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HPOES User Manual Change History

October 2014 Revisions

The following updates have been made to Section 2:

• The description of the Authorizing Official user role has been updated. Authorizing Official users will only be able to search and view applications.

The following updates have been made to Section 3:

- Section 3.1.3 and Section 3.1.4 have been updated in various areas to include text updates on the user interface (UI).
- Section 3.1.3.2, Section 3.1.3.3, and Section 3.1.3.4 have been updated to reflect the removal of the Authorizing Official approval process. Additionally, the application workflow includes a new progress bar image through the application process.
- Section 3.1.3.6 has been updated to reflect the removal of the Authorizing Official approval process.
- Section 3.1.4 has been updated to reflect the removal of the Authorizing Official's ability to approve or reject applications. Authorizing Official users will only be able to search and view applications.

1 Introduction

The Department of Health and Human Services (HHS) has adopted a standard for a unique health plan identifier (HPID) and another entity identifier (OEID). The adoption of a unique health plan identifier is designed to eliminate the need for multiple identifiers in order to streamline HIPAA standard transactions. The unique identifiers may also be used for any other lawful purpose to uniquely identify a health plan or other entity.

The Office of E-Health Standards and Services (OESS), as delegated by HHS, has developed the final rule for the adoption of unique identifiers and the creation of an online enumeration system. The enumeration system has been named the Health Plan and Other Entity Enumeration System (HPOES) and is referred to as such in this document.

This user manual explains the user functionality of the HPOES module within the Health Insurance Oversight System (HIOS), including submitting an application, creating a profile, system approval of an application, assignment of an HPID or OEID number, and editing an application. This manual provides step-by-step instructions for the features and functionalities available in HPOES.

2 Introduction to Health Plan and Other Entity Enumeration System

The HPOES System requires three types of users: 'Guest', 'Submitter' and 'Authorizing Official'. A user has access to functionality within the system based on the roles associated to the user type.

The following is a brief description of the three user roles within the HPOES System:

- Guest A Guest user who does not need to apply for a Health Plan Identifier (HPID) or Other Entity Identifier (OEID), but would like to stay current on HPOES news and information.
- 2. Submitter A Submitter user is a representative of a Health Plan or an Other Entity who has the ability to complete and submit an application on behalf of the health plan or other entity.
- 3. Authorizing Official An Authorizing Official user is an individual that has the authority to legally bind the entity and holds ultimate responsibility, for example the chief executive officer (CEO), the chief compliance officer, and the chief financial officer (CFO). An Authorizing Official user can view the applications submitted by the organization's Submitter user(s).

2.1 What entities can get a Health Plan Identifier (HPID)?

An entity must meet the definition of Health Plan at 45 CFR 160.103 to get an HPID. For purposes of the HPID, there are two classifications of health plans – a Controlling Health Plan (CHP) and a Subhealth Plan (SHP). A Controlling Health Plan must get an HPID, while a Subhealth Plan is eligible but not required to get an HPID. To determine whether a Subhealth Plan should get an HPID, the CHP and/or the SHP should consider whether the SHP needs to be identified in the standard transactions. A CHP may get an HPID for its SHP or may direct a SHP to get an HPID.

2.2 What entities are eligible to get an Other Entity Identifier (OEID)?

An entity is eligible to get an OEID if the entity meets ALL of the following:

- 1. Needs to be identified in the standard transactions;
- 2. Is NOT eligible to obtain an HPID;
- 3. Is NOT eligible to obtain an National Provider Identifier (NPI); and
- 4. Is NOT an Individual.

Examples of entities that are eligible to get an OEID include third party administrators, clearinghouses, and non-HIPAA covered entities such as auto liability and workers compensation carriers.

2.3 When must a health plan get and use HPIDs?

Health plans that are not Small Health Plans must get HPIDs by November 5, 2014. Small health plans must get HPIDs by November 5, 2015. All health plans and other HIPAA covered entities must use an HPID to identify a health plan that has an HPID in the standard transactions by November 7, 2016.

2.4 When must other entities get and use OEIDs?

Other Entities are not required to get or use OEIDs since it is a voluntary identifier.

2.5 What is the HPID and OEID format?

Both the HPID and the OEID numbers are 10 characters in length and consist of numeric characters only. HPID numbers have '7' as the predefined leading digit while OEID numbers have '6' as the predefined leading digit.

3 Health Plan and Other Entity Enumeration System

HPOES is accessed by three types of users: Guest, Submitter, and Authorizing Official. A user's access to system functionalities depend upon the user role assigned to that user. If you experience issues with access to a specific functionality within the HPOES System, please contact the Exchange Operations Support Center (XOSC). The Exchange Operations Support Center (XOSC) contact information can be found in Section 5.

3.1 HPOES Functionality

This section discusses the different functionalities available to each user type. The first section describes HIOS Portal Functionality that is available to all users. There are also separate sections for Guest, Submitter, and Authorizing Official user roles.

3.1.1 HIOS Portal Functionality

The following HIOS Portal functionalities are available for all users:

- Request a User Role
- Manage an Organization

Please refer to the HIOS Portal User Manual located under the "Forms, Reports, and Other Resources" link on the CCIIO website for instructions on how to register/create an organization, request a role in HPOES, or obtain access to an organization.

3.1.2 'Guest' User Role

Within the HPOES System, a Guest user can access the following functionalities:

Submit Feedback

Figure 1: HPOES Guest User Homepage below is a screenshot of the HPOES homepage displayed once a Guest user logs into HIOS and clicks on the 'Health Plan and Other Entity Enumeration System' link. Guest users may submit feedback through a text box located at the bottom of the homepage.

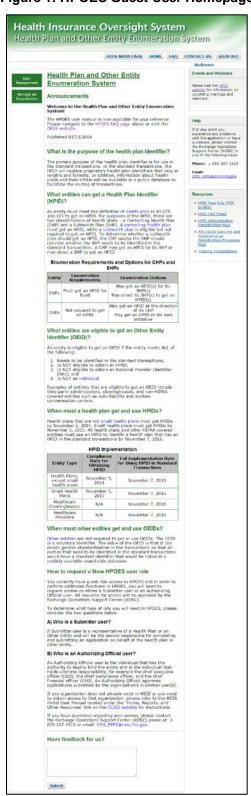


Figure 1: HPOES Guest User Homepage

3.1.3 'Submitter' User Role

Within the HPOES system, a user with a 'Submitter' user role can perform the following functions:

- Submit Feedback
- Submit a Controlling Health Plan (CHP) HPID Application
- Submit a Subhealth Plan (SHP) HPID Application
- Submit an Other Entity Identifier (OEID) Application
- Search Applications
- Edit Applications
- View Audit History for Applications

The following sections provide a description of these functionalities.

3.1.3.1 Submit Feedback

Figure 2: HPOES Submitter User Homepage is a screenshot of the HPOES homepage displayed once a Submitter user logs into HIOS and clicks on the 'Health Plan and Other Entity Enumeration System' link. Submitter users may submit feedback through a text box located at the bottom of the homepage.

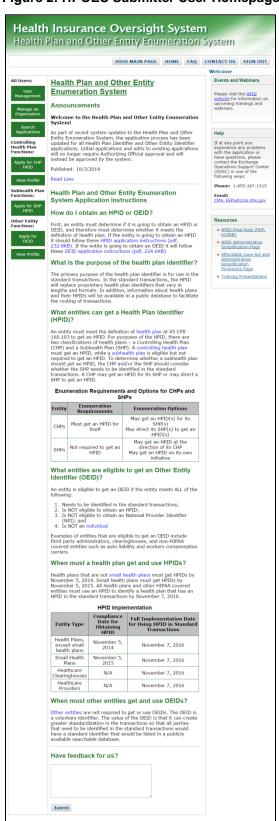


Figure 2: HPOES Submitter User Homepage

3.1.3.2 How to Submit a Controlling Health Plan (CHP) HPID Application

Step 1: Navigate to the HIOS Main Page.

Step 2: Select 'Health Plan and Other Entity Enumeration System' button on the left hand menu.

The user will be directed to the 'HPOES Homepage' for a Submitter User. (Please see <u>Figure 3:</u> <u>HPOES Submitter User Homepage</u> below).

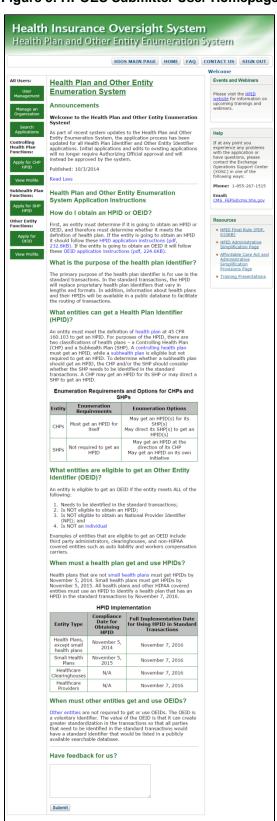


Figure 3: HPOES Submitter User Homepage

Step 3: Select 'Apply for CHP HPID' button on the left hand menu.

The user will be directed to the first step in the Controlling Health Plan profile creation process. (Please see <u>Figure 4: CHP Organization Information Page</u> below).

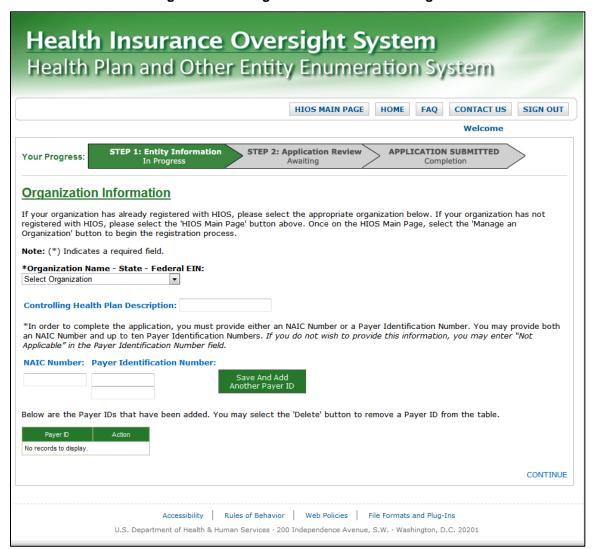


Figure 4: CHP Organization Information Page

Step 4: Select an organization from the Organization Name dropdown.

