

Health Insurance Oversight System

Portal – User Manual



Last updated: December 2015

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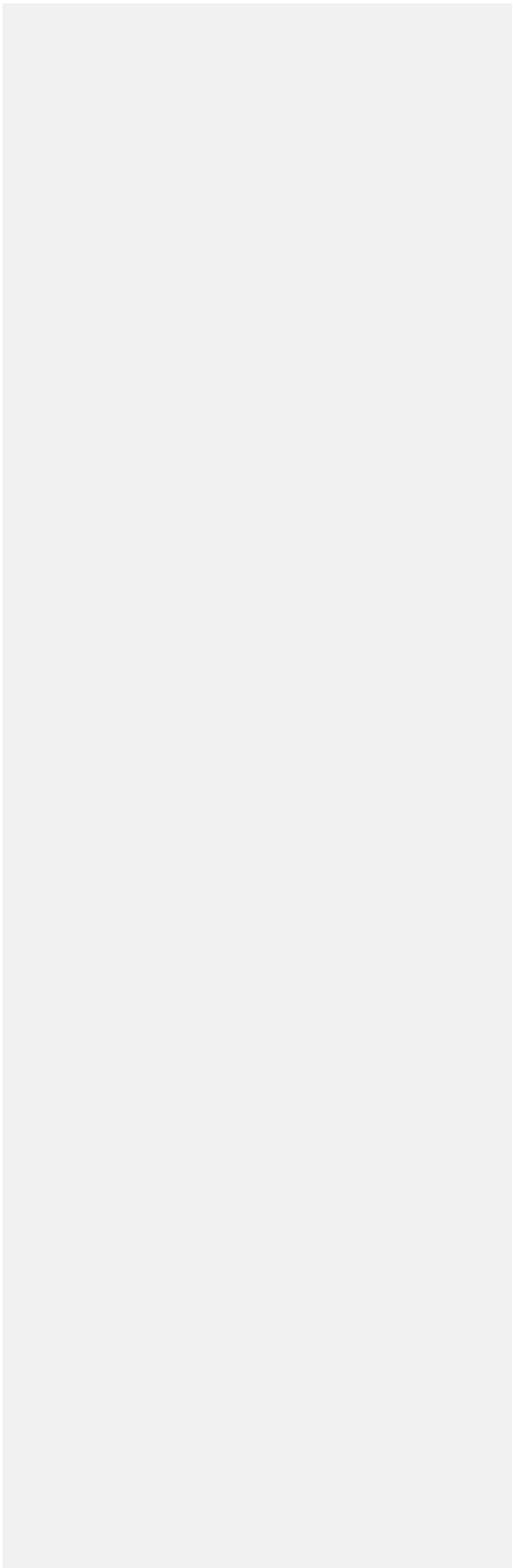
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Portal User Manual Change History

December 2015 Revisions

Added a tool tip for the NAIC Company Code field on the Manage Organization- View Page
Role Management- Removed the User type field for modules ERE, Non Fed, QHP Issuer Module, QHP Benefits and Service Area, QHP Rating, State Evaluation and Unified Rate Review modules.

April 2015 Revisions

Modified to reflect current release and date, updated Figures 9 & 10 and related text for new Portal “Access Catalog” screens.

February 2015 Revisions

Added Release 19.00.00 updated screens and functionality changes. In this release, the HIOS Main Home Page has an extra button at the top navigation bar labeled “Access PM”. The Approval pages have been updated to allow for multiple role request approvals. Lastly, the confirmation message text has changed.

December 2014 Revisions

Added Release 17.00.00 updated screens and functionality changes. In release 17.00.00, the system will be collecting both US and Non-US addresses for Other Organization Type.

October 2014 Revisions

Added Release 16.00.00 updated screens and functionality changes. Main addition for this release is including Other Organization Types as an option in the organization type dropdown.

August 2014 Revisions

Added Release 15.02.00 updated screens and text related to the TPA Edge Server Role Requests and prerequisites to be followed.

May 2014 Revisions

The following updates have been made to Section 3.3 to show the new Organizational User Role Approvals page. Has been updated to illustrate the view modules the Organizational user Role Approvals can be used for (ERE and Non-Fed role requests)

1 Introduction

The Center for Consumer Information and Insurance Oversight (CCIIO), a division of the Department of Health and Human Services (HHS), is charged with helping implement many provisions of the Affordable Care Act. The Health Insurance Oversight System (HIOS) is a federal system of record and provides a centralized, multi-user interface for insurance issuers and state/territory regulators to submit, and CCIIO to store information on individual and small group major medical insurance. Information submitted to HIOS is transferred in accordance with CCIIO regulations to provide data updates to Healthcare.gov. The Healthcare.gov website displays this information to provide assistance to consumers in locating health insurance coverage available in the market.

1.1 Pre-requisites and Information for HIOS System Access

These technical instructions explain how the HIOS application works within any compatible Internet browser application such as:

1. Internet Explorer (version 7 or higher)
2. Mozilla Firefox (version 5 or higher)
3. Chrome (version 9.0 or higher)

Prior to accessing HIOS, users will need to obtain their Enterprise Identity Management System (EIDM) credentials. The credentials are obtained by completing registration through the EIDM secure authentication process. Once registered, these credentials will be used to access CMS Enterprise Portal.

CMS Enterprise Portal: CMS Enterprise Portal is used for accessing CMS systems. HIOS is one of the systems that can be accessed through the CMS Portal using EIDM authentication and authorization. Only users who are authenticated with the EIDM procedures will be allowed to access the HIOS system.

Enterprise Identity Management System (EIDM): EIDM provides authentication and authorization capabilities and is tightly integrated with the CMS Enterprise Portal. Users must register for an EIDM account and obtain an EIDM User ID and Password to access the CMS Enterprise Portal.

Pre-Requisites for HIOS Access:

- All users will be required to complete the Enterprise Portal registration process, which includes Identity Verification (ID Proofing).
- ID Proofing verifies that the individual referenced in the account is the same person creating the account.
- Additional information collected includes the following Personally Identifiable Information (PII) for purposes of the ID Proofing process: Social Security Number, Date of Birth, Home Address and Primary Phone Number.

2 HIOS System Access

All EIDM authorized and authenticated users will be able to access the HIOS system by navigating to the CMS Enterprise Portal using the secure URL: <https://portal.cms.gov/>. Users will be required to enter their credentials obtained by registering through the EIDM system to access HIOS.

This manual provides steps and instructions on how new and existing users can get access to HIOS and use its different functionalities.

Figure 1 displays the CMS Enterprise Portal Home page.

Figure 1: CMS Enterprise Portal Main Screen



2.1 New User Registration

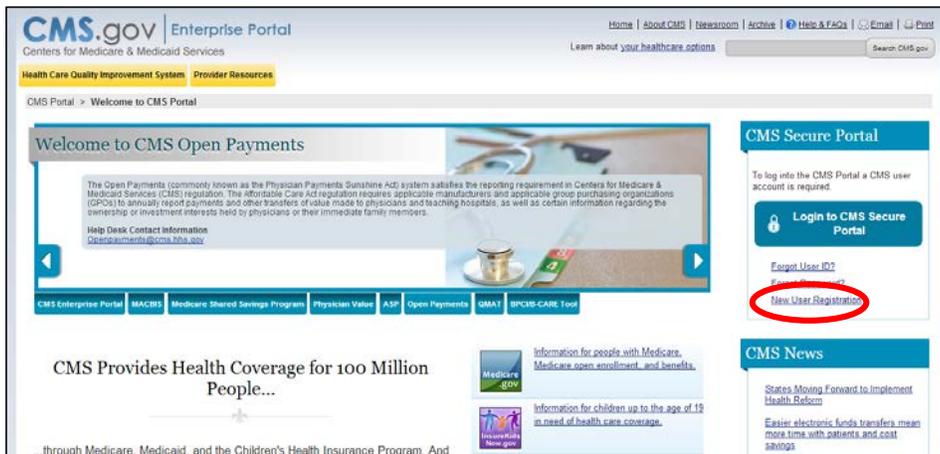
New users must complete the following steps to access HIOS.

1. Register for an EIDM account.
2. Request access to HIOS through the CMS Enterprise Portal.

Step 1: Register for an EIDM Account: New users will navigate to the CMS Enterprise Portal at <http://www.portal.cms.gov> to start the registration process. This registration process will require some personally identifiable information (PII) such as (Social Security number, Date of Birth, Home Address, Full name, Phone number etc.).

Figure 2 displays the “New User Registration” link on the CMS Enterprise Portal main screen:

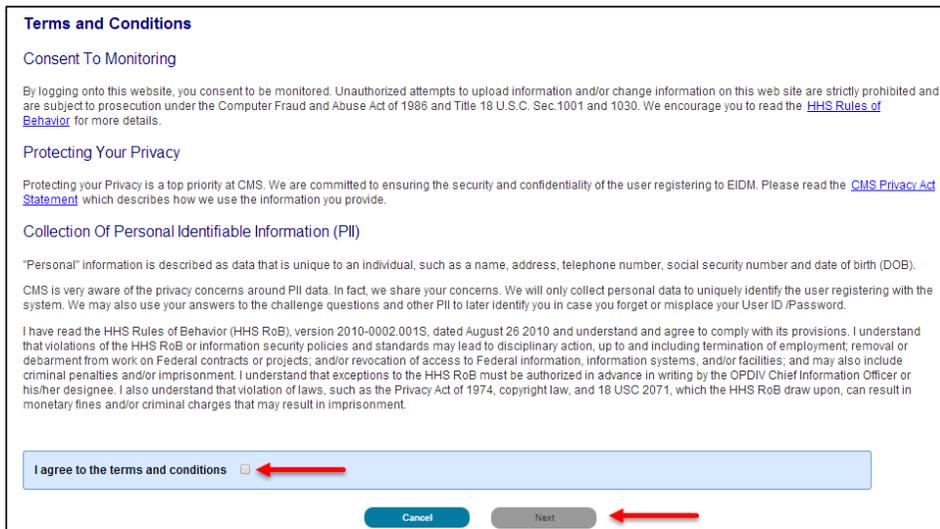
Figure 2: CMS Enterprise Portal



In order to register as a new user, all users must agree to the terms and conditions by selecting the “I agree to the terms and conditions” checkbox. Once that checkbox is selected, the Next button will be made available.

Figure 3 displays the EIDM ID Proofing Screens:

Figure 3: EIDM ID Proofing Screens



Users will then be navigated to an Additional Questions page, where they must enter additional fields required for ID proofing that are not collected in HIOS. Attributes already collected in HIOS will be pre-populated and read-only.

Figure 4 displays the Additional Questions page:

Figure 4: Additional Questions Page

The screenshot shows a web form titled "Your Information" with a breadcrumb trail "Your Information > Your Information > Your Information". The form contains several sections for data entry:

- Name Section:** "Enter your legal first name and last name, as it may be required for identity verification." It includes fields for "First Name", "Last Name", "Middle Name", and a "Suffix" dropdown menu.
- Email Section:** "Enter your email address, as it will be used for account related communications." It includes an "E-mail Address" field and a "Confirm E-mail Address" field.
- Social Security Number Section:** "Enter your full 9 digit social security number, as it may be required for identity verification." It includes a "Social Security Number" field.
- Date of Birth Section:** "Enter your date of birth in MM/DD/YYYY format, as it may be required for identity verification." It includes a "Date of Birth" field.
- Home Address Section:** "Enter your current or most recent home address, as it may be required for identity verification." It includes fields for "Home Address Line 1", "Home Address Line 2", "City", "State" (dropdown), "Zip Code", "Zip Code Extension", and "Country: USA".
- Phone Number Section:** "Enter your primary phone number, as it may be required for identity verification." It includes a "Primary Phone Number" field.

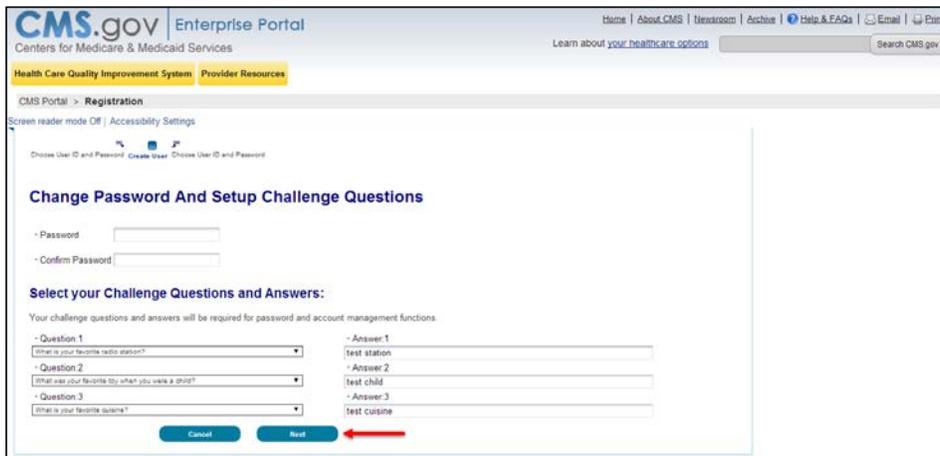
At the bottom of the form, there are two buttons: "Cancel" and "Next". A red arrow points to the "Next" button.

