

Centers for Medicare & Medicaid Services News for Agents and Brokers

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An electronic source of information for Federally-facilitated Marketplace (FFM) Agents and Brokers

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Webinar Series: Weekly Updates for Agents and Brokers Participating in the FFM for Plan Year 2016 Open Enrollment

CMS hosted the first of its biweekly webinars for agents and brokers participating in the FFM on November 3, 2015, and will continue to host sessions through the end of the Open Enrollment period. These webinars provide agents and brokers with updates and announcements related to Open Enrollment, as well as reminders of upcoming critical deadlines. The webinars also provide highlights of relevant program content or information. CMS is hosting two sessions of these webinars each week, on Tuesdays from 3:00–4:00 PM ET and Thursdays from 10:00–11:00 AM ET.

To register for any of these sessions, log in to www.REGTAP.info and complete the following steps:

1. Select “Training Events” from “My Dashboard.”
2. Select the “View” icon next to the session of “Health Insurance Marketplace 2016 Open Enrollment Operational Updates and Announcements for Agents and Brokers” you are interested in attending.
3. Select “Register Me.”

If you require assistance with webinar registration, you may contact the Registrar at 800-257-9520 or registrar@REGTAP.info. The registrars are available by phone from 9:00 AM–5:00 PM ET, Monday through Friday. Registration closes 24 hours prior to each event.

Agent and Broker FFM Registration Completion List

Plan Year 2016 Agent and Broker FFM Registration Completion List

CMS is pleased to announce that the Agent and Broker FFM Registration Completion List for Plan Year 2016 is now available on the [Agents and Brokers Resources webpage](#). The list includes the National Producer Numbers (NPNs) of agents and brokers who have completed plan year 2016 registration requirements for the FFM. Issuers can review the Agent and Broker FFM Registration Completion List to confirm that agents and brokers with whom they have agreements are authorized to assist consumers in selecting plans through the FFM.

If you completed all of the plan year 2016 agent and broker registration and training requirements for the FFM, you should review the Agent and Broker FFM Registration Completion List for Plan Year 2016 to confirm that your NPN is included. You can search NPNs by clicking the arrow in cell A1, or by using the “Ctrl + F” (or “Command + F”) keystroke. All NPNs are self-reported by the agent or broker during FFM registration, and should be validated against state and/or other National Association of Insurance Commissioners records to confirm state licensure. Agents and brokers who completed registration after the date the list was last updated should continue to check back, as CMS expects to post a new update shortly.



Plan Year 2015 Agent and Broker FFM Registration Completion List

CMS has also posted an updated plan year 2015 Agent and Broker FFM Registration Completion List, which contains the NPNs of agents and brokers who have completed plan year 2015 registration requirements for the FFM. As a reminder, plan year 2015 registration and training is closed; however, issuers may still review the Agent and Broker FFM Registration Completion List for Plan Year 2015 to confirm that agents and brokers with whom they have agreements are authorized to assist consumers in selecting plans through the FFM for the remainder of plan year 2015. If you completed the plan year 2015 agent and broker registration and training requirements for the FFM, you can check the list to confirm that your NPN is included on the latest list.

Plan Year 2016 Registration and Training Resources

CMS has recently released a number of resources to assist you in completing the plan year 2016 FFM agent and broker registration and training requirements.

Guidance on Plan Year 2016 FFM Registration and Training for Agents and Brokers Webinar

CMS hosted seven sessions of the “Guidance on Plan Year 2016 FFM Registration and Training for Agents and Brokers” webinar on September 8, 10, 11, 15, 17, 18, and 25, 2015. The slides from this webinar are now available on the [Agents and Brokers Resources webpage](#). The slides provide an overview of the agent and broker FFM registration and training requirements and process steps, including screenshots, and information about the new option to take training from a CMS-approved vendor. If you have not already done so, please take a moment to review this presentation.

Agent and Broker Registration and Training Quick Reference Guide

Check out the “[Quick Reference Guide: Plan Year 2016 FFM Registration for Agents and Brokers](#)” on the Agents and Brokers Resources webpage. This guide provides step-by-step instructions for completing plan year 2016 FFM agent and broker registration and training via the new Marketplace Learning Management System or through one of the CMS-approved vendors.