If the user does not see the organization in the organization dropdown list, the user can navigate to the HIOS Main Page to request permission to request on the organization's behalf. Please refer to the HIOS Portal User Manual located under the "Forms, Reports, and Other Resources" link on the CCIIO website for instructions on how to register/create an organization, request a role in HPOES, or obtain access to an organization.

Based on the organization selected from the dropdown, the system will display information drawn from the HIOS database. (Please see <u>Figure 5: CHP Organization Information Page – Display Information</u> below).

Figure 5: CHP Organization Information Page – Display Information

Health Insu	ırance Oversight System
Health Plan a	nd Other Entity Enumeration System
	HIOS MAIN PAGE HOME FAQ CONTACT US SIGN OUT
	Welcome
	Entity Information In Progress STEP 2: Application Review APPLICATION SUBMITTED Completion
Organization Info	<u>rmation</u>
organization has not registe	eady registered with HIOS, please select the appropriate organization below. If your ered with HIOS, please select the 'HIOS Main Page' button above. Once on the HIOS age an Organization' button to begin the registration process.
Note: (*) Indicates a requi	red field.
*Organization Name - St JN Test Company 1 - VA - 123	
Federal EIN:	123455555
<u>Address</u>	
Address Line 1:	123 Test Street
Address Line 2:	N/A
City:	Oakton
State	VA
Zip:	22124
Zip Plus 4:	N/A
Controlling Health Plan	Description:
Number. You may provide	application, you must provide either an NAIC Number or a Payer Identification both an NAIC Number and up to ten Payer Identification Numbers. <i>If you do not wish you may enter "Not Applicable" in the Payer Identification Number field.</i>
NAIC Number: Payer Ide	Save And Add Another Payer ID
Below are the Payer IDs that the table.	at have been added. You may select the 'Delete' button to remove a Payer ID from
Payer ID Action No records to display.	
	CONTINUE

Step 5: Provide organization information.

After the information has been displayed for the selected organization, the user will have the option to provide a Controlling Health Plan Description. If more than one Controlling Health Plan application exists for the selected organization, this field will be required. This field provides users a way to uniquely identify one CHP from another within the same organization.

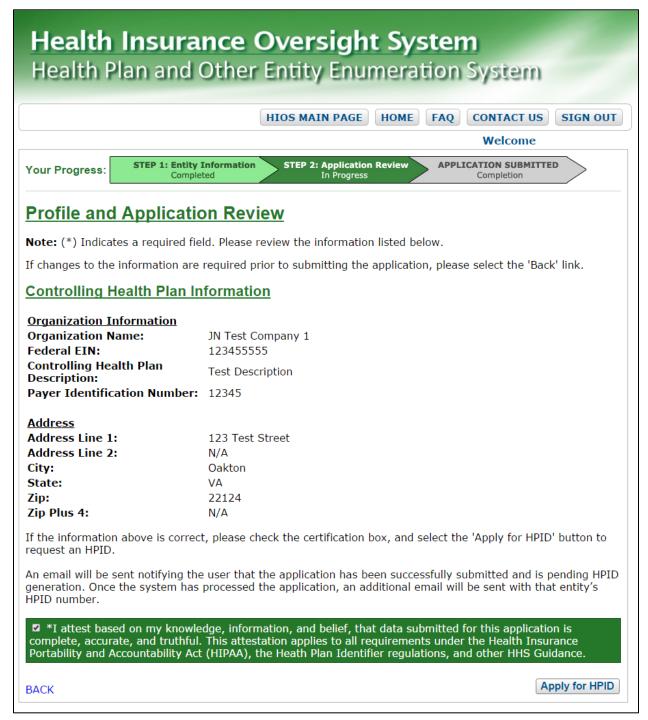
The user will also be required to enter either an NAIC Number or a Payer Identification Number to proceed in the application. The user may click on the Controlling Health Plan Description, NAIC Number or Payer Identification Number links to see a pop-up definition of each term. If the user does not wish to provide an NAIC Number or Payer Identification Number, the user may enter "Not Applicable" in the Payer Identification Number field.

Once the user has provided the organization information, they can click on the 'CONTINUE' link and navigate to the 'Profile and Application Review' page.

Step 6: Select 'Apply for HPID' button.

On the 'Profile and Application Review' page, the system will display all information captured throughout the profile creation process. Once the certification checkbox is selected, the 'Apply for HPID' button will become active. (Please see <u>Figure 6: CHP Profile and Application Review Page</u> below).

Figure 6: CHP Profile and Application Review Page

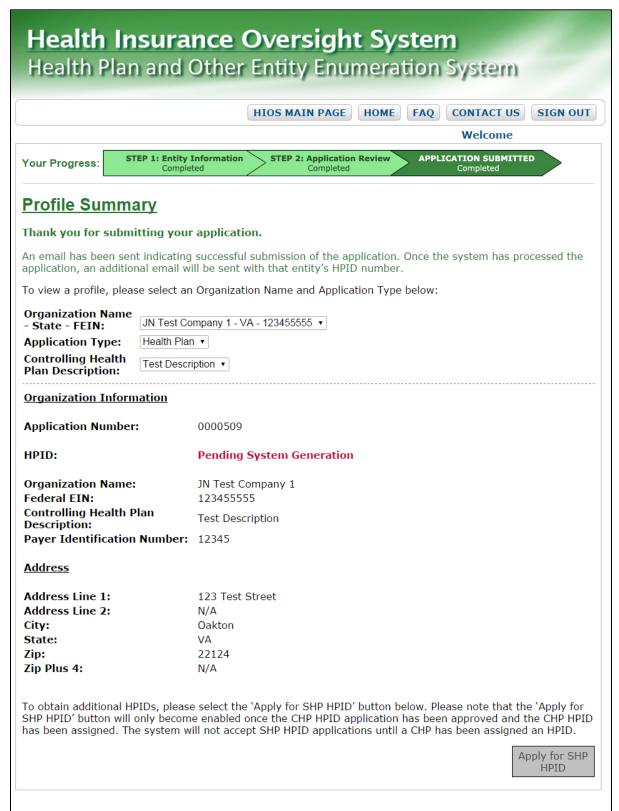


The user will then click the 'Apply for HPID' button to submit the application. An email will be sent to the user informing them that an application has been successfully submitted and is pending HPID generation. Once the system has processed the application, another email will be sent with that entity's HPID number.

Once the user submits the application, the user will be navigated to the 'Profile Summary' page. (Please see <u>Figure 7: CHP Profile Summary Page</u> below). If the user has access to more than one profile, the user may use the 'Organization Name' dropdown to navigate between profiles. If the selected organization has both a Health Plan and Other Entity profile, the user may use the 'Application Type' dropdown to navigate between the two. If the selected organization has more than one Controlling Health Plan, the user may use the 'Controlling Health Plan Description' dropdown to navigate between the profiles.

A user may also access the 'Profile Summary' page by clicking on the 'View Profile' button on the HPOES Homepage. (Please see <u>Figure 3: HPOES Submitter User Homepage</u>). The user can view the summary of the profile and the status of the application on the 'Profile Summary' page.

Figure 7: CHP Profile Summary Page



3.1.3.2.1 Apply for Subhealth Plan (SHP) HPID under a CHP Profile

If a user associated to a CHP would like to apply for SHP HPID(s), the user can click on the 'Apply for SHP HPID' button on the Profile Summary page to request HPID(s) for the Subhealth Plan(s). This button only becomes active after the CHP has been assigned an HPID. If the CHP has not been assigned an HPID yet, the 'Apply for SHP HPID' button will be grayed out. (Please see Figure 8: CHP Profile Summary – No HPID Assigned below).

Figure 8: CHP Profile Summary - No HPID Assigned



If the CHP has already been assigned an HPID, the 'Apply for SHP HPID' button will be enabled, as shown in <u>Figure 9: CHP Profile Summary – HPID Assigned</u>. Once the user clicks the 'Apply for SHP HPID' button from the 'Profile Summary' page, the system will start a SHP application and automatically populate the CHP information pulled from the 'Profile Summary' page. The user is navigated to the 'Subhealth Plan Identification' page shown in <u>Figure 13: Subhealth Plan Type Page</u> and follows the process mentioned in section <u>3.1.3.3</u> to request HPID(s) for the SHPs.

If the CHP has any associated SHPs, the SHP HPID application information will display in a table on the 'Profile Summary' page, shown in <u>Figure 9: CHP Profile Summary – HPID</u>
<u>Assigned</u>. If the user clicks on the 'View' link within the table, the user will be navigated to the 'View Application' page shown in <u>Figure 10: View Approved SHP Application Page</u>.