Based on the information provided, the users will be required to answer four questions for identity verification. User information is submitted to Experian and unique questions and answers are provided to each user for ID Proofing.

Users must then set their password and set up challenge questions and answers as shown below.

Figure 5 displays one of the Identity Verifications screens:

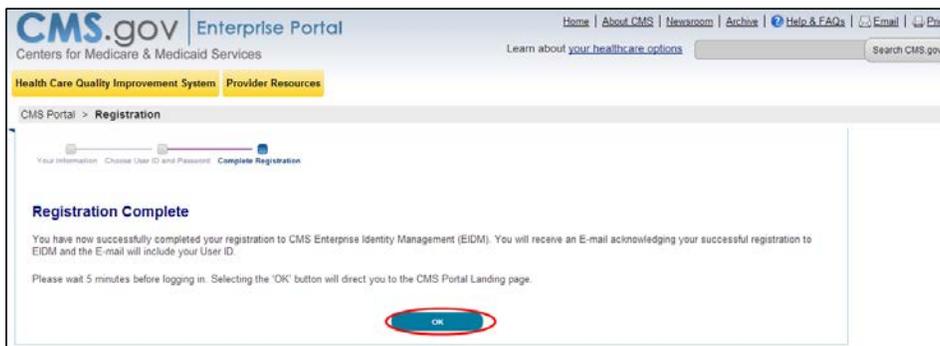
Figure 5: Identity Verification Screens - 2



After completing the registration process, users will receive the below confirmation message. Users will also receive an email acknowledging successful registration and the email will include the EIDM user ID.

Figure 6 displays the registration confirmation screen:

Figure 6: Confirmation Screen



Step 2: Once users receive the acknowledgement email that contains their User ID, they will need to request access to the HIOS System by signing into CMS Enterprise Portal.

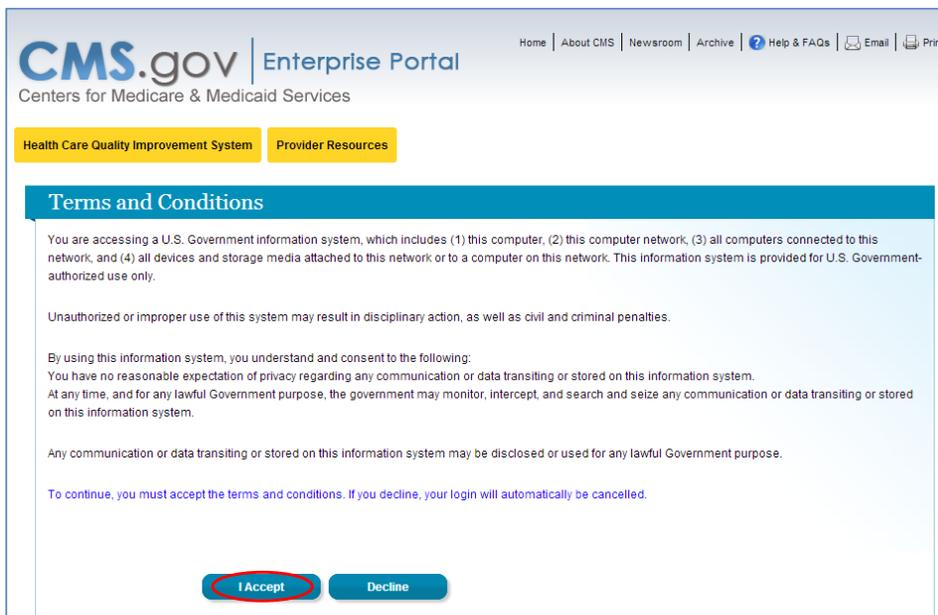
Figure 7 displays the CMS Enterprise Portal login screen:

Figure 7: CMS Enterprise Portal - Login



Figure 8 displays the Terms and Conditions page through CMS Portal:

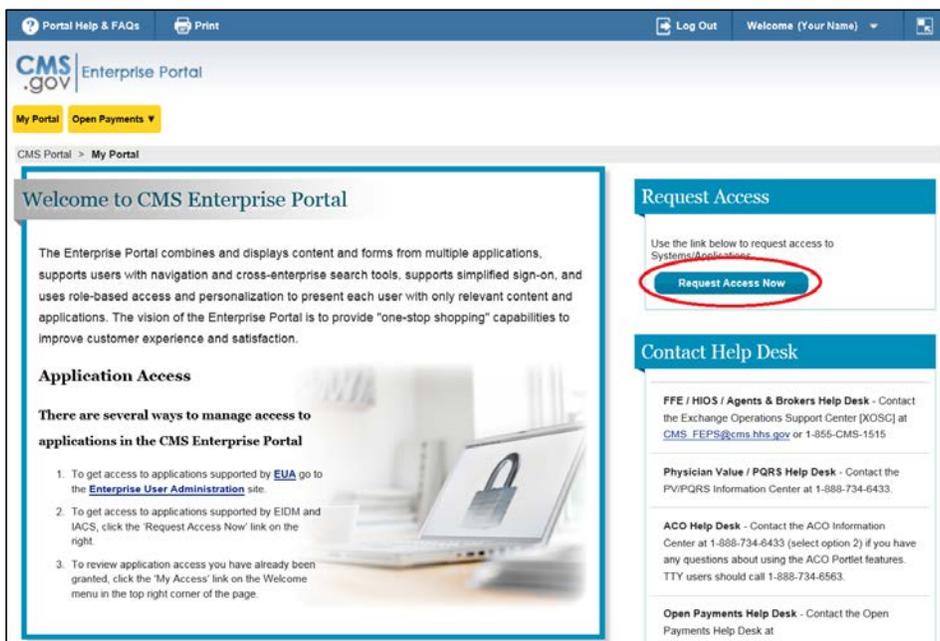
Figure 8: Terms and Conditions Page - CMS Portal



Once the Terms and Conditions have been accepted, the users will need to log in by entering their EIDM credentials. The users would then select “Request Access Now” as shown in the image below.

Figure 9 displays the “Request Access Now” link through the CMS Portal:

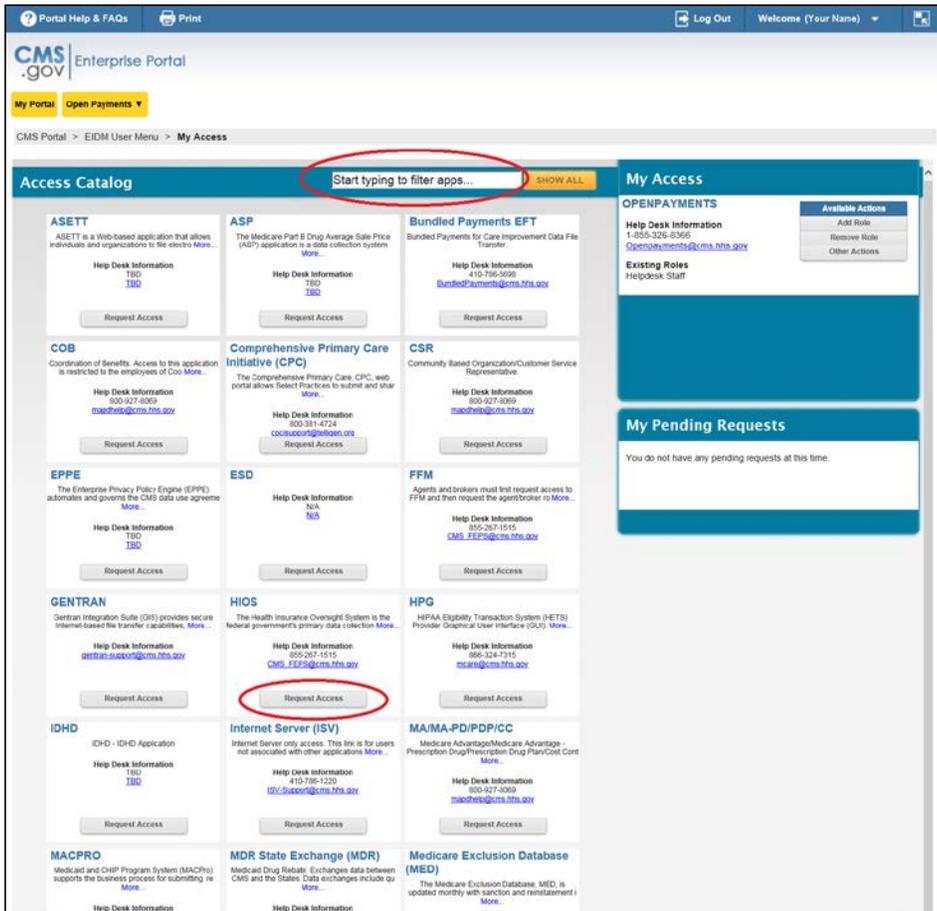
Figure 9: CMS Enterprise Portal Page



From the Access Catalog page, users will select the “Request Access” link by scrolling down to the HIOS application, or filtering the list by entering “HIOS” in the filter box, as shown below.

Figure 10 below displays the “Request Access” Link:

Figure 10: Request Access Link



Users will select “HIOS Issuer” from the Role Dropdown. New users will need to register in HIOS by selecting the link circled below. The HIOS Registration page will open.

Figure 11 displays the Request New Application Access page:

Figure 11: My Access - HIOS

Portal Help & FAQs Print Log Out Welcome

CMS.gov Enterprise Portal

My Portal

CMS Portal > My Access

Screen reader mode Off | Accessibility Settings

My Access

[Request New Application Access](#)

[View and Manage My Access](#)

Request New Application Access

Select an application and then a role to request access.

Application Description: HIOS - HIOS Application

Role: HIOS Issuer

Enter validation data

Please enter a valid HIOS Authorization Code (i.e. HIOS Issuer ID or Company FEIN) to continue with the role request. If you are an existing HIOS user and do not have access to a valid HIOS Authorization Code, please contact the HIOS helpdesk.

Phone: 855-267-1515
Email: CMS_FEPS@CMS.HHS.GOV
Hours of Operation: 9am-6pm

If you are not an existing HIOS user, please select the hyperlink below to register for access to HIOS:

<https://portal.cms.gov/HIOS-MAIU-UI/FrontController?op=registerHIOSAccess>

HIOS Authorization Code:

Cancel Submit

Users will need to complete the HIOS registration form and submit for approval. Please note that the HIOS registration form accepts user requests from within and outside the US.

Figure 12 and Figure 13 displays the HIOS Registration forms for both US and Non-US users, respectively:

Figure 12: HIOS Registration Form – US Address

Health Insurance Oversight System

Request HIOS Account

Please note that you are applying for access to the Health Insurance Oversight System (HIOS). If you have any questions, please contact the Exchange Operations Support Center (XOSC) at Phone: 1-855-267-1515 or Email: CMS_FEPS@cms.hhs.gov.

(*) Indicates a required field

To initialize the request for a HIOS user account, please select if the base address for the requesting user is located in the United States by selecting "US User" or "Non-US User".

Title (Name):	<input type="text"/>
*First Name:	<input type="text"/>
Middle Name:	<input type="text"/>
*Last Name:	<input type="text"/>
Suffix:	<input type="text"/>
*Job Title:	<input type="text"/>
*Organization Name:	<input type="text"/>
*Email Address:	<input type="text"/>
Organization Address:	US Address <input type="text"/>
US based Address Information	
Address Type:	<input type="text"/>
Address Line 1:	<input type="text"/>
Address Line 2:	<input type="text"/>
*City:	<input type="text"/>
*State:	<input type="text"/>
ZIP code:	<input type="text"/> - <input type="text"/>
*Phone (Format: 123-456-7890):	<input type="text"/>
Phone Ext:	<input type="text"/>

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

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Figure 13: HIOS Registration Form – Non-US Address

Health Insurance Oversight System

Request HIOS Account

Please note that you are applying for access to the Health Insurance Oversight System (HIOS). If you have any questions, please contact the Exchange Operations Support Center (XOSC) at Phone: 1-855-267-1515 or Email: CMS_FEPS@cms.hhs.gov.

(*) Indicates a required field

To initialize the request for a HIOS user account, please select if the base address for the requesting user is located in the United States by selecting "US User" or "Non-US User".

