



# Agent and Broker Participation in the Federally-facilitated Marketplace (FFM)

*Plan Year 2015 Open Enrollment: Tips for Agents and Brokers*

*November 2014*

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



# Webinar Agenda

- Webinar Objectives
- FFM Agent and Broker Registration Overview
- Marketplace Online Application Updates
- Federally-facilitated Small Business Health Options Program (FF-SHOP) Updates

# Agent and Broker Participation in the Federally-facilitated Marketplace (FFM)



## *Webinar Objectives*

# Webinar Objectives

- Provide an overview of agent and broker registration in the FFM
- Discuss recent updates to streamline the Marketplace online application for individuals and families
- Provide an overview FF-SHOP and the new online application and enrollment process for employer and employee coverage beginning in 2015

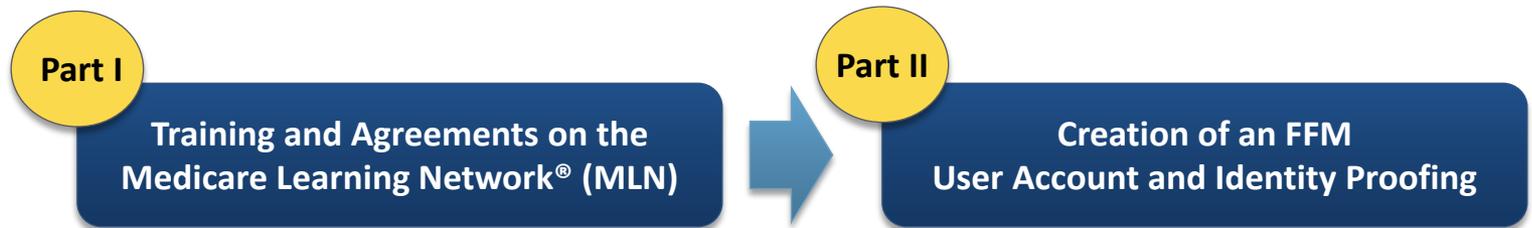
## Agent and Broker Participation in the Federally-facilitated Marketplace (FFM)



## *FFM Agent and Broker Registration Overview*

# FFM Agent and Broker Registration Overview

- Agents and brokers must complete certain registration activities initially and annually in order to participate in the FFM.
- The agent and broker registration process for the FFM is comprised of two parts.



## Website:



**Medicare Learning Network®:**  
<https://Marketplace.MedicareLearningNetworkLMS.com>



**CMS Enterprise Portal:**  
<https://portal.cms.gov>

## Key Actions:

- ▶ Create an account on the MLN
  - ▶ Select the agent/broker role for the desired market
  - ▶ Complete the training curriculum for the desired market, including the applicable FFM Agreement(s)
- ▶ Create an FFM user account
  - ▶ Request the agent/broker role
  - ▶ Complete identity proofing

# Registration Requirements for Agents and Brokers Who are NEW to the FFM

<i>Agents and brokers participating in the...</i>	Initial FFM Registration Activities			
	Part I			Part II
	Create an Account on MLN	Complete the FFM Training	Execute FFM Agreement(s)	Create an FFM User Account and Complete Identity Proofing on the CMS Enterprise Portal
• FFM for the individual market and FF-SHOP	Required	Required: Basics, P&S, IM Recommended: SHOP	Required: GA, P&S IM, P&S SHOP	Required
• FFM for the individual market	Required	Required: Basics, P&S, IM	Required: GA, P&S IM	Required
• FF-SHOP	Required	Recommended: Basics, P&S, SHOP	Required: P&S SHOP	Required

**TRAINING & AGREEMENTS:**

- Basics Affordable Care Act and Marketplace Basics Course & Exam
- P&S Privacy and Security Standards Course & Exam
- IM Individual Marketplace Course & Exam
- SHOP SHOP Marketplace Course & Exam
- GA Agent Broker General Agreement for the FFM Individual Market
- P&S IM Agreement Between Agent or Broker and CMS for the FFM Individual Market
- P&S SHOP Agreement Between Agents and Brokers and CMS for the FF-SHOP

# Registration Requirements for Agents and Brokers Who are RENEWING with the FFM

Annual FFM Registration Activities				
<i>Agents and brokers renewing their participation in the...</i>	Part I			Part II
	Log in to MLN using existing MLN User ID	Complete the FFM Training	Execute FFM Agreement(s)	Create an FFM User Account and Complete Identity Proofing on the CMS Enterprise Portal
<ul style="list-style-type: none"> <li>FFM for the individual market and FF-SHOP</li> </ul>	Required	Required: Basics, P&S, IM Recommended: SHOP	Required: GA, P&S IM, P&S SHOP	No activity required
<ul style="list-style-type: none"> <li>FFM for the individual market</li> </ul>	Required	Required: Basics, P&S, IM	Required: GA, P&S IM	No activity required
<ul style="list-style-type: none"> <li>FF-SHOP</li> </ul>	Required	Recommended: Basics, P&S, SHOP	Required: P&S SHOP	Required ( <i>Note: Agents and brokers who did not complete this requirement as part of the registration for the 2014 plan year must do so as part of registration for the 2015 plan year.</i> )

## TRAINING & AGREEMENTS:

Basics	Affordable Care Act and Marketplace Basics Course & Exam
P&S	Privacy and Security Standards Course & Exam
IM	Individual Marketplace Course & Exam
SHOP	SHOP Marketplace Course & Exam
GA	Agent Broker General Agreement for the FFM Individual Market
P&S IM	Agreement Between Agent or Broker and CMS for the FFM Individual Market
P&S SHOP	Agreement Between Agents and Brokers and CMS for the FF-SHOP



## Agent and Broker Participation in the Federally-facilitated Marketplace (FFM)

INDIVIDUALS & FAMILIES

The Health Insurance Marketplace is Open!

Enroll now in a plan that covers essential benefits, pre-existing conditions, and more.

Plus, see if you qualify for lower costs.

[APPLY ONLINE](#) [APPLY BY PHONE](#)

*Marketplace  
Online  
Application  
Updates*

# Online Application Updates

- Streamlined version of the online Marketplace application
  - Improved flow
  - More dynamic
  - Fewer screens to navigate
  - Optimized for mobile users
  - Backward navigation
  - Updated look and feel
- Shorter, smoother, simpler user experience
- Available for Marketplace/Side-by-Side pathway only (not Direct Enrollment pathway)

# Consumer Experience

The improved application process is seamless and transparent to users.

