



# Eligibility and Enrollment in the FFM: Twelve Tips for Agents and Brokers

*Agents and Brokers:  
Tips for Enrollment  
and Eligibility*

*January 2015*

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



# Webinar Agenda

- Session Guidelines
- Webinar Objectives
- Presentation of Twelve Tips
- Summary of Lessons Learned
- Question and Answer (Q&A) Session
- Resources
- Closing Remarks

# Session Guidelines



## Duration

This is a 90-minute webinar session.



## Questions

Questions will be taken at the end of the presentation.



## Contact

For questions regarding logistics, contact the REGTAP Registrar at [registrar@REGTAP.info](mailto:registrar@REGTAP.info) or (800) 257-9520.

Documented Q&As will be posted in the coming weeks.

# Eligibility and Enrollment in the FFM: Twelve Tips for Agents and Brokers



*Webinar  
Objectives*

# Webinar Objectives

Topics to be covered:

- Crediting an agent/broker for an enrollment transaction
- Locations for capturing the National Producer Number (NPN) on Federally-facilitated Marketplace (FFM) applications
- Assisting consumers with an application that stalled in the FFM
- Prohibition on qualified health plan (QHP) issuers denying enrollment to qualified individuals
- Using Marketplace pathway for QHP issuers and web-brokers who do not support Direct Enrollment

# Webinar Objectives (continued)

- Assisting consumers in reporting change of life circumstances
- Assisting consumers that are eligible for other government sponsored health coverage to determine whether they are eligible for FFM coverage
- Citizenship requirements for FFM eligibility
- Eligibility requirements for advance payments of the premium tax credit
- Eligibility requirements for cost-sharing reductions
- Look up clients' applications
- Registering to participate in the FFM

# Eligibility and Enrollment in the FFM: Twelve Tips for Agents and Brokers



*Presentation of  
Twelve Tips*

# Topic: Crediting an agent or broker for an enrollment transaction

## Tip #1

*Did you know:*

A QHP issuer can credit an agent or broker for an enrollment even if the agent or broker was not initially reflected on the 834 enrollment transaction.

# Question 1

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:

- A. CCIIO directly
- B. The FFM Producer and Assister Help Desk
- C. The respective QHP issuer



# Question 1

## *Answer*

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:



- A. CCIIO directly
- B. The FFM Producer and Assister Help Desk
- ✔ C. **The respective QHP issuer**

# Question 1

## *Answer (continued)*

- *The agent or broker should contact the respective QHP issuer directly to discuss the specific situation.*
- *Agents or brokers who are assisting consumers with enrollment in QHPs offered through the FFM must have a current FFM registration at the time they are providing assistance.*
- *CMS expects QHP issuers to confirm all affiliated agents' and brokers' licensure statuses, and verify that they fulfilled the applicable FFM registration requirements, before providing compensation for Marketplace transactions.*

## Question 2

If an agent or broker has any questions about how the QHP issuer would credit the agent's or broker's NPN for an enrollment transaction, the agent or broker should contact:

- A. CCIIO directly
- B. The FFM Producer and Assister Help Desk
- C. The respective QHP issuer



# Question 2

## Answer

If an agent or broker has any questions about how the QHP issuer would credit the agent's or broker's NPN for an enrollment transaction, the agent or broker should contact:

- A. CCIIO directly
- B. The FFM Producer and Assister Help Desk
- ✓ **C. The respective QHP issuer**



*The agent or broker should contact the respective QHP issuer directly to discuss any questions related to retroactively adding the agent's or broker's NPN to an enrollment transaction.*

# Topic: Locations for capturing the NPN on FFM applications

## Tip #2

*Did you know:*

The location where the NPN can be captured when an agent or broker is assisting a qualified individual, employer, or employee with FFM enrollment is dependent on a number of factors.

# Tip #2 (continued)

The key factors include:

Marketplace

- Individual Marketplace
- Small Business Health Options Program (SHOP) Marketplace

Enrollment Type

- Passive Re-Enrollment
- Active Re-Enrollment
- New Application

Enrollment  
Pathway

- Direct Enrollment
- Marketplace

Application Form

- New Streamlined Application
- Classic FFM Application

Timing of the  
NPN Entry

- During Eligibility Application Process
- During Plan Selection Process

## Tip #2 (continued)

For consumers enrolling in the Individual Marketplace, there are five ways the NPN can be entered:

1. Passive re-enrollment
2. Direct enrollment
3. Marketplace when entering NPN during the application using the classic application
4. Marketplace when entering NPN during the application using the new streamlined application
5. Marketplace when entering NPN during plan selection



# Tip #2 (continued)

## 1. *Passive re-enrollment*

- If a consumer is passively re-enrolling in the Individual Marketplace, and the consumer's 2014 Plan Year application included an NPN, that same NPN will be pre-populated in the 2015 Plan Year application and submitted with the re-enrollment transaction.
- No manual entry of the NPN is needed.



# Tip #2 (continued)

## 2. *Direct enrollment*

- If an FFM-registered agent or broker is assisting a consumer with enrollment via Direct Enrollment, the NPN information is electronically submitted in accordance with how the Direct Enrollment account was set up by the respective QHP issuer or web-broker.
- No manual entry of an NPN is required.
- Each time a Direct Enrollment transaction occurs, an NPN can be sent with the transaction.