Title (Name):	<input type="text"/>
*First Name:	<input type="text"/>
Middle Name:	<input type="text"/>
*Last Name:	<input type="text"/>
Suffix:	<input type="text"/>
*Job Title:	<input type="text"/>
*Organization Name:	<input type="text"/>
*Email Address:	<input type="text"/>
Organization Address:	Non-US Address <input type="text"/>
Non-US based Address Information	
Address Type:	<input type="text"/>
Address Line 1:	<input type="text"/>
Address Line 2:	<input type="text"/>
*City:	<input type="text"/>
*Province, Region or State:	<input type="text"/>
*Country:	<input type="text"/>
ZIP code or Postal PIN Code:	<input type="text"/>
*Telephone Number:	<input type="text"/>
Phone Ext:	<input type="text"/>

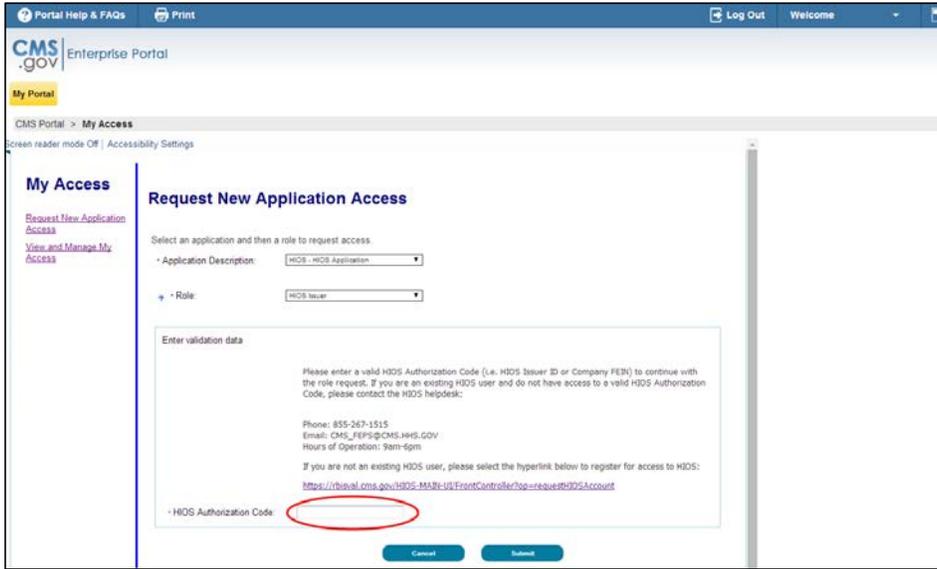
[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

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Once approved, authenticated users will receive an email with their HIOS credentials, account information and an authorization code to request access to HIOS in the Enterprise Portal.

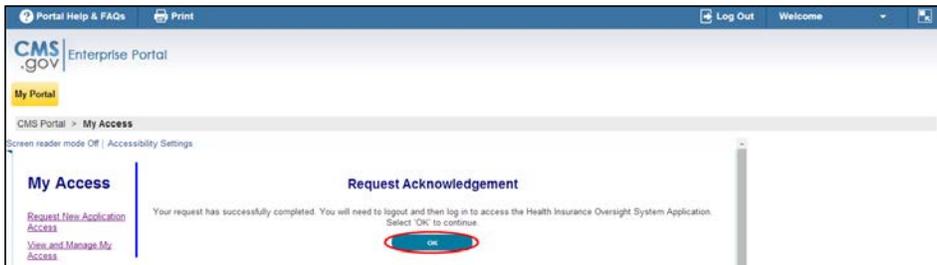
Once the users receive the email from HIOS registration along with the authorization code, they are required to enter the Authorization Code in the “HIOS Authorization Code” field under the Request New Application Access page as illustrated in Figure 14.

Figure 14: New HIOS User-Enter Authorization Code screen



Once the system has acknowledged the request, users will be granted permission to access HIOS as shown in Figure 15.

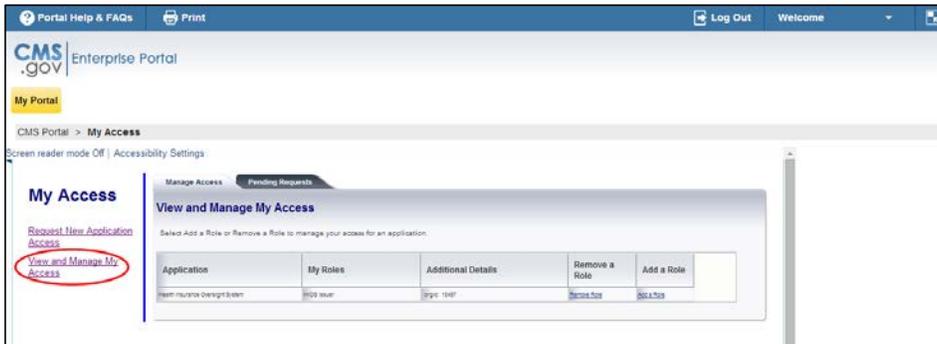
Figure 15: Request Acknowledgement Screen



Access to HIOS will appear under the View and Manage My Access page, after the user logs out of the Portal and logs back in for the changes to take effect.

Figure 16 displays the View and Manage My Access page.

Figure 16: View and Manage My Access Page



2.2 Existing HIOS Users

Existing HIOS Users will follow the steps below to access HIOS once they have completed the EIDM registration process and have been granted access to the HIOS system. Users must first log out of the system for their profile updates to take effect. Users will then log back into the Enterprise Portal with their EIDM user ID and password.

Figure 17 displays the CMS Enterprise Portal Page.

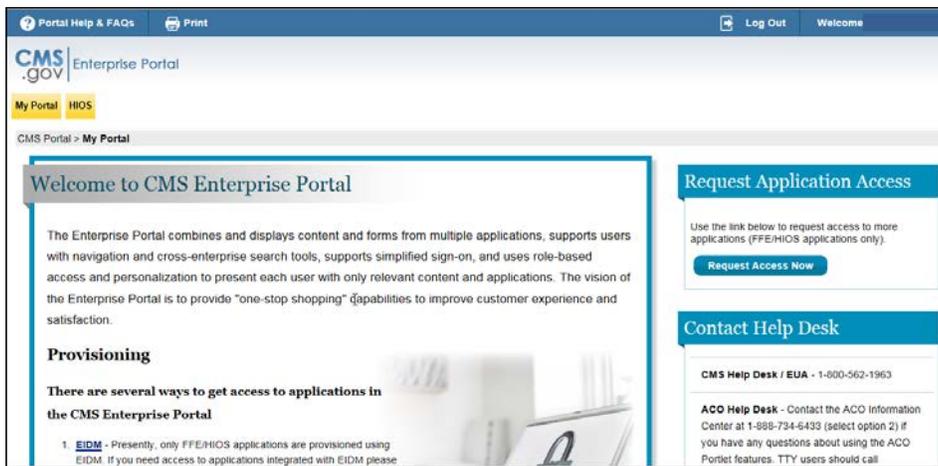
Figure 17: CMS Enterprise Portal Page - Login with EIDM Credentials



After users have logged into the CMS Enterprise Portal, they will have access to HIOS in the Portal. Selecting the "HIOS" tab will open the HIOS landing page.

Figure 18 displays Authorized HIOS users CMS Portal page.

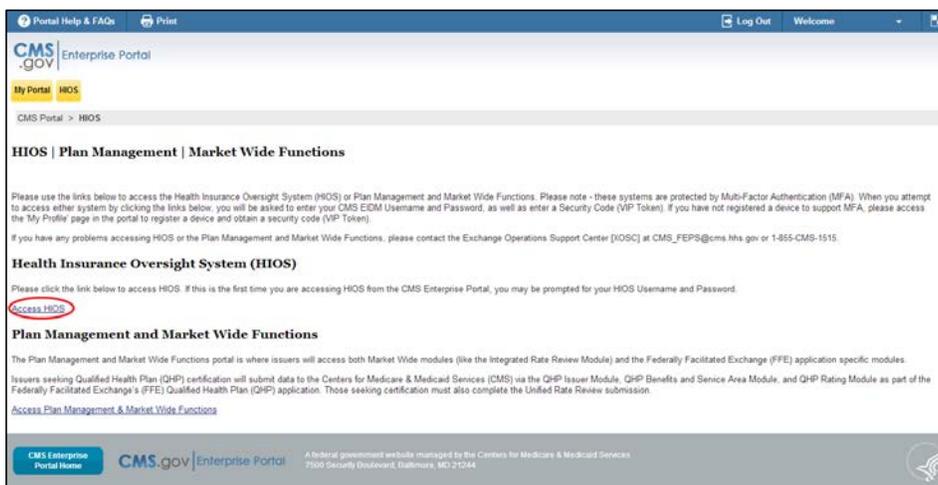
Figure 18: EIDM Portal page - Authorized HIOS Users



Users will select the “HIOS” tab to be navigated to a landing page from where they can access HIOS.

Figure 19 displays the page that will allow the users to access the HIOS home page. Users will select the “Access HIOS” link to navigate to the HIOS home page.

Figure 19: Access HIOS, Plan Management Landing Page



3 Portal Home Page

Upon successful login, the users will arrive on the HIOS Portal Home Page as shown in Figure 20.

Figure 20: HIOS Portal Home Page

Health Insurance Oversight System

ACCESS PM HOME FAQ CONTACT US SIGN OUT

Welcome

HIOS Home Page

Organization Management & Administrative Functions:

- Manage Account
- Manage an Organization
- Role Management

HIOS Main Page Announcements:

Obtaining a Health Plan Identifier (HPID)

Users needing to obtain an HPID for their organization will need to take the following steps in HIOS:

1. Register the organization in HIOS
2. Request access to the HPOES module through user role management
3. Complete an HPID application within the HPOES module
4. Once an HPID application has been successfully submitted, an HPID number will be assigned

Users may also access an HPID Quick Guide that provides an easy step-by-step reference for completing the necessary steps in HIOS and HPOES to obtain an HPID. You can view the Quick Guide in [graphic](#) or a [text form at http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/Affordable-Care-Act/Health-Plan-Identifier.html](http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/Affordable-Care-Act/Health-Plan-Identifier.html).

Welcome to the Health Insurance Oversight System (HIOS).
HIOS will be accessible through the CMS Enterprise Portal.

The following Modules are now live in HIOS:

- HIOS Portal
- Plan Finder and Product Data Collection Module (PF)
- Rates and Benefits Information System (RBIS)
- Consumer Assistance Program (CAP)
- Medical Loss Ratio Data Collection System (MLR)
- Rate Review System (RRJ)
- Rate Review Grants Reporting System (RRG)
- Health Plan and Other Entity Enumeration System (HPOES)
- Document Collection Module- Form Filing Module (DCM- FFM)
- Document Collection Module- Market Conduct Module (DCM-MCM)
- Document Collection Module- State Document Collection (SDC)
- Minimum Essential Coverage (MEC)
- Non Federal Governmental Plan (Non-Fed)
- Assister (NAV)

For any further inquiries or questions, please contact the Exchange Operations Support Center (XOSC) at CMS_FEPS@cms.hhs.gov or 1-855-267-1515.

3.1 Manage an Organization

The Manage Organization functionality allows users to verify an organization exists in HIOS, or create a new organization or attach an issuer to an organization within HIOS. The organization must be actively registered in HIOS in order for users to request access or role permissions to the account.

Most of the modules within and controlled by HIOS will require the user to be cross-referenced (or associated) to at least one organization, company, issuer, or self-funded, non-federal governmental plans before a user can gain access to the module. The module's access button will not be visible to the user until the user has an approved role to an existing or approved new Organization/Company.

In order to view or add an organization to HIOS, the users will need to navigate to the Manage an Organization page. It can be accessed by selecting its corresponding button as illustrated in Figure 21.

Figure 21: HIOS Portal – Manage an Organization

Health Insurance Oversight System

[ACCESS PM](#) [HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

HIOS Home Page

Organization Management & Administrative Functions:

- Manage Account
- Manage an Organization**
- Role Management

HIOS Main Page Announcements:

Obtaining a Health Plan Identifier (HPID)

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Welcome to the Health Insurance Oversight System (HIOS).

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- HIOS Portal
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- Rate Review System (RRJ)
- Rate Review Grants Reporting System (RRG)
- Health Plan and Other Entity Enumeration System (HPOES)
- Document Collection Module- Form Filing Module (DCM- FFM)
- Document Collection Module- Market Conduct Module (DCM-MCM)
- Document Collection Module- State Document Collection (SDC)
- Minimum Essential Coverage (MEC)
- Non Federal Governmental Plan (Non-Fed)
- Assister (NAV)

For any further inquiries or questions, please contact the Exchange Operations Support Center (XOSC) at CMS_FEPS@cms.hhs.gov or 1-855-267-1515.

3.1.1 Creating an Organization

Once the user is on the Manage an Organization page, they will be able to input three or four fields, depending on Organization Type. The first selection will be the primary purpose of the visit to the Manage an Organization page, selecting either Create New Organization or Edit Existing Organization in the dropdown menu. The user can then select the hyperlink to view the list of organization types and their definitions, and then select the appropriate Organization Type from the options: Company, Non Insurance, Non-Federal Governmental Plans and Other Organization Type. The final input will be Federal Employee Identification Number or Tax Identification Number (EIN/TIN), unless the user selects Other Organization Type as the organization type. If the user selects Other Organization Type, the Manage an Organization menu will display a checkbox stating the following: My Organization does not have an FEIN. If the checkbox is checked, a free form text box will appear where the users can input the Organization name being searched.

Figure 22 displays the search organization screen.

