



Companion Guide

A Marketplace Original Series **Agent and Broker Learning On Demand**

A Self-Paced Learning Series
to Help You Master the Marketplace
and Maximize Enrollments

The Purpose of This Companion Guide

This Companion Guide was developed by the Centers for Medicare & Medicaid Services (CMS) for use in conjunction with the video series *A Marketplace Original Series: Agent and Broker Learning On Demand*. This self-paced learning video series aims to help agents and brokers master the Marketplace and maximize enrollments.

This Companion Guide contains information that is supplementary to the video series and includes links to additional resources. We hope you continue to find it helpful after you've completed the series and work to support consumers with enrolling in and managing Marketplace coverage.



In this document, the terms “Health Insurance Marketplace” and “Marketplace” refer to Federally-facilitated Marketplaces (FFMs), including FFMs where states perform plan management functions, and State-based Marketplaces on the Federal Platform (SBM-FPs).

In this video series, you will explore several new developments and other topics that are important to Marketplace agents and brokers. The videos can be viewed in any order and at your own pace.

Video Topics

Welcome Address	3
Training and Registration Annual Requirements.....	4
New Enrollment and Client Management Portals.....	6
Tools for Maximizing Marketplace Enrollments.....	8
Circle of Champions Recognition Program	11
Guide to Compensation	12
Privacy and Security Requirements.....	13
Complex Case Scenarios.....	16
Agent and Broker Support Desks.....	18
Enrollment Consumer Support	19
Answers to Your Frequently Asked Questions	20
Abbreviations	21

Welcome Address

 WATCH THE WELCOME ADDRESS

In this video, Randy Pate, CMS Deputy Administrator and the Director of the Center for Consumer Information and Insurance Oversight (CCIIO), welcomes agents and brokers to the video series ***A Marketplace Original Series: Agent and Broker Learning On Demand***. In his role, Randy leads CMS's work on the individual and small group markets, including the Health Insurance Marketplaces.

CMS recognizes the role of agents and brokers as critical partners to the success of the Individual Marketplace. During this past year's open enrollment period, Marketplace-registered agents and brokers enrolled over 3.6 million consumers in the Federally-facilitated Marketplaces, supporting 42 percent of all Marketplace enrollments.



Due to the impressive contributions of agents and brokers, CMS is continuing to focus on improving the Marketplace experience for agents and brokers. This year, for example, we've made training shorter for returning agents and brokers, rolled out new resources, and improved the Help On Demand and Find Local Help tools to make it easier for consumers to find you.

CMS continues to appreciate your contributions and wishes you success enrolling consumers during the 2019 Health Insurance Marketplace Open Enrollment Period. Thanks to your hard work, you have increased access to health care and made a lasting positive impact in your community.

Training and Registration Annual Requirements

 WATCH VIDEO

Each year, agents and brokers must complete the Marketplace agent and broker training and registration requirements before helping consumers make plan selections and enroll in Marketplace coverage.

- **New agents and brokers** must complete the full Marketplace training and registration requirements for plan year 2019. [Learn more about the requirements for new agents and brokers here.](#)
- **Returning agents and brokers** can complete either the full Marketplace training and registration requirements or a condensed version exclusively for returning agents and brokers. [Learn more about the requirements for returning agents and brokers here.](#)

Updates for Plan Year 2019

This year, you will notice a few changes to the training and registration requirements, including:



Shortened training, now approximately a half-hour, for returning agents and brokers that fulfills the Individual Marketplace training requirement



Updated registration and Marketplace Learning Management System (MLMS) profile options so you can determine how your contact information will be displayed in Help On Demand and Find Local Help



The new Marketplace Registration Tracker to help you identify what steps you've completed and those still left to do

New Marketplace Registration Tracker

The [Marketplace Registration Tracker](#) is a new searchable database that allows you to look up your Marketplace registration status using your ZIP Code and National Producer Number (NPN) in your MLMS profile.