- Consumers are guided through the appropriate version of the application based on their answers to a set of screening questions.
- As a user, consumers will not know anything has changed or that there are different possible pathways based on the consumer's specific situation.

# Updated, Streamlined Application Process

The following slides show an example of the updated, streamlined application process and highlight the differences you will see.

- In this example, the consumer is eligible for financial assistance.
- Consumers not eligible for, or interested in applying, for financial assistance will not see the income-related screen or questions related to determining eligibility for Medicaid or the Children's Health Insurance Program (CHIP).

# Start Application

HealthCare.gov

Learn

Get Insurance

Log in

Español

Individuals & Families

Small Businesses

HELP

## Open Enrollment is over

You can still get health coverage for 2014 in special cases, including:

- Marriage, birth, or adoption
- A move outside your service area
- Loss of health coverage
- Applying for Medicaid or CHIP

See the [full list](#) for details. If you think you qualify, start here:

Alabama

APPLY

Not ready to apply? [Learn more.](#)

Same  
application  
starting place

# Consumer Account Creation

## Create an account

After you create an account, you can manage your coverage, update your information, and get updates on your coverage.

Richard      Chen      ✓

Your email address will also be your username when you log in.

rchen11985@yopmail.com      ✓

I want to have news and updates sent to this email address. (optional)

Use:      ✓ 8-20 characters      ✓ Upper & lowercase letters      ✓ Number(s)

.....      ✓

.....      ✓

We need you to pick a few questions that only you will be able to answer. If you ever forget your password, we'll ask you these questions to verify your identity.

What is your favorite radio station?      ✓  
station

What was your favorite toy when you were a child?      ✓  
toy

What is your favorite cuisine?      ✓  
cuisine

I understand and agree with the [HealthCare.gov privacy policy](#).

**CREATE ACCOUNT**

**I ALREADY HAVE AN ACCOUNT**

**Shorter, streamlined  
account creation  
process**

## Success!

Your account has been created.

With this account, you can use the Health Insurance Marketplace to find health coverage that fits your budget and meets your needs.

**CONTINUE**

# Consumer Log In

HealthCare.gov

Learn

Get Insurance

Español

New to HealthCare.gov?

[CREATE ACCOUNT](#)



## Log In

All fields are required unless they're marked optional.

Username

Password

[Forgot your username?](#) | [Forgot your password?](#)

[Having trouble logging in?](#)

**Same log in process**

**Note:** If you are using a shared computer or a computer in a public place, like a library or community center, be sure you close all browser windows and tabs and log out when you're done. This will keep your information secure.

[LOG IN](#)

# My Applications & Coverage

The screenshot shows the HealthCare.gov website interface. At the top left is the logo 'HealthCare.gov'. In the center, there are two tabs: 'Learn' and 'Get Insurance', with 'Get Insurance' being the active tab. On the top right, the user's name 'Richard' is displayed next to a profile icon, a 'Logout' link, and a language selector for 'Español'. Below the navigation bar, the user's name 'Richard Chen' is shown next to a profile icon. The main content area is divided into two columns. The left column contains two menu items: 'MY APPLICATIONS & COVERAGE' (with a plus icon) and 'MY PROFILE' (with a gear icon). The right column features a heading 'Richard, what would you like to do?' followed by two paragraphs of text. The first paragraph discusses finding applications and includes a link 'Find my application.'. The second paragraph discusses updating applications and selecting 'Apply for new coverage'. Below this is a section titled 'Apply for new coverage' which contains an 'IMPORTANT' notice about the 2014 Open Enrollment Period being over, with a link to 'Learn more about Special Enrollment Periods and your coverage options outside Open Enrollment.'. At the bottom of the page, there is a button labeled 'Apply and shop for coverage for me and/or my family' under the heading 'INDIVIDUALS & FAMILIES'.

HealthCare.gov

Learn Get Insurance

Richard | [Logout](#) [Español](#)

Richard Chen

MY APPLICATIONS & COVERAGE

MY PROFILE

## Richard, what would you like to do?

**Need to find your application?** Take the next steps here if you applied with a paper application or the Marketplace Call Center, or you were referred by your appropriate state agency. [Find my application.](#)

**If you were referred here by your state agency and something's changed since you applied** – like your income or family size – select “Apply for new coverage” instead.

## Apply for new coverage

**IMPORTANT**

The 2014 Open Enrollment Period is over. You can enroll in a private health insurance plan through the Marketplace **only** if you qualify for a Special Enrollment Period. You can use the Marketplace application to apply for Medicaid and the Childrens Health Insurance Program (CHIP) at any time. [Learn more about Special Enrollment Periods and your coverage options outside Open Enrollment.](#)

If you think you qualify for a Special Enrollment Period, start an application now.

INDIVIDUALS & FAMILIES

Apply and shop for coverage for me and/or my family

- Find your application
- Update your application
- Apply for new coverage

# Start Application

## Alabama application for individuals & families

**You can apply for any of these people on this same application, even if they already have health insurance now:**

- Yourself
- Other family members
- Anyone on your same federal income tax return (if you file one)

**You may need:**

- Names, birth dates, and income information for your family
- Social Security numbers (if they're available) for the people who want coverage

**NEXT**

Not a resident of Alabama? [Choose a different state.](#)

# Consumer Information Entered

HealthCare.gov Learn Get Insurance Richard | Log out

Individuals & Families Small Businesses HELP

### Verify your identity & contact information

Tell us about yourself. Use your complete name as it appears on your legal documents (like your driver's license or Social Security card). [Why do I need to verify my identity?](#)

Richard Middle Chen Suffix ▾

Phone number 444-444-4444 Home ▾ Date of birth 06/06/1985 Male ▾

135 Catoma ST Apt./Ste. #

Montgomery Alabama ▾ 36104

Social Security Number (SSN) 317-20-1469

QUESTIONS LOADED

- Previously the “Contact Information” page
- Collects same information with improved flow

# Consumer Verifies Identity

**Answer these questions so we can verify your identity**

Based on your information, we've put together a few questions that only you'll be able to answer. [Why do I need to verify my identity?](#)

Please select the county for the address you provided.

- MIDLAND
- ALCONA
- MARQUETTE
- INGHAM**
- NONE OF THE ABOVE

According to our records, you previously lived on (PLYMOUTH). Please choose the city from the following list where this street is located.