Figure 22: Search Organization

The screenshot shows the 'Health Insurance Oversight System' interface. At the top, there is a green header with the system name. Below the header, the date 'Friday, February 20, 2015' is displayed on the left, and navigation links for 'HOME', 'FAQ', 'CONTACT US', and 'SIGN OUT' are on the right. A 'Welcome' message is centered. The main content area is titled 'Manage an Organization' and contains several sections: 1. A dropdown menu for 'Please specify the primary purpose of your visit:' with 'Create new organization' selected. 2. A link 'here' for a list of organization types. 3. A dropdown menu for 'Please select the type of organization:' with 'Other Organization Type' selected. 4. A text input field for 'Federal EIN/TIN' and a 'FEIN/TIN Search' button. 5. A checked checkbox for 'My organization does not have an FEIN'. 6. A detailed instruction paragraph about the search process. 7. A text input field for 'Please enter the organization name to search:' and an 'Organization Search' button.

If there is an existing organization within HIOS, it will be displayed under the search box. Section 3.1.2 explains this portion in detail. If there is no existing organization with the FEIN/TIN or Organization Name (only when Other Organization Type is selected) the users provided, they will have the option to create a new organization.

Note: If the users logged in belong to an Organization with a Non-US address, the checkbox for My Organization does not have an FEIN will be selected by default. Users can uncheck the check box if they would like to enter an FEIN for their organization.

3.1.1.1 Company

This section will cover the process of creating a new Company organization.

If organization type selected is Company and no FEIN was found, the users will have the option to create a new organization. The user can select the Create Organization button to begin the process.

Figure 23 displays the select organization type screen.

Figure 23: Select Organization Type: Company

The screenshot displays the 'Health Insurance Oversight System' interface. At the top, there is a green header with the system name. Below the header, the date 'Friday, February 20, 2015' is shown on the left, and navigation buttons for 'HOME', 'FAQ', 'CONTACT US', and 'SIGN OUT' are on the right. A 'Welcome' message is centered below the navigation. The main content area is titled 'Manage an Organization' and contains the following elements:

- A button labeled 'Manage an Organization' and another labeled 'Manage Organization Relationships'.
- A section titled 'Manage an Organization' with the instruction: 'Please specify the primary purpose of your visit: Create new organization' (with a dropdown arrow).
- A link: 'Please click [here](#) for a list of organization types and their definitions.'
- A section titled 'Please select the type of organization: Company' (with a dropdown arrow).
- A note: 'Please enter your organization's 9 digit Federal EIN /TIN below and select 'FEIN/TIN Search' to determine if your organization currently exists in HIOS.'
- A text input field for 'Federal EIN/TIN' followed by a 'FEIN/TIN Search' button.
- A section titled 'Organization' with the sub-heading 'No Organization Found' and the text: 'You may register your organization in HIOS by selecting the 'Create Organization' button below to enter your organization's information.'
- A 'Create Organization' button.

Figure 24 and Figure 25 display the Register New Organization of type Company.

Figure 24: Register New Organization-Company (1 of 2)

The screenshot shows the 'Health Insurance Oversight System' registration page. At the top, there is a green header with the system name. Below the header is a navigation bar with buttons for 'HOME', 'FAQ', 'CONTACT US', and 'SIGN OUT'. A 'Welcome' message is displayed below the navigation bar. The main heading is 'Register New Organization'. Below this, there is a note: 'Please fill in the form below with your Organization's information.' and 'Note: (*) Indicates a required field.' The form fields are as follows: Organization Type: Company; *Organization Legal Name: Alpha Insurance; Federal EIN/TIN: 123098765; Domiciliary Address: 123 Main St.; *Address Line 2: (empty); *City: Miami; *State: FL; *ZIP code: 33133; ZIP Plus 4: (empty). At the bottom of the form are 'Back' and 'Continue' buttons. Below the form is a footer with links for 'Accessibility', 'Rules of Behavior', 'Web Policies', and 'File Formats and Plug-Ins', and the address: 'U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201'.

Health Insurance Oversight System

[HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

Register New Organization

Please fill in the form below with your Organization's information.

Note: (*) Indicates a required field.

Organization Type: **Company**

*Organization Legal Name:

Federal EIN/TIN:

[Domiciliary Address](#)

*Address Line 1:

Address Line 2:

*City:

*State:

*ZIP code:

ZIP Plus 4:

[Back](#) [Continue](#)

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201

Figure 25: Register New Organization-Company (2 of 2)

Health Insurance Oversight System

Wednesday, December 02, 2015

HOME FAQ CONTACT US SIGN OUT

Welcome xxxxxxth xxxxxxxxxxth

Register Attributes For New Organization

Please fill in the form below with your Company's attribute information.

Note: (*) Indicates a required field.

*Incorporated State:

NAIC Company Code: 

NAIC Group Code:

Group Name:

AM Best Number:

Not For Profit:

Co-Op:

Back Review/Continue

Accessibility | Rules of Behavior | Web Policies | File Formats and Plug-Ins

U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201

Commented [JN1]: Please add Alt Text to this figure

1. Enter in the details of the company where applicable. Be sure to complete required fields, which are marked with an asterisk (*).
2. NAIC Company Code tool tip-Indicating the correct definition
3. Select the "Review/Continue" button.

Figure 26 displays the Review Organization Information page.

Figure 26: Review Organization Information

Health Insurance Oversight System

[HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

Review Organization Information

Organization

Organization Type: Company
Organization Legal Name: Alpha Insurance
Incorporated State: FL
Federal EIN/TIN: 123098765
NAIC Company Code:
NAIC Group Code:
Group Name:
AM Best Number:
Not For Profit: No
Co-Op: No

[Domiciliary Address](#)

Address Line 1: 123 Main St.
Address Line 2:
City: Miami
State: FL
ZIP code: 33133
ZIP Plus 4:

[Back](#) [Submit](#)

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201

4. Confirm the accuracy of the information provided. Select “Back” to correct any information or “Submit” to complete the request.

Figure 27 displays the New Organization Confirmation page.

Figure 27: New Organization Confirmation

Health Insurance Oversight System

[HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

Confirmation

Your request to register the organization below has been submitted for approval. Please log back in within 1 to 2 business days to check the status of your request.

Organization

Organization Type:	Company
Organization Legal Name:	Alpha Insurance
Incorporated State:	FL
Federal EIN/TIN:	123098765
NAIC Company Code:	
NAIC Group Code:	
Group Name:	
AM Best Number:	
Not For Profit:	No
Co-Op:	No

[Domiciliary Address](#)

Address Line 1:	123 Main St.
Address Line 2:	
City:	Miami
State:	FL
ZIP code:	33133
ZIP Plus 4:	
Are you a TPA?	No

[Continue](#)

5. Select the “Continue” button to return to the HIOS Portal Home Page.

The request will be submitted for approval. The requesting users will receive an email once the new organization has been approved.

3.1.1.2 Non Insurance Company

This section will cover the process of creating a new Non Insurance Company organization.

If organization type selected is Non Insurance Company and no FEIN was found, the users will have the option to create a new organization. The Users can select the Create Organization button to begin the process.

Figure 28 displays the organization type screen with non-insurance company highlighted.

Figure 28: Select Organization Type: Non Insurance Company

Health Insurance Oversight System

Friday, February 20, 2015 [HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

Manage an Organization Manage Organization Relationships

Manage an Organization

Please specify the primary purpose of your visit:

Please click [here](#) for a list of organization types and their definitions.

Please select the type of organization:

Please enter your organization's 9 digit Federal EIN /TIN below and select 'FEIN/TIN Search' to determine if your organization currently exists in HIOS.

Federal EIN/TIN [FEIN/TIN Search](#)

Organization

No Organization Found

You may register your organization in HIOS by selecting the 'Create Organization' button below to enter your organization's information.

[Create Organization](#)

The users will be asked to complete the following forms to create their organization.

Figure 29 and Figure 30 display the Register New Organization for a Non Insurance Company.

Figure 29: Register New Organization – Non Insurance Company (1 of 2)

The screenshot shows the 'Health Insurance Oversight System' header. Below the header is a navigation bar with buttons for HOME, FAQ, CONTACT US, and SIGN OUT. A 'Welcome' message is displayed. The main heading is 'Register New Organization'. Below this, a note states: 'Please fill in the form below with your Organization's information.' and 'Note: (*) Indicates a required field.' The form fields are as follows:

Organization Type:	Non Insurance Company
*Organization Legal Name:	Alpha Health Inc
Federal EIN/TIN:	554541514
Domiciliary Address	
*Address Line 1:	123 Main St
Address Line 2:	
*City:	Alexandria
*State:	VA
*ZIP code:	22206
ZIP Plus 4:	

Buttons for 'Back' and 'Continue' are located at the bottom of the form. A footer contains links for Accessibility, Rules of Behavior, Web Policies, and File Formats and Plug-Ins, along with the address: U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201.

Figure 30: Register New Organization – Non Insurance Company (2 of 2)

The screenshot shows the 'Health Insurance Oversight System' header. Below the header is a navigation bar with buttons for HOME, FAQ, CONTACT US, and SIGN OUT. A 'Welcome' message is displayed. The main heading is 'Register Attributes For New Organization'. Below this, a note states: 'Please fill in the form below with your Company's attribute information.' and 'Note: (*) Indicates a required field.' The form fields are as follows:

*Incorporated State:	VA
----------------------	----

Buttons for 'Back' and 'Review/Continue' are located at the bottom of the form. A footer contains links for Accessibility, Rules of Behavior, Web Policies, and File Formats and Plug-Ins, along with the address: U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201.

1. Enter in the details of the company. Be sure to complete required fields, which are marked with an asterisk (*).
2. Select the “Review/Continue” button.

Figure 31 displays the Review Organization Information page.

Figure 31: Review Organization Information (Non Insurance)

Health Insurance Oversight System

HOME FAQ CONTACT US SIGN OUT

Welcome

Review Organization Information

Organization

Organization Type:	Non Insurance Company
Organization Legal Name:	Alpha Health Inc
Incorporated State:	VA
Federal EIN/TIN:	554541514

[Domiciliary Address](#)

Address Line 1:	123 Main St
Address Line 2:	
City:	Alexandria
State:	VA
ZIP code:	22206
ZIP Plus 4:	

Back Submit

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201

3. Confirm the accuracy of the information provided. Select “Back” to correct any information or “Submit” to complete the request.

Figure 32 displays the new organization confirmation page.

Figure 32: New Organization Confirmation (Non Insurance)

Health Insurance Oversight System

HOME FAQ CONTACT US SIGN OUT

Welcome

Confirmation

Your request to register the organization below has been submitted for approval. Please log back in within 1 to 2 business days to check the status of your request.

Organization

Organization Type:	Non Insurance Company
Organization Legal Name:	Alpha Health Inco
Incorporated State:	VA
Federal EIN/TIN:	654545454
Domiciliary Address	
Address Line 1:	123 Main St
Address Line 2:	
City:	Alexandria
State:	VA
ZIP code:	22206
ZIP Plus 4:	
Are you a TPA?	No

Continue

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201

4. Select the “Continue” button to return to the HIOS Portal Home Page.

The request will be submitted for approval. The requesting users will receive an email once the new organization has been approved.

3.1.1.3 Non-Federal Governmental Plans

This section will cover the process of creating a new Non-Federal Governmental Plans organization.

If organization type selected is Non-Federal Governmental Plans and no FEIN was found the users will have the option to create a new organization. The Users can select the Create Organization button to begin the process.

Figure 33 displays the organization type screen with non-federal governmental plans highlighted.

Figure 33: Select Organization Type: Non-Federal Governmental Plans

Health Insurance Oversight System

Friday, February 20, 2015

HOME FAQ CONTACT US SIGN OUT

Welcome.

Manage an Organization Manage Organization Relationships

Manage an Organization

Please specify the primary purpose of your visit:

Please click [here](#) for a list of organization types and their definitions.

Please select the type of organization:

Please enter your organization's 9 digit Federal EIN /TIN below and select 'FEIN/TIN Search' to determine if your organization currently exists in HIOS.

Federal EIN/TIN

Organization

No Organization Found

You may register your organization in HIOS by selecting the 'Create Organization' button below to enter your organization's information.

The users will be asked to complete the following forms to create their organization.

Figure 34 and Figure 35 display the Register New Organization for a Non-Federal Governmental Plans organization.

Figure 34: Register New Organization- Non-Federal Governmental Plans (1 of 2)

Health Insurance Oversight System

[HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

Register New Organization

Please fill in the form below with your Organization's information.

Note: (*) Indicates a required field.

Organization Type:	Non-Federal Governmental Plans
*Organization Legal Name:	Beta Insurance
Federal EIN/TIN:	554541514
Domiciliary Address	
*Address Line 1:	457 Main St
Address Line 2:	
*City:	Addis
*State:	LA ▼
*ZIP code:	70170
ZIP Plus 4:	

[Back](#) [Continue](#)

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

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Figure 35: Register New Organization- Non-Federal Governmental Plans (2 of 2)

Health Insurance Oversight System

[HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

Register Attributes For New Organization

Please select the attributes that apply to your organization.

Note: (*) Indicates a required field.