# Tip #2 (continued)

## 3. Marketplace when entering NPN during the application using the classic application

Help applying for coverage

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

# Tip #2 (continued)

## 4. Marketplace when entering NPN during the application using the new streamlined application

**Step 1:** Click the checkbox stating, “Another person is helping me complete my application.”

The screenshot shows a web application form titled "Continue your application". Below the title is a sub-header "Household contact information" and a note: "After you complete this section, you'll answer a few more questions before you compare plans." and "These fields are optional: middle name, suffix, and preferred written and spoken languages." The form contains several input fields: "First name", "Middle", "Last name", "Suffix" (dropdown), "Email address", "Phone number", "Home" (dropdown), "Preferred written language" (dropdown set to "English"), and "Preferred spoken language" (dropdown set to "English"). There are two checkboxes: "Go paperless! Get your notices by email, instead of paper copies in your mailbox." and "Another person is helping me complete my application." The second checkbox is highlighted with a red border. Below this is the "Home address" section with a note: "Enter the permanent address where everyone on your application lives. The apt./ste. # field is optional." It includes fields for "Street address", "Apt./Ste. #", "City", "State" (dropdown set to "Kansas"), "ZIP code", and a final dropdown field.

# Tip #2 (continued)

## 4. Marketplace when entering NPN during the application using the new streamlined application

**Step 2:** Enter the agent's or broker's NPN into the "ID number" field.

**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.

First name Middle Last name Suffix

Email address Phone number 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.

First name Middle Last name Suffix

Select type Organization name **ID number**

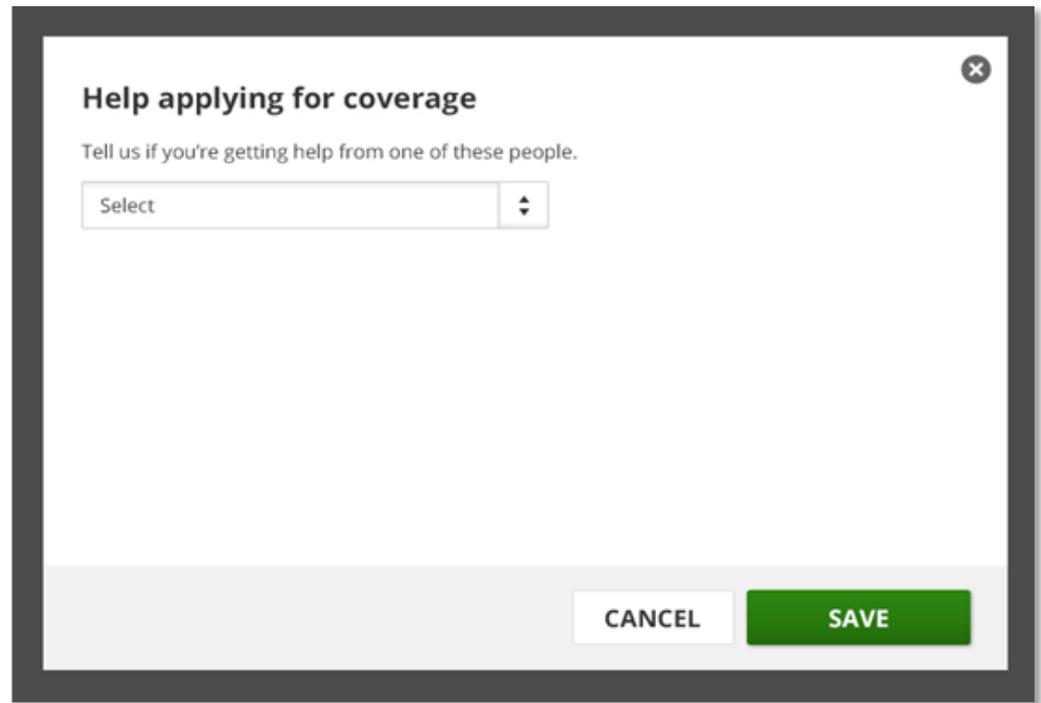
**Home address**  
Enter the permanent address where everyone on your application lives. The apt./ste. # field is optional.

Street address Apt./Ste. #

# Tip #2 (continued)

## *5. Marketplace when entering NPN during plan selection*

**Option 1:** The consumer can add the agent or broker when prompted to indicate who is helping with the application.



The screenshot shows a dialog box titled "Help applying for coverage" with a close button (X) in the top right corner. Below the title, the text reads "Tell us if you're getting help from one of these people." There is a dropdown menu with the word "Select" and a downward arrow icon. At the bottom of the dialog, there are two buttons: "CANCEL" and "SAVE".

# Tip #2 (continued)

## 5. Marketplace when entering NPN during plan selection

**Option 2:** If the consumer wishes to enter or change an NPN during plan selection in the Marketplace pathway, the consumer can click on “Is a new or different assister helping you with your enrollment?” and add the new NPN.

**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 premium tax credit task.

**Blue Value Silver**  
Plan ID: 46944AL0410001  
Health plan for Suzanne Carson  
John Carson  
Estimated Effective Date 09/01/2014

Health Plan Monthly Premium	\$603.10
Premium tax credit	\$418.28
Health Plan Monthly Premium	\$184.82

[CHANGE SELECTION](#)

**Blue Value Silver**  
Plan ID: 46944AL0410001  
Health plan for Anna Carson  
Estimated Effective Date 09/01/2014

Health Plan Monthly Premium	\$120.32
Premium tax credit	\$86.72
Health Plan Monthly Premium	\$33.60

[CHANGE SELECTION](#)

[Is a new or different assister helping you with your enrollment?](#)

**You can change effective dates.**  
[Learn more](#) about your dates of coverage. [CHANGE EFFECTIVE DATE](#)

**Total: \$218.42**  
Monthly premium total (with tax credit)

I understand that I will lose my premium tax credit if I'm found eligible for other minimum essential coverage, like coverage through my job or Medicare. I also understand that if I don't contact the Marketplace about my eligibility for other coverage, I will lose my coverage through the Marketplace.