Figure 9: CHP Profile Summary - HPID Assigned

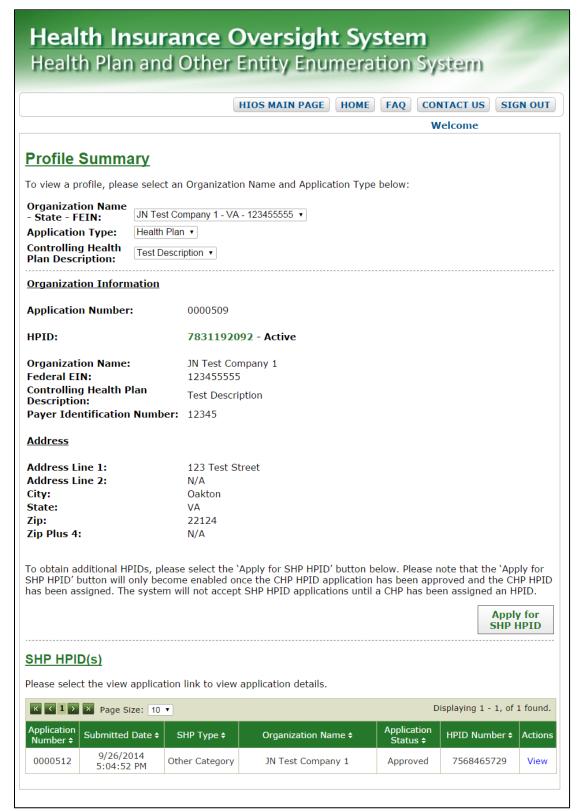
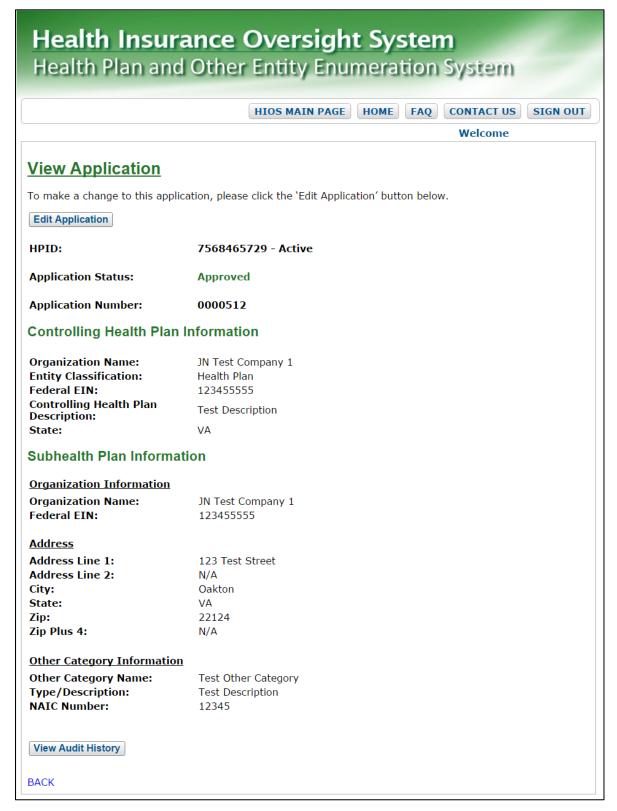


Figure 10: View Approved SHP Application Page



3.1.3.3 How to Submit a Subhealth Plan (SHP) HPID Application

Step 1: Navigate to the HIOS Main Page.

Step 2: Select 'Health Plan and Other Entity Enumeration System' button on the left hand menu.

The user will be directed to the 'HPOES Homepage' for a Submitter User. (Please see <u>Figure 11: HPOES Submitter User Homepage</u> below).

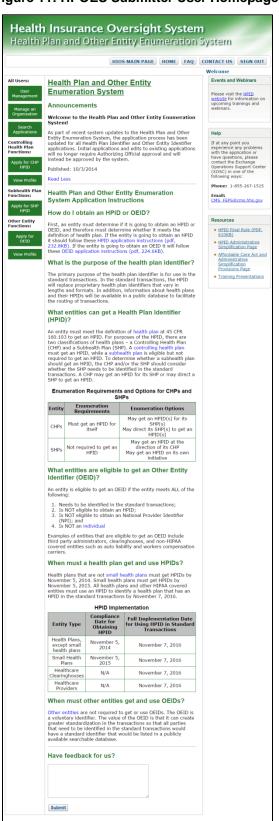


Figure 11: HPOES Submitter User Homepage

Step 3: Select the 'Apply for SHP HPID' button on the left hand menu.

The user will be directed to the first step in the Subhealth Plan application creation process.

Step 4: Identify the Controlling Health Plan.

The user will need to identify the Controlling Health Plan by searching for the CHP HPID Number. (Please see Figure 12: SHP Controlling Health Plan Identification Page below).

Health Insurance Oversight System Health Plan and Other Entity Enumeration System HIOS MAIN PAGE HOME FAQ CONTACT US SIGN OUT Welcome STEP 2: Application Review **APPLICATION SUBMITTED** STEP 1: Entity Information Your Progress: Completion Controlling Health Plan (CHP) Identification **Note:** (*) Indicates a required field. *Please provide the organization's Controlling Health Plan (CHP) HPID number using the search bar below. The CHP that is identified on this page will be included as part of the SHP HPID application. NOTE: If your CHP has not yet received its HPID, you will not be able to move forward until they have received their HPID. Please call the Exchange Operations Support Center (XOSC) at 1-855-267-1515 if you have any questions. **CHP HPID Number:** Search CONTINUE

Figure 12: SHP Controlling Health Plan Identification Page

The user will be directed to the next step of the application process where the user selects the Subhealth plan type. If a user clicks on the hyperlinks for any of the Subhealth plan types, the system displays a definition of the terms displayed on the screen. (Please see <u>Figure 13:</u> <u>Subhealth Plan Type Page</u> below).

Step 5: Identify the Subhealth Plan Type.

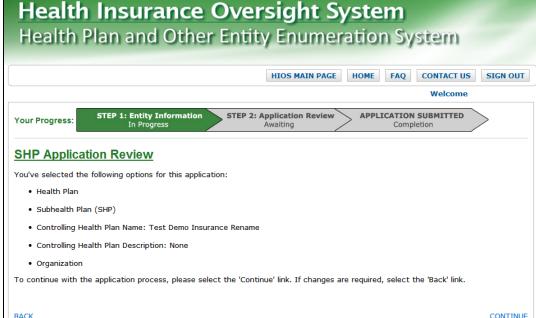
Health Insurance Oversight System Health Plan and Other Entity Enumeration System HIOS MAIN PAGE HOME FAQ CONTACT US STEP 1: Entity Information STEP 2: Application Review APPLICATION SUBMITTED Your Progress: Subhealth Plan Type (*) Indicates a required field. *Please select one of the following:
To view the definitions of the terms listed below, please select the link. Organization Issuer Product Compared to the second of t Other Category BACK CONTINUE

Figure 13: Subhealth Plan Type Page

The user will be directed to the 'SHP Application Review' page to confirm the profile selection. (Please see Figure 14: SHP Application Review Page below).

Figure 14: SHP Application Review Page





The next few steps will walk through the information pages for each SHP type: organization, issuer, product, line of business, and other category.

Step 6(a): Provide Organization Information.

Once the user indicates the application selection as 'Organization' in **Step 5**, the user must select and provide the Organization information. If the user does not see the organization in the organization dropdown list, the user can navigate to the HIOS Main Page to request permission to request on the organization's behalf. Based on the organization selected from the dropdown, the system will display information drawn from the HIOS database.

After the information has been displayed for the selected organization, the user will also be required to enter either an NAIC Number or a Payer Identification Number to proceed in the application. The user may click on the NAIC Number or Payer Identification Number links to see a pop-up definition of each term. If the user does not wish to provide this information, the user may enter "Not Applicable" in the Payer Identification Number field. (Please see <u>Figure 15: SHP Organization Information Page</u> below).

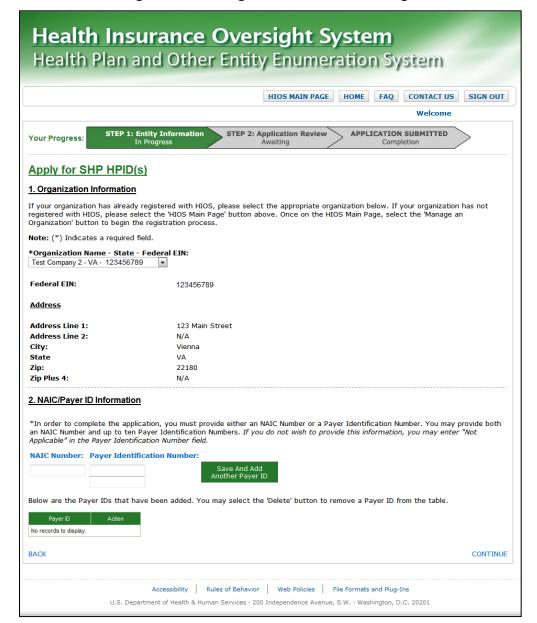


Figure 15: SHP Organization Information Page

Step 6(b): Provide Issuer Information.

Once the user indicates the application selection as 'Issuer' in **Step 5**, the user must first select the Organization from the dropdown and then select and provide the Issuer information. The user will select the Issuer information from the dropdown, which will draw from information already within the HIOS database.

If the user does not see the issuer in the issuer dropdown list, the user can navigate to the HIOS Main Page to register the new issuer.

Additionally, the user will be required to enter either an NAIC Number or a Payer Identification Number to proceed in the application. The user may click on the NAIC Number or Payer Identification Number links to see a pop-up definition of each term. If the user does not wish to provide this information, the user may enter "Not Applicable" in the Payer Identification Number field. (Please see **Figure 16: SHP Issuer Information Page** below).

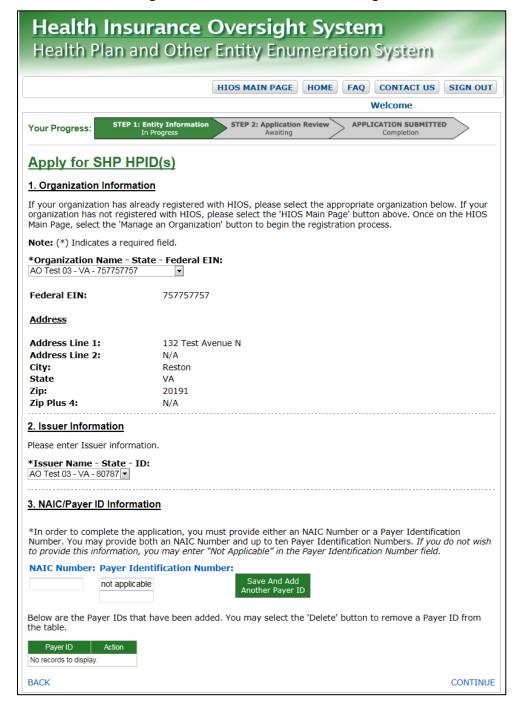


Figure 16: SHP Issuer Information Page

Step 6(c): Provide Product Information.

Once the user indicates the application selection as 'Product' in **Step 5**, the user must first select the Organization and Issuer information from the dropdowns and then select and provide the

Product information. The user will select the Product information from the dropdown, which will draw from information already within the HIOS database.