Agent and Broker Registration and Training Videos

CMS has also released a number of guided tour videos for different steps of the FFM agent and broker registration and training process. *Please note: Agents and brokers previously registered with the FFM should start at Step 4 and use their existing FFM user ID and password.*

Watch the videos here:

[Step 1—Creating an Enterprise Portal Account](#)

[Step 2—Navigating to the Registration Status Page](#)

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[Step 3—Completing Identity Proofing](#)

[Step 4—Accessing Training Options](#)

[Step 5—\(Vendor Training Option\)—Completing FFM Registration After Completing Training with a Third-Party Vendor](#)

You can also view these videos and check out other registration and training resources by visiting the [Agents and Brokers Resources webpage](#).

Spanish Training for FFM Agents and Brokers

A Spanish version of the CMS-developed plan year 2016 FFM training for agents and brokers is available through the MLMS on the [CMS Enterprise Portal](#). Please note that completion of the Spanish version satisfies the agent and broker training requirement.

Plan Year 2016 Agent and Broker Agreements

Agent and Broker Agreements for Each Market Segment

Once you have completed the appropriate agent and broker FFM training(s), you will need to execute up to three Agreements, depending on which market segment(s) (i.e., individual market or SHOP) you plan to participate in.

The first is the Individual Marketplace General Agreement, which includes terms for complying with federal and state laws, rules, standards, and policies.

The second is the Individual Marketplace Privacy and Security Agreement, which includes privacy and security policies for protecting consumers' personally identifiable information, or PII.

Finally, the third is the SHOP Marketplace Agreement, which includes privacy and security policies for protecting consumers' PII.

As an agent and broker, if you are participating in both the Individual Marketplace and the SHOP Marketplace, you must execute all three Agreements. If you are participating in only the Individual Marketplace, you must execute the Individual Marketplace General Agreement and the Individual Marketplace Privacy and Security Agreement. If you are participating in only the SHOP Marketplace, you are only required to execute the SHOP Marketplace Agreement. Note that if you do not complete the plan year 2016 Agreement for the SHOP Marketplace you will be unable to log in to the SHOP Agent/Broker Portal to enroll new groups and manage accounts for your existing clients.

Plan year 2015 Agreements expire on November 12, 2015, which means that from November 1 through November 12, 2015, both the plan year 2015 and plan year 2016 Agreements will be active. Each



of the agent and broker Agreements for plan year 2016 expire on the day before the first day of the Open Enrollment period for the plan year 2017. Please note that the Agreements do not specify a fixed expiration date as the start of Open Enrollment is subject to annual regulatory change.

Executing Plan Year 2016 Agent and Broker Agreements After Completing CMS-approved Vendor Training

If you complete training with a CMS-approved vendor, you still need to execute the applicable Agreement(s) with CMS on the MLMS prior to assisting consumers seeking to enroll in health coverage through the FFM. To execute the Agreements:

1. Log in to the CMS Enterprise Portal using the following link: <https://portal.cms.gov>. Remember to use the CMS Enterprise Portal user ID and password you created when you originally completed agent/broker registration.
2. Click on the “MLMS > Training” link that appears at the top left of the page (yellow tab).
3. Fill out the required information on the MLMS agent/broker profile page.
4. Click “Save/Update” to access the MLMS agent/broker landing page.
5. Once on the MLMS agent/broker landing page, navigate to the “Current Learning” section, hover over “Launch” beside the applicable curriculum/Agreement, and click “Enroll” to begin executing the Agreement.

Spotlight on Eligibility and Enrollment (E&E)

Guidance for Issuers on Plan Year 2016 Reenrollment through the FFM

CMS recently issued [Guidance for Issuers on 2016 Reenrollment in the FFM](#). This guidance provides an overview of the redetermination and reenrollment process for the Annual Open Enrollment Period (OEP) for plan year 2016, and highlights important changes. “Redetermination” refers to the requirement that Marketplaces must determine the eligibility of consumers to reenroll in QHP coverage through the Marketplace. The term “reenrollment” describes the process by which an FFM ensures that an issuer continues an enrollee’s QHP coverage from one plan year to the next; this includes both active reenrollment (i.e., current enrollee initiates reenrollment and plan selection) and passive reenrollment (i.e., auto-reenrollment for current enrollees who do not update their eligibility information and make an active plan selection). For more information on these topics, please review the guidance.