The database displays a personal summary of your Marketplace training and registration status, including:

- Identity Proofing Validation
- Marketplace Training and Registration
- Small Business Health Options Program (SHOP) Training and Registration
- NPN Validation

Additional Resources to Support You

Here are additional resources to guide you through the Marketplace training and registration process for plan year 2019:

- [Agent and Broker Plan Year 2019 Marketplace Registration and Training webpage](#)

- [Avoiding the Creation of a Duplicate CMS Enterprise Portal Account](#)
- [Marketplace Agent and Broker Agreements Job Aid](#)
- [Marketplace Agent and Broker Training and Registration Frequently Asked Questions \(FAQs\)](#)
- [MLMS Quick Reference Guide: Plan Year 2019 Computer Configuration Requirements](#)
- [National Producer Number \(NPN\) Validation Frequently Asked Questions \(FAQs\)](#)
- Specific to new agents and brokers:
 - [Computer-based training \(CBT\)](#) that includes step-by-step instructions for new agents and brokers on how to complete training and registration
 - [Overview of Plan Year 2019 Health Insurance Marketplace Registration & Training for New Agents and Brokers](#)
 - [Guide to Plan Year 2019 Marketplace Registration and Training for New Agents and Brokers](#)
- Specific to returning agents and brokers:
 - [Computer-based training \(CBT\)](#) that includes step-by-step instructions for returning agents and brokers on how to complete training and registration
 - [Overview of Plan Year 2019 Health Insurance Marketplace Registration & Training for Returning Agents and Brokers](#)
 - [Guide to Plan Year 2019 Marketplace Registration and Training for Returning Agents and Brokers](#)

You can find additional resources on the [Agents and Brokers General Resources webpage](#).

Knowledge Check

Now that you've watched the "Training and Registration Annual Requirements" video, take a few moments to answer the following questions to gauge what you've learned:

1. **Changes for training and registration requirements for plan year 2019 include:**
 - A. Updated Marketplace registration and MLMS profile options so you can choose how your contact information will be displayed in Find Local Help and Help On Demand
 - B. Half-hour training for returning agents and brokers that fulfills the Individual Marketplace training requirement
 - C. A new tool to make it easier for agents and brokers to view their registration and training status with the Marketplace
 - D. All of the above
2. **True or False: The new Marketplace Registration Tracker allows you to look up your Marketplace registration status using just your ZIP Code and National Producer Number (NPN) in your MLMS profile.**
3. **When should agents and brokers complete the 2019 Marketplace training and registration requirements by in order to assist consumers during the 2019 Open Enrollment Period?**
 - A. September 30
 - B. October 15
 - C. October 31
 - D. None of the above

Knowledge Check Answer Key: 1=D; 2=TRUE; 3=C

New Enrollment and Client Management Portals

 WATCH VIDEO

Marketplace-registered agents and brokers have two ways to assist consumers with eligibility determinations, enrollments, and account management for Individual Marketplace qualified health plans (QHPs):

- Through HealthCare.gov, working “side-by-side” with consumers (*known as the Marketplace Pathway*)
- Through the Direct Enrollment Pathway (*see more information below*)

The Direct Enrollment Pathway

The Direct Enrollment (DE) Pathway allows Marketplace-registered agents and brokers to assist consumers with plan selections and, in some cases, completing applications for coverage on a carrier’s or web-broker’s website.

- **Classic DE Pathway**, also known as “double redirect,” is a process by which an agent and broker begins on an issuer’s or web-broker’s website, is redirected to HealthCare.gov to complete a consumer’s application and receive an eligibility determination, and then is redirected back to the issuer’s or web-broker’s website to complete the plan selection and enrollment process.
- **Enhanced DE Pathway** is new for plan year 2019 and allows agents and brokers to assist consumers with their eligibility determination, plan selection, and enrollment on the websites of approved issuers and web-brokers, without being redirect to HealthCare.gov.

Enrollment and Client Management Portals

Approved issuers and web-brokers participating in Enhanced DE may host enrollment and client management portals for Marketplace-registered agents and brokers. These portals will offer new fully integrated platforms that provide a range of custom features and functionality that enable agents and brokers to assist clients with year-round policy and client relationship management.