- DILLON
- LEADVILLE
- LITTLETON
- ELIZABETH
- NONE OF THE ABOVE**

Please select the city that you have previously resided in.

- WINFIELD
- DAYTON
- PARRISH
- BARAGA**
- NONE OF THE ABOVE

According to our records, you currently own, or have owned within the past year, on (PLYMOUTH). Please select the vehicle that you purchased or leased prior to March 2013 from the following list.

- GMC G-SERIES VAN
- GMC SONOMA PICKUP
- DODGE RAM VAN**
- GMC SAFARI VAN
- NONE OF THE ABOVE

**VERIFY MY IDENTITY**

Same types of questions with a new look and better flow

# Privacy & Use of Consumer Information

The screenshot shows the HealthCare.gov website interface. At the top, the logo 'HealthCare.gov' is on the left, with 'Learn' and 'Get Insurance' navigation links. On the right, the user's name 'Richard' and a 'Log out' link are visible. Below the navigation bar, there are tabs for 'Individuals & Families' (selected) and 'Small Businesses', along with a 'HELP' icon. The main content area has a dark blue background. A yellow callout box on the right contains the text 'New look and location'. The primary heading is 'Your identity has been verified', followed by a sub-heading 'Privacy & the use of your information'. The text explains that information is used for eligibility and coverage, and that it may be retrieved from other agencies like the IRS and Social Security. A green button at the bottom says 'TAKE ME TO THE APPLICATION'.

HealthCare.gov Learn Get Insurance Richard | Log out

Individuals & Families Small Businesses HELP

## Your identity has been verified

You can now fill out your application for health coverage through the Marketplace.

### Privacy & the use of your information

We'll keep your information private as required by law. Your answers on this form will only be used to determine eligibility for health coverage or help paying for coverage. We'll check your answers using the information in our databases and the databases of other federal agencies. If the information doesn't match, we may ask you to send us proof. We won't ask any questions about your medical history. Household members who don't want coverage won't be asked questions about citizenship or immigration status.

As part of the application process, we may need to retrieve your information from the Internal Revenue Service (IRS), Social Security, the Department of Homeland Security (DHS), and/or a consumer reporting agency. We need this information to check your eligibility for coverage and help paying for coverage if you want it and to give you the best service possible. We may also check your information at a later time to make sure your information is up to date. We'll notify you if we find something has changed.

[Learn more about your data](#), or view the [Privacy Act Statement](#).

I agree to have my information used and retrieved from data sources for this application. I have consent for all people I'll list on the application for their information to be retrieved and used from data sources.

**TAKE ME TO THE APPLICATION**

# Before Getting Started

HealthCare.gov Learn **Get Insurance** Richard  [Log out](#)

Individuals & Families Small Businesses [HELP](#)

## Before you get started

Fill in the information below about your household. [Click here](#) if you're not applying for coverage in Alabama.

Are you single or married?

SINGLE  MARRIED

How many dependents will be on your 2014 tax return?

Not filing a tax return for 2014? To apply, [click here](#).

Include all of your dependents on your 2014 tax return, even those not applying for coverage. (Note: Don't include yourself or your spouse.)

How much income will your household make this year? (optional)

\$82,000 OR LESS  MORE THAN \$82,000

Based on your estimated household income in 2014 of less than \$82,000, you may get help paying for coverage. Do you want to answer additional questions to see if you qualify for help paying for coverage?

YES  NO

**CONTINUE**

**Shorter, streamlined**

# Answer Some Questions

## Answer some questions

Read the questions below, and select "Yes" or "No."

- YES** **NO** Does everyone applying for coverage have the same permanent home address AND currently live in Alabama?
- YES** **NO** Is everyone applying for coverage a U.S. citizen?
- YES** **NO** Does everyone applying for coverage have a Social Security Number (SSN) you can provide?
- YES** **NO** Is everyone who's applying for coverage claimed as tax dependents on your federal tax return for 2014, other than yourself and your spouse?  
(Select "No" if someone will also be claiming you or your spouse as a dependent on their return.)
- YES** **NO** Is everyone who's claimed as a dependent on your tax return your child who's currently 25 or younger and unmarried?
- YES** **NO** Are any of these dependents your stepchildren?
- YES** **NO** Is anyone applying for coverage currently incarcerated (detained or jailed)?
- YES** **NO** Is anyone applying for coverage an American Indian or Alaska Native?
- YES** **NO** Is anyone applying for coverage a naturalized or derived citizen? (This usually means a U.S. citizen who was born outside the U.S.)
- YES** **NO** Is anyone applying for coverage under a name different than the one on their Social Security card?
- YES** **NO** Is anyone applying for coverage eligible for health coverage through their job, someone else's job, or COBRA?  
(Select "Yes" if they are now or will be in 2014.)
- YES** **NO** Is anyone applying on your tax return pregnant, or have they had a child in the last 60 days?
- YES** **NO** Is anyone applying for coverage a full-time student aged 18-22?
- YES** **NO** Was anyone who's applying for coverage in foster care at 18 and currently 25 or younger?
- YES** **NO** Are you and your spouse responsible for a child 18 or younger who lives with you, but isn't on your tax return?
- YES** **NO** Do any of your dependents live with a parent who's not on your tax return?

CONTINUE

New screening questions guide you through the correct application process

# Consumer Contact Information

HealthCare.gov Learn Get Insurance Wanda | Log out

Individuals & Families Small Businesses HELP

## Continue your application

After you complete this section, you'll answer a few more questions before you compare plans.

### Household contact information

These fields are optional: middle name, suffix, and preferred written and spoken languages.

Richard Middle Chen Suffix

rchen11985@yopmail.com 444-444-4444 Home

Preferred written language Preferred spoken language  
English English

Go paperless! Get your notices by email, instead of paper copies in your mailbox.

Another person is helping me complete my application.

Jane Middle Doe

Navigator Organization Name ID Number

### Home address

Enter the permanent address where everyone on your application lives. The apt./ste. # field is optional.

135 Catoma ST Apt./Ste. #  
Montgomery Alabama 36104 MONTGOMERY

**YES** **NO** Is your mailing address the same as your permanent address?

### Check & update your information

If the name on your Social Security card is different than the name below, update it here so it's the same as it appears on your Social Security card. These fields are optional: middle name, suffix, and race & ethnicity.

