Frequently Asked Questions (FAQs) for Enhanced Direct Enrollment

Enhanced Direct Enrollment for 2019 FAQs

What is enhanced direct enrollment?

Enhanced direct enrollment is a new way for consumers to apply for and enroll in health coverage through the Federally-facilitated Exchanges (FFE) and State-based Exchanges that use the Federal Platform (SBE-FPs) without visiting HealthCare.gov. This new platform will improve the consumer experience in shopping for, applying for, and enrolling in Exchange coverage through third parties by allowing consumers to interact directly with private partners and complete all steps in the eligibility and enrollment process on a single website. The new process uses “APIs” (or application programming interfaces) to transfer data between the Federally-facilitated Exchange and approved partner websites.

Through API-based secure data transfers, the Federally-facilitated Exchange will determine a consumer’s eligibility for health insurance through either Exchange coverage, Medicaid, or the Children’s Health Insurance Program (CHIP), the appropriate amount of advance payments of the premium tax credit, cost-sharing reductions, and consumers can select and enroll in their choice of health plans. This process builds on years of work between the Centers for Medicare & Medicaid Services (CMS), issuers and other third-party partners seeking to allow a more tailored enrollment process on approved third-party websites for consumers to apply for and enroll in qualified health plans, and manage their information year-round.

What will happen when enhanced direct enrollment begins?

The enhanced direct enrollment pathway replaces the short term, proxy direct enrollment pathway which launched last year, introducing improved technology and functionality for 2019. Currently, issuers, agents and brokers, and other certified third parties who help consumers enroll in health coverage, such as online health insurance sellers (also referred to as web brokers) can use the direct enrollment pathway to process enrollments for consumers they serve. In most cases this involves starting on an enrollment partner’s website, being redirected to HealthCare.gov for an eligibility determination, and then returning to the partner’s platform to complete plan selection and enrollment. The enhanced direct enrollment process streamlines the consumer experience from start to finish when using a third-party website by allowing partners to integrate their websites with back-end data services to provide consumers with the same information and capabilities for managing their coverage that’s available through HealthCare.gov.

How does enhanced direct enrollment change the current direct enrollment process?

Enhanced direct enrollment includes fully integrated platforms that provide a range of custom features and capabilities that allow consumers to apply for and enroll in Exchange coverage using an approved third-party website. Through this enhanced pathway, a consumer can complete their Exchange application and enrollment into an Exchange plan without having to visit HealthCare.gov. Just as a tax preparation program can walk a consumer through the entire tax filing process on their branded website, certified enhanced direct enrollment partners will be able to walk a consumer through the Exchange application process on their branded website as well.

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amount of advance payments of the premium tax credit, cost-sharing reductions, and consumers can select and enroll in his or her choice of health plans.

In addition, this expansion for partner sites will also enable agents and brokers to more easily assist their clients year-round. Agents, brokers and consumers will now be able to complete and update the application on a third-party platform, upload documents and view the status of data matching and Special Enrollment Period verification issues, as well as download notices from the Exchange. Partners also have the option to provide portals for agents and brokers to manage their client portfolios—making it easier for consumers to stay in touch with their chosen agent or broker and obtain real-time status updates.

Will the process work the same for consumers with complex situations?

Eligibility determinations and application processing can be complex; depending on the consumer and their specific circumstances, some partners may not have the technology available initially to accommodate all complex situations. In those instances, consumers may still be re-directed to HealthCare.gov to determine their eligibility and to complete their enrollment.

Why create a new option for consumers?

This new pathway will provide an improved one-stop shopping experience for consumers who choose to shop for and enroll in Exchange plans through a partner’s website. It also offers consumers the opportunity to obtain personalized assistance from the partner’s licensed insurance agents and brokers.

How can consumers trust enhanced direct enrollment partners?

Before enhanced direct enrollment partners are approved, extensive security and privacy reviews and audits are conducted by an independent third-party auditor. CMS reviews the audit results to ensure compliance with nearly 300 CMS security and privacy standards. CMS reviews the partner’s system security plans and reviews their system testing. CMS also requires business logic audits, ensuring that a partner’s system will accurately deliver consumer information to the Exchange for an eligibility determination. Enhanced direct enrollment partners must sign a privacy and security agreement with CMS that describes their specific roles and responsibilities to protect consumer’s information and the standards that the partner has committed to maintain.

After an enhanced direct enrollment partner’s initial approval, CMS will continue to monitor the partner for compliance with program requirements. If a partner falls out of compliance, CMS will disconnect that partner immediately.

How can consumers know whether the website they are enrolling on is an approved partner?

All approved partner websites are required to display disclaimer language, which is true not just for enhanced direct enrollment, but for all direct enrollment entities. In addition, approved enhanced direct enrollment partners must provide additional educational content they are required to display to consumers and this is part of our audit review process before approving a partner. As CMS approves partner websites to go live, CMS will maintain an updated list on www.cms.gov/CCIIO. Consumers can visit https://www.healthcare.gov/direct-enrollment/ for more information on how to get health coverage through certified enrollment partner websites.

What happens when CMS certifies a partner’s enhanced direct enrollment platform?

When CMS has certified and approved a new enhanced direct enrollment partner, CMS will work with each entity as they launch and ramp up the new pathway. Both the partner and CMS will monitor
technical aspects of the standup and review connections, applications, and enrollments to ensure everything is working as expected between the partner’s site and the backend of HealthCare.gov.

As soon as a partner’s platform goes live, consumers will be able to apply and enroll in an Exchange plan directly through the certified partner’s website without having to visit HealthCare.gov. The enrollment partner’s website will connect to HealthCare.gov in a manner that is invisible to the consumer. Consumers or agent and brokers assisting consumers will be able to stay on the certified enrollment partner’s website for the entire application and enrollment experience and they’ll be able to download Exchange notices, get status updates, and upload documents for data matching and Special Enrollment Period verifications.