These hosted applications may offer different functionality based on the consumer and household scenarios they support through Enhanced DE. While these functions may vary by issuer or web-broker, some potential capabilities include being able to:

- 1 Complete and update consumers’ applications without being redirected to HealthCare.gov
- 2 Upload documents for data-matching issues (DMI) and Special Enrollment Period verification issue (SVI) adjudication
- 3 View DMI and SVI statuses

4 View consumer notices, such as the Eligibility Determination Notice and Form 1095-A

5 Make initial binder payments

6 Select plans and submit enrollments

If your clients cannot be serviced through these portals because their circumstances are not supported by the issuers' or web-brokers' websites, they will be directed to the Classic DE Pathway or HealthCare.gov to apply for and enroll in coverage.

You should contact the web-brokers and issuers you work with for more information on the functionality they may offer.

How to Help Enroll a Consumer Though the Enhanced DE Pathway

When enrolling through an issuer's or web-broker's website*, the consumer typically will need to:

- Complete identity proofing, if they have not already done so, with the issuer or web-broker
- Complete his or her application and submit it for an eligibility determination
- Select and enroll in a Marketplace plan through the issuer's or web-broker's website during the shopping experience
- Upload documents for Special Enrollment Periods (SEPs) if they have an SVI after plan selection
- Resolve any DMIs by uploading appropriate documents

* For information on specific steps, refer to the issuer or web-broker you are working with.

Additional Resources to Support You

In this video, there is a panel discussion where you can learn more about some of the elements that approved issuers and web-brokers participating in Enhanced DE are offering for the 2019 Open Enrollment Period.

Representatives from several organizations will discuss more about:

1. Some of the features of the Enhanced DE Pathway you may find useful during and outside the Open Enrollment Period;
2. How the online application of approved organizations may look and feel compared to HealthCare.gov;
3. Scenarios where you may still need to interact with HealthCare.gov or the Marketplace Call Center;
4. How approved organizations may support you differently as new tools and capabilities are launched; and
5. Why you should consider participating in the DE Pathway this year.

For a list of issuers and web-brokers who are participating in the Marketplace, visit the [Private Partner Enrollment and Client Management Capabilities Directory](#) webpage.

Tools for Maximizing Marketplace Enrollments



WATCH VIDEO

Help On Demand and Find Local Help are tools to help you maximize your Marketplace enrollments during and outside the annual Open Enrollment Period. They both aid you by connecting you with consumers who need help making plan selections and enrolling in Marketplace coverage.

Help On Demand

Help On Demand, hosted by BigWave Systems, connects consumers who are seeking real-time plan selection and enrollment assistance on HealthCare.gov with Marketplace-registered, licensed agents and brokers in their area who can provide immediate help. Help On Demand will notify you of a consumer seeking help via text, email, or App notification, and you must actively accept a request for assistance within 15 minutes or it will be sent to another agent or broker.

Updates for Plan Year 2019

You will notice a few changes to Help On Demand to improve your experience, including the ability to:



Limit your preferences to select only the states in which you are licensed and would like to receive consumer assistance requests



Track all consumer assistance requests, including any requests you may have missed, and more easily pull reports of request statuses



See the time that a consumer submitted his or her request and the number of requests you did not accept within the 15-minute window



Capture additional contact information from consumers to more easily connect with them and provide assistance

How to Participate in Help On Demand

In order to participate in Help On Demand, you must:

- Complete Marketplace training and registration through the [CMS Enterprise Portal](#)
- Ensure 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 on the [Agent and Broker FFM Registration Completion List](#)
- Complete the self-paced [Help On Demand training](#) and certify completion by providing your name, email address, and NPN at the end of the training
- Ensure your contact information selection in your MLMS profile has been set to one of the “display contact information” options

Find Local Help

Find Local Help is a tool accessible on HealthCare.gov that enables consumers to search for and connect with Marketplace-registered agents and brokers with an active state license who are near them based on a ZIP code, city or state for plan selection and enrollment assistance.