Additionally, the user will be required to enter either an NAIC Number or a Payer Identification Number to proceed in the application. The user may click on the NAIC Number or Payer Identification Number links to see a pop-up definition of each term. If the user does not wish to provide this information, the user may enter "Not Applicable" in the Payer Identification Number field. (Please see Figure 17: SHP Product Information Page below).

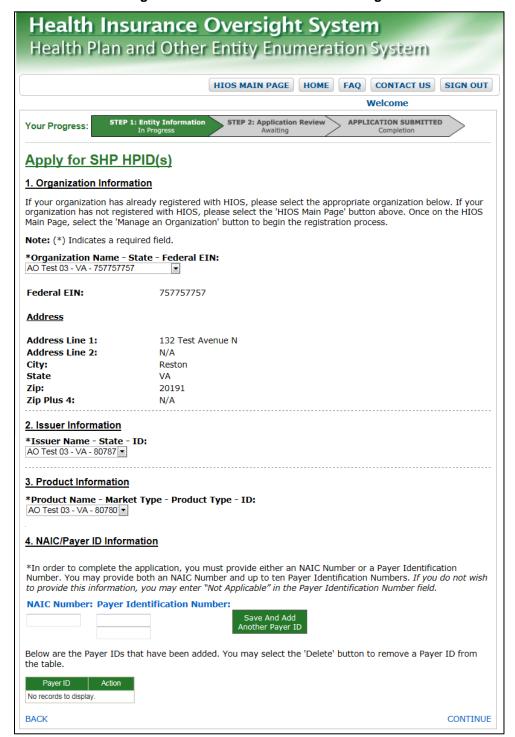


Figure 17: SHP Product Information Page

Step 6(d): Provide Line of Business Information.

Once the user indicates the application selection as 'Line of Business' in **Step 5**, the user must first select the Organization from the dropdown and then select and provide the Line of Business information.

The different Line of Business types are:

- Comprehensive (hospital and medical)
- Dental-Only
- Federal Employees Health Plans (FEHBP)
- HMO (Health Management Organization)
- Hospital/Surgical
- Individual Practice Association
- Medicaid Cost
- Medicaid Risk
- Medicare Cost
- Medicare Other
- Medicare Risk
- Medicare Supplement
- Network Model
- Other (Specify)
- POS (Point of Service)
- PPO (Preferred Provider Organization)
- Self-funded
- Staff Model
- Vision-Only

Additionally, the user will be required to enter either an NAIC Number or a Payer Identification Number to proceed in the application. The user may click on the NAIC Number or Payer Identification Number links to see a pop-up definition of each term. If the user does not wish to provide this information, the user may enter "Not Applicable" in the Payer Identification Number field. (Please see <u>Figure 18: SHP Line of Business Information Page</u> below).

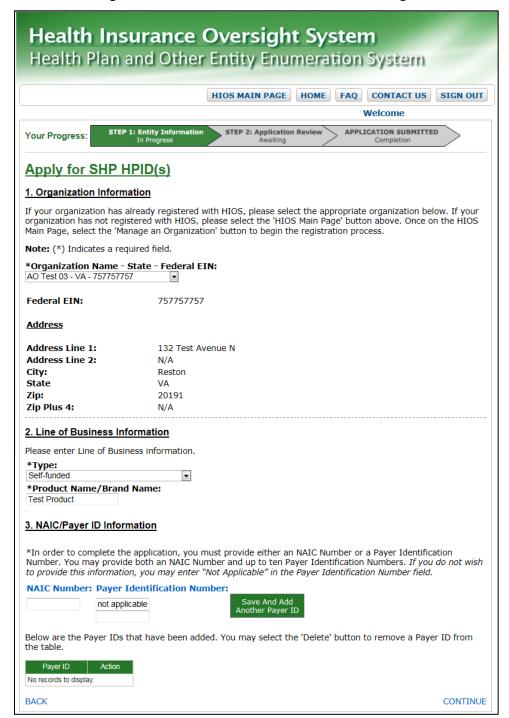


Figure 18: SHP Line of Business Information Page

Step 6(e): Provide Other Category Information.

Once the user indicates the application selection as 'Other Category' in **Step 5**, the user must first select the Organization from the dropdown and then provide the Other Category information.

Additionally, the user will be required to enter either an NAIC Number or a Payer Identification Number to proceed in the application. The user may click on the NAIC Number or Payer Identification Number links to see a pop-up definition of each term. If the user does not wish to provide this information, the user may enter "Not Applicable" in the Payer Identification Number field. (Please see Figure 19: SHP Other Category Information Page below).

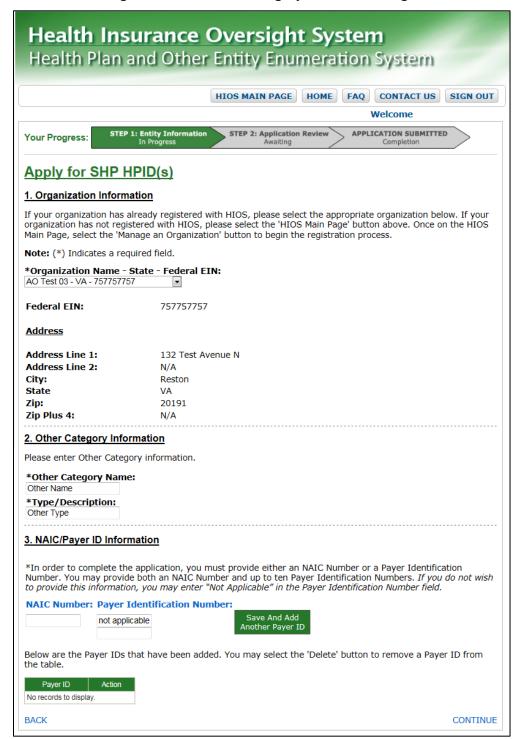


Figure 19: SHP Other Category Information Page

Once the CHP has been selected, the user has made the Subhealth Plan selection in **Step 5** and completed the relevant Subhealth Plan information, the user will be navigated to the application review page.

Step 7: Click 'Apply for HPID' button.

The system will display all information captured throughout the application process. Once the certification checkbox is selected, the 'Apply for HPID' button will become active.

The user will then click the 'Apply for HPID' button to submit the application. An email will be sent to the user informing them that an application has been successfully submitted and is pending HPID generation. Once the system has processed the application, another email will be sent with that entity's HPID number. (Please see <u>Figure 20</u> through <u>Figure 22</u> for the application review pages for Product, Line of Business, and Other Category below).

Figure 20: SHP Product Application Review

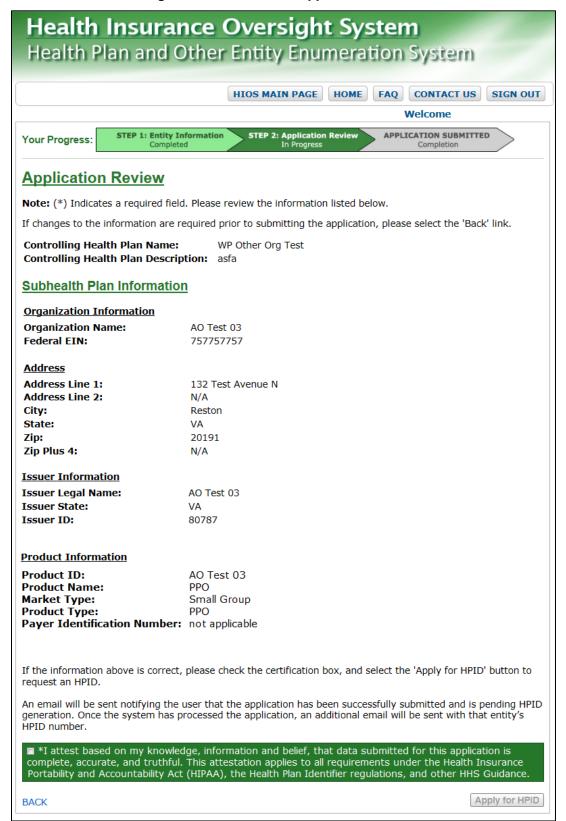


Figure 21: SHP Line of Business Application Review

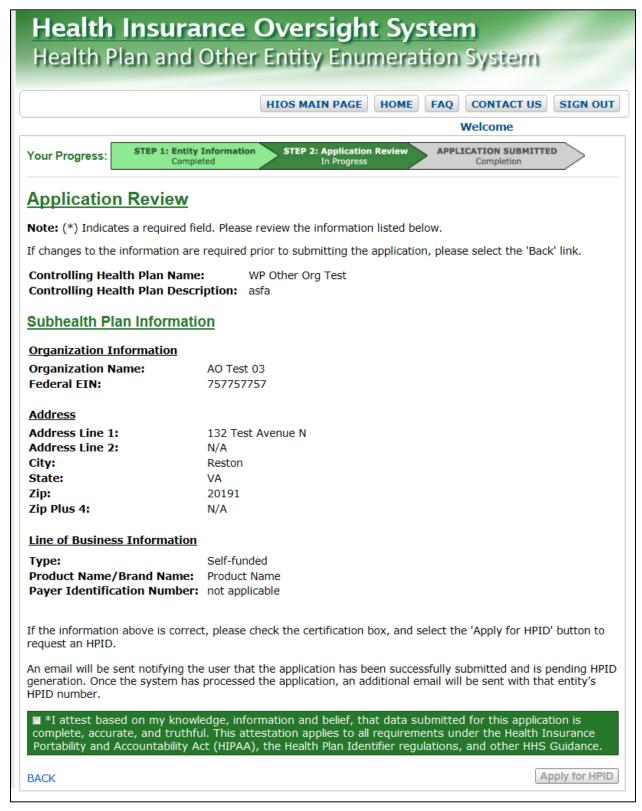
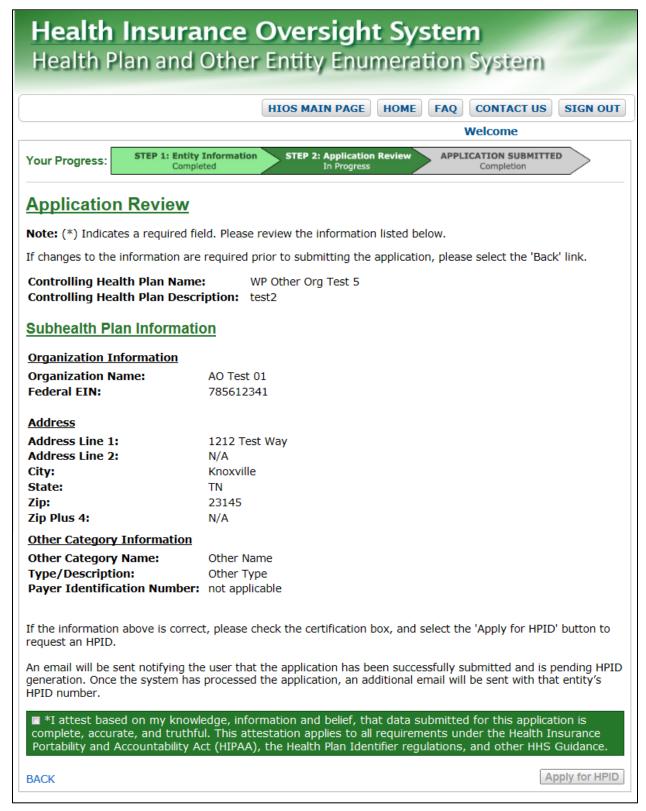


Figure 22: SHP Other Category Application Review



Step 9: Application Summary Page

Once the user has reviewed and submitted the application, the user is navigated to a summary of the application. (Please see Figure 23: SHP Application Summary Page below).