[CONFIRM](#)

# Topic: Assisting consumers with an application that stalled in the FFM

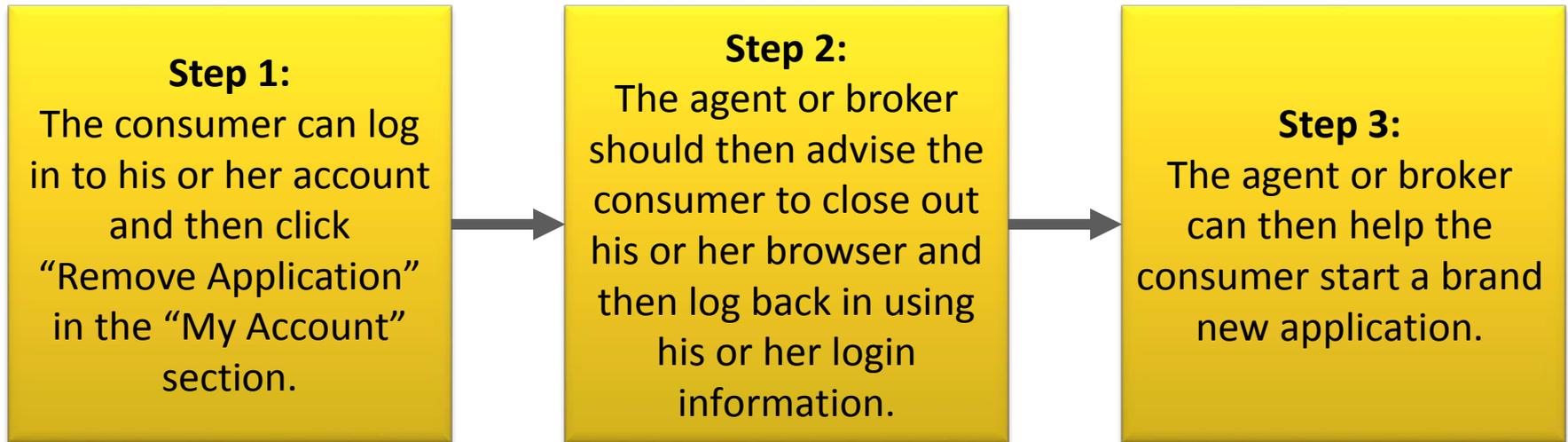
## Tip #3

*Did you know:*

If a consumer previously created a Marketplace account and tried to file an application online but the application is not processing, the agent or broker can advise the consumer to remove the ongoing or submitted application.

# Tip #3 (continued)

There are three main steps to correct the issue:



If this option does not work, the agent or broker should conduct a 3-way call with the Marketplace Call Center and the consumer.

# Topic: Prohibition on QHP issuers denying enrollment to qualified individuals

## Tip #4

*Did you know:*

QHP issuers cannot deny enrollment to qualified individuals who wish to enroll in coverage through the Marketplace during open enrollment or a special enrollment period.

# Question 1

Tom was enrolled in a QHP last year, but did not pay the premiums and was terminated from his plan. This year he wants to enroll in a new QHP during open enrollment. Can the QHP issuer deny his enrollment?

- A. Yes
- B. No
- C. It depends



# Question 1

## Answer

Tom was enrolled in a QHP last year, but did not pay the premiums and was terminated from his plan. This year he wants to enroll in a new QHP during open enrollment. Can the QHP issuer deny his enrollment?



- A. Yes
- B. No
- C. It depends

*Tom cannot be denied for enrollment provided he meets the eligibility requirements for the FFM. However, his coverage may be terminated if he does not pay the premiums, in accordance with the plan's policies.*

## Question 2

Can an agent or broker assist Tom with his 2015 enrollment?

- A. Yes
- B. No
- C. It depends



## Question 2

### Answer

Can an agent or broker assist Tom with his 2015 enrollment?

- ✓ A. Yes
- B. No
- C. It depends



*An agent or broker can assist Tom with his 2015 enrollment.*

*A QHP cannot deny an eligible consumer because he was assisted by an agent or broker.*

# Topic: Using Marketplace pathway for QHP issuers and web-brokers who do not support Direct Enrollment

## Tip #5

### *Did you know:*

If a consumer wishes to select a QHP whose issuer does not support the Direct Enrollment pathway, or if the Direct Enrollment pathway is temporarily unavailable, the agent can direct him or her to the Marketplace pathway.

The agent or broker can assist the consumer as he or she completes the application and plan selection process online through the Marketplace website.

# Topic: Assisting consumers in reporting change of life circumstances

## Tip #6

*Did you know:*

Agents and brokers can assist consumers in reporting change of life circumstances through HealthCare.gov.

# Tip #6 (continued)



- Change in life circumstances include:
  - Having a baby
  - Moving to a new state
  - Certain changes in income
  - Changes in family size
  - Gaining membership in a federally recognized tribe or status as an Alaska Native Claims Settlement Act Corporation (ANCSA) shareholder
- If an individual has a change of life circumstance, he or she may qualify for a special enrollment period (SEP).

## Tip #6 (continued)

- A consumer can also qualify for an SEP if he or she experienced an exceptional circumstance that kept him/her from enrolling (e.g., was hospitalized during open enrollment).

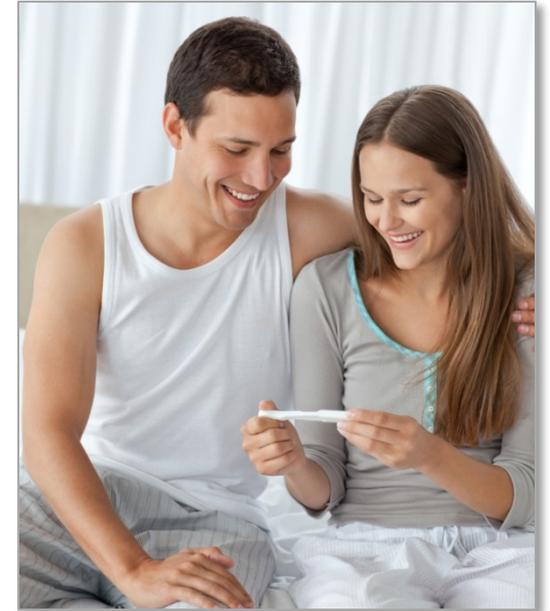


- For more information on SEPs, visit <https://www.healthcare.gov/glossary/special-enrollment-period/>.