E&E Tips: Reenrollment in a Qualified Health Plan (QHP)

Some consumers you help will already have health coverage through the Marketplace and will need your help with reenrolling in a QHP. Asking consumers the following questions will help you understand how to move forward with potential reenrollments in Marketplace plans:

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- Are you currently enrolled in a QHP through the Marketplace?
- Do you use your QHP? What was your experience like with your QHP?
- What questions do you have about using your QHP?
- Was your QHP sufficient to meet your needs? Why or why not?

E&E in the FFM: Twelve Tips for Agents and Brokers

CMS hosted the “Eligibility and Enrollment in the FFM: Twelve Tips for Agents and Brokers” webinar on January 27 and 29, 2015, and the webinar slides are available on the [Agents and Brokers Resources webpage](#). CMS recommends that you take a moment to review these slides to help you as you prepare to assist consumers during Open Enrollment. The slides contain information on the following topics:

- Crediting an agent/broker for an enrollment transaction
- Locations for capturing the NPN on FFM applications
- Assisting consumers with an application that stalled in the FFM
- Prohibition on QHP issuers denying enrollment to qualified individuals
- Using the Marketplace pathway for QHP issuers and web-brokers who do not support Direct Enrollment
- Assisting consumers in reporting change of life circumstances
- Assisting consumers that are eligible for other government-sponsored health coverage to determine whether they are eligible for FFM coverage
- Citizenship requirements for FFM eligibility
- Eligibility requirements for APTC and cost-sharing reductions (CSRs)
- Looking up clients’ applications

Small Business Health Options Program (SHOP) Corner

Small Group Market Definition and SHOP Marketplace Eligibility

Congress recently enacted legislation that establishes a standard definition of small group for purposes of health insurance markets. The legislation impacts the size of small businesses that will be able to participate in the small group market and SHOP Marketplace beginning in 2016. Specifically, the legislation defines the small group market as employers with 1-50 employees; however, states have the option to expand this definition to include employers with 1-100 employees.

Relaxed SHOP Marketplace Minimum Participation Rate (MPR) Calculations

As of November 1, 2015, employees who are enrolled in health coverage outside of the SHOP Marketplace will be counted towards an employer’s MPR calculation, making it easier for employers to enroll in the SHOP Marketplace in 2016 and beyond. For example, in most states, a business with 10 employees must have seven employees enrolling in coverage before the employer will be able to enroll in the SHOP Marketplace. Under the new regulation, if two employees have coverage through a spouse and another has coverage through the Individual Marketplace, the employer would need only four

employees to sign up for coverage—rather than the seven employees that would have had to sign up pursuant to last year’s regulations.

Get Your Clients Ready: From November 15 - December 15, No Participation Rates Will Be Calculated for SHOP Marketplace Enrollments

- Do you have clients who want to offer coverage but struggle to meet participation requirements? The SHOP Marketplace can help you. **Small employers may enroll in SHOP Marketplace coverage between November 15 and December 15 without meeting participation requirements.** This one-month window is available each year to small employers enrolling in January 1st coverage. Outside of this window, employers who want to enroll in the SHOP Marketplace must meet a participation rate set by their state (typically 70%) before they can enroll in coverage.
- Do you have renewals coming up? Enroll your clients in SHOP Marketplace coverage while the participation rate is waived. For more information visit: www.healthcare.gov/small-businesses.

Update on Periodic Data Matching (PDM) for Dually-enrolled Consumers

In September 2015, the Marketplace mailed paper notices to the household contacts of consumers who may be enrolled in both a Marketplace plan with APTC or CSRs and Medicaid or the Children’s Health Insurance Program (CHIP) that qualifies as minimum essential coverage (MEC),* with instructions on what to do next. If these “dually-enrolled” consumers do not end their Marketplace coverage with APTC or CSRs, the tax filer(s) for those consumers’ households will likely have to pay back all or some of the APTC received for a Marketplace plan during the months the consumers were eligible for MEC Medicaid or CHIP. As an agent or broker, you can help consumers complete the necessary next steps.

This update includes **Q&As that address how to help consumers** who receive this notice and several **links to resources**.