Richard Middle Chen Suffix

Date of birth Social Security Number (SSN)  
06/06/1985 317-20-1469 Male Race & ethnicity

**YES** **NO** Are you applying for coverage for yourself?

**Agent/Broker  
information is  
entered here**

# Income Information

Income information Application ID: 103359128

People can get income in many ways. [Learn more about income.](#)

Job	Self-employment	Unemployment	Pension
Social Security	Capital gains	Investment	Retirement
Alimony	Farming or fishing	Rental or royalty	Scholarship
Other income			

---

### Current income for Richard Chen

Tell us about any income Richard had in the last month.

Type	How much	
Job / XYZ Inc (777-777-7777)	\$41,355.65 per year	<a href="#">Edit</a> <a href="#">Remove</a>

[ADD NEW SOURCE OF INCOME](#)

Does Richard have any deductions for 2014?

YES  NO

---

### Yearly income for Richard Chen

Based on what you entered, Richard's income minus any deductions for 2014 will be about **\$41,355.65**. Is this correct?

YES  NO

---

### Current income for Terry Chen

Tell us about any income Terry had in the last month.

Type	How much	
Job / Wendy's (555-555-5555)	\$3,445.30 per month	<a href="#">Edit</a> <a href="#">Remove</a>

[ADD NEW SOURCE OF INCOME](#)

Does Terry have any deductions for 2014?

YES  NO

---

### Yearly income for Terry Chen

Based on what you entered, Terry's income minus any deductions for 2014 will be about **\$41,343.60**. Is this correct?

YES  NO

---

### Current income for Robert Chen

Tell us about any income Robert had in the last month.

[ADD NEW SOURCE OF INCOME](#)

Does Robert have any deductions for 2014?

YES  NO

---

### Yearly income for Robert Chen

Based on what you entered, Robert's income minus any deductions for 2014 will be about **\$0.00**. Is this correct?

YES  NO

[CONTINUE](#)

Application ID displayed

Shorter, streamlined

# Additional Questions

HealthCare.gov Learn Get Insurance Richard | Log out

Individuals & Families Small Businesses HELP

Application ID: 103359128

## Additional questions

You're almost done. Answering these questions will give you a better chance of getting coverage.

Do any of these people have a physical disability or mental health condition that limits their ability to work, attend school, or take care of their daily needs? (optional)

- Richard Chen
- Terry Chen
- Robert Chen

Do any of these people need help with daily activities (like bathing, dressing, or using the bathroom), or live in a medical facility or nursing home? (optional)

- Richard Chen
- Terry Chen
- Robert Chen

Do any of these people need help paying their medical bills from the last 3 months? (optional)

- Richard Chen
- Terry Chen
- Robert Chen

**CONTINUE**

**Same screening questions related to Medicaid eligibility**

# Additional Coverage and Change in Circumstance Questions

## Richard Chen's coverage information

Is Richard Chen currently enrolled in health coverage?

YES NO

## Terry Chen's coverage information

Is Terry Chen currently enrolled in health coverage?

YES NO

## Robert Chen's coverage information

Is Robert Chen currently enrolled in health coverage?

YES NO

## Additional coverage questions

Does a child on this application have a parent living outside the home?

YES NO

Were any of these people found not eligible for either Medicaid or the Children's Health Insurance Program?

- Richard Chen
- Terry Chen
- Robert Chen

## Questions about life changes

Select anyone in your household who had these changes.

Did anyone listed below lose health coverage on or after 6/29/2014?

- Richard Chen
- Terry Chen

When did Terry lose health coverage?

07/01/2014

- Robert Chen

Will anyone listed below lose coverage before 10/27/2014?

- Richard Chen
- Terry Chen
- Robert Chen

Did anyone listed below get married on or after 6/29/2014?

- Richard Chen
- Terry Chen
- Robert Chen

Did anyone listed below get released from incarceration (detention or jail) on or after 6/29/2014?

- Richard Chen
- Terry Chen
- Robert Chen

Did anyone listed below gain eligible immigration status on or after 6/29/2014?

- Richard Chen
- Terry Chen
- Robert Chen

Was anyone listed below adopted, placed for adoption, or placed for foster care on or after 6/29/2014?

- Richard Chen
- Terry Chen
- Robert Chen

Did anyone listed below move on or after 6/29/2014?

- Richard Chen
- Terry Chen
- Robert Chen

## Renewal of coverage

To make it easier to determine my eligibility for help paying for coverage in future years, I agree to allow the Marketplace to use my income data, including information from tax returns, for the next 5 years. The Marketplace will send me a notice, let me make any changes, and I can opt out at any time.

I AGREE I DISAGREE

Shorter, streamlined

# Application Summary

HealthCare.gov
Learn **Get Insurance**
Richard Log out

Individuals & Families **Small Businesses**
HELP

Application ID: 103359128

## Application summary

Take a few minutes to review the information you gave us and make changes, if necessary. Once everything is correct, you can sign and submit your application.

### Household contact EDIT

Full name	Richard Chen
Address	135 Catoma ST Montgomery, AL 36104
Phone number	444-444-4444
Email address	rchen11985@yopmail.com
Get updates by email	Yes
Preferred written language	English
Preferred spoken language	English

### Household members EDIT

Full name	Date of birth	SSN	Relationship	Sex
Richard Chen	06/06/1985	XXX-XX-1469	Self	Male
Terry Chen	12/30/1980	XXX-XX-1470	Spouse	Female
Robert Chen	01/02/2005	XXX-XX-1471	Child	Male

### Household income EDIT

Name	Type	Amount
Richard Chen	Job / XYZ Inc (777-777-7777)	\$41,355.65 per year
Terry Chen	Job / Wendy's (555-555-5555)	\$3,445.30 per month
Robert Chen	-	-

### Income summary EDIT

Name	Last month's income	Expected income in 2014
Richard Chen	\$3,446.30	\$41,355.65
Terry Chen	\$3,445.30	\$41,343.60
Robert Chen	\$0.00	\$0.00

Basic household questions
EDIT

Everyone applying for coverage ...

- has the same permanent home address, and currently lives there.
- is a U.S. citizen or U.S. national.
- is included on the tax return for 2014 that I'll file jointly with my spouse, and we're not claimed as dependents by anyone else.

Everyone who's claimed as a dependent on our tax return ...

- is our child.
- is not our stepchild.
- is 25 or younger.
- is not married.

No one applying for coverage ...