# Question 1

Molly enrolled in a QHP during the 2015 Open Enrollment period, but finds out after it closes that she is pregnant. Based on this information:

- A. Molly is eligible for an SEP as soon as she finds out she is pregnant
- B. Molly is eligible for an SEP once she has her baby
- C. Molly does not qualify for an SEP

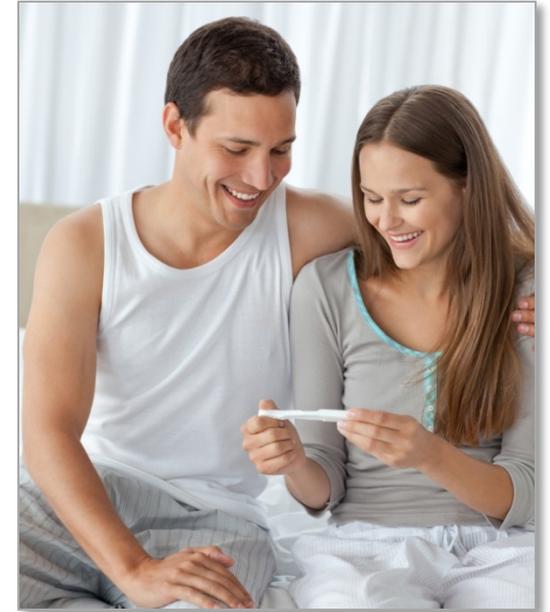


# Question 1

## Answer

Molly enrolled in a QHP during the 2015 Open Enrollment period, but finds out after it closes that she is pregnant. Based on this information:

- A. Molly is eligible for an SEP as soon as she finds out she is pregnant
- ✓ **B. Molly is eligible for an SEP once she has her baby**
- C. Molly does not qualify for an SEP



*Her agent or broker can assist her in reporting the change to her family size and making allowed changes to her QHP enrollment.*

## Question 2

Peter was laid off and found a new job with a lower salary. He is not sure if the change will impact the amount of advance payments of the premium tax credit he is currently receiving, or if his lower salary now qualifies him for Medicaid coverage in his state. How can an agent or broker help him?

- A. Encourage and assist Peter to report his new income to the Marketplace as a change of life circumstance
- B. Do nothing, because changes in income cannot qualify as change of life circumstances



## Question 2

### *Answer*

Peter was laid off and found a new job with a lower salary. He is not sure if the change will impact the amount of advance payments of the premium tax credit he is currently receiving, or if his lower salary now qualifies him for Medicaid coverage in his state. How can an agent or broker help him?

- ✔ **A. Encourage and assist Peter to report his new income to the Marketplace as a change of life circumstance**
- B. Do nothing, because changes in income cannot qualify as change of life circumstances



## Question 2

### Answer (continued)

- *Peter's income change qualifies as a change in life circumstance. When Peter reports this change, the Marketplace will automatically update its calculations for the amount of Peter's advance payments of the premium tax credit.*
- *Note that if the Marketplace determines or assesses that Peter's new income makes him Medicaid eligible, it will transfer Peter's information to the Medicaid agency in Peter's state for enrollment in coverage.*
- *Consumers can enroll in Medicaid at any point in time during the year.*

**Topic: Assisting consumers that are eligible for other government sponsored health coverage to determine whether they are eligible for FFM coverage**

**Tip #7**

*Did you know:*

If a consumer is eligible for government sponsored health coverage, he or she may or may not be able to enroll in a QHP through the FFM.

# Question 1

Fred is 73 years old and a United States (U.S.) citizen. He is currently enrolled in Medicare, but is interested in exploring his option for enrolling in a QHP in the FFM. An agent or broker assisting Fred should:

- A. Not enroll him in a QHP through the FFM
- B. Ask for additional information
- C. Enroll him in a QHP through the FFM to ensure he has coverage



# Question 1

## Answer

Fred is 73 years old and a United States (U.S.) citizen. He is currently enrolled in Medicare, but is interested in exploring his option for enrolling in a QHP in the FFM. An agent or broker assisting Fred should:

- ✔ **A. Not enroll him in a QHP through the FFM**
- B. Ask for additional information
- C. Enroll him in a QHP through the FFM to ensure he has coverage



*If an individual is eligible for Medicare, he/she is not eligible to participate in the FFM. It is against the law for someone who knows that an individual has Medicare coverage to sell that individual a Marketplace plan.*

## Question 2

Diane was notified by the FFM that she may be eligible for Medicaid, but she has not heard anything from the state and is concerned that Open Enrollment is closing. An agent or broker assisting Diane should:



- A. Advise her to wait until she receives notification from her state Medicaid agency
- B. Advise her to contact her state Medicaid agency
- C. Assist her in enrolling in a QHP to ensure she has coverage

## Question 2

### Answer

Diane was notified by the FFM that she may be eligible for Medicaid, but she has not heard anything from the state and is concerned that Open Enrollment is closing. An agent or broker assisting Diane should:



- A. Advise her to wait until she receives notification from her state Medicaid agency
- ✔ **B. Advise her to contact her state Medicaid agency**
- C. Assist her in enrolling in a QHP to ensure she has coverage

*If Diane has not heard back from her state agency she should follow up to confirm whether she is eligible for Medicaid coverage.*

# Question 2

## *Answer (continued)*

- *Note that if she is not eligible, or is not interested in Medicaid after speaking with the agency, an agent or broker can help her enroll in a QHP.*
- *However, an individual is not eligible for advance payments of the premium tax credit through the FFM if he/she is eligible for Medicaid or the Children's Health Insurance Program (CHIP) coverage.*