Overview

PDM is a process the Marketplace uses to identify consumers who are enrolled in Marketplace coverage with APTC or CSRs and MEC Medicaid or CHIP. In September 2015, as part of PDM, the Marketplace mailed paper notices to the household contact for any consumers it found to be dually-enrolled.** The notices tell consumers to either: immediately end their Marketplace coverage with APTC or CSRs (if they are enrolled in MEC Medicaid or CHIP), with instructions on how to do so; or take no further action (if they are no longer enrolled in Medicaid or CHIP). The notice also provides instructions for consumers who want more information about Medicaid or CHIP, or if they are not sure whether they are enrolled in Medicaid or CHIP. As an agent or broker, you may have consumers come to you for assistance completing the necessary next steps.

**Most Medicaid or CHIP is considered MEC; some forms of Medicaid or CHIP coverage (e.g., emergency Medicaid or coverage for pregnancy-related services only) are not considered MEC.*

***Not all states were able to fully participate in this round of PDM. Consumers in the following states did not receive notices in this round of PDM: AK, DE, GA, ME, MI, NJ, OR, SC, TN, and WY.*

Questions & Answers (Q&As): How to Help Consumers Who Receive the Notice

Q1: Who does this notice impact?

A1: This notice impacts consumers who are enrolled in both a Marketplace plan with APTC or CSRs and Medicaid or CHIP. Consumers who were identified as enrolled in both a Marketplace plan with APTC or CSRs and Medicaid or CHIP will be notified; however, the Marketplace cannot identify all consumers in all Marketplace states who were dually-enrolled because not all states were able to fully participate in periodic data matching for technical reasons. Consumers in the following states did not receive notices in this round of PDM: AK, DE, GA, ME, MI, NJ, OR, SC, TN, and WY.

Q2: Why would consumers be enrolled in both Marketplace coverage with APTC or CSRs and Medicaid or CHIP coverage?

A2: A consumer may experience a life change (e.g., drop in income) making him or her eligible for Medicaid or CHIP, but he or she may fail to terminate Marketplace coverage with APTC or CSRs after reporting the change directly to the Marketplace. Similarly, consumers who are enrolled in Marketplace coverage with APTC or CSRs may apply for Medicaid or CHIP directly with the state agency and be determined eligible, but fail to terminate Marketplace coverage with APTC or CSRs. While the Marketplace reinforces in many places the importance of reporting changes to the Marketplace and ending Marketplace coverage with APTC or CSRs after being determined eligible for or enrolling in other minimum essential coverage, this PDM notice is a reminder for consumers who may not have been aware that they need to terminate their Marketplace coverage with APTC or CSRs.

Q3: Why is this important for consumers?

A3: Consumers determined eligible for Medicaid or CHIP are not eligible for a Marketplace plan with APTC or CSRs and should end their Marketplace coverage with APTC or CSRs. If interested, these consumers may maintain Marketplace coverage without financial assistance. If consumers who are determined eligible for Medicaid or CHIP and who are enrolled in a Marketplace plan with APTC or CSRs do not end their Marketplace coverage with APTC or CSRs, the tax filer(s) for those consumers' households will likely have to pay back all or some of the APTC received during the months the consumers are also eligible for Medicaid or CHIP. (Note: Liability starts the first of the month following the Medicaid or CHIP eligibility determination.)

Q4: When does tax liability begin for APTC received while enrolled in Medicaid or CHIP?

A4: While tax liability is determined exclusively by the Internal Revenue Service (IRS), according to IRS rules, the tax filer(s) for the consumer's household may be liable to pay back APTC for months the consumer is enrolled in a Marketplace plan with APTC or CSRs and Medicaid or CHIP beginning on the first day of the month following the Medicaid or CHIP eligibility determination. In accordance with IRS regulations, repayment is subject to statutory caps.

Q5: When and how are these notices being sent to consumers?

A5: The Marketplace mailed paper notices in September 2015 to the household contact for applications

with consumers who may be dually-enrolled. The notices are not available electronically in consumer user accounts. Additional data matching and notifying of consumers will occur in 2016; updates will be provided when more information is available.

Q6: How will consumers identify these notices, and what do the notices say?