Updates for Plan Year 2019

This year, you will notice a few changes to Find Local Help to improve your experience, including:



A "Years of Service" badge that shows how many years you've been registered with the Marketplace



A "Search by Name" feature that helps consumers find your exact contact information and allows you to locate and confirm your own contact information more easily



Improved geocoding and a new address validation function within the MLMS that allows you to correct any errors when first entering your MLMS profile address

How to Participate in Find Local Help

In order to participate in Find Local Help, you must:

- Complete Marketplace training and registration through the [CMS Enterprise Portal](#)
- Ensure 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 on the [Agent and Broker FFM Registration Completion List](#)
- Ensure your contact information selection in your MLMS profile has been set to one of the "display contact information" options

Updating Your Contact Information Selection

This year, there are a few updates to the way you can display your contact information. In order to participate in Help On Demand and/or Find Local Help, you'll need to ensure your contact information selection in your MLMS profile has been set to one of the "display contact information" options.

To update your contact information selection:

- Sign in to your [CMS Enterprise Portal](#) account and access your MLMS profile
- Locate the "Find Local Help and Help On Demand Options" section
- Update your contact information selection to one of the "display contact information" options

It's recommended that you select the option "I would like all my contact information displayed for all states where I have a valid health license" so you can connect with consumers in all states where you are licensed.

Additional Resources to Support You

Provided here are additional resources for Help On Demand and Find Local Help to support you throughout the year:

- [Overview of Help On Demand](#)
- [Tips for Maximizing Your Participation in Help On Demand](#)
- [Help On Demand Training](#)
- [Find Local Help Quick Reference Guide](#)

You can find additional resources on the [Agents and Brokers General Resources webpage](#).

Knowledge Check

Now that you've watched the "Tools for Maximizing Marketplace Enrollments" video, take few moments to answer the following questions to gauge what you've learned:

1. **True or False: If you completed Help On Demand training for plan year 2018 and are registered to participate in the Marketplace for plan year 2019, you are still required to complete Help On Demand training for plan year 2019.**
2. **Which Find Local Help and Help On Demand contact information display option is recommended by CMS?**
 - A. I would like all my contact information displayed
 - B. I would like my profile information displayed, except my street address. Including states where I have a valid health license
 - C. I would like all my profile information displayed for all states where I have a valid health license
 - D. I don't want my contact information displayed
3. **How long do you have to accept a consumer's request for assistance on Help On Demand before the request is sent to another agent or broker?**
 - A. 10 minutes
 - B. 20 minutes
 - C. 15 minutes
 - D. 30 minutes

Knowledge Check Answer Key: 1=FALSE; 2=C; 3=C

Circle of Champions Recognition Program

 WATCH VIDEO

The Marketplace Circle of Champions is an annual recognition program for Marketplace-registered agents and brokers who assist individuals with at least 20 active enrollments in Marketplace coverage during the Open Enrollment Period.

- An **active enrollment** means an applicant returns to the Marketplace to update their application and plan selection.
- **Prior year and SEP enrollments**, as well as auto re-enrollments, do not count toward Marketplace Circle of Champions eligibility.

How to Qualify for the Circle of Champions

Only agents and brokers who have completed Marketplace training and registration for plan year 2019 are eligible for recognition in the 2019 Marketplace Circle of Champions.

During the 2019 Open Enrollment Period, there are three Circle of Champions recognition levels:

-  Agents and brokers who complete **20-99 active enrollments** will qualify for the 2019 Marketplace Circle of Champions
-  Agents and brokers who complete **100-499 active enrollments** will qualify for the 2019 Marketplace Elite Circle of Champions
-  Agents and brokers who complete **500 or more active enrollments** will qualify for the 2019 Marketplace Elite Plus Circle of Champions

Once you reach Circle of Champions status at any of the three levels, you will receive a congratulations package at the email associated with your MLMS profile. This package can be used to promote your accomplishment among your peers and within your community.