- is currently in U.S. military service.
- is a naturalized citizen.
- listed as a dependent on someone else's tax return.
- is eligible for Medicaid in another state.
- is 18-22 and a full-time student at an eligible institution.
- was in foster care.

I'm not living with anyone else ...

- None of my dependents.

### Additional questions EDIT

- No one applying for coverage has a physical disability or mental health condition that limits their ability to work, attend school, or take care of their daily needs.
- No one applying for coverage needs help with daily activities (like bathing, dressing, or using the bathroom) or lives in a medical facility or nursing home.
- No one applying for coverage needs help paying their medical bills from the last 3 months.
- Terry Chen lost coverage on or after 6/29/2014.
- No one applying for coverage got married on or after 6/29/2014.
- No one applying for coverage was released from incarceration (detention or jail) on or after 6/29/2014.
- No one applying for coverage gained eligible immigration status on or after 6/29/2014.
- No one applying for coverage was adopted, placed for adoption, or placed for foster care on or after 6/29/2014.
- No one applying for coverage will lose coverage before 10/27/2014.
- No one applying for coverage moved on or after 6/29/2014.

Name	Current health coverage	Recently lost health coverage
Richard Chen	-	No
Terry Chen	-	Yes
Robert Chen	-	No

### Agree & confirm

Select "Yes" or "No" for each statement below.

**YES** **NO** If anyone on this application enrolls in Medicaid, I'm giving the Medicaid agency our rights to pursue and get any money from other health insurance, legal settlements, or other third parties. I'm also giving to the Medicaid agency rights to pursue and get medical support from a spouse or parent.

**YES** **NO** I know I must tell the program I'll be enrolled in if information I listed on this application changes. I know I can make changes in my Marketplace account online or by calling 1-800-318-2596. TTY users should call 1-855-989-4325. I know a change in my information could affect eligibility for member(s) of my household.

**YES** **NO** I'm signing this application under penalty of perjury, which means I've provided true answers to all of the questions to the best of my knowledge. I know I may be subject to penalties under federal law if I intentionally provide false information.

### Sign & submit

Richard Chen, type your full name below to sign electronically.

Richard Chen

SUBMIT APPLICATION

# Eligibility Results

The screenshot shows the HealthCare.gov website interface. At the top left is the HealthCare.gov logo. To its right are navigation tabs for 'Learn' and 'Get Insurance'. On the far right of the top bar, it shows the user's name 'Richard', a 'Logout' link, and a language selector for 'Español'. Below this is a dark blue navigation bar with a state selector for 'Alabama', a progress indicator with 'Apply', 'Get Results', and 'Get Coverage' steps, and a 'HELP' link. The main content area has a dark blue background with the heading 'Eligibility results' and a sub-heading 'Learn more about your eligibility results'. Below this, it states 'Results based on your application (ID 103359128) submitted on 2014-08-28' and 'Your application was received and has been processed.' A white box contains the message 'Your detailed eligibility results are ready' and an 'Important' note: 'Read your eligibility results before you enroll. We'll let you know if there are problems with your application that you'll need to resolve.' At the bottom of this box are two green buttons: 'VIEW ELIGIBILITY RESULTS' and 'CONTINUE TO ENROLLMENT'.

HealthCare.gov

Learn Get Insurance

Richard | Logout Español

Alabama Apply Get Results Get Coverage HELP

## Eligibility results

Learn more about your eligibility results

Results based on your application (ID 103359128) submitted on 2014-08-28

Your application was received and has been processed.

**Your detailed eligibility results are ready**

**Important:** Read your eligibility results before you enroll. We'll let you know if there are problems with your application that you'll need to resolve.

**VIEW ELIGIBILITY RESULTS** **CONTINUE TO ENROLLMENT**

# Key Points to Remember

- The updated, shorter Marketplace application will be used with consumers who have simple household situations.
- Consumers will be automatically routed through the correct application process for their situation.
- Although updates will be fully implemented by open enrollment, you still will not see the updated application for every consumer you help because the streamlined application is designed for consumers who have simple household situations .

# New Agent/Broker Functionality for 2015 Open Enrollment

**Confirm your plan choices**

You must confirm your plan choices below in order to enroll.

To change the tax credit amount you want to use each month, return to the [To-Do List](#) and select "change" next to the set ppremium tax credit task.

---

**Blue Value Silver**

Plan ID: 46944AL0410001  
Health plan for  
Suzanne Carson  
John Carson

Health Plan Monthly Premium	<b>\$603.10</b>
Premium tax credit	<b>\$418.28</b>
Health Plan Monthly Premium	<b>\$184.82</b>

Estimated Effective Date  
09/01/2014

**CHANGE SELECTION**

---

**Blue Value Silver**

Plan ID: 46944AL0410001  
Health plan for  
Anna Carson

Health Plan Monthly Premium	<b>\$120.32</b>
Premium tax credit	<b>\$86.72</b>
Health Plan Monthly Premium	<b>\$33.60</b>

Estimated Effective Date  
09/01/2014

**CHANGE SELECTION**

[is a new or different assistor helping you with your enrollment?](#)

*Changing the  
Agent/Broker  
of Record  
During Plan  
Selection*

# Select “Agent or broker” From Drop-Down List Input Requested Information

## Help applying for coverage ✕

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

Agent or broker ▾

First name  Middle name optional  Last name  Suffix optional  ▾

Organization name optional  ID number   
XXXXXXXXXX XXXXXXXXXXXX

FFM User ID optional  NPN number   
XXXXXXXXXX XXXXXXXXXXXX

# FF-SHOP Marketplace Updates for 2015 Plans

HealthCare.gov

Individuals & Families

Small Businesses

Log in

For Employers

For Employees

Get Answers ▾

Search

## The small business Marketplace is open

The Small Business Health Options Program (SHOP) Marketplace helps employers with 50 or fewer employees offer affordable, flexible health plans

**FOR EMPLOYERS**

**FOR EMPLOYEES**

# What is the Federally-facilitated SHOP Marketplace?

## The Small Business Health Options Program = SHOP

- Part of the Health Insurance Marketplace created by the Affordable Care Act
- Offers small employers a choice of qualified health and dental plans and tools for making informed choices
- Gives otherwise eligible qualified small employers access to the Small Business Health Care Tax Credit—worth up to 50% of employer's premium contributions
- Works with new insurance reforms to spur competition based on price and quality

## Starting November 15, 2014:

- Offers online purchase and enrollment in health and dental coverage through HealthCare.gov
- Offers small employers in 14 states the option to give employees a choice of plans

Note: Employers with fewer than 50 full-time-equivalent employees are not required to offer health insurance, and there is no penalty if they choose not to.