At this point, the user has two options:

- 1) If the user would like to request HPID(s) for another organization that are under the same Controlling Health Plan, the user must click the 'Get Additional SHP HPID(s)' button on the Application Summary page and follow the steps mentioned in section 3.1.3.2.1.
- 2) If the user would like to request HPID(s) for another organization that is under a different Controlling Health Plan or does not require additional HPID(s) at this time, the user can click the 'Done' button on the Application Summary page. The system will then navigate the user to the HPOES Homepage.



Figure 23: SHP Application Summary Page

3.1.3.4 How to Submit an Other Entity Identifier (OEID) Application

Step 1: Navigate to the HIOS Main Page.

Step 2: Select 'Health Plan and Other Entity Enumeration System' button on the left hand menu.

The user will be directed to the 'HPOES Homepage' for a Submitter User. (Please see <u>Figure 24: HPOES Submitter User Homepage</u> below).

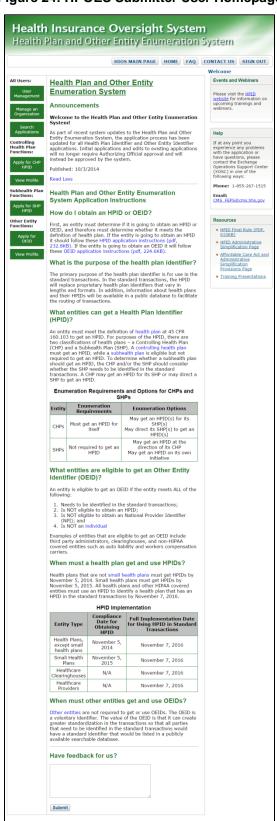


Figure 24: HPOES Submitter User Homepage

Step 3: Select 'Apply for OEID' button on the left hand menu.

The user will be directed to the first step in the Other Entity profile creation process. (Please see Figure 25: OEID Organization Information Page below).

Health Insurance Oversight System Health Plan and Other Entity Enumeration System HIOS MAIN PAGE HOME FAQ **SIGN OUT** Welcome APPLICATION SUBMITTED STEP 1: Entity Information STEP 2: Application Review Your Progress: Organization Information If your organization has already registered with HIOS, please select the appropriate organization below. If your organization has not registered with HIOS, please select the 'HIOS Main Page' button above. Once on the HIOS Main Page, select the 'Manage an Organization' button to begin the registration process. Note: (*) Indicates a required field. *Organization Name - State - Federal EIN: Select Organization *Business Classification: Select Business Classification -CONTINUE

Figure 25: OEID Organization Information Page

Step 4: Select an organization from the Organization Name dropdown.

If the user does not see the organization in the organization dropdown list, the user can navigate to the HIOS Main Page to request permission to request on the organization's behalf. Please refer to the HIOS Portal User Manual located under the "Forms, Reports, and Other Resources" link on the CCIIO website for instructions on how to register/create an organization, request a role in HPOES, or obtain access to an organization.

Based on the organization selected from the dropdown, the system will display information drawn from the HIOS database. (Please see <u>Figure 26: OEID Organization Information Page – Display Information</u> below).

Figure 26: OEID Organization Information Page – Display Information



Step 5: Provide organization information.

After the information has been displayed for the selected organization, the user will also need to select the business classification from the dropdown. (Please see <u>Figure 27: Other Entity</u> <u>Organization Information Page</u> below).

The different business classifications are:

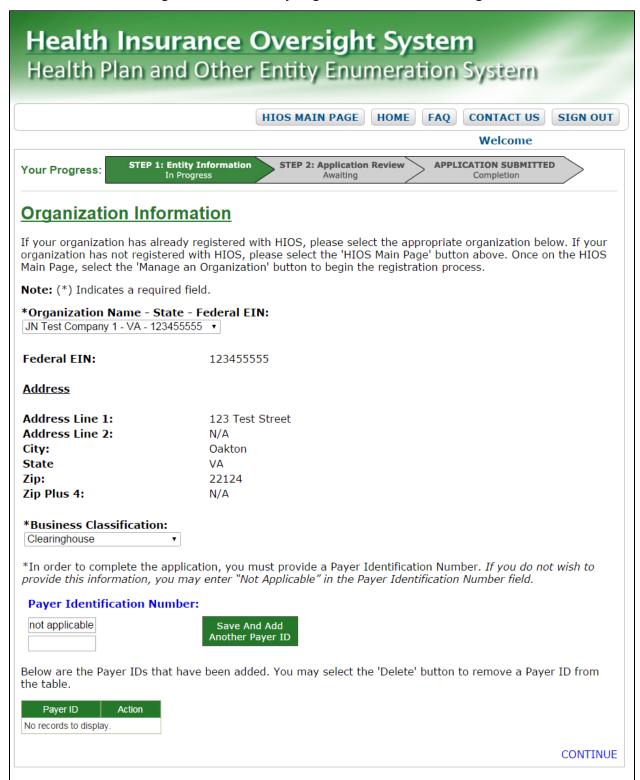
- Atypical Provider
- Clearinghouse

- Other
- Third Party Administrator
- Third Party Repricer

Additionally, the user will be required to enter a Payer Identification Number for all business classifications except the "Atypical Provider" classification. If the user does not wish to provide the Payer Identification Number, the user may enter "Not Applicable" in the Payer Identification Number field. If the "Atypical Provider" classification is selected, the user will be required to enter an Atypical Provider Identifier to proceed with the application.

Once the user has provided the organization information, they can click on the 'CONTINUE' link and navigate to the 'Profile and Application Review' page.

Figure 27: Other Entity Organization Information Page

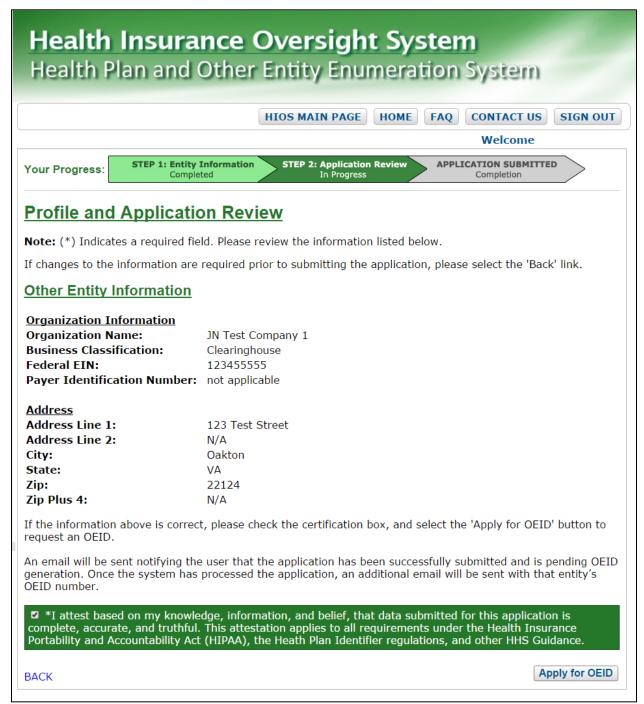


Step 6: Select 'Apply for OEID' button.

The system will display all information captured throughout the profile creation process. Once the certification checkbox is selected, the 'Apply for OEID' button will become active.

The user will then click the 'Apply for OEID' button to submit the application. An email will be sent to the user informing them that an application has been successfully submitted and is pending HPID generation. Once the system has processed the application, another email will be sent with that entity's HPID number. (Please see <u>Figure 28: OEID Profile and Application</u> Review Page below).

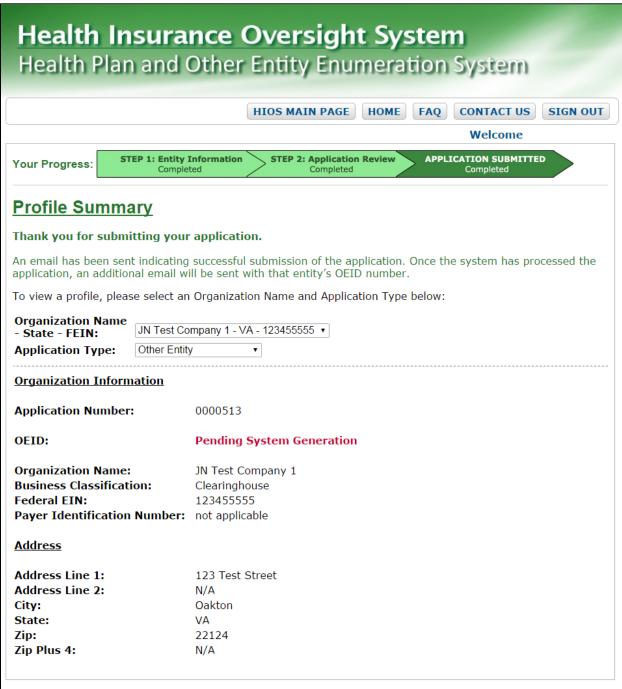
Figure 28: OEID Profile and Application Review Page



Once the user submits the application, the user will be navigated to the 'Profile Summary' page. (Please see <u>Figure 29: OEID Profile Summary Page</u> below). If the user has access to more than one profile, the user may use the 'Organization Name' dropdown to navigate between profiles. If the selected organization has both a Health Plan and Other Entity profile, the user may use the 'Application Type' dropdown to navigate between the two.