Knowledge Check

Now that you've watched the "Circle of Champions Recognition Program" video, take few moments to answer the following questions to gauge what you've learned:

1. **What types of enrollments count toward qualifying for the Marketplace Circle of Champions?**
 - A. Active enrollments only during the Open Enrollment Period
 - B. Batch-auto re-enrollments only during the Open Enrollment Period
 - C. SEP Enrollments during and outside the Open Enrollment Period
 - D. All of the above

Knowledge Check Answer Key: 1=A

Guide to Compensation



WATCH VIDEO

Compensation for Marketplace enrollments includes commissions, fees, or other incentives as established in a relevant contract between a qualified health plan (QHP) issuer and the Marketplace-registered agent or broker and any applicable state requirements. Compensation comes directly from issuers with whom you are affiliated, similar to enrollments in coverage offered outside the Marketplace.



Neither the Marketplace, nor CMS, sets or pays compensation to agents or brokers. The Marketplace does not play a role in appointments or compensation agreements between issuers and agents and brokers and is not a party to the contracts between issuers and agents and brokers.

Requirements for Receiving Compensation

To receive compensation for a Marketplace enrollment, you must:

- Have an appointment or compensation agreement with the issuer in accordance with state law
- Have completed Marketplace training and registration for the applicable plan year prior to assisting with the enrollment
- Be licensed with an active health-related line of authority in the state(s) where the QHP is offered

To receive credit for consumer enrollments in the Marketplace, your name and NPN must be recorded on the consumer's application. **You should note that having a consumer add you as an Agent of Record is not the same as having your NPN listed on the Marketplace application.**

Issuers are required to confirm you have completed Marketplace training and registration for the most recent plan year before issuing you compensation. A QHP issuer may add you to an enrollment with which you assisted, even if you were not initially included on the enrollment transaction.

Additional Resources to Support You

Provided here are additional resources on compensation to support you:

- [Agent and Broker Compensation for Marketplace Enrollments Tip Sheet](#)
- [Marketplace Agent and Broker Compensation Frequently Asked Questions \(FAQs\)](#)

You can find additional resources on the [Agents and Brokers General Resources webpage](#).

Privacy and Security Requirements

 WATCH VIDEO

Before assisting consumers with plan selections and enrolling in Marketplace coverage, you must execute the appropriate Individual Marketplace and/or Small Business Health Options Program (SHOP) Privacy/Security Agreements and be in compliance with Marketplace privacy and security requirements.

Marketplace Agreements

The specific privacy and security standards for agents and brokers are described in Appendix A of the Marketplace Agreement(s). You should review these privacy standards to understand the limits on how you may use any information gained as part of assisting consumers.

Specifically, the Marketplace Agreements require you to:

- 1 Provide consumers with correct information regarding the Marketplace, QHPs offered through the Marketplace, and insurance affordability programs**
- 2 Refrain from marketing or conduct that is misleading, coercive, or discriminates based on race, color, national origin, disability, age, sex, gender identity, or sexual orientation**
- 3 Provide the Marketplace with correct information required by section 1411(b) of the Patient Protection and Affordable Care Act**
- 4 Obtain the consent of the individual, employer, or employee prior to assisting with enrolling in Marketplace coverage or applying for financial assistance**
- 5 Protect consumers' personally identifiable information (PII)**
- 6 Comply with all applicable federal and state laws and regulations**

Privacy Notice Statement

Before collecting PII, you must provide a Privacy Notice Statement that is displayed on a public-facing website or an electronic and/or paper form. The Privacy Notice Statement must contain:

- Legal authority to collect PII
- Purpose of the information collection
- To whom PII might be disclosed and for what purposes
- Authorized uses and disclosures of any collected information
- Whether the request to collect PII is voluntary or mandatory under the law
- Effects of non-disclosure if a consumer chooses not to provide the requested information

Consumer Consent

Before assisting a consumer with applying for financial help and/or enrolling in Marketplace coverage, you must obtain their consent. CMS does not prescribe a standard format or process for maintaining this record, so you have flexibility to use a system of record that works for you.

The record of consent should include:

- The individual's, employer's, or employee's name
- The date consent was given
- The name of the agent(s) or broker(s) to whom consent was given

To satisfy this requirement, you can use a Broker of Record form from an issuer or state department of insurance. You may obtain consent in writing, verbally, or electronically. However, its recommended that you obtain consent in writing. Consent documents must be appropriately secured and maintained for a period of ten years.