*Non-Fed Plan Type:	<input checked="" type="checkbox"/> Self Funded <input type="checkbox"/> Fully Insured
---------------------	--

[Back](#) [Review/Continue](#)

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

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1. Enter in the details of the Non-Federal Governmental Plan where applicable. Be sure to complete required fields, which are marked with an asterisk (*).
2. Select the “Review/Continue” button.

Figure 36 displays the Review Organization Information page.

Figure 36: Review Organization Information

Health Insurance Oversight System

[HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

Review Organization Information

Organization

Organization Type: Non-Federal Governmental Plans
Organization Legal Name: Beta Insurance
Non-Fed Plan Type: Self Funded
Federal EIN/TIN: 554541514

[Domiciliary Address](#)

Address Line 1: 457 Main St
Address Line 2:
City: Addis
State: LA
ZIP code: 70170
ZIP Plus 4:

[Back](#) [Submit](#)

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

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3. Confirm the accuracy of the information provided. Select “Back” to correct any information or “Submit” to complete the request.

Figure 37 displays the new organization confirmation page.

Figure 37: New Organization Confirmation (Non-Federal Governmental Plans)

Health Insurance Oversight System

HOME FAQ CONTACT US SIGN OUT

Welcome

Confirmation

Your request to register the organization below has been submitted for approval. Please log back in within 1 to 2 business days to check the status of your request.

Once your request has been approved, you shall receive a notification email containing instructions on how to gain access to the ERE module and complete the review election process. This message is subject to the Self-Funded attribute being selected.

Organization

Organization Type:	Non-Federal Governmental Plans
Organization Legal Name:	Beta Insurance
Non-Fed Plan Type:	Self Funded
Federal EIN/TIN:	984784544
Domiciliary Address	
Address Line 1:	457 Main St
Address Line 2:	
City:	Addis
State:	LA
ZIP code:	70170
ZIP Plus 4:	
Are you a TPA?	No

Continue

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201

4. Select the “Continue” button to return to the HIOS Portal Home Page.

The request will be submitted for approval. The requesting users will receive an email once the new organization has been approved.

Note: Those that select the Self-Funded Non-Fed Plan Type will see the text highlighted in yellow. This is the instructional text to submit External Review Elections data in the ERE Module of HIOS.

3.1.1.4 Other Organization Type

This section will cover the process of creating a new Other Organization Type organization.

If organization type selected is Other Organization Type and no FEIN or Organization Name is found, the users will have the option to create a new organization. The Users can select the Create Organization button to begin the process.

Figure 38 displays the select organization type screen.

Figure 38: Select Organization Type: Other Organization Type

Health Insurance Oversight System

Friday, February 20, 2015 [HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

Manage an Organization | Manage Organization Relationships

Manage an Organization

Please specify the primary purpose of your visit:

Please click [here](#) for a list of organization types and their definitions.

Please select the type of organization:

Please enter your organization's 9 digit Federal EIN /TIN below and select 'FEIN/TIN Search' to determine if your organization currently exists in HIOS.

Federal EIN/TIN [FEIN/TIN Search](#)

My organization does not have an FEIN

In the search bar below, please provide the name of the Organization being requested. After pressing the 'Organization Search' button, only those matching organizations that are currently registered in the HIOS system and do not contain an FEIN will be returned for your review. If your organization has an FEIN, please use Search by FEIN/TIN option above. If none of the organizations provided are associated with the requesting organization, please press the 'Create Organization' button.

Please enter the organization name to search: [Organization Search](#)

Organization

No Organization Found

You may register your organization in HIOS by selecting the 'Create Organization' button below to enter your organization's information.

[Create Organization](#)

If Organization Address selected is Non-US Address, the following information will be required:

- Organization Legal Name
- Address Line 1
- City or Town
- Province, Region or State
- Country
- Zip Code or Postal PIN code

Figure 39 display the Register New Organization - Other Organization Type for Non-US Address.

Figure 39: Register New Organization – Other Organization Type – Non-US Address

The screenshot shows the 'Health Insurance Oversight System' registration page. At the top, there is a green header with the system name. Below the header is a navigation bar with buttons for 'HOME', 'FAQ', 'CONTACT US', and 'SIGN OUT'. A 'Welcome' message is displayed. The main heading is 'Register New Organization'. Below this, there is a note: 'Please fill in the form below with your Organization's information.' and another note: 'Note: (*) Indicates a required field.' The form fields are as follows: 'Organization Type' is set to 'Other Organization Type'; 'Organization Address' is a dropdown menu set to 'Non-US Address'; '*Organization Legal Name' is 'International Health Assc'; 'Federal EIN/TIN' is an empty text box; 'Address Type' has radio buttons for 'Domiciliary Address' (selected) and 'Business Address'. Below the form fields is a note: 'Note: The Domiciliary address is the location in which an organization is incorporated/registered or organized, while the Business address is the location from where the organization can conduct their business.' Under the heading '*Domiciliary Address', there are text boxes for: '*Address Line 1: 32 Redwing Court'; 'Address Line 2: Ashton Road'; '*City or Town: Romford'; '*Province, Region or State: Essex'; '*Country: United Kingdom' (dropdown menu); and '*Zip code or Postal PIN Code: RM38QQ'. At the bottom of the form are 'Back' and 'Continue' buttons. The footer contains links for 'Accessibility', 'Rules of Behavior', 'Web Policies', and 'File Formats and Plug-Ins', along with the address: 'U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201'.

If Organization Address selected is US Address, the following information will be required:

- Legal Organization Name
- Address Line 1
- City
- State
- Zip Code

Figure 40 displays Register New Organization – Other Organization Type for US Address.

Figure 40: Register New Organization – Other Organization Type – US Address

The screenshot shows the 'Health Insurance Oversight System' registration page. At the top, it displays the date 'Tuesday, November 04, 2014' and navigation links for 'HOME', 'FAQ', 'CONTACT US', and 'SIGN OUT'. A user greeting 'Welcome Rocky' is visible. The main heading is 'Register New Organization', followed by the instruction 'Please fill in the form below with your Organization's information.' A note states: 'Note: (*) Indicates a required field.' The form fields include: 'Organization Type' set to 'Other Organization Type'; 'Organization Address' set to 'US Address'; '*Organization Legal Name' with the value 'First Virginia'; 'Federal EIN/TIN' (empty); 'Address Type' with 'Domiciliary Address' selected; and a section for '*Domiciliary Address' with fields for '*Address Line 1' (123 Main St), 'Address Line 2' (empty), '*City' (Fairfax), '*State' (VA), '*ZIP code' (22030), and 'ZIP Plus 4' (empty). 'Back' and 'Continue' buttons are at the bottom.

Users will select the “Continue” button once the registration information is completed. The users will have the option to include any additional details in the text box. Once the additional details are added the users will select the “Continue” button to review the organization information before submitting.

Figure 41 displays the Register Attributes for New Organization page.

Figure 41: Register New Organization – Other Organization Type – Register Attributes

Health Insurance Oversight System

HOME FAQ CONTACT US SIGN OUT

Welcome

Register Attributes For New Organization

In the text field below, please indicate additional details pertaining to the requesting Organization and the reason for requesting access to the HIOS system:

Note: There is a 1000 character limit within the text box below.

Organization Type: **Other Organization Type**
Organization Address: **Non-US Address**
Organization Name: **International Health Association**
Federal EIN/TIN:

Back Review/Continue

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201

Figure 42 displays the Review Organization Information page.

Figure 42: Review Organization Information

Health Insurance Oversight System

HOME FAQ CONTACT US SIGN OUT

Welcome

Review Organization Information

Organization

Organization Type: Other Organization Type
Organization Address: Non-US Address
Organization Legal Name: International Health Association
Federal EIN/TIN:
Address Type: Domiciliary Address
Address Line 1: 32 Redwing Court
Address Line 2: Ashton Road
City or Town: Romford
Province, Region or State: Essex
Country: United Kingdom
ZIP code or Postal PIN code: RM38QQ

Es ist ein lang erwiesener Fakt, dass ein Leser vom Text abgelenkt wird, wenn er sich ein Layout ansieht. Der Punkt, Lorem Ipsum zu nutzen, ist, dass es mehr oder weniger die normale Anordnung von Buchstaben darstellt und somit nach lesbarer Sprache aussieht.

Back Submit

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)
U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201

Users will review the accuracy of the information provided. Select “Back” to correct any information or “Submit” to complete the request and navigate to the confirmation page.

Figure 43 displays the New Organization Confirmation page.

Figure 43: New Organization Confirmation (Other Organization Type)

The screenshot shows the 'Health Insurance Oversight System' header with a green gradient. Below the header is a navigation bar with buttons for 'HOME', 'FAQ', 'CONTACT US', and 'SIGN OUT'. A 'Welcome' message is centered below the navigation bar. The main heading is 'Confirmation' in green. Below it is a paragraph: 'Your request to register the organization below has been submitted for approval. Please log back in within 1 to 2 business days to check the status of your request.' The section is titled 'Organization' in green. It contains a list of organization details: Organization Type: Other Organization Type; Organization Address: US Address; Organization Legal Name: Enterprise One; Federal EIN/TIN: (blank); Address Type: Domiciliary Address; Address Line 1: 123 Main St; Address Line 2: (blank); City: Fairfax; State: VA; ZIP code: 22030; ZIP Plus 4: (blank). Below this list is a text area with the placeholder text 'This is additional details about the organization.' and a 'Continue' button at the bottom right. At the bottom of the page, there are links for 'Accessibility', 'Rules of Behavior', 'Web Policies', and 'File Formats and Plug-Ins', followed by the footer text: 'U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201'.

Select the “Continue” button to return to the HIOS Portal Home Page.

The request will be submitted for approval. The requesting users will receive an email once the new organization has been approved.

3.1.2 Viewing Existing Organization Information

HIOS users can view company information on the Manage an Organization page. Users can search by a valid Federal EIN/TIN and select “FEIN/TIN Search” or search by an organization’s name and select “Organization Search.” A summary of the organization’s information will be displayed in the search results as illustrated in Figure 44.

Figure 44: Summary Organization Information

Health Insurance Oversight System

Friday, February 20, 2015 [HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

Manage an Organization Manage Organization Relationships

Manage an Organization

Please specify the primary purpose of your visit:

Please click [here](#) for a list of organization types and their definitions.

Please select the type of organization:

Please enter your organization's 9 digit Federal EIN /TIN below and select 'FEIN/TIN Search' to determine if your organization currently exists in HIOS.

Federal EIN/TIN [FEIN/TIN Search](#)

My organization does not have an FEIN

Organization

Organization Legal Name	Organization Type	Federal EIN/TIN	Action
Test Non Fed	Non-Federal Governmental Plans	321321321	View

Organization information can only be edited by an approved Organization Administrator role. This role can be requested through the role request page.

[Back](#)

Under the “Action” column, a “View” hyperlink will be displayed. When selected, the users will be redirected to a page containing the organization’s detailed information in read-only format.

Figure 45 displays the information recorded for an organization.

Figure 45: View Organization Information page

Health Insurance Oversight System

Wednesday, September 24, 2014

[HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome Rocky Pou

Organization

Organization Type:	Other Organization Type
Organization Address:	US Address
Organization Legal Name:	E Health
Federal EIN/TIN:	824824824
Address Type:	Domiciliary Address
Address Line 1:	123 Test St
Address Line 2:	
City:	Fairfax
State:	VA
ZIP code:	22030
ZIP Plus 4:	
Organization Details:	E Health registration

[Back](#)

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

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3.1.3 Editing Company Information

Users with the Company Administrator role who are cross-referenced to an organization can edit the company's information. The following fields on the Edit Organization page are editable: Company Legal Name, Organization Name, Federal EIN/TIN, AM Best Number, Not for Profit, Co-Op, Address Type, Address Line 1, Address Line 2, City, State, ZIP Code, and ZIP Plus 4, "Are you a TPA?", and "TPA Type". **Note:** The NAIC Company Code, NAIC Group Code and Group Name fields shall be locked down and disabled for editing unless there are existing values. A **Company Administrator** is defined as: A representative of the Company who will be responsible for the editing of Company-level information as well as Issuer-level information for Issuers that are associated to the company. A company can have any number of Company Administrators. **Note:** A user with a submitter or validator role for an organization cannot be a Company Administrator.

When Company Administrators and Non-Administrator users access HIOS and locate their organization records, they will be able to check their company's FEIN validation status. The status is high-level and will only indicate whether the FEIN was successfully validated, failed

validation, or is pending validation. As indicated in the failure notifications, the Company Administrator may need to contact the help desk to receive further information on their failure scenario.

Figure 46 displays the Organization summary page with the additional “Edit” action.

Figure 46: Edit Link on Manage an Organization Page

Health Insurance Oversight System

Friday, February 20, 2015 [HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#) Welcome

Manage an Organization | Manage Organization Relationships

Manage an Organization

Please specify the primary purpose of your visit:

Please click [here](#) for a list of organization types and their definitions.

Please select the type of organization:

Please enter your organization's 9 digit Federal EIN /TIN below and select 'FEIN/TIN Search' to determine if your organization currently exists in HIOS.