A user may also access the 'Profile Summary' page by clicking on the 'View Profile' button on the HPOES Homepage. (Please see <u>Figure 24: HPOES Submitter User Homepage</u>). The user can view the summary of the profile and the status of the application on the 'Profile Summary' page.

Figure 29: OEID Profile Summary Page



3.1.3.5 Search Applications

Step 1: Navigate to the HIOS Main Page.

Step 2: Select 'Health Plan and Other Entity Enumeration System' button on the left hand menu.

The user will be directed to the 'HPOES Homepage' for a Submitter User. (Please see <u>Figure</u> 30: HPOES Submitter User Homepage below).

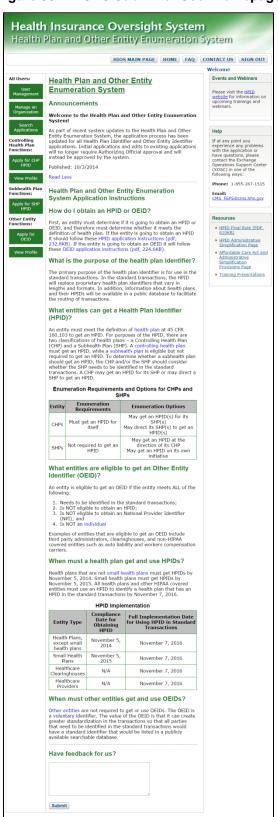
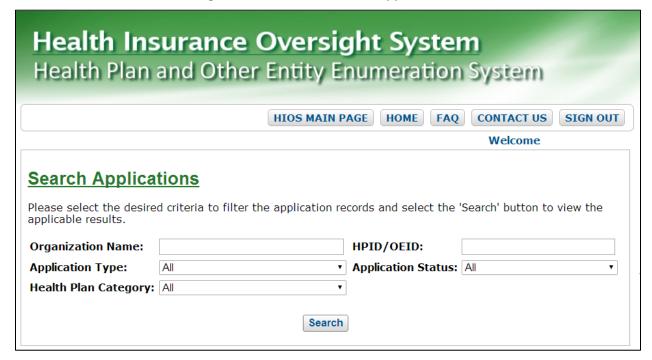


Figure 30: HPOES Submitter User Homepage

Step 3: Select 'Search Applications' button on the left hand menu.

Please see Figure 31: Submitter Search Applications below.

Figure 31: Submitter Search Applications



A Submitter user may search for applications by Organization Name, Application Type, Health Plan Category, HPID/OEID, or Application Status. Submitter users will only be able to search for applications for organizations they have the appropriate access to. Once the user has defined the search criteria, the user will be able to view the results. (Please see <u>Figure 32: Submitter Search Results</u> below).

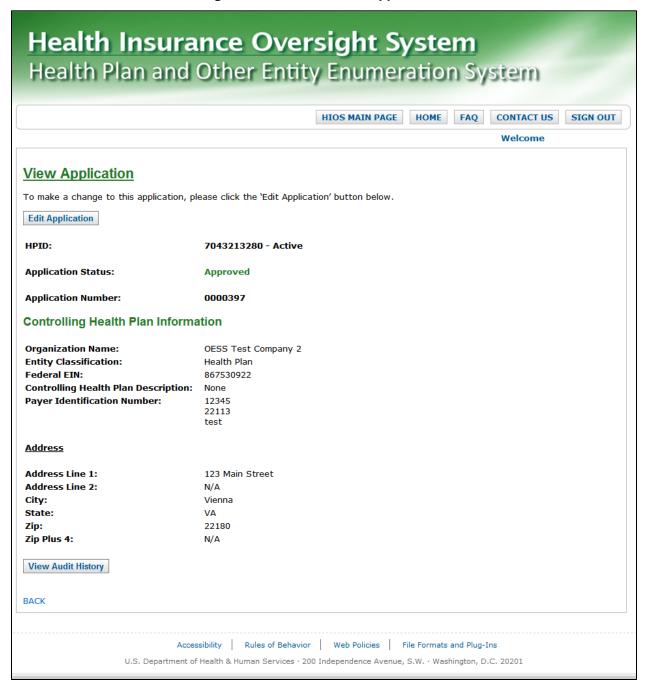
Health Insurance Oversight System Health Plan and Other Entity Enumeration System HIOS MAIN PAGE HOME FAQ CONTACT US SIGN OUT Welcome **Search Applications** Please select the desired criteria to filter the application records and select the 'Search' button to view the applicable results. Organization Name: HPID/OEID: Health Plan Identifier (HPID) • All Application Type: Application Status: • **Health Plan Category:** Search Please select the View Application link to view application details. Displaying 1 - 2, of 2 found. K (1) N Page Size: 10 ▼ Submitted Date \$ Health Plan Category \$ Application Organization Name \$ HPID/OEID Number \$ Actions 0000397 11/7/2013 HPID CHP OESS Test Company 2 Approved 7043213280 View 0001072 9/18/2014 **HPID** CHP OESS Test Company 2 7164425366 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 32: Submitter Search Results

Step 4: Select the record to view application details.

Please see Figure 33: Submitter View Application.

Figure 33: Submitter View Application



3.1.3.6 Edit Applications

- **Step 1:** Navigate to the HIOS Main Page.
- Step 2: Select 'Health Plan and Other Entity Enumeration System' button on the left hand menu.

The user will be directed to the 'HPOES Homepage' for a Submitter User. (Please see <u>Figure</u> 34: HPOES Submitter User Homepage below).

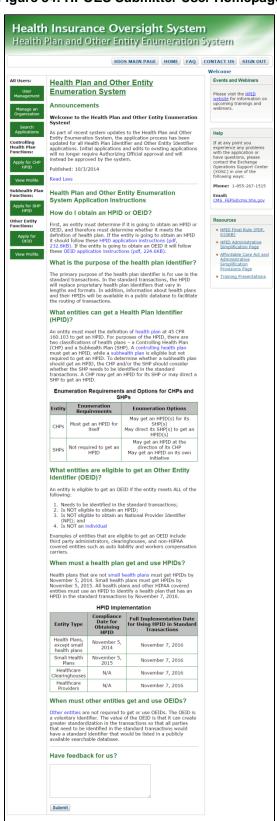
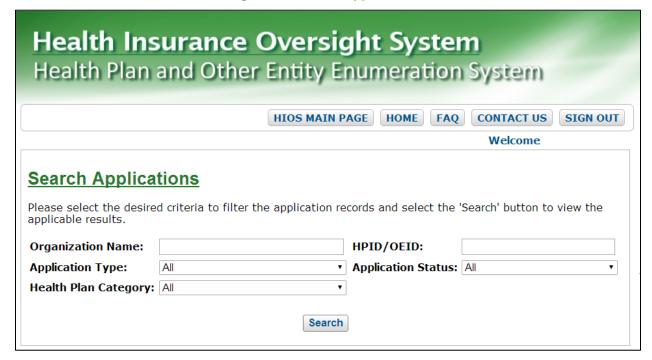


Figure 34: HPOES Submitter User Homepage

Step 3: Select 'Search Applications' button on the left hand menu.

Please see Figure 35: Search Applications below.

Figure 35: Search Applications



Once the user has defined the search criteria, the user will be able to view the results. (Please see <u>Figure 36: Search Results</u> below).

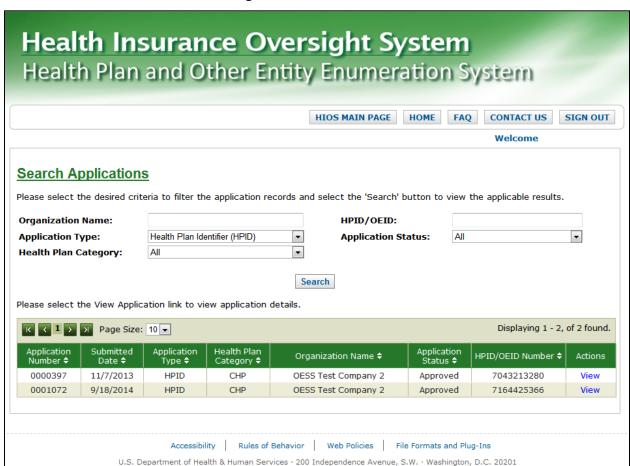


Figure 36: Search Results

Step 4: Select the record you wish to edit.

Please see Figure 37: View Application (Edit Application Button).

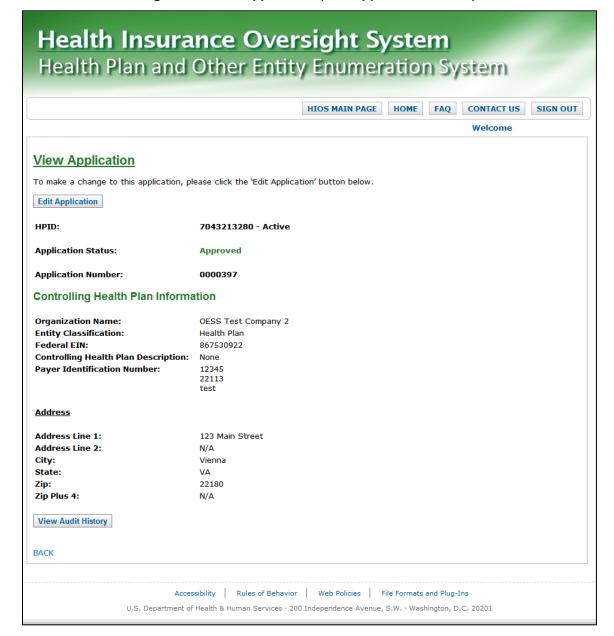


Figure 37: View Application (Edit Application Button)

If the user does not see the 'Edit Application' button on the 'View Application' page and the application status is 'Approved,' this means the user does not have the proper access to edit the application. The user can navigate to the HIOS Main Page to request permission to access the organization.