Protecting Consumer Information and Managing Risk

When you execute the Marketplace Agreements, you agree to take reasonable steps to ensure PII provided by consumers to the Marketplace is accurate. You may only collect, use, or disclose PII to the extent necessary to carry out the authorized functions outlined in the Marketplace Agreements, unless you obtain the specific, written consent from the consumer.

To protect consumers' information and minimize risk:



Ensure your system has up-to-date malware protections installed



Use caution when connecting any wireless device to a public wireless network and only use secure, trusted wireless access points



Never share your password with anyone and never allow anyone (including clients) to share their private login credentials with you



Ensure communications are encrypted when exchanging PII or other sensitive data electronically

Consequences for Failing to Comply

If you fail to comply with the applicable Marketplace requirements, such as the obligation to report PII breaches or incidents within one hour of discovery, as stated in the Marketplace Privacy and Security Agreements, the U.S. Department of Health and Human Services (HHS) may:

- Suspend or terminate your Marketplace agreements
- Bar Marketplace participation for future benefit years
- Impose a civil money penalty

Additional Resources to Support You

Provided here are additional resources on Marketplace privacy and security requirements to support you:

- [Marketplace Agents and Brokers Privacy and Security Requirements Frequently Asked Questions \(FAQs\)](#)
- [Overview of Marketplace Requirements for Agents and Brokers](#)
- [Compliance with Marketplace Requirements: Considerations for Agents and Brokers](#)
- [Protection Requirements and Appropriate Usage of Consumers' Personally Identifiable Information \(PII\): A Topical Deep Dive for Agents and Brokers](#)
- [Marketplace Privacy & Security Requirements for Agents and Brokers \(Part 1\)](#)
- [Marketplace Privacy & Security Requirements for Agents and Brokers \(Part 2\)](#)
- [Marketplace Agent and Broker Agreements Job Aid](#)

You can find additional resources on the [Agents and Brokers General Resources webpage](#).

Knowledge Check

Now that you've watched the "Privacy and Security Requirements" video, take a few moments to answer the following questions to gauge what you've learned:

1. **Before collecting PII, you must provide a _____ that is displayed on a public-facing website or an electronic and/or paper form.**
 - A. Consumer Consent Form
 - B. Privacy Notice Statement
 - C. State Compliance Form
 - D. None of the above
2. **Before assisting a consumer with applying for financial help and/or enrolling in Marketplace coverage you must:**
 - A. Obtain their login credentials to assist them
 - B. Provide them with all plan information
 - C. Obtain consumer consent
 - D. All the above
3. **The Privacy Notice Statement must contain:**
 - A. Legal authority to collect PII
 - B. Purpose of the information collected
 - C. Authorized uses and disclosures of any collected information
 - D. All the above

Knowledge Check Answer Key: 1=B; 2=C; 3=D

Complex Case Scenarios



WATCH VIDEO

Some consumers, especially those seeking financial assistance, may be asked to provide additional information on their Marketplace application related to their household size, living situations, and income that may be difficult for them to answer.

Transitioning from the Marketplace to Medicare

When consumers become eligible for Medicare, they lose eligibility for any premium tax credits and/or reduced cost sharing in the Marketplace. You can help clients who have become eligible for Medicare to take action to end their tax credits and avoid tax liability.



Make sure your eligible clients don't end their Marketplace plan until they know for certain when their new coverage starts. Once they end Marketplace coverage, they can't re-enroll until the next annual Open Enrollment Period (unless they qualify for a SEP).

The best way to ensure consumers transitioning from the Marketplace to Medicare receive their desired coverage end date is by requesting the change with the Marketplace Call Center a few weeks before they turn 65 years old.

Canceling a Marketplace Plan

Consumers can cancel Marketplace coverage for all or just some of their household members. You should advise your clients that, if they choose to drop their Marketplace coverage, they must pay special attention to the timing, so that they don't end their Marketplace plan *until* their new coverage begins.



