”, para empezar haga clic en “Matricularse”.

Question 9

What is the deadline for an agent or broker to register to participate in the FFMs for plan year 2016?



Question 9: *Answer*

- *Agents and brokers can complete registration at any time. However, agents and brokers who plan to assist consumers during the remainder of plan year 2016 Open Enrollment will want to complete registration as soon as possible.*
- ***Please note that you must complete the entire registration and training process, which includes identity proofing, PRIOR to assisting consumers.***

Question 10



How do I receive my commissions for assisting consumers with selecting and enrolling in coverage for plan year 2016 through the FFM's?

Question 10: Answer

- *Agents and brokers in the FFMs are credited via the 834 enrollment transactions in accordance with their agreements with QHP issuers and any state-specific requirements.*
- *The FFMs do not directly appoint agents or brokers and do not set compensation/credit levels.*
- *To the extent permitted by a state, agents and brokers may receive compensation/credit from QHP issuers in the form of commissions as a result of assisting qualified individuals in selecting QHPs through the Marketplaces.*
- *A QHP issuer must pay the same compensation/credit for QHPs offered through the FFMs as it does for similar health plans offered in the state but outside of the FFMs.*
- *Agents and brokers should ensure they enter a correct NPN in their MLMS profiles to ensure issuers are able to credit them appropriately.*

Health Insurance Marketplace 2016 Open Enrollment



*Agent and
Broker
Resources*

Agent and Broker Resources

- *Additional resources can be found on CMS's Agents and Brokers Resources webpage:*
<http://www.cms.gov/CCIIO/programs-and-initiatives/health-insurance-marketplaces/a-b-resources.html>.
- *Additional information agents and brokers can use to educate consumers can be found at:*
HealthCare.gov and Marketplace.CMS.gov.
- *The list of CMS-approved training vendors can be found at:*
<https://www.cms.gov/cciio/programs-and-initiatives/health-insurance-marketplaces/a-b-resources.html>.
- *For more information on registration and training requirements, please review the following resources on the Agents and Brokers Resources webpage at:*
<https://www.cms.gov/cciio/programs-and-initiatives/health-insurance-marketplaces/a-b-resources.html>:
 - *The slides from the “FFM Agent and Broker Plan Year 2016 Registration and Training Requirements” webinar that was held in July and August 2015*
 - *The slides from the “Guidance on Plan Year 2016 FFM Registration and Training for Agents and Brokers” webinar that was held in September 2015*
 - *Quick Reference Guide – Plan Year 2016 FFM Registration for Agents and Brokers*
 - *FFM agent and broker plan year 2016 registration and training videos*

Agent and Broker Resources (cont.)

- *The CMS Enterprise Portal can be accessed at: <https://portal.cms.gov/>.*
- *Agent and Broker NPNs can be found at: www.nipr.com/PacNpnSearch.htm.*
- *The checklist for agents and brokers to use when helping consumers with their applications can be found at: <https://marketplace.cms.gov/outreach-and-education/marketplace-application-checklist.pdf>.*
- *For more details on plan year 2016 annual redeterminations and re-enrollments, review the guidance CMS issued on April 22, 2015 at: <http://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/annual-redeterminations-for-coverage-42215.pdf>.*
- *Agents and brokers can review 45 C.F.R. § 156.340 and the 2016 Letter to Issuers ([https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/2016 Letter to Issuers 2 20 2015.pdf](https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/2016%20Letter%20to%20Issuers%202015.pdf)) to understand the circumstances where CMS advises Marketplace issuers to withhold compensation from agents and brokers.*

Agent and Broker Resources (cont.)

- *Agents and brokers can check their registration statuses on the Agent Broker Registration Status page via the CMS Enterprise Portal or on the Agent and Broker FFM Registration Completion List for Plan Year 2016 on the Agents and Brokers Resources webpage at: <http://go.cms.gov/CCIIOAB>.*
- *To host an enrollment event, or to get connected to enrollment groups in your area, email the HealthCare.gov Partnership Team at: Partnership@cms.hhs.gov.*
- *To understand the requirements for Navigators and other assisters, review <https://marketplace.cms.gov/technical-assistance-resources/agents-and-brokers-guidance-for-assisters.PDF>.*
- *Agents and brokers can access an earned media and public awareness toolkit that provides resources on marketing at: <https://marketplace.cms.gov/outreach-and-education/healthcaregov-assister-navigator-earned-media-and-promotion-toolkit.pdf>.*
- *Agents and brokers can direct consumers to the Interactive Tax Assistant at [http://www.irs.gov/uac/Interactive-Tax-Assistant-\(ITA\)-1](http://www.irs.gov/uac/Interactive-Tax-Assistant-(ITA)-1) or call the IRS call center at 1-800-829-1040 for questions on reconciling their APTC on their 2014 tax returns.*

Agent and Broker Resources (cont.)

- *To access the SHOP Marketplace Agent/Broker Portal to complete your searchable profile and manage SHOP Marketplace accounts, visit: <https://healthcare.gov/marketplace/small-businesses/agent>.*
- *The News for Agents and Brokers monthly newsletter is distributed via email. For agents and brokers who do not receive the newsletter via email, CMS posts it on the Agents and Brokers Resources webpage at: <http://www.cms.gov/CCIIO/programs-and-initiatives/health-insurance-marketplaces/a-b-resources.html>.*
 - *The August and September editions contain important information about agent and broker FFM registration and training for plan year 2016.*
 - *The October edition contains important information about plan year 2016 FFM Open Enrollment.*
- *Current news and updates are distributed via email and CMS' twitter handle: [@CMSGov](https://twitter.com/CMSGov).*

Questions?

For questions about Agent/Broker participation in the FFMs:
FFMProducer-AssisterHelpDesk@cms.hhs.gov

For questions on the MLMS: MLMSHelpDesk@CMS.HHS.gov

For questions when working with consumers applying and enrolling:
1-800-318-2596 (TTY: 1-855-889-4325) available 7 days a week, 24 hours a day

For questions unrelated to application and enrollment:
1-855-CMS-1515 (855-267-1515) and select option “1”

For questions about the SHOP Marketplace:
1-800-706-7893 (TTY: 711) available M-F 9:00 AM-7:00 PM ET

For questions regarding a CMS-approved vendor’s training, agents and brokers should contact the respective vendor’s help desk. Contact information can be found on the Agents and Brokers Resources webpage at: <http://www.cms.gov/CCIIO/programs-and-initiatives/health-insurance-marketplaces/a-b-resources.html>.

For questions/comments about web-broker participation in the FFMs: WebBroker@cms.hhs.gov