Step 5: Select the 'Edit Application' button on the application.

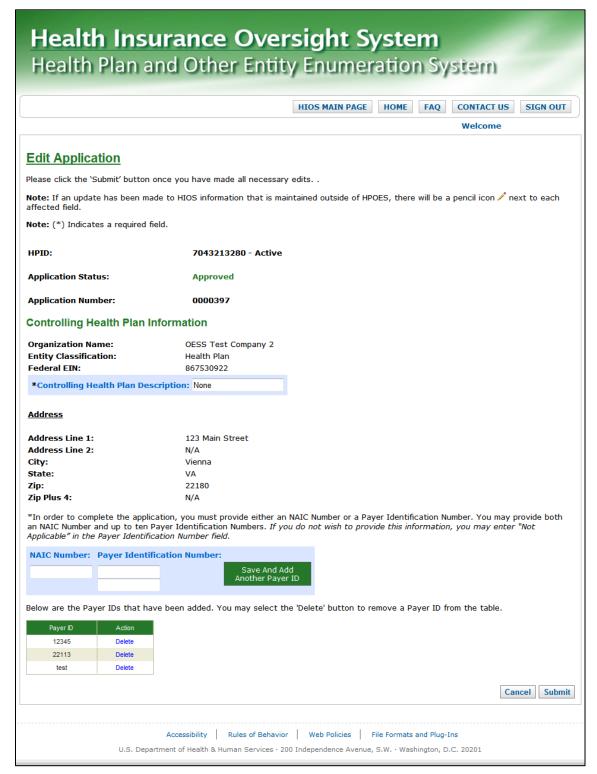
Once the 'Edit Application' button is selected, certain fields can be edited by the user depending on the application type. Please see <u>Table 1</u> below for a list of field users may edit.

Table 1: Editable Fields on Applications

Field Name	Application Type
Controlling Health Plan Description	CHP HPID Application
NAIC	HPID Application
Payer ID	OEID and HPID Applications
Line of Business Type	SHP HPID Line of Business Application
Product Name/Brand Name	SHP HPID Line of Business Application
Other Description	SHP HPID Line of Business Application
Other Category Name	SHP HPID Other Category Application
Type/Description	SHP HPID Other Category Application
Atypical Provider ID	OEID Application
Business Classification	OEID Application
Description of Classification	OEID Application

The editable fields will be highlighted in a blue box. Additionally, please note that if there are any changes to HIOS information in the application, a pencil icon () will display next to the updated field(s). This information will automatically be included in the edit submission but is not editable by the HPOES user since the information is pulled from data that is maintained outside of HPOES. (Please see Figure 38: Edit Application below).

Figure 38: Edit Application



Step 6: Once all edits have been made to the application, the user will need select 'Submit'.

After the user has submitted the edit to the application, users will see a confirmation message and be able to view their updates on the application. (Please see <u>Figure 39: Edit Application</u> with Confirmation Message below).

Health Insurance Oversight System Health Plan and Other Entity Enumeration System HIOS MAIN PAGE HOME FAQ CONTACT US SIGN OUT Welcome **Edit Application** Thank you for submitting your update. The application has been updated based on the edit submitted. Note: (*) Indicates a required field. 7043213280 - Active **Application Status:** Approved **Application Number:** 0000397 Controlling Health Plan Information Organization Name: OESS Test Company 2 **Entity Classification:** Health Plan Federal EIN: 867530922 *Controlling Health Plan Description: None <u>Address</u> Address Line 1: 123 Main Street Address Line 2: N/A Vienna City: State: VA Zip: 22180 Zip Plus 4: N/A *In order to complete the application, you must provide either an NAIC Number or a Payer Identification Number. You may provide both an NAIC Number and up to ten Payer Identification Numbers. If you do not wish to provide this information, you may enter "Not Applicable" in the Payer Identification Number field. NAIC Number: Payer Identification Number: Below are the Payer IDs that have been added. You may select the 'Delete' button to remove a Payer ID from the table. Done 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 39: Edit Application with Confirmation Message

Once the user clicks on the 'Done' button, they will be navigated back to the HPOES home page. If a user were to search for the application, they will automatically see the updated application on the 'View Application' page.

3.1.3.7 View Audit History

- **Step 1:** Navigate to the HIOS Main Page.
- **Step 2:** Select 'Health Plan and Other Entity Enumeration System' button on the left hand menu.

The user will be directed to the 'HPOES Homepage' for a Submitter User. (Please see <u>Figure 40: HPOES Submitter User Homepage</u> below).

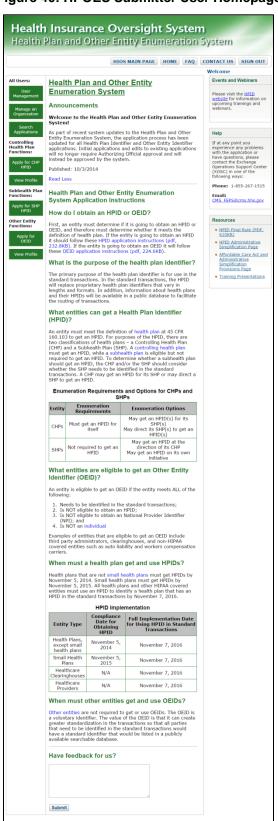
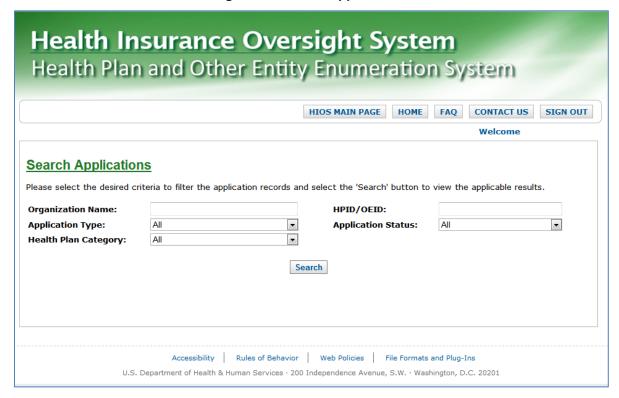


Figure 40: HPOES Submitter User Homepage

Step 3: Select 'Search Applications' button on the left hand menu.

Please see Figure 41: Search Applications below.

Figure 41: Search Applications



Once the user has defined the search criteria, the user will be able to view the results. (Please see Figure 42: Search Results below).

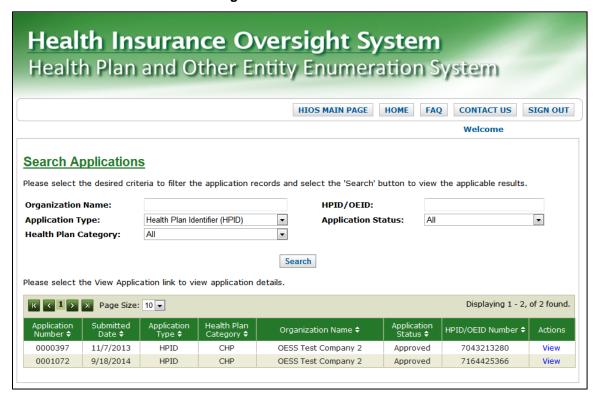


Figure 42: Search Results

Step 4: Select the record to view.

Please see Figure 43: View Application (Audit History Button).

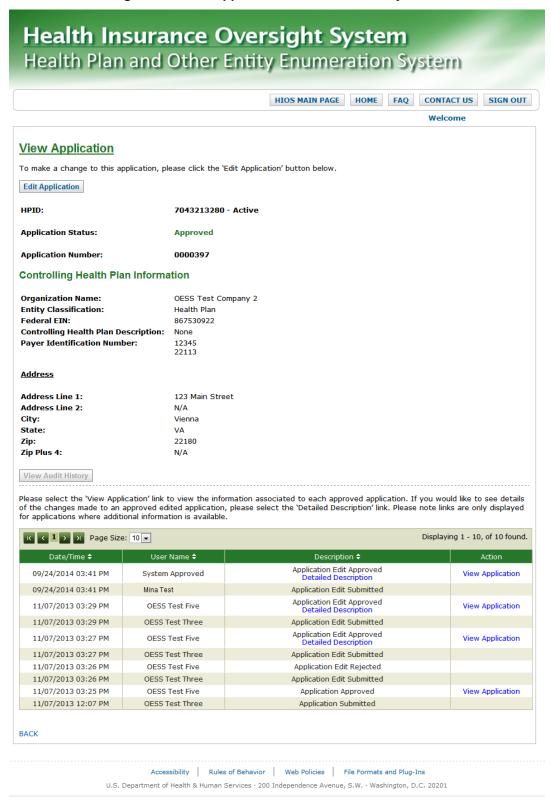


Figure 43: View Application (Audit History Button)

Step 5: Select the 'View Audit History' button on the application.

A table will generate below the button with the audit history for the selected application. Users will be able to see certain links within the audit history table for approved applications. (Please see Figure 44: View Application with Audit History Table below).

Figure 44: View Application with Audit History Table



Step 6: Select 'View Application' link.

The 'View Application' page from the Audit History table would appear in a new tab in the window. The page will display a snapshot of each approved application. The user will be able to distinguish between the different approved applications with the date/time stamp displayed in the top right hand corner of the page. (Please see <u>Figure 45: View Application from Audit History</u> below).

View Application Application approved on: 09/24/2014 03:41 PM HPID: 7043213280 - Active **Application Status: Approved Application Number:** 0000397 Controlling Health Plan Information Organization Name: OESS Test Company 2 **Entity Classification:** Health Plan Federal EIN: 867530922 Controlling Health Plan Description: None Paver Identification Number: 12345 22113 Address Address Line 1: 123 Main Street Address Line 2: Vienna State: 22180 Zip Plus 4: N/A

Figure 45: View Application from Audit History

Step 7: Select 'Detailed Description' link.