Ending Coverage for Some Members of the Household: For consumers ending coverage for some people on the application (e.g., the person who has become eligible for Medicare), in most cases, those people's Marketplace coverage ends right away.



Ending Coverage for the Entire Household: For consumers ending coverage for everyone on the application, their termination can take effect as soon as the day they cancel their plan, or they can set the Marketplace coverage end date to a day in the future.

Estimating Income

When assisting consumers with their Marketplace applications, you may need to help them estimate what their household income is likely to be for the year. Income information needs to be collected from all application members, including non-applicants.

For additional information on estimating income, visit [HealthCare.gov](https://www.healthcare.gov).

Calculating Tax Household Size

For most people, a household consists of the tax filer, their spouse, if they have one, and their tax dependents, including those who don't need coverage.

$$\text{Tax Filer} + \text{Spouse} + \text{Tax Dependents} = \text{Household}$$

Multi-tax households are households in which family members file more than one federal income tax return and can include domestic partners and parents with non-tax dependent children who file their own taxes. Multi-tax households may require consumers to file separate applications. If consumers are grouped into multi-tax households, and seeking financial assistance, they will need to go through the Marketplace Call Center to re-apply on separate applications and enroll in coverage.

Currently, the Marketplace cannot support people from different tax households enrolling in a QHP together with advance payments of the premium tax credit (APTCs) on one application. Therefore, people in different tax households must file a separate application for each tax household.

When helping complete separate applications for members of multi-tax households:

- For each tax household, list members of the tax household as applicants (applying for coverage) on only one application.
- List the other household members as non-applicants (not applying for coverage) on the application. Note that consumers may be asked to provide information about the people they live with who are not applying for coverage.

Each tax household application will be on its own policy, but the different tax households can still select the same QHP, if they choose to do so. Family members who enroll in different QHPs may be members of separate tax households but may also be members of a single tax household. One condition is not dependent on the other.

Additional Resources to Support You

Provided here are additional resources on handling complex cases to support you throughout the year:

- [How to Cancel a Marketplace Plan](#)
- [Application Spotlight: Income](#)
- [Income Resource Chart](#)
- [Complex Cases: Helping Consumers Resolve Data Matching Issues \(DMIs\)](#)
- [Income Data Matching Issue: Complex Case](#)
- [Medicare and the Marketplace](#)
- [Changing from the Marketplace to Medicare](#)
- [Common Complex Scenarios: Transitioning from a Marketplace Plan to Other Health Coverage](#)

You can find additional resources on the [Agents and Brokers General Resources webpage](#).

Agent and Broker Support Desks



Help Desk	Contact Information (Closed Holidays)	Types of Inquiries Handled
Marketplace Service Desk	<p>Phone: 1-855-267-1515 Email: CMS_FEPS@cms.hhs.gov</p> <p>Hours of Operation:</p> <ul style="list-style-type: none"> Monday-Friday 8:00 AM–8:00 PM ET October-November only: Saturday-Sunday 10:00 AM–3:00 PM ET 	<ul style="list-style-type: none"> CMS Enterprise Portal password resets and account lockouts Other CMS Enterprise Portal account issues or error messages General registration and training questions (not related to a specific training platform) Login issues on the Direct Enrollment agent/broker landing page—when you are redirected to HealthCare.gov
Agent/Broker Email Help Desk	<p>Email: FFMProducer-AssisterHelpDesk@cms.hhs.gov</p> <p>Hours of Operation:</p> <ul style="list-style-type: none"> Monday-Friday 8:00 AM–6:00 PM ET October-November only: Saturday-Sunday 10:00 AM–3:00 PM ET 	<ul style="list-style-type: none"> General enrollment and compensation questions Manual identity proofing/Experian issues Escalated general registration and training questions (not related to a specific training platform) Registration Completion List issues Find Local Help list issues Help On Demand participation instructions or questions Report concerns that a consumer or another agent or broker has engaged in fraud or abusive conduct
Marketplace Call Center–Direct Agent/Broker Partner Line	<p>Phone: 1-855-788-6275</p> <ul style="list-style-type: none"> Enter your National Producer Number to access this line. <p>Hours of Operation:</p> <ul style="list-style-type: none"> 24 hours/day each day of the week 	<ul style="list-style-type: none"> HealthCare.gov account password resets Special enrollment periods not available on the consumer application Individual Marketplace eligibility and enrollment issues
Agent/Broker Training and Registration Email Help Desk	<p>Email: MLMSHelpDesk@cms.hhs.gov</p> <p>Hours of Operation:</p> <ul style="list-style-type: none"> Monday-Friday 9:00 AM–5:30 PM ET 	<ul style="list-style-type: none"> Technical or system-specific issues related to the MLMS User-specific questions about maneuvering in the MLMS site or accessing training and exams
America’s Health Insurance Plans (AHIP) Training Help Desk	<p>Phone: 1-800-984-8919 Email: support@ahipinsuranceeducation.org</p> <p>Hours of Operation:</p> <ul style="list-style-type: none"> Monday-Friday 8:00 AM–7:00 PM ET Saturday 8:30 AM-5:00 PM ET 	<ul style="list-style-type: none"> All inquiries specifically related to the AHIP agent/broker training platform