A6: The subject of the notice reads “You’re getting this notice because some people in your household may be enrolled in both a Marketplace health plan and Medicaid or Children’s Health Insurance Program (CHIP) and you may need to take action immediately to end Marketplace coverage with advance payments of the premium tax credit or cost-sharing reductions.” The notice lists the consumers the Marketplace found to be dually-enrolled, and tells them to do one of two things: 1) if they are enrolled in Medicaid or CHIP, immediately end their Marketplace coverage with APTC or CSRs (the notice provides instructions on how to do so), or 2) take no further action if they are no longer enrolled in Medicaid or CHIP. The notice also provides instructions for consumers who want more information about Medicaid or CHIP, or if they are not sure whether they are enrolled in Medicaid or CHIP.

Q7: As an agent or broker, why might consumers contact me, and how can I help them?

A7: Consumers who receive the notice may contact agents or brokers: (a) for help understanding the notice, (b) for help ending Marketplace coverage with APTC/CSRs, (c) if they do not think they are enrolled in Medicaid or CHIP, (d) if they want more information about Medicaid or CHIP, and/or (e) if they are not sure if they are enrolled in Medicaid or CHIP. Here are some examples of the ways that you can help consumers who contact you:

- **Help consumers understand the notice.** Explain that consumers who have been determined eligible for MEC Medicaid or CHIP are not eligible for a Marketplace plan with APTC or CSRs, and that they should immediately end their Marketplace coverage with APTC/CSRs (see links below). If dually-enrolled consumers do not end their Marketplace coverage with APTC, the tax filer(s) for those consumers’ households will likely have to pay back all or some of the APTC received during the months the consumers were also enrolled in Medicaid or CHIP. (Note: Liability starts the first of the month following the Medicaid or CHIP eligibility determination.)

If interested, these consumers may maintain Marketplace coverage without financial assistance. After ending their Marketplace coverage with APTC/CSRs, they will need to submit a new application for Marketplace coverage without financial assistance, if they are otherwise eligible. (Consumers can enroll in coverage outside of Open Enrollment if they have a life event that qualifies them for a [Special Enrollment Period](#).)

- **Encourage consumers who are enrolled in MEC Medicaid or CHIP to take immediate action** to end their Marketplace coverage with APTC/CSRs. To help you assist consumers with the process of ending their Marketplace coverage with APTC/CSRs, see [this](#) presentation. Consumer instructions for ending Marketplace coverage when a consumer gets Medicaid or CHIP are available on HealthCare.gov [here](#).

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- Inform consumers who do not think they are enrolled in Medicaid or CHIP that they may want to contact their state Medicaid or CHIP agency to confirm that they are not enrolled or have not been determined eligible for Medicaid or CHIP. If the state agency confirms that the consumers are not enrolled in Medicaid or CHIP coverage, they do not need to take further action with the Marketplace.
- Advise consumers who want more information about Medicaid or CHIP, or who are not sure if they are enrolled in or eligible for Medicaid or CHIP, to contact their state Medicaid or CHIP agency.

Supported Browsers for the Marketplace Learning Management System (MLMS) Platform

To ensure the best experience with the MLMS, please use Mozilla Firefox or Google Chrome as your web browser.

- You can download the latest version of Mozilla Firefox at the following link:
<https://www.mozilla.org/en-US/firefox/new/>.
- You can download the latest version of Google Chrome at the following link:
<https://www.google.com/chrome/browser/desktop/>.

If you are using Mozilla Firefox or Google Chrome and are still experiencing any technical or system-specific issues or require further assistance related to the MLMS, please contact the MLMS Help Desk at MLMSHelpDesk@cms.hhs.gov.

Did You Know?

If you have previously created a CMS Enterprise Portal account at <https://portal.cms.gov>, it is vital that you log in to that existing account to complete registration for plan year 2016. If you cannot recall your User ID or password, you can recover that information and do not need to create a new account. The CMS Enterprise Portal homepage includes two links on the right hand side for “Forgot User ID” and “Forgot Password.” You should click on the link applicable to your situation and follow the instructions provided to recover your account information.

Follow us on Twitter

Agents and brokers can find important information and updates by following the CMS Twitter handle ([@CMSGov](https://twitter.com/CMSGov)) or by searching the hashtags #ABFFM or #ABFFSHOP on Twitter.

Contact Us

For questions pertaining to the FFM agent and broker program, including the FFM registration requirements, or to subscribe to this newsletter, please contact the FFM Producer and Assister Help Desk via email at FFMProducer-AssisterHelpDesk@cms.hhs.gov.