# Who Can Purchase FF-SHOP Coverage and When?

## Small employers:

- That have 1-50 full-time equivalent employees (In the FF-SHOP, employees working on average 30 or more hours per week)
- With at least one employee who is not a co-owner or spouse
- Including tax-exempt and religious employers
- That offer coverage to all full-time employees

**Visit the SHOP FTE Calculator**

**[HealthCare.gov/fte-calculator/](https://HealthCare.gov/fte-calculator/)**

## Enroll in SHOP coverage:

- Initial group enrollment can occur anytime during the year—no limited Open Enrollment period
- Before 15th of month for coverage starting next month
- After 15th of month for coverage starting 2nd following month

# Requirements for Employee Participation in the FF-SHOP

The FF-SHOP sets a “minimum participation rate” for participation in the SHOP.

- Means that a certain percentage of employees must accept the employer’s offer of coverage through the FF-SHOP before they will be allowed to enroll
- Set at 70% in most states using FF-SHOP

The employee participation rate is the number of employees enrolling in coverage offered through the SHOP, divided by the number of employees offered coverage.

# Requirements for Employee Participation in the FF-SHOP (cont.)

When counting “employees offered coverage,” do not include:

- Employees’ dependents
- Employees with coverage through another job or another person’s job
- Employees with Medicare, Medicaid, TRICARE, or another governmental program

Exception to the minimum participation requirement

- From November 15 – December 15 each year, employers can enroll in FF-SHOP coverage without having to meet this minimum participation requirement.

# FF-SHOP Launches Online November 15, 2014 for 2015 Coverage

The screenshot displays the HealthCare.gov website interface. At the top, the logo "HealthCare.gov" is on the left, and navigation tabs for "Individuals & Families" and "Small Businesses" are in the center. On the right, there are "Log in" and "Español" links. Below the navigation, a dark blue header contains "For Employers" (highlighted), "For Employees", and "Get Answers" with a dropdown arrow. A search bar with the text "Search" and a "SEARCH" button is also present. The main content area features a large banner with the headline "Offer SHOP coverage to your employees now" and a sub-headline "Have 50 employees or fewer? Use the SHOP Marketplace to offer coverage right now. Coming soon: SHOP online!". Below the headline is a "Select Your State" dropdown menu and a link "Own a business in more than one state?". The bottom section is a dark blue footer with four columns: "SEE PLANS & PRICES" with a double-headed arrow icon and a "GO" button; "TAX CREDIT" with a "Byline" and a "LEARN MORE" button; "FULL-TIME" with a briefcase icon, a "Byline", and a "LEARN MORE" button; and "CONTACT US" with a document icon, a "Byline", and a "LEARN MORE" button.

# New features of the FF-SHOP for 2015

Starting November 15, 2014:

- Small employers can access the SHOP on HealthCare.gov to:
  - Browse, select, and offer employees health and dental coverage that begins in 2015
  - Have employees enroll in SHOP coverage online
  - Find and authorize a SHOP-registered broker to help with online enrollment
- No paper applications will be distributed or accepted.
- SHOP-registered agents and brokers can access new online features and manage accounts when authorized by clients.
- Employers in 14 states can offer employees a choice of plans at one coverage level.
- The SHOP Call Center will assist employees, as well as employers, agents, and brokers.

# Compare Plans on FF-SHOP

HealthCare.gov [Create enrollment](#) [Manage employees](#) [My account](#) [Help -](#) [Español](#)

VA: Change state [0 Plan\(s\) in Cart](#) [Log out esabajoxi-3091@yopmail.com](#)

**ENROLLMENT CREATION**

- 1 Set enrollment period
- 2 Decide how you offer coverage
- 3 Set employer premium contribution
- 4 Select plans**
- 5 Summary and submit

## Compare plans

[BACK TO PLAN LIST](#) [DOWNLOAD IN EXCEL](#) [PRINT](#)

Plan Name	Employer monthly cost	Employee monthly cost	Total estimated cost
<b>Anthem HealthKeepers Bronze Guided Access Plus w/HSA-gjdb</b>	<b>\$337.61</b>	<b>\$225.07</b>	<b>\$562.68</b>
<b>Anthem HealthKeepers Silver Guided Access Plus-gvoa</b>	<b>\$408.93</b>	<b>\$272.61</b>	<b>\$681.54</b>
<b>Anthem HealthKeepers Gold Guided Access Plus-groa</b>	<b>\$496.12</b>	<b>\$330.74</b>	<b>\$826.86</b>

Access to Doctors and Hospital -

National Provider Network

NO	NO	NO
----	----	----

Provider Directory

<a href="#">Refer to provider network</a>	<a href="#">Refer to provider network</a>	<a href="#">Refer to provider network</a>
---	---	---

Cost and Coverage Examples +

Costs for Medical Coverage +

Medical Services +

# FF-SHOP Renewals:

## Renew 2014 SHOP Coverage for Plan Year 2015

Employers who offered a SHOP health plan to employees in 2014 need to renew their SHOP coverage online.

- Renewals can not be done for SHOP coverage by working directly with an insurance company.
- SHOP-registered agent or brokers will have to handle renewals and changes to SHOP coverage online too.

Start renewing online beginning November 15, 2014! Things to consider before renewal:

- Timing of the renewal offer
- Employers planning a renewal offering should keep the following in mind:
  - Must give employees at least one week to decide whether to accept the coverage offer
  - Must submit enrollments by the 15th day of the month for coverage to start the first day of the next month

# FF-SHOP Renewals: Renew 2014 SHOP Coverage for Plan Year 2015 (cont.)

## Updating your information for 2015

- When renewing SHOP participation online, employers will be asked the same questions asked on the 2014 application.
- Answer the questions based on information that applies for 2015.

## More than 50 employees as of 2015?

- If an employer had 50 or fewer FTEs in 2014 but now has more than 50 FTEs, it should attest to the statement that says the business has 50 or fewer FTEs based on last year's attestation.