## Question 2

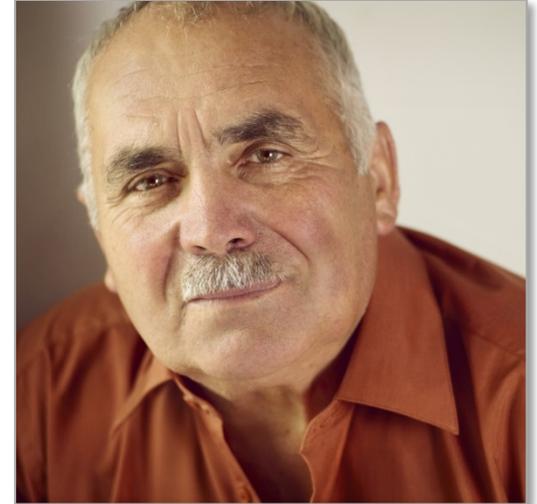
### *Answer (continued)*

- ***Assessed Eligible:** The Marketplace makes an initial decision that a consumer is potentially eligible for Medicaid or CHIP. The Marketplace will then transfer the consumer's information to the state Medicaid or CHIP agency for a final eligibility determination. The state will then notify the consumer and the Marketplace of the final eligibility determination.*
- ***Determined Eligible:** The Marketplace makes a final determination of the consumer's eligibility for Medicaid or CHIP. The Marketplace will issue a determination notice to the consumer and then transfer the determination information to the state Medicaid or CHIP agency for enrollment in coverage.*

## Question 3

Jacob is currently enrolled in the Veterans Health Administration (VA) health care program, but is not sure if he needs additional coverage through the FFM. Based on his VA coverage, does Jacob need additional coverage?

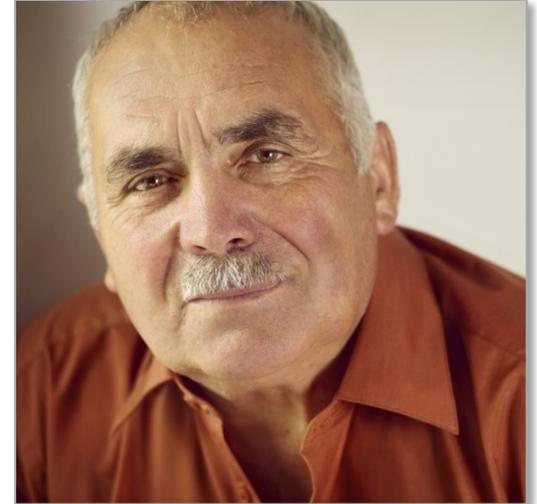
- A. Yes
- B. No
- C. It depends



# Question 3

## Answer

Jacob is currently enrolled in the Veterans Health Administration (VA) health care program, but is not sure if he needs additional coverage through the FFM. Based on his VA coverage, does Jacob need additional coverage?



- A. Yes
- B. No
- C. It depends

*VA coverage meets the requirements for minimal essential coverage under the Affordable Care Act. If Jacob is enrolled in VA health coverage, he does not need to enroll in coverage through the FFM. However, if Jacob chooses to enroll in a QHP through the FFM, he would have to cancel his enrollment in VA health coverage in order to be eligible for advance payments of the premium tax credit.*

# Topic: Citizenship requirements for FFM eligibility

## Tip #8

*Did you know:*

To qualify for coverage through the FFM, a consumer must be a U.S. citizen or U.S. national, or be a non-citizen who is lawfully present in the U.S. for the entire period for which enrollment is sought.

# Question 1

Mark is a permanent resident of Texas but works in Oklahoma, and is seeking coverage in Texas through the FFM. Based on this information, what information is needed about Mark to assist him in obtaining an eligibility determination through the FFM?



- A. Mark is a citizen or a lawfully present resident
- B. Mark filed taxes in Texas during 2013
- C. Mark's employment location is in Oklahoma

# Question 1

## Answer

Mark is a permanent resident of Texas but works in Oklahoma, and is seeking coverage in Texas through the FFM. Based on this information, what information is needed about Mark to assist him in obtaining an eligibility determination through the FFM?



- ✓ **A. Mark is a citizen or a lawfully present resident**
- B. Mark filed taxes in Texas during 2013
- C. Mark's employment location is in Oklahoma

*The Marketplace will confirm that the consumer is a U.S. citizen, U.S. national, or lawfully present resident of the state in which he or she is seeking coverage. The state in which Mark is employed is not relevant for coverage through the FFM.*

# Question 1

## *Answer (continued)*

- *Note that the agent or broker should also ask whether Mark has access to affordable health coverage under an employer-sponsored plan.*
- *If Mark does have affordable employer-sponsored coverage, then he meets the minimum essential coverage requirement, and therefore would not need health coverage through the FFM.*



## Question 2

Greta has a Permanent Resident Card, or “Green Card.” Based on this information, Greta is likely eligible for:

- A. Health coverage through the FFM
- B. No health coverage through the FFM as she is not a U.S. citizen or U.S. national
- C. It depends



# Question 2

## Answer

Greta has a Permanent Resident Card, or “Green Card.” Based on this information, Greta is likely eligible for:

- ✔ **A. Health coverage through the FFM**
- B. No health coverage through the FFM as she is not a U.S. citizen or U.S. national
- C. It depends



*Lawfully present residents are eligible for coverage through the FFM in the state in which they reside provided they are able to show the appropriate documentation and the Marketplace is able to verify their immigration status.*

# Topic: Eligibility requirements for advance payments of the premium tax credit

## Tip #9

### *Did you know:*

Eligibility for advance payments of the premium tax credit requires that the individual is ineligible for other coverage, including government-sponsored coverage, affordable employer-sponsored insurance, or certain other minimal essential coverage.