Federal EIN/TIN

Organization

Organization Legal Name	Organization Type	Federal EIN/TIN	Action
test001	Company	111111111	<ul style="list-style-type: none">ViewEdit

Once the users select the “Edit” hyperlink, they will be redirected to the illustrated in Figure 47 where they can edit the company’s information.

Figure 47: Edit Organization Fields

Edit Company

Please fill in the form below with your Organization's information.
Note: (*) Indicates a required field.

*Organization Type:	Company
*Organization Legal Name:	Galaxy Insurance
*Incorporated State:	FL
*Federal EIN/TIN:	123098765
Validation Status:	Validation in Process
NAIC Company Code:	
NAIC Group Code:	
Group Name:	
AM Best Number:	
Not For Profit:	<input type="checkbox"/>
Co-Op:	<input type="checkbox"/>
Domiciliary Address	
*Address Line 1:	123 Main St.
Address Line 2:	
*City:	Miami
*State:	FL
*ZIP code:	33133
ZIP Plus 4:	
*Are you a TPA?	<input checked="" type="radio"/> Yes <input type="radio"/> No
*TPA Type:	<input checked="" type="checkbox"/> EDGE Server

Updating FEIN/LBN:

1. Request Organization Administrator role.
2. Access HIOS as Organization Administrator.
3. Select "Manage an Organization."
4. Enter FEIN/TIN in Search field.
5. Select "FEIN/TIN Search" button.
6. Select "Edit" in the Action column.
7. Review the Validation Status.
8. Edit Organization Legal Name (LBN) or Federal EIN/TIN as necessary.
9. Select "Review/Continue" button.
10. Review updated information.
11. Select "Submit" button.

Note: The FEIN and Company Legal Name fields will be locked down and disabled for editing when the FEIN Validation Status is "Validated", as illustrated in Figure 48.

Figure 48: Edit Company Fields – FEIN Validated

Edit Company

Please fill in the form below with your Organization's information.
Note: (*) Indicates a required field.

***Organization Type:** Company

***Organization Legal Name:** Galaxy Insurance

***Incorporated State:** FL

***Federal EIN/TIN:** 123098765

Validation Status: Validated

NAIC Company Code:

NAIC Group Code:

Group Name:

AM Best Number:

Not For Profit:

Co-Op:

[Domiciliary Address](#)

***Address Line 1:** 123 Main St.

Address Line 2:

***City:** Miami

***State:** FL

***ZIP code:** 33133

ZIP Plus 4:

***Are you a TPA?** Yes No

***TPA Type:** EDGE Server

Note: The Insurance Organization's FEIN and Legal Business Name will be validated when the editing request has been submitted. Once the FEIN validation has been processed, the Validation Status will be displayed on this page.

If the answer to the "Are you a TPA?" question is "Yes", the users will be asked to identify the Type of TPA and provide additional information for the company. The screenshots below display the additional information that needs to be provided.

Figure 49: Edit Company – TPA Attributes (1 of 2)

Health Insurance Oversight System

HOME FAQ CONTACT US SIGN OUT

Welcome

Edit Company

Please fill in the form below with your Organization's information.

Note: (*) Indicates a required field.

Legal Business Address:

*Address Line 1:

Address Line 2:

*City:

*State:

*ZIP code:

ZIP Plus 4:

Authorizing Official Contact Information:

Title:

First Name:

Last Name:

Email Address:

Phone Number:

Phone Ext:

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

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Figure 50: Edit Company – TPA Attributes (2 of 2)

Edit Company

Please fill in the form below with your Organization's information.

Note: (*) Indicates a required field.

Primary Contact Information:

*Title:

*First Name:

*Last Name:

*Email Address:

*Phone Number:

Phone Ext:

Secondary Contact Information:

Same as Primary Contact Information

Title:

First Name:

Last Name:

Email Address:

Phone Number:

Phone Ext:

Supplemental Contact One Information:

Title:

First Name:

Last Name:

Email Address:

Phone Number:

Phone Ext:

Supplemental Contact Two Information:

Same as Supplemental Contact One Information

Title:

First Name:

Last Name:

Email Address:

Phone Number:

Phone Ext:

Once the EDGE Server TPA attributes have been entered, the users will be asked to review the information and confirm that it is correct.

3.1.4 Issuer

Before creating a new issuer within HIOS, an associated company must be registered and approved in the system. The user must perform a Federal EIN Search to ensure the company is already registered within HIOS. If any of the details of the company are incorrect, please contact the Help Desk to submit corrections.

Figure 51 displays the beginning of the process to add a new issuer.

Figure 51: Add Issuer

Health Insurance Oversight System

Friday, February 20, 2015

[HOME](#)
[FAQ](#)
[CONTACT US](#)
[SIGN OUT](#)

Welcome

Manage an Organization

Manage Organization Relationships

Manage an Organization

Please specify the primary purpose of your visit: Edit existing organization ▼

Please click [here](#) for a list of organization types and their definitions.

Please select the type of organization: Company ▼

Please enter your organization's 9 digit Federal EIN /TIN below and select 'FEIN/TIN Search' to determine if your organization currently exists in HIOS.

Federal EIN/TIN 111111111 [FEIN/TIN Search](#)

Organization

Organization Legal Name	Organization Type	Federal EIN/TIN	Action
test001	Company	111111111	<ul style="list-style-type: none"> View Edit

Issuers

[K](#)
[<](#)
1
[>](#)
[N](#)
Page size: 10 ▼
5 items in 1 page

Issuer ID	Issuer Legal Name	Registered State	Action
19681	test001	CA	<ul style="list-style-type: none"> View Edit
33512	test001	NE	<ul style="list-style-type: none"> View Edit
52663	test001	AL	<ul style="list-style-type: none"> View Edit
65173	test001	VA	<ul style="list-style-type: none"> View Edit
85775	test001	ND	<ul style="list-style-type: none"> View Edit

[Back](#)
[Add Issuer](#)

To search for an organization, complete the following steps:

1. Select “Manage an Organization” link from the HIOS Portal Home Page.
2. Enter the organization’s Federal EIN.
3. Select the “FEIN/TIN Search” button.
4. If the organization is not found, the user must create the organization first. See section 3.1.1 to register a new organization.
5. If the organization is found in the search results, check the existing list of Issuers associated to the organization to ensure the issuer does not already exist.
6. If the issuer does not already exist, select the “Add Issuer” button.

Figure 52 displays the new issuer registration page.

Figure 52: Register New Issuer page

Health Insurance Oversight System

[HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

Register New Issuer

Please fill in the form below with your Issuer's information.

Note: (*) Indicates a required field.

Issuer Legal Name: **Galaxy Insurance**

Issuer Marketing Name:

***Registered State:**

Federal EIN: **123098765**

NAIC Company Code:

NAIC Group Code:

***Market Type and Line of Business:**

Individual
 Individual Line of Business-
 Health Insurance Coverage
 Mini-Med
 Student Health Plans
 Rx-only

Small Group
 Small Group Line of Business-
 Health Insurance Coverage
 Mini-Med
 Expatriate
 Rx-only

Large Group
 Large Group Line of Business-
 Health Insurance Coverage
 Mini-Med
 Expatriate
 Rx-only

[Domiciliary Address](#)

***Address Line 1:**

Address Line 2:

***City:**

***State:**

***ZIP code:**

ZIP Plus 4

[Back](#)
[Save and Add Another Issuer](#)

Below are the Issuers that you have requested to create. To remove an Issuer from the table, you may select the Delete link on that row.

Issuer Legal Name	Registered State	Actions
Galaxy Insurance	VA	View Delete

[Submit](#)

7. Complete the required fields and confirm you have selected the Registered State of the new issuer. All required fields are marked with an asterisk (*).
8. When complete, select the “Save and Add Another Issuer” button.
9. When all new issuer requests are completed, confirm the accuracy of the issuer details in the summary table at the bottom of the page using the “View” and “Delete” hyperlinks, and then select the “Submit” button.

3.1.4.1 Viewing Issuer Information

HIOS users can view issuer information on the Manage an Organization page. When the users enter a valid Federal EIN/TIN into the search box and select “Search”, a summary of the organization’s information and associated issuers will be displayed in the search results as illustrated in Figure 53.

Figure 53: Summary Issuer Information

Health Insurance Oversight System

Friday, February 20, 2015

[HOME](#)
[FAQ](#)
[CONTACT US](#)
[SIGN OUT](#)

Welcome

Manage an Organization

Manage Organization Relationships

Manage an Organization

Please specify the primary purpose of your visit: Edit existing organization

Please click [here](#) for a list of organization types and their definitions.

Please select the type of organization: Company

Please enter your organization's 9 digit Federal EIN /TIN below and select 'FEIN/TIN Search' to determine if your organization currently exists in HIOS.

Federal EIN/TIN 111111111 [FEIN/TIN Search](#)

Organization

Organization Legal Name	Organization Type	Federal EIN/TIN	Action
test001	Company	111111111	<ul style="list-style-type: none"> View Edit

Issuers

⏪ ⏩ Page size: 10 5 items in 1 page

Issuer ID	Issuer Legal Name	Registered State	Action
19681	test001	CA	<ul style="list-style-type: none"> View Edit
33512	test001	NE	<ul style="list-style-type: none"> View Edit
52663	test001	AL	<ul style="list-style-type: none"> View Edit
65173	test001	VA	<ul style="list-style-type: none"> View Edit
85775	test001	ND	<ul style="list-style-type: none"> View Edit

[Back](#)
[Add Issuer](#)

Under the “Action” column, a “View” hyperlink will be displayed. When selected, the users will be redirected to a page containing the issuer’s detailed information in read-only format as illustrated in Figure 54 below.

Figure 54: View Issuer Information page

Health Insurance Oversight System

HOME FAQ CONTACT US SIGN OUT

Welcome

Issuer

Issuer ID:	67347
Issuer Legal Name:	Galaxy Insurance
Issuer Marketing Name:	Andromeda
Registered State:	GA
Federal EIN/TIN:	123098765
NAIC Company Code:	
NAIC Group Code:	
Market Type(s):	Line of Business:
Individual	Health Insurance Coverage
Small Group	Health Insurance Coverage
Large Group	Health Insurance Coverage
Domiciliary Address	
Address Line 1:	345 Main
Address Line 2:	
City:	Atlanta
State:	GA
ZIP code:	33133
ZIP Plus 4:	
Are you a TPA?	No

[Back](#)

3.1.4.2 Editing Issuer Information

Users with the Company Administrator or Issuer Administrator role will have the capability to edit Issuer level information. Company Administrators will be able to edit the information of all Issuers associated to the company.

Users with the Issuer Administrator role who are cross-referenced to an issuer can edit the information for that issuer. The following fields on the Edit Issuer page are editable: Issuer Marketing Name, Market Coverage, Line of Business, Address Line 1, Address Line 2, City,

State, ZIP Code, and ZIP Plus 4, “Are you a TPA?” and “TPA Type”. An **Issuer Administrator** is defined as: A representative of the Issuer who will be solely responsible for the editing of Issuer-level information. An Issuer can have any number of Issuer Administrators. **Note:** Users with a submitter or validator role for an issuer cannot be an Issuer Administrator.

Figure 55 displays the issuer edit links under the Manage an Organization page.

Figure 55: Issuer Edit Link on Manage an Organization Page

Company Legal Name	Federal EIN/TIN	Action
Test Demo Insurance Rename	123123123	View

Company information can only be edited by an approved Company Administrator role. This role can be requested through the role request page.

Issuers

Page size: 10 3 items in 1 page

Issuer ID	Issuer Legal Name	Registered State	Action
18970	Test Demo Insurance	MI	View
42723	Test Demo Insurance	VA	View
57494	Test Demo Insurance	CA	View Edit

[Back](#) [Add Issuer](#)

Once the users select the “Edit” hyperlink, they will be redirected to the page illustrated in Figure 56 where they can edit the issuer’s information.

Figure 56: Edit Issuer Information page

Health Insurance Oversight System

HOME FAQ CONTACT US SIGN OUT

Welcome

Edit Issuer

Please fill in the form below with your Issuer's information.

Note: (*) Indicates a required field.

Issuer ID: 17376

*Issuer Legal Name: Snickers

Issuer Marketing Name: Editing Test

Registered State: VA

Federal EIN/TIN: 987654321

NAIC Company Code:

NAIC Group Code:

*Market Type and Line of Business:

- Individual
 - Individual Line of Business
 - Health Insurance Coverage
 - Mini-Med
 - Student Health Plans
 - Rx-only
 - Small Group
 - Small Group Line of Business
 - Health Insurance Coverage
 - Mini-Med
 - Expatriate
 - Rx-only
 - Large Group
 - Large Group Line of Business
 - Health Insurance Coverage
 - Mini-Med
 - Expatriate
 - Rx-only

[Domiciliary Address](#)

*Address Line 1: 123 Work

Address Line 2:

*City: Fair

*State: VA

*ZIP code: 12312

ZIP Plus 4:

*Are you TPA? Yes No

*TPA Type: EDGE Server

Back Review/Continue

Note: Users can select multiple Market Coverage types. A validation check will be implemented to prevent a user from unselecting a Market Coverage type if that Issuer has a valid Product in that same Market Coverage type. Users can also select multiple Lines of Business for each Market Coverage type selected.