# FF-SHOP Renewals: Renew 2014 SHOP Coverage for Plan Year 2015 (cont.)

SHOP is required to let you continue to participate in SHOP for 2015 if all of the following apply to you:

- You received a determination of eligibility from SHOP in 2014
- You had 50 or fewer FTE employees when you began participating in SHOP in 2014
- You added employees after you began participating and now have more than 50 FTEs
- You meet all other requirements for participating in SHOP

If all of these apply to you, attesting to the statement about your employer size being 50 or fewer employees based on last year's attestation will let you continue participating in SHOP in 2015.

# How the FF-SHOP Works: Moving Toward Employee Choice

A key goal of the SHOP: Options for small employers and their employees

In 2014:

- The FF-SHOP Marketplace offers employer choice, but no employee choice option.
  - Employers choose among plan categories, insurers, and plans, and offer a single plan to employees.
- States running their own SHOP can offer employee choice option -- many do.

In 2015:

- Employers in 14 states using the FF-SHOP Marketplace can offer employees a choice of plans.

In 2016:

- The SHOP Marketplace in all states is expected to offer small employers an Employee Choice option.

# Employee Choice: Flexibility and Control

Advantages of offering employees a choice of plans:

- Less research for employers
- Better fit for employees
- More competitive benefits
- More competition between insurers
- Employer gets and pays just one monthly bill
- Employer sets choice limits

# Decide How to Offer SHOP Coverage: Employee Choice vs. Single Plan

HealthCare.gov **Create enrollment** Manage employees My account Help - Español

VA: Change state 0 Plan(s) in Cart Log out esabajodi-3091@yopmail.com

## ENROLLMENT CREATION

- 1 Set enrollment period
- 2 Decide how you offer coverage**
- 3 Set employer premium contribution
- 4 Select plans
- 5 Summary and submit

### Decide how you offer coverage

Decide how you want to offer coverage from the 2 options below:

- You'll select the insurance company and the plan. Your employees must enroll in this plan in order to get SHOP coverage.
- You'll select a plan category (like Bronze or Silver) from any insurance company. Your employees can select the insurance company and plan that best suits their needs from plan category you choose.

If you have any questions, call the SHOP Call Center at 1-800-706-7893, or select "Help" to chat online. TTY users should call 711 to reach a call center representative.

**Option one**  
Employees can choose to enroll in the insurance company and plan you select.

Health plans. Select an insurance company below:

- VA Health 9
- HealthKeepers, Inc.
- Optima Health

Dental plans. Select an insurance company below:

- VA Health 9
- Metropolitan Life Insurance Company
- Dominion Dental Services, Inc.
- DentaQuest Virginia, Inc.
- Anthem Blue Cross and Blue Shield

**Option two**  
Employees can select any plan from an insurance company within the plan category you choose, like Bronze or Silver. You can choose only one plan category.

BACK SAVE AND CONTINUE

# FF-SHOP States Offering Employee Choice in 2015

FF-SHOP States as of 2015			
Alabama	Indiana	Nebraska	South Carolina
Alaska	Iowa	New Hampshire	South Dakota
Arizona	Kansas	New Jersey	Tennessee
Arkansas	Louisiana	North Carolina	Texas
Delaware	Maine	North Dakota	Virginia
Florida	Michigan	Ohio	West Virginia
Georgia	Missouri	Oklahoma	Wisconsin
Illinois	Montana	Pennsylvania	Wyoming

 FF-SHOP States offering Employee Choice option in 2015

# New for 2015 SHOP Coverage: Agent and Broker Search

The screenshot shows the HealthCare.gov website interface. At the top, there is a navigation bar with links for 'Create enrollment', 'Manage employees', 'My account', and 'Get Help'. A 'Español' button is also present. Below the navigation bar, a dark blue header contains a location selector 'OK: Change state' and a 'Log out' button for 'mowraitr@fakeinbox.com'. The main content area features a blue sidebar with a 'Find an agent/broker' button. The central section has a blue header with the same text. Below this, there is explanatory text about SHOP enrollment help, authorization requirements, and search instructions. The search form includes fields for 'ZIP code', 'Distance' (a dropdown menu), 'Agent/broker last name', 'National Producer Number (NPN)', and 'Language' (a dropdown menu). A green 'SEARCH' button is located at the bottom right of the form area.

HealthCare.gov Create enrollment Manage employees My account Get Help Español

OK: Change state Log out mowraitr@fakeinbox.com

Find an agent/broker

## Find an agent/broker

You can choose to get SHOP enrollment help from an agent or broker registered to work with SHOP. Each agent or broker listed in the search has completed the SHOP privacy and security agreement and is able to assist you.

If you decide to do so, you must authorize them to act on your behalf. You can remove authorization at any time.

To search for an agent/broker, enter information about your location and preferred language. You can also enter your agent/broker's information if available.

If you don't want to find an agent/broker, click one of the tabs above to continue your application.

**ZIP code**

**Distance**

**Agent/broker last name**

**National Producer Number (NPN)**

**Language**

SEARCH

# FF-SHOP Employer Authorization

Find an agent/broker

## Search results

BACK TO FIND AN AGENT/BROKER

Your agent/broker search results are listed below. Click the agent/broker first or last name to get more details, authorize the agent/broker to act on your behalf, or remove authorization.

Agents/brokers found 1 - 10 of 17

First name	Last name	Email address	Phone number	ZIP code	Languages
<a href="#">PATRICK</a>	<a href="#">BARNES</a>	<a href="#">Agentjamesb0...</a>	(301) 372-8527	28786	-
<a href="#">PATRICK</a>	<a href="#">BARNES</a>	<a href="#">AGENT3IMPL@Y...</a>	(222) 333-4444	28786	-
<a href="#">Mattie</a>	<a href="#">Boyd</a>	<a href="#">Agent1Impl@y...</a>	(333) 444-5555	78749	-
<a href="#">John</a>	<a href="#">CARSON</a>	<a href="#">agent00714@y...</a>	(601) 856-3063	39208	-
<a href="#">John</a>	<a href="#">Carson</a>	<a href="#">bufrobad@fak...</a>	(601) 856-3063	39208	-
<a href="#">John</a>	<a href="#">Carson</a>	<a href="#">pioloura@fak...</a>	(601) 856-3063	39208	-
<a href="#">John</a>	<a href="#">Carson</a>	<a href="#">cheatost@fak...</a>	(601) 856-3063	39208	-
<a href="#">John</a>	<a href="#">Carson</a>	<a href="#">wouphosi@fak...</a>	(601) 856-3063	39208	-
<a href="#">John</a>	<a href="#">Carson</a>	<a href="#">crainhea@fak...</a>	(601) 856-3063	39208	-

Find an agent/broker

## Agent/broker details

BACK TO SEARCH RESULTS

Once you authorize a SHOP agent or broker to access your account, he or she will be able to see your business and employee information. For your privacy and security, confirm that your preferred agent or broker is licensed and in good standing with your state department of insurance before finalizing your authorization. If you have questions about what this means or if you need the phone number for your state department of insurance, call the SHOP Call Center at 1-800-706-7893 Monday - Friday, 9 a.m. - 7 p.m. EST. TTY users should call 711 to reach a call center representative.