# Tip #9 (continued)

- Eligibility is also based on family size and household income.
- Household income between 100% and 400% of the Federal Poverty Level (FPL) meets the income requirements for advance payments of the premium tax credit.

Household Size	100%	138%**	150%**	200%**	250%**	300%**	400%**
1	\$11,670	\$16,105	\$17,505	\$23,340	\$29,175	\$35,010	\$46,680
2	15,730	21,707	23,595	31,460	39,325	47,190	62,920
3	19,790	27,310	29,685	39,580	49,475	59,370	79,160
4	23,850	32,913	35,775	47,700	59,625	71,550	95,400
5	27,910	38,516	41,865	55,820	69,775	83,730	111,640
6	31,970	44,119	47,955	63,940	79,925	95,910	127,880
7	36,030	49,721	54,045	72,060	90,075	108,090	144,120
8	40,090	55,324	60,135	80,180	100,225	120,270	160,360

\*Chart is for 48 contiguous states and the District of Columbia; for Hawaii and Alaska please visit the website of the HHS Assistant Secretary for Planning and Evaluation (ASPE): <http://aspe.hhs.gov/poverty/14poverty.cfm>.

\*\*Dollar amounts are calculated based on 100% column; rounding rules may vary across federal, state, and local programs.

# Question 1

Tara is a single person with an income at 175% of the FPL. She enrolled in a QHP through the FFM and received advance payments of the premium tax credit last year. She is interested in enrolling in a different QHP this year, but is not sure she can change and still receive the credit. Based on this information, Tara is:



- A. Only eligible for advance payments of the premium tax credit if she keeps her current plan
- B. Only eligible for advance payments of the premium tax credit if her income has not increased since last year
- C. Eligible for advance payments of the premium tax credit since her income is under 400% of the FPL
- D. Not enough information is known to determine her status

# Question 1

## Answer

Tara is a single person with an income at 175% of the FPL. She enrolled in a QHP through the FFM and received advance payments of the premium tax credit last year. She is interested in enrolling in a different QHP this year, but is not sure she can change and still receive the credit. Based on this information, Tara is:



- A. Only eligible for advance payments of the premium tax credit if she keeps her current plan
- B. Only eligible for advance payments of the premium tax credit if her income has not increased since last year
- C. Eligible for advance payments of the premium tax credit since her income is under 400% of the FPL
-  **D. Not enough information is known to determine her status**

# Question 1

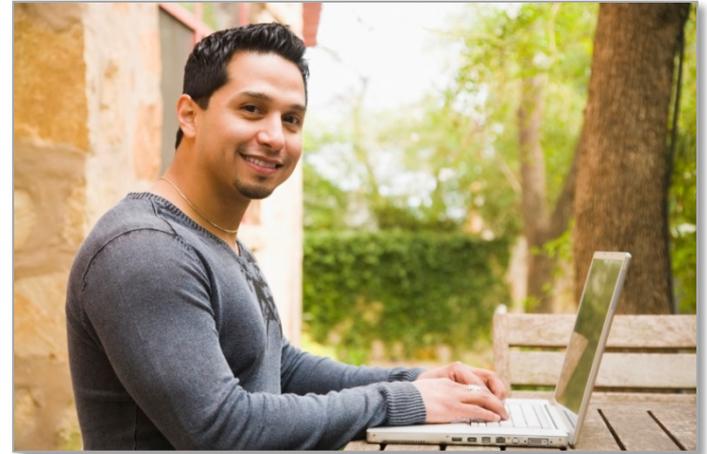
## *Answer (continued)*

- *Based on her income Tara appears eligible for advance payments of the premium tax credit, but before determining her eligibility for the tax credit, it will be important to confirm that she is not eligible for any other health coverage, through an employer or otherwise.*



## Question 2

Robert had health coverage through the FFM last year and received advance payments of the premium tax credit because his family income was at 250% of the FPL. His family income has not changed, but his employer decided to give its employees the option of health coverage through the SHOP. However, the employer is not covering any of the premium costs. Is Robert still eligible for advance payments of the premium tax credit?

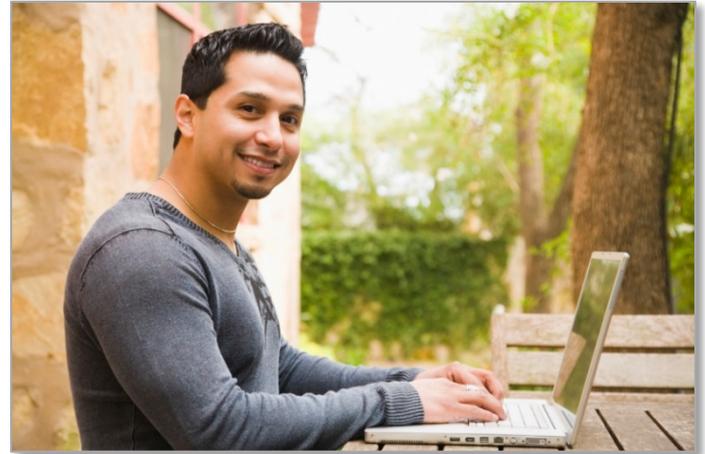


- A. Yes
- B. No
- C. It depends

# Question 2

## *Answer*

Robert had health coverage through the FFM last year and received advance payments of the premium tax credit because his family income was at 250% of the FPL. His family income has not changed, but his employer decided to give its employees the option of health coverage through the SHOP. However, the employer is not covering any of the premium costs. Is Robert still eligible for advance payments of the premium tax credit?