Figure 57 displays the market coverage notification page.

Figure 57: Market Coverage Notification

The screenshot displays the HIOS portal interface. At the top, the title "Health Insurance Oversight System" is shown in a green banner. Below the banner, the date "Tuesday, December 03, 2013" is displayed on the left, and navigation buttons for "HOME", "FAQ", "CONTACT US", and "SIGN OUT" are on the right. A "Welcome" message is centered below the navigation. A red error message is prominently displayed: "Error(s):" followed by a bullet point: "• Issuer Market Coverage cannot be changed as there exist product for the market coverage". Below the error, there is a section titled "Edit Issuer" with the instruction "Please fill in the form below with your Issuer's information." and a note: "Note: (*) Indicates a required field." The form contains the following fields: "Issuer ID:" with the value "38118", "*Issuer Legal Name:" with the value "World Insurance Company", and "Issuer Marketing Name:" with the value "testing marketing name" and an adjacent empty input field.

If an Issuer has been identified as an EDGE Server TPA, the users will need to provide further information unique to this type of Issuer as shown below in Figure 58 and Figure 59.

Figure 58: Edit Issuer – TPA Attributes (1 of 2)

Health Insurance Oversight System

[HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

Edit Issuer

Please fill in the form below with your Issuer's information.
Note: (*) Indicates a required field.

Legal Business Address:

***Address Line 1:**

Address Line 2:

***City:**

***State:**

***ZIP code:**

ZIP Plus 4:

Authorizing Official Contact Information:

Title:

First Name:

Last Name:

Email Address:

Phone Number:

Phone Ext:

[Back](#) [Continue](#)

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

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Figure 59: Edit Issuer – TPA Attributes (2 of 2)

Edit Issuer

Please fill in the form below with your Issuer's information.

Note: (*) Indicates a required field.

Primary Contact Information:

*Title:

*First Name:

*Last Name:

*Email Address:

*Phone Number:

Phone Ext:

Secondary Contact Information:

Same as Primary Contact Information

Title:

First Name:

Last Name:

Email Address:

Phone Number:

Phone Ext:

Supplemental Contact One Information:

Title:

First Name:

Last Name:

Email Address:

Phone Number:

Phone Ext:

Supplemental Contact Two Information:

Same as Supplemental Contact One Information

Title:

First Name:

Last Name:

Email Address:

Phone Number:

Phone Ext:

When the users have finished reviewing and submitting their Issuer Edit request, it will be queued up for approval. Once approved, the users will receive an email notification informing them that their request has been approved.

3.2 Role Management

All module access and role requests are to be completed in the Role Management section. Users will be able to view their existing roles and access status. The users will also be able to submit module access permission requests and cross-reference requests to registered companies, issuers, and states (for state users only) all under Role Management.

Figure 60 displays the role request page.

Figure 60: HIOS Portal – Role Management

Health Insurance Oversight System

[ACCESS PM](#) [HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

HIOS Home Page

Organization Management & Administrative Functions:

- Manage Account
- Manage an Organization
- Role Management**

HIOS Main Page Announcements:

Obtaining a Health Plan Identifier (HPID)

Users needing to obtain an HPID for their organization will need to take the following steps in HIOS:

1. Register the organization in HIOS
2. Request access to the HPOES module through user role management
3. Complete an HPID application within the HPOES module
4. Once an HPID application has been successfully submitted, an HPID number will be assigned

Users may also access an HPID Quick Guide that provides an easy step-by-step reference for completing the necessary steps in HIOS and HPOES to obtain an HPID. You can view the Quick Guide in [graphic](http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/Affordable-Care-Act/Health-Plan-Identifier.html) or a [text form](http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/Affordable-Care-Act/Health-Plan-Identifier.html) at <http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/Affordable-Care-Act/Health-Plan-Identifier.html>.

Welcome to the Health Insurance Oversight System (HIOS).

HIOS will be accessible through the CMS Enterprise Portal.

The following Modules are now live in HIOS:

- HIOS Portal
- Plan Finder and Product Data Collection Module (PF)
- Rates and Benefits Information System (RBIS)
- Consumer Assistance Program (CAP)
- Medical Loss Ratio Data Collection System (MLR)
- Rate Review System (RRJ)
- Rate Review Grants Reporting System (RRG)
- Health Plan and Other Entity Enumeration System (HPOES)
- Document Collection Module- Form Filing Module (DCM- FFM)
- Document Collection Module- Market Conduct Module (DCM-MCM)
- Document Collection Module- State Document Collection (SDC)
- Minimum Essential Coverage (MEC)
- Non Federal Governmental Plan (Non-Fed)
- Assister (NAV)

For any further inquiries or questions, please contact the Exchange Operations Support Center (XOSC) at CMS_FEPS@cms.hhs.gov or 1-855-267-1515.

3.2.1 View Existing Roles

The users can view their existing roles and access permissions on the View Existing Roles tab as displayed below in Figure 61.

Figure 61: View Existing Roles

Health Insurance Oversight System

HOME FAQ CONTACT US SIGN OUT

Welcome

View Existing Role Request Role

View Existing Roles

Username:

External Review Election (ERE) HIOS Portal

Role	Association Type	Association
HIOS Organization Approver		
Role Approver Administrator	Issuer	
HIOS User Account Approver		
HIOS User Role Approver	Module	External Review Election (ERE)
HIOS User Role Approver	Module	HIOS Portal

EDGE Server Management

Role	Association Type	Association	User Type	User Sub-Type
Issuer EDGE Registration Request Submitter	Company	10085 - FFE RR Test Issuer 526 - NE	Submitter	Primary Contact
Issuer EDGE Registration Request Approver	Issuer	10085 - FFE RR Test Issuer 526 - NE	Approver	Primary Contact
TPA EDGE Registration Submitter	Issuer	10085 - FFE RR Test Issuer 526 - NE	Submitter	Primary Contact

To view existing roles, complete the following steps:

1. From the HIOS Portal Home Page, select the “Role Management” button.
2. Select the “View Existing Roles” tab.

3.2.2 Requesting a Role

To request an additional role or module access, a role request must be submitted. Be sure to review the Module Descriptions chart to ensure that the correct module and role is requested within the module.

To request a role, complete the following steps:

1. From the HIOS Portal Home Page, select the “Role Management” button.
2. Select the “Request Role” tab.
3. Select the Module needed.
4. Select the Requested Role. The system will only display the specific roles that apply to the module selected.
5. If applicable for the module selected, select the User Type from the drop down menu.
 - The USER TYPE field shall **NOT** be displayed for the following modules:
 - ERE
 - Non Fed
 - Financial Management
 - QHP Issuer Module
 - QHP Rating Module
 - QHP Benefits and Service Area
 - State Evaluation module
 - Unified Rate Review System
6. If applicable for the module selected, selected the User Sub-Type from the drop down menu.
7. If the module requires a cross-reference to a company, issuer, or state, enter the information and select Search. If a Search Result is not displayed, the user must register the organization first or verify that the issuer or state reference provided is accurate.
8. Select the “Review/Continue” button.
9. Select the “Submit” button. The “Back” button is also an option if the user needs to make changes to prior to this page.

Commented [JN2]: I updated the formatting slightly to make the note under step 5, since I do not think it qualifies as an additional step.

Figure 62, Figure 63, and Figure 64 display the role request for the Ratings/Reports Viewer role within the Marketplace Quality Management (MQM) module.

Figure 62: Ratings/Reports Viewer Role Request

The screenshot shows the 'Request Role' page in the Health Insurance Oversight System. At the top, there is a green header with the system name. Below the header is a navigation bar with buttons for HOME, FAQ, CONTACT US, and SIGN OUT. A 'Welcome' message is displayed on the right. On the left, there are two buttons: 'View Existing Role' and 'Request Role', with 'Request Role' being the active one. The main content area is titled 'Request Role' and includes a note that all fields are required. It provides instructions for selecting a module and a role. The 'Module' dropdown is set to 'Marketplace Quality Module (MQM)' and the 'Requested Role' dropdown is set to 'Ratings/Reports Viewer'. Below this is the 'Issuer Association' section, which instructs the user to enter an Issuer ID and click 'Search'. The 'Issuer ID' field contains '55555' and the 'Search' button is visible. The search result is displayed as '55555 - FM-Company-TEST0-027 - DC' and an 'Add Issuer' button is provided.

Health Insurance Oversight System

HOME FAQ CONTACT US SIGN OUT

Welcome

View Existing Role **Request Role**

Request Role

All fields are required.

Please select a Module from the drop-down list below and follow the prompts to submit a role request. For a description of each module, select [Module Descriptions \(PDF - 835KB\)](#)

Module: Marketplace Quality Module (MQM)

Requested Role: Ratings/Reports Viewer

Issuer Association

Please enter the HIOS Issuer ID below and select the Search button. Once an issuer is found, select the Add Issuer button to associate the Issuer to the role. You may add up to 10 Issuers per submission.

Issuer ID : 55555 Search

Search Result: 55555 - FM-Company-TEST0-027 - DC

Add Issuer

Users seeking to request the Ratings/Reports Viewer role can associate themselves to multiple Issuers per request. These users need to Search a valid Issuer and then select the Add Issuer button.

Figure 63: Ratings/Reports Viewer Issuer Association

Health Insurance Oversight System

HOME FAQ CONTACT US SIGN OUT

Welcome

View Existing Role **Request Role**

Request Role

All fields are required.

Please select a Module from the drop-down list below and follow the prompts to submit a role request. For a description of each module, select [Module Descriptions \(PDF - 835KB\)](#)

Module: Marketplace Quality Module (MQM)

Requested Role: Ratings/Reports Viewer

Issuer Association

Please enter the HIOS Issuer ID below and select the Search button. Once an issuer is found, select the Add Issuer button to associate the Issuer to the role. You may add up to 10 Issuers per submission.

Issuer ID : Search

Search Result:

Add Issuer

Below are the issuers you have requested to associate to this role. To remove an issuer from the table, you may select the Delete link under the Actions column. Once satisfied with the records, select the Submit button to request the role.

Issuer Legal Name	Registered State	Actions
55555 -FM-Company-TEST0-027	DC	Delete

Submit

The system will check that the Issuer IDs entered exist within HIOS and that the users do not already have an existing association with the selected Issuer. Should the system fail either validation check, it will throw one of the following error messages as displayed by Figure 64 and Figure 65, respectively.

Figure 64: Invalid Issuer ID Error Message

Health Insurance Oversight System

[HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

Error(s):

- Invalid Issuer ID or no match found for the Issuer ID you entered.

[View Existing Role](#) [Request Role](#)

Request Role

All fields are required.

Please select a Module from the drop-down list below and follow the prompts to submit a role request. For a description of each module, select [Module Descriptions \(PDF - 835KB\)](#)

Module:

Requested Role:

Issuer Association

Please enter the HIOS Issuer ID below and select the Search button. Once an issuer is found, select the Add Issuer button to associate the Issuer to the role. You may add up to 10 Issuers per submission.

Issuer ID :

Search Result:

Below are the issuers you have requested to associate to this role. To remove an issuer from the table, you may select the Delete link under the Actions column. Once satisfied with the records, select the Submit button to request the role.

Issuer Legal Name	Registered State	Actions
55555 -FM-Company-TEST0-027	DC	Delete

Figure 65: Existing Association Error Message

Health Insurance Oversight System

HOME FAQ CONTACT US SIGN OUT

Welcome.

Error(s):

- The account already has the requested association.

View Existing Role Request Role

Request Role

All fields are required.

Please select a Module from the drop-down list below and follow the prompts to submit a role request. For a description of each module, select [Module Descriptions \(PDF - 835KB\)](#)

Module: Marketplace Quality Module (MQM)

Requested Role: Ratings/Reports Viewer

Issuer Association

Please enter the HIOS Issuer ID below and select the Search button. Once an issuer is found, select the Add Issuer button to associate the Issuer to the role. You may add up to 10 Issuers per submission.

Issuer ID : 19681 Search

Search Result: 19681 - test001 - CA

Add Issuer

The users may add up to 10 issuers to a role request association. If users attempt to add more than 10 issuers, the system will throw the error message as displayed in Figure 66.

Figure 66: 10 Issuers Limit Error Message

Health Insurance Oversight System

[HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome

Error(s):

• You may only add up to 10 records per submission.

View Existing Role

Request Role

Request Role

All fields are required.

Please select a Module from the drop-down list below and follow the prompts to submit a role request. For a description of each module, select [Module Descriptions \(PDF - 835KB\)](#)

Module:

Requested Role:

Issuer Association

Please enter the HIOS Issuer ID below and select the Search button. Once an issuer is found, select the Add Issuer button to associate the Issuer to the role. You may add up to 10 Issuers per submission.

Issuer ID :

Search Result: **80779 - Neighborhood Health Partnership, Inc. - FL**

Below are the issuers you have requested to associate to this role. To remove an issuer from the table, you may select the Delete link under the Actions column. Once satisfied with the records, select the Submit button to request the role.