1 - 1 of 1

**Boyd, Mattie**

**Boyd Broker Inc**  
 4313 CLARNO DR  
 Austin, TRAVIS, TX, 78749

**Email address:** [Agent1Impl@yopmai...](#)  
**Agency phone number:** (333) 444-5555

**Working hours:** 08:00 - 16:00  
**Preferred spoken language:** -  
**National Producer Number (NPN):** 524207

**AUTHORIZE AN AGENT/BROKER**

# FF-SHOP Agent Broker Portal

The screenshot shows the 'Manage clients' page in the HealthCare.gov FF-SHOP Agent Broker Portal. The page has a dark blue header with the HealthCare.gov logo and navigation links: 'Manage clients', 'Manage enrollments', 'My account', and 'Get Help'. A 'Español' language toggle is also present. A dark blue bar below the header contains a 'Log out AGENT11MPL' button. On the left, a 'My clients' sidebar is visible. The main content area has a 'Manage clients' title and a brief instruction: 'You can add, search, and view client information here. Use the Download template and Upload Client List to manage your clients.' Below this is a 'DOWNLOAD IN EXCEL' button. A search section includes a 'Search' input field, a 'Within' dropdown menu set to 'Client name', and a 'SEARCH' button. The 'Client list' section shows '1 - 1 of 1' results. The table below has columns for 'Client name', 'Phone number', 'Company', 'Client status', and 'Action'. The single entry is for 'Carson, John' with phone number '(601) 856-3063', company 'IssuerTesting\_Scenario22', and status 'Prospective client'. The 'Action' column contains a 'Client notes' link.

HealthCare.gov

Manage clients Manage enrollments My account Get Help

Español

Log out AGENT11MPL

My clients

## Manage clients

You can add, search, and view client information here. Use the Download template and Upload Client List to manage your clients.

DOWNLOAD IN EXCEL

Search

Within

Client name

SEARCH

1 - 1 of 1

### Client list

Client name	Phone number	Company	Client status	Action
Carson, John	(601) 856-3063	IssuerTesting_Scenario22	Prospective client	<a href="#">Client notes</a>

# FF-SHOP Agent Broker Portal

The screenshot shows the 'Manage clients' page in the HealthCare.gov FF-SHOP Agent Broker Portal. The page has a dark blue header with the 'HealthCare.gov' logo and navigation links for 'Manage clients', 'Manage enrollments', 'My account', and 'Get Help'. A 'Español' language toggle is also present. A 'Log out AGENT11MPL' button is located in the top right. On the left, there is a 'My clients' sidebar. The main content area is titled 'Manage clients' and includes a brief instruction: 'You can add, search, and view client information here. Use the Download template and Upload Client List to manage your clients.' Below this is a 'DOWNLOAD IN EXCEL' button. A search section contains a 'Search' input field, a 'Within' dropdown menu set to 'Client name', and a 'SEARCH' button. A 'Client list' section shows '1 - 1 of 1' results. The table below has columns for 'Client name', 'Phone number', 'Company', 'Client status', and 'Action'. The single entry is for 'Carson, John' with phone number '(601) 856-3063', company 'IssuerTesting\_Scenario22', and status 'Client'. An 'Action' link labeled 'Client notes' is provided for this entry.

HealthCare.gov Manage clients Manage enrollments My account Get Help Español

Log out AGENT11MPL

My clients

## Manage clients

You can add, search, and view client information here. Use the Download template and Upload Client List to manage your clients.

DOWNLOAD IN EXCEL

Search Within

Client name SEARCH

1 - 1 of 1

### Client list

Client name	Phone number	Company	Client status	Action
<a href="#">Carson, John</a>	(601) 856-3063	IssuerTesting_Scenario22	Client	<a href="#">Client notes</a>

# Questions?



For questions/comments about agent/broker participation in the FFM:  
[FFMProducer-AssisterHelpDesk@cms.hhs.gov](mailto:FFMProducer-AssisterHelpDesk@cms.hhs.gov)

For questions/comments about the FFM application & enrollment:  
1-800-318-2596 (TTY: 1-855-889-4325) available 7 days a week, 24 hours a day

For questions/comments about the FF-SHOP:  
1-800-706-7893 (TTY: 711) available M-F 9:00am-7:00pm ET

# Additional Resources

**ACA rules, guidance, Agent and Broker Resource Page:**

[www.cms.gov/cciiio/programs-and-initiatives/health-insurance-marketplaces/a-b-resources.html](http://www.cms.gov/cciiio/programs-and-initiatives/health-insurance-marketplaces/a-b-resources.html)

**Online SHOP Information and tools:** [www.HealthCare.gov/small-businesses](http://www.HealthCare.gov/small-businesses)

**SHOP FTE Calculator:**

[www.HealthCare.gov/small-businesses/provide-shop-coverage/fte-calculator/](http://www.HealthCare.gov/small-businesses/provide-shop-coverage/fte-calculator/)

**Information on the Small Business Healthcare Tax Credit:**

[www.irs.gov/uac/Small-Business-Health-Care-Tax-Credit-for-Small-Employers](http://www.irs.gov/uac/Small-Business-Health-Care-Tax-Credit-for-Small-Employers)

**SHOP Tax Credit Estimator:** [www.healthcare.gov/small-businesses/provide-shop-coverage/small-business-tax-credits/](http://www.healthcare.gov/small-businesses/provide-shop-coverage/small-business-tax-credits/)

**SHOP Premium Estimator Tool:** [www.healthcare.gov/see-plans/en-US/small-business/](http://www.healthcare.gov/see-plans/en-US/small-business/)

**FFM Premium Estimator Tool:** [www.healthcare.gov/find-premium-estimates/](http://www.healthcare.gov/find-premium-estimates/)