A. Yes

B. No

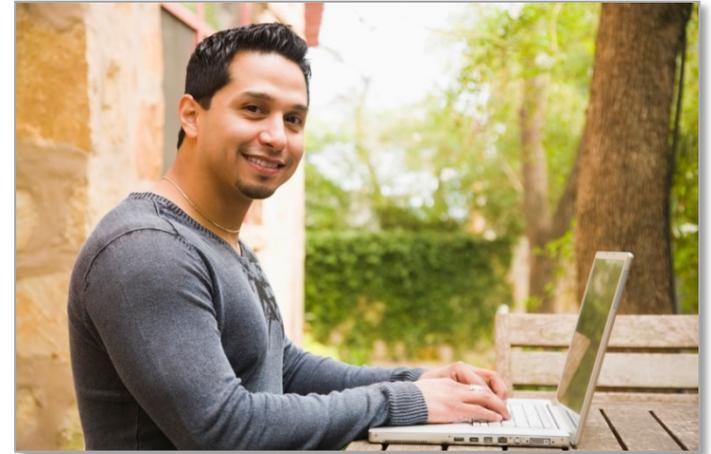


**C. It depends**

# Question 2

## *Answer (continued)*

- *It depends; Robert is no longer eligible for advance payments of the premium tax credit if he enrolls in his employer-sponsored insurance through the SHOP.*
- *However, if his family's share of the annual premiums will exceed 9.5% of the family's annual income, then it does not qualify as affordable employer-sponsored insurance and he may be able to enroll through the Individual Marketplace and continue receiving advance payments of the tax credit.*



# Topic: Eligibility requirements for cost-sharing reductions

## Tip #10

*Did you know:*

Cost-sharing reductions can make coverage more affordable by limiting out-of-pocket costs to the consumer.

# Tip #10 (continued)

To be eligible for cost-sharing reductions, an individual must:

- Have an income at or below 250% of the FPL (\$59,625 annually for a family of 4 in 2014)
- Receive advance payments of the premium tax credit
- Enroll in a Marketplace Silver level plan



## Tip #10 (continued)

- Members of federally-recognized tribes and shareholders of ANCSA corporations have no cost sharing for essential health benefits if their household income is at or below 300% of the FPL (Up to approximately \$71,550 for a family of 4 (\$89,460 in Alaska) in 2014).
- This is available in any metal level Marketplace health plan, including Bronze level plans, which have the lowest premiums.

# Question 1

Susan was enrolled in a Marketplace Silver level plan last year and was receiving advance payments of the premium tax credit. A few months ago she lost her job so this year she wants to check if she is eligible for cost-sharing reductions as well. Does she qualify this year?

- A. Yes
- B. No
- C. It depends



# Question 1

## Answer

Susan was enrolled in a Marketplace Silver level plan last year and was receiving advance payments of the premium tax credit. A few months ago she lost her job so this year she wants to check if she is eligible for cost-sharing reductions as well. Does she qualify this year?

- A. Yes
- B. No



- C. It depends**

*While it may be possible that she qualifies for cost-sharing reductions, she may qualify for the Medicaid program in her state. If so, Susan will not be able to receive advance payments of the premium tax credit or cost-sharing reductions if she remains enrolled in a QHP through the FFM, but she will be able to receive health coverage through Medicaid.*



## Question 2

Marco has an income at 275% of the FPL, is enrolled in a Silver level plan with advance payments of the premium tax credit, and was told by his friend that he would not need to pay any cost-sharing as a result. Did Marco's friend give him correct information?

- A. Yes
- B. No
- C. It depends



## Question 2

### Answer

Marco has an income at 275% of the FPL, is enrolled in a Silver level plan with advance payments of the premium tax credit, and was told by his friend that he would not need to pay any cost-sharing as a result. Did Marco's friend give him correct information?



- A. Yes
- ✓ B. No
- C. It depends

*Marco's income is above the cost-sharing reduction eligibility threshold of 250% of the FPL. However he may be eligible for zero cost sharing if he is a member of a federally recognized tribe or an ANCSA corporation shareholder.*

# Question 2

## *Answer (continued)*

- *Please note that if Marco is not a member of a federally recognized tribe or an ANCSA corporation shareholder, but has an income under 250% of the FPL, he would qualify for cost-sharing reductions, but that would not necessarily mean that he would have no cost-sharing responsibilities.*



# Topic: Look up clients' applications

## Tip #11

*Did you know:*

Agents and brokers who use the Direct Enrollment pathway to enroll consumers (through the website of a QHP issuer or web-broker) can access their client applications directly and see a record of the client applications that they have started or submitted to the Marketplace.

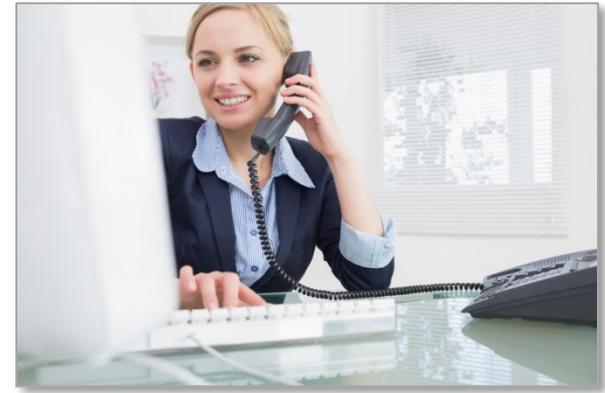
# Tip #11 (continued)

- By using the “Look up a client’s existing application” function of the Direct Enrollment Pathway, agents and brokers can enter the consumer’s information or application ID.
- The system will look up available records for that consumer.
- The agent or broker can then view the existing application and assist in its completion.



# Tip #11 (continued)

- For more information about how agents and brokers may assist consumers, please review our guidance:



<http://www.cms.gov/CCIIO/programs-and-initiatives/health-insurance-marketplaces/a-b-resources.html>

<http://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Downloads/Operational-Tips-Enrollment-11-12-2014-508.pdf>

# Topic: Registering to participate in the FFM

## Tip #12

### *Did you know:*

It is not too late to register as an agent or broker in the FFM. There is no calendar deadline to complete registration requirements for the FFM.