Enrollment Consumer Support

 WATCH VIDEO

2019 Open Enrollment Period and Beyond

The 2019 Open Enrollment Period runs from November 1, 2018 to December 15, 2018. Marketplace plans sold during this period start on January 1, 2019.

During and after the 2019 Open Enrollment Period, you can help consumers in three primary ways:

- **Outreach and Education:** Providing consumers with educational information about Marketplace coverage
- **Enrollment Assistance:** Continuing to assist eligible consumers in enrolling in Marketplace coverage
- **Post-Enrollment Assistance:** Helping consumers with questions related to effectuating and utilizing their Marketplace coverage

Additional Resources to Support You

Provided here are additional resources on complex cases to support you during the 2019 Open Enrollment Period:

- [Helping Consumers Frequently Asked Questions \(FAQs\)](#)
- [5 Things Agents and Brokers Should Know About SEP Verification Issues \(SVI\)](#)
- [Special Enrollment Period Verification Phase 2: Helping Consumers Resolve Additional SVI Types](#)
- [Helping Consumers Resolve Data Matching Issues \(DMIs\)](#)
- [5 Things Assistants Should Know about Data Matching Terminations](#)

You can find additional resources on the [Agents and Brokers General Resources webpage](#).

Answers to Your Frequently Asked Questions

 WATCH VIDEO

Answers from Subject Matter Experts

Answers to your frequently asked questions (FAQs) are provided in this video. Subject matter experts from the CMS Center for Consumer Information and Insurance Oversight (CCIIO) review these FAQs in detail.

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Additional Resources to Support You

Provided here are links discuss during the video and additional resources to support you:

- [Reporting self-employment income to the Marketplace](#)
- [What to Include as Income](#)
- [Federal Poverty Level \(FPL\)](#)
- [Income Levels and Savings](#)
- [Figure Out Your Premium Tax Credit Form](#)
- [Useful Websites Marketplace Help Desks and Call Centers for Agents and Brokers](#)

For even more answers, check out the [Agent and Brokers FAQs website](#). You can find additional resources on the [Agents and Brokers General Resources webpage](#).

Abbreviations

AHIP	America's Health Insurance Plans
APTC	Advance Payments of the Premium Tax Credit
CBT	Computer-based Training
CCIO	Center for Consumer Information and Insurance Oversight
CMS	Centers for Medicare & Medicaid Services
DE	Direct Enrollment
DMI	Data-matching Issue
EDN	Eligibility Determination Notice
FAQ	Frequently Asked Question
FFM	Federally-facilitated Marketplace
FPL	Federal Poverty Level
HHS	U.S. Department of Health and Human Services
MLMS	Marketplace Learning Management System
NPN	National Producer Number
QHP	Qualified Health Plan
PII	Personally Identifiable Information
RIDP	Remote Identity Proofing
SBM-FP	State-based Marketplace on the Federal Platform
SHOP	Small Business Health Options Program
SEP	Special Enrollment Period
SVI	SEP Verification Issue