Issuer Legal Name	Registered State	Actions
55555 -FM-Company-TEST0-027	DC	Delete
38118 -World Insurance Company	NE	Delete
12281 -Principal Life Insurance Company	NE	Delete
79636 -Coventry Health and Life Insurance Co.	NE	Delete
57145 -United Security Life and Health Insurance Company	NE	Delete
73102 -UnitedHealthcare Insurance Company	NE	Delete
16842 -Blue Cross and Blue Shield of Florida	FL	Delete
18628 -Aetna Health Inc. (a FL corp.)	FL	Delete
62662 -Time Insurance Company	FL	Delete
21663 -Celtic Insurance Company	FL	Delete

Once the users have submitted the desired role request, the system will display a Confirmation screen, displayed in Figure 67, to notify the users of the successful submission.

Figure 67: Role Request Confirmation Page

The screenshot shows the 'Health Insurance Oversight System' interface. At the top, there is a green header with the system name. Below the header is a navigation bar with buttons for 'HOME', 'FAQ', 'CONTACT US', and 'SIGN OUT'. A 'Welcome' message is displayed on the right side of the navigation bar. On the left side, there are two buttons: 'View Existing Role' and 'Request Role'. The 'Request Role' button is highlighted in green. The main content area is titled 'Request Role' and contains a 'Confirm' section. The confirmation text states: 'Your role request has been submitted for approval, please log back in within 1 to 2 business days to check the status of your request. All fields are required.' Below this, there is a prompt to select a module from a drop-down list and a link to 'Module Descriptions (PDF - 835KB)'. The drop-down menu is currently set to '--Select Module--'.

3.3 Approvals

Users with the appropriate role for their module, have the ability to Approve or Deny user role requests at both the module and organizational level. Users with approval roles will have Approvals button displayed in the HIOS Portal Home page as displayed in Figure 68.

Figure 68: Approvals Button on HIOS Home Page

The screenshot shows the HIOS Home Page interface. At the top, there is a green header with the text "Health Insurance Oversight System". Below the header is a navigation bar with buttons for "ACCESS PM", "HOME", "FAQ", "CONTACT US", and "SIGN OUT". A "Welcome" message is displayed below the navigation bar. The main content area is titled "HIOS Home Page" and is divided into two columns. The left column, titled "Organization Management & Administrative Functions:", contains four buttons: "Manage Account", "Manage an Organization", "Role Management", and "Approvals". The "Approvals" button is highlighted with a red border. The right column, titled "HIOS Main Page Announcements:", contains a section titled "Obtaining a Health Plan Identifier (HPID)" with a list of four steps. Below this is a link to a Quick Guide and a list of modules now live in HIOS.

Health Insurance Oversight System

ACCESS PM HOME FAQ CONTACT US SIGN OUT

Welcome

HIOS Home Page

Organization Management & Administrative Functions:

- Manage Account
- Manage an Organization
- Role Management
- Approvals**

HIOS Main Page Announcements:

Obtaining a Health Plan Identifier (HPID)

Users needing to obtain an HPID for their organization will need to take the following steps in HIOS:

1. Register the organization in HIOS
2. Request access to the HPOES module through user role management
3. Complete an HPID application within the HPOES module
4. Once an HPID application has been successfully submitted, an HPID number will be assigned

Users may also access an HPID Quick Guide that provides an easy step-by-step reference for completing the necessary steps in HIOS and HPOES to obtain an HPID. You can view the Quick Guide in [graphic](http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/Affordable-Care-Act/Health-Plan-Identifier.html) or a [text form](http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/Affordable-Care-Act/Health-Plan-Identifier.html) at <http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/Affordable-Care-Act/Health-Plan-Identifier.html>.

Welcome to the Health Insurance Oversight System (HIOS).

HIOS will be accessible through the CMS Enterprise Portal.

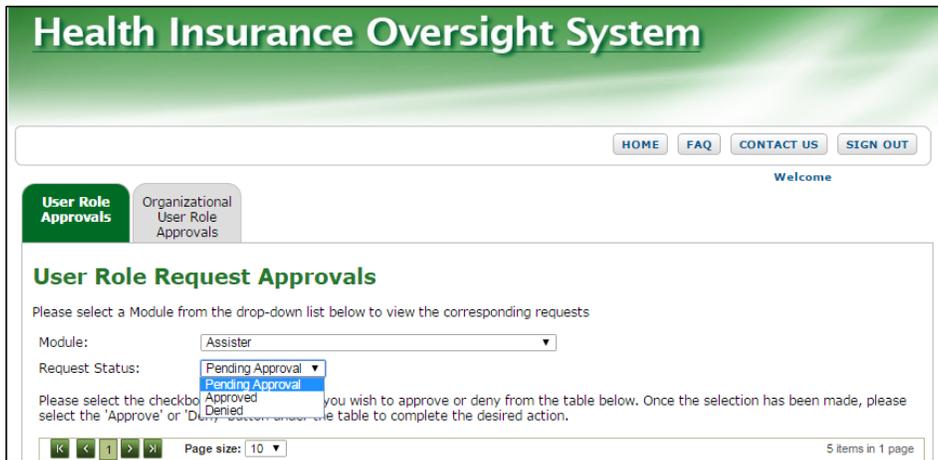
The following Modules are now live in HIOS:

- HIOS Portal
- Plan Finder and Product Data Collection Module (PF)
- Rates and Benefits Information System (RBIS)
- Consumer Assistance Program (CAP)
- Medical Loss Ratio Data Collection System (MLR)
- Rate Review System (RRJ)
- Rate Review Grants Reporting System (RRG)
- Health Plan and Other Entity Enumeration System (HPOES)
- Document Collection Module- Form Filing Module (DCM- FFM)
- Document Collection Module- Market Conduct Module (DCM-MCM)
- Document Collection Module- State Document Collection (SDC)
- Minimum Essential Coverage (MEC)
- Non Federal Governmental Plan (Non-Fed)
- Assister (NAV)

For any further inquiries or questions, please contact the Exchange Operations Support Center (XOSC) at CMS_FEPS@cms.hhs.gov or 1-855-267-1515.

Under the Approvals tabs, users will have the option to view all Pending Approval, Approved, and Denied requests as displayed in Figure 69.

Figure 69: Approval Tabs – Request Status



Users with the HIOS User Role Approver role will see the User Role Approvals tab, as displayed in Figure 70. Under this tab, users can approve or deny role requests for the modules for which they have permissions.

Figure 70: User Role Request Approvals

Health Insurance Oversight System

Thursday, February 19, 2015 [HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome Rxxxx Pxxxxx

[New Organization Approvals](#) **[User Role Approvals](#)**

User Role Request Approvals

Please select a Module from the drop-down list below to view the corresponding requests

Module:

Request Status:

Please select the checkboxes for the records you wish to approve or deny from the table below. Once the selection has been made, please select the 'Approve' or 'Deny' button under the table to complete the desired action.

Page size: 10 8 items in 1 page

Select	Requestor Username	Job Title	Module	Role	Association Type	Association	User Type	User Sub-Type	Requested Date
<input type="checkbox"/>	heatherM3@cgifederal.com	Tester	Assister	Assister Attester		WY Senior Citizens			2015-02-19 09:25:15.63
<input type="checkbox"/>	heatherM3@cgifederal.com	Tester	Assister	Assister Attester		WY Senior Citizens			2015-02-19 09:24:44.057
<input type="checkbox"/>	heatherM3@cgifederal.com	Tester	Assister	Assister State	State	WY			2015-02-12 10:07:31.02
<input type="checkbox"/>	tiffany.miller@cgi.com	Tester	Assister	Assister State	State	AZ			2015-01-16 12:00:44.243
<input type="checkbox"/>	patricia.freitag@cgi.com	Tester	Assister	Assister Attester		Arizona Board of Regents, University of Arizona			2015-01-15 19:30:21.84
<input type="checkbox"/>	ariel.salinas@cgifederal.com	Consultant	Assister	Assister State	State	MI			2014-09-12 10:31:19.86
<input type="checkbox"/>	Sovmya.Kaparthi@cgifederal.com	Consultant	Assister	Assister Attester		Cardon Healthcare Network, LLC dba Cardon Outreach			2014-09-10 11:47:51.367
<input type="checkbox"/>	ariel.salins@cgifederal.com	Insurer	Assister	Assister Attester		Catholic Social Services Archdiocese of Mobile			2014-08-08 10:57:46.323

[Approve](#) [Deny](#)

Figure 71 displays the Organizational User Role Approvals tab which only users with the Role Approver Administrator role will be able to see. This role allows users to approve or deny requested associations between a user and a module for a particular Organization.

Figure 71: Organizational User Role Approvals

Health Insurance Oversight System

Friday, February 20, 2015

HOME FAQ CONTACT US SIGN OUT

Welcome

New Organization Approvals User Account Approvals User Role Approvals **Organizational User Role Approvals**

Organizational User Role Request Approvals

Please select a Module from the drop-down list below to view the corresponding requests

Module: External Review Election (ERE)

Request Status: Pending Approval

Please select the checkboxes for the records you wish to approve or deny from the table below. Once the selection has been made, please select the 'Approve' or 'Deny' button under the table to complete the desired action.

Page size: 10 1 item in 1 page

Select	Requestor Username	Job Title	Module	Role	Association Type	Association	User Type	User Sub-Type	Requested Date
<input type="checkbox"/>	Mimi.Le@cgifederal.com	Tester	External Review Election (ERE)	ERE Submitter	Non-Federal Governmental Plans	Test Non-Federal Org 10	Submitter	Primary Contact	2015-02-11 21:37:56.763

Approve Deny

In order to approve or deny a record within one of the approvals tabs, the users would need to select the checkboxes next to the record, and then select the Approve or Deny button to approve or deny the selected records.

Once the users have selected at least one record's checkbox and selected the Approve or Deny button, the users will be redirected to a Confirmation page where the users will be notified of a successful request, and/or if the system encountered any errors in processing the request. Figure 72 displays the User Role Approvals Confirmation page where the system encountered an error in processing an Approval or Denial request.

Figure 72: User Role Request Approvals Confirmation Page

The screenshot displays the 'Health Insurance Oversight System' interface. At the top, there is a green header with the system name. Below the header, the date 'Thursday, February 19, 2015' is shown on the left, and navigation links for 'HOME', 'FAQ', 'CONTACT US', and 'SIGN OUT' are on the right. A 'Welcome Rxxx Pxxxxxx' message is also present. The main content area features a 'User Role Approvals' tab and a confirmation message: 'The following role requests have been successfully Approved for the HIOS Portal module:'. Below this message is a table with the following data:

Role	Requestor Username	Association Type	Association	User Type	User Sub-Type
Issuer Administrator	kkussow@humana.com	Issuer	30613 - Humana Insurance Company - MO		

A 'Continue' button is located below the table. At the bottom of the page, there are links for 'Accessibility', 'Rules of Behavior', 'Web Policies', and 'File Formats and Plug-Ins', along with the footer text: 'U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201'.

Records that encountered an error will return to the “Pending Approval” Request Status once the users select the Continue button if it was not already successfully approved by any other user.

Figure 73 displays the Organizational User Role Approvals Confirmation page where the approval request was partially successful.

Figure 73: Organizational User Role Approvals Confirmation Page

Health Insurance Oversight System

Friday, February 20, 2015

HOME FAQ CONTACT US SIGN OUT

Welcome

New Organization Approvals User Account Approvals User Role Approvals **Organizational User Role Approvals**

Organizational User Role Approvals Confirmation

Error in approving the following requests:

Role	Requestor Username	Association Type	Association	User Type	User Sub-Type
NonFed Submitter	Patrick.Fakhry@cgifederal.com	Non-Federal Governmental Plans	Diligence	Submitter	Primary Contact

The following role requests have been successfully Approved for the Non-Federal Governmental Plans (Non-Fed) module:

Role	Requestor Username	Association Type	Association	User Type	User Sub-Type
NonFed Submitter	Patrick.Fakhry@cgifederal.com	Non-Federal Governmental Plans	insertvalidationStatus	Submitter	Primary Contact
NonFed Submitter	Patrick.Fakhry@cgifederal.com	Non-Federal Governmental Plans	non fed smoke test3	Submitter	Primary Contact

[Continue](#)

The confirmation page will display the records that encountered error on top of the records that were successfully approved or denied.

To approve or deny further records, the users may select the Continue button to be redirected to the previous page.

4 Troubleshooting and FAQ

4.1 FAQs

Question 1: I forgot my password. What do I do?

Answer: Select the “Forgot Password” link on the CMS Enterprise Portal.

Question 2: I do not see the module access button for the application I would like access. What do I do?

Answer: Refer user to User Role Request.

Question 3: I received an error stating that I am locked out of my account. What should I do?

Answer: Contact the Exchange Operations Support Center (XOSC).

Question 4: I do not see the specific issuer or company information I am looking for within a specific module. What should I do?

Answer: Refer to User Role Request instructions.

4.2 Support

CMS Help Desk

For additional assistance, please call the Exchange Operations Support Center (XOSC) at 1-855-CMS-1515 or email them at CMS_FEPS@CMS.HHS.gov.