Marketplace-specific requirements must be met before assisting qualified individuals, employers, and employees with eligibility determinations and enrollment for the 2015 Plan Year.

# Question 1

An agent or broker did not participate in the FFM last year. To begin assisting consumers, the agent or broker must:

- A. Create an account on the Medicare Learning Network (MLN)<sup>®</sup>, complete assigned trainings and exams, and execute the FFM Agreement(s)
- B. Create an FFM user account and complete identity (ID) proofing on the CMS Enterprise Portal
- C. Both



# Question 1

## Answer

An agent or broker did not participate in the FFM last year. To begin assisting consumers, the agent or broker must:

- A. Create an account on the Medicare Learning Network (MLN)<sup>®</sup>, complete assigned trainings and exams, and execute the FFM Agreement(s)
- B. Create an FFM user account and complete identity (ID) proofing on the CMS Enterprise Portal
- ✓ **C. Both**



*New agents and brokers must complete Part I (MLN trainings and exams, execute FFM Agreements) and Part II (create user account and complete ID proofing) to assist consumers in the FFM.*

## Question 2

An agent or broker participated in the FFM Individual Marketplace last year. He or she plans to participate in the Individual and Federally-facilitated Small Business Health Options Program (FF-SHOP) Marketplaces this year. The agent or broker must:



- A. Use his or her existing account on the Medicare Learning Network (MLN)<sup>®</sup> to complete assigned trainings and exams, and execute the FFM Agreement(s)
- B. Create an FFM user account and complete identity (ID) proofing on the CMS Enterprise Portal
- C. Both

## Question 2

### Answer

An agent or broker participated in the FFM Individual Marketplace last year. He or she plans to participate in the Individual and Federally-facilitated Small Business Health Options Program (FF-SHOP) Marketplaces this year. The agent or broker must:



-  **A. Use his or her existing account on the Medicare Learning Network (MLN)<sup>®</sup> to complete assigned trainings and exams, and execute the FFM Agreement(s)**
- B. Create an FFM user account and complete identity (ID) proofing on the CMS Enterprise Portal
- C. Both

# Question 2

## Answer (continued)

- *Agents and brokers who participated in the FFM last year should not create a new FFM user account or complete identity proofing.*
- *However, they must complete all assigned trainings and exams as well as execute the FFM Agreements for the 2015 plan year.*
- *Agents and brokers who wish to operate exclusively within the FF-SHOP are not required to complete training and pass the accompanying exams; however, they must execute the Agent Broker Agreement for the FF-SHOP.*



# Eligibility and Enrollment in the FFM: Twelve Tips for Agents and Brokers



*Summary of  
Lessons  
Learned*

# Summary of Lessons Learned

- Tip #1** A QHP issuer can credit an agent or broker for an enrollment even if the agent or broker was not initially reflected on the 834 enrollment transaction.
- Tip #2** The specific location where the NPN can be captured when an agent or broker is assisting a qualified individual, employer or employee with FFM enrollment is dependent on a number of factors.
- Tip #3** If a consumer previously created a Marketplace account and tried to file an application online but the application is not processing, the agent or broker can advise the consumer to remove the ongoing or submitted application.
- Tip #4** QHP issuers cannot deny enrollment to qualified individuals who wish to enroll in coverage through the Marketplace.

# Summary of Lessons Learned (continued)

- Tip #5** If a consumer wishes to select a QHP whose issuer or web-broker does not support the Direct Enrollment pathway, or if the Direct Enrollment pathway is temporarily not available, he or she can always default to the Marketplace pathway.
- Tip #6** Agents and brokers can assist consumers in reporting change of life circumstances.
- Tip #7** If a consumer is eligible for government sponsored health coverage, he or she may or may not be able to enroll in a QHP through the FFM.
- Tip #8** To qualify for coverage through the FFM, a consumer must be a U.S. citizen or U.S. national, or be a non-citizen who is lawfully present in the U.S. for the entire period for which enrollment is sought.

# Summary of Lessons Learned (continued)

- Tip #9** Eligibility for advance payments of the premium tax credit. requires that the individual is ineligible for other coverage, including government-sponsored coverage, affordable employer-sponsored insurance, or certain other minimal essential coverage.
- Tip #10** Cost-sharing reductions can make coverage more affordable by limiting out-of-pocket costs to the consumer.
- Tip #11** Agents and brokers who use the Direct Enrollment pathway to enroll consumers (through the website of a QHP issuer or web-broker) can access their client applications directly and can see a record of the applications that they have created.
- Tip #12** It is not too late to register as an agent or broker in the FFM. There is no calendar deadline to complete registration requirements for the FFM.

# Eligibility and Enrollment in the FFM: Twelve Tips for Agents and Brokers



*Question and  
Answer Session*

# Questions?



To submit questions by webinar:  
*Type your question in the text box under the 'Q&A' tab  
and click 'Send' to submit your questions.*

# Additional 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 and 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 9:00 a.m. - 7:00 p.m. ET

# Eligibility and Enrollment in the FFM: Twelve Tips for Agents and Brokers



*Resources*

# Additional Resources

Resource	Link
Additional resources can be found on CCIO's agent and broker webpage:	<a href="http://www.cms.gov/CCIIO/programs-and-initiatives/health-insurance-marketplaces/a-b-resources.html">http://www.cms.gov/CCIIO/programs-and-initiatives/health-insurance-marketplaces/a-b-resources.html</a>
The MLN can be accessed at:	<a href="https://Marketplace.MedicareLearningNetworkLMS.com">https://Marketplace.MedicareLearningNetworkLMS.com</a>
The CMS Enterprise Portal can be accessed at:	<a href="https://portal.cms.gov/">https://portal.cms.gov/</a>

# Eligibility and Enrollment in the FFM: Twelve Tips for Agents and Brokers



*Closing  
Remarks*