Once the user clicks on the 'Detailed Description' link, a pop-up window will appear that displays the specific approved edits to the application. (Please see <u>Figure 46: Detailed</u> <u>Description from Audit History</u>).

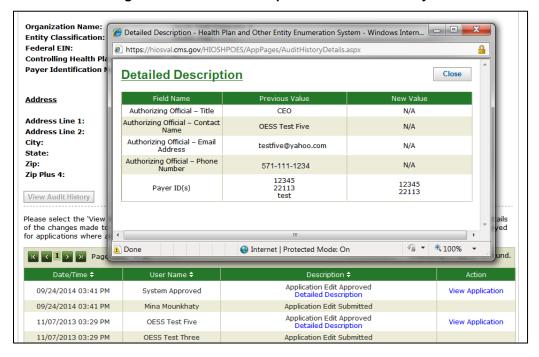


Figure 46: Detailed Description from Audit History

3.1.4 'Authorizing Official' User Role

Within the HPOES system, a user with an 'Authorizing Official' user role can perform the following functions:

- Search Applications
- View Audit History

The following sections provide a description of these functionalities.

3.1.4.1 Search Applications

- **Step 1:** Navigate to the HIOS Main Page.
- **Step 2:** Select 'Health Plan and Other Entity Enumeration System' button on the left hand menu.

The user will be directed to the 'HPOES Homepage' for an Authorizing Official. (Please see Figure 47: HPOES Homepage for Authorizing Official below).

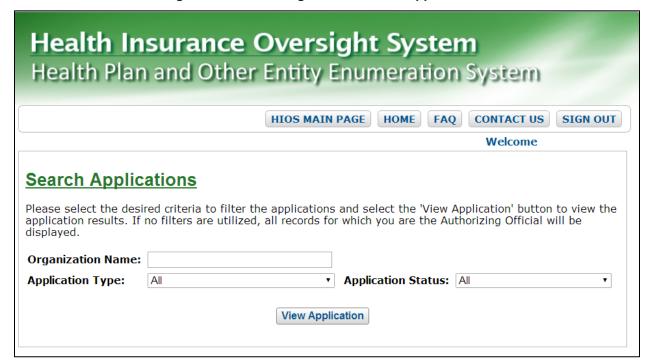


Figure 47: HPOES Homepage for Authorizing Official

Step 3: Select the 'Search Applications' button on the left hand menu.

Please see Figure 48: Authorizing Official Search Applications below.

Figure 48: Authorizing Official Search Applications



An Authorizing Official user may search for applications based on the Organization Name, Application Type, or Application Status. Authorizing Official users will only be able to search for applications for organizations they are the designated Authorizing Official of. Once the user has defined the search criteria, the user will be able to view the results. (Please see <u>Figure 49: Authorizing Official Search Results</u> below).

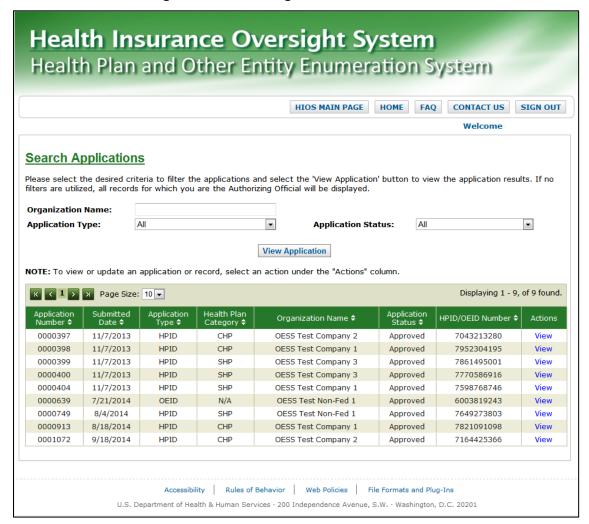


Figure 49: Authorizing Official Search Results

Step 4: Select the record to view application details. Please see <u>Figure 50: Authorizing Official View Application</u> below.



Figure 50: Authorizing Official View Application

3.1.4.2 View Audit History – Authorizing Official User

Step 1: Navigate to the HIOS Main Page.

Step 2: Select 'Health Plan and Other Entity Enumeration System' button on the left hand menu.

The user will be directed to the 'HPOES Homepage' for an Authorizing Official. (Please see Figure 51: HPOES Homepage for Authorizing Official below).

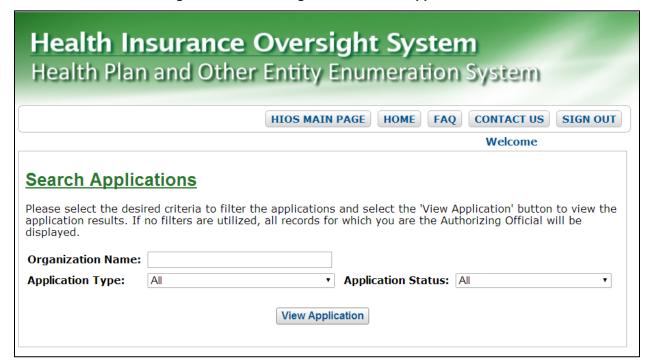


Figure 51: HPOES Homepage for Authorizing Official

Step 3: Select 'Search Applications' button on the left hand menu.

Please see Figure 52: Authorizing Official Search Applications below.

Figure 52: Authorizing Official Search Applications



Once the user has defined the search criteria, the user will be able to view the results. (Please see Figure 53: Search Results below).

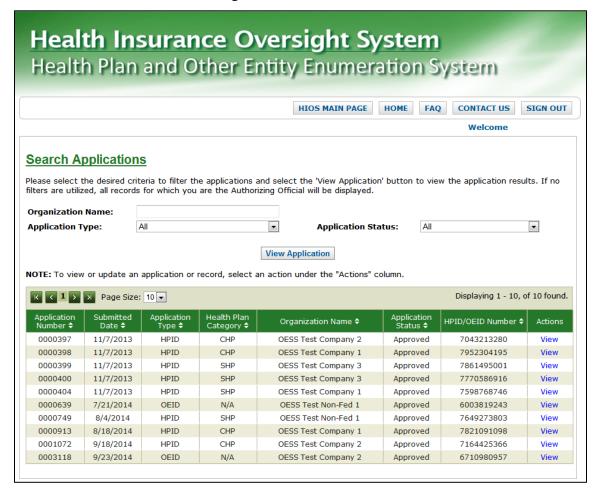


Figure 53: Search Results

Step 4: Select the record to view. Please see <u>Figure 54: View Application (Audit History Button)</u>.

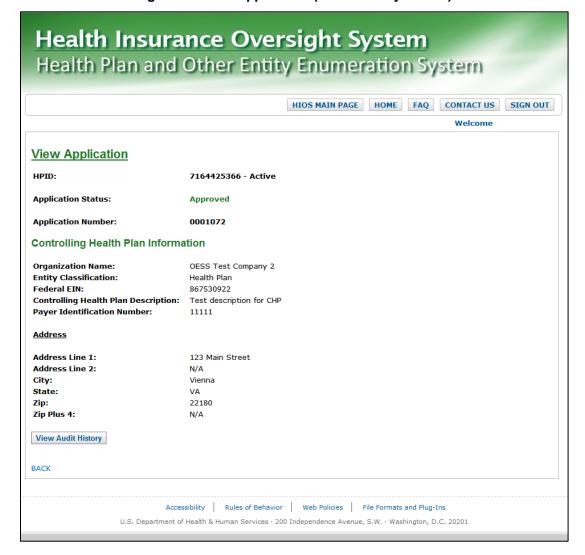


Figure 54: View Application (Audit History Button)

Step 5: Select the 'View Audit History' button on the application.

A table will generate below the button with the audit history for the selected application. Users will be able to see certain links within the audit history table for approved applications. (Please see Figure 55: View Application with Audit History Table below).

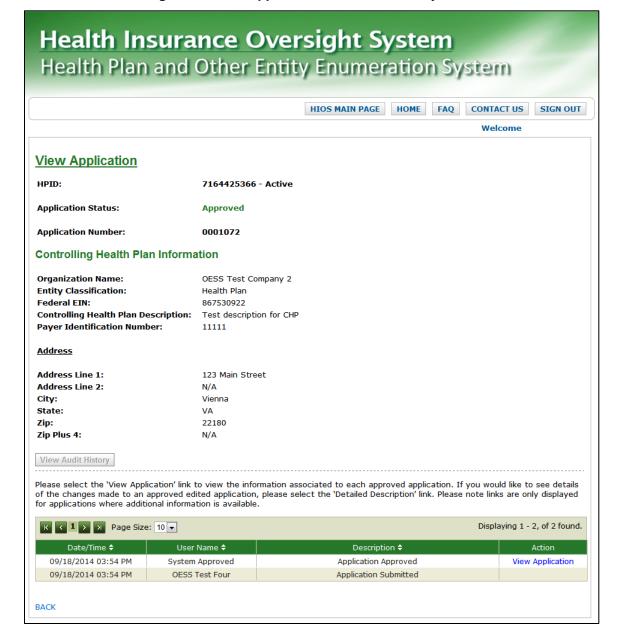
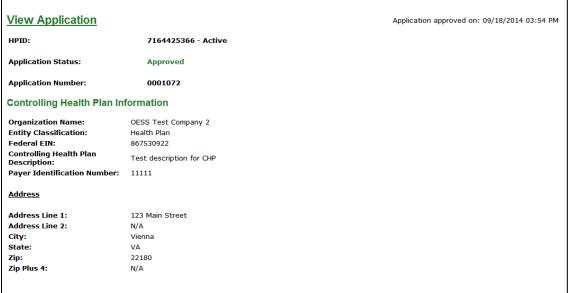


Figure 55: View Application with Audit History Table

Step 6: Select 'View Application' link.

The 'View Application' page from the Audit History table would appear in a new tab in the window. The page will display a snapshot of each approved application. The user will be able to distinguish between the different approved applications with the date/time stamp that will be displayed in the top right hand corner of the page. (Please see <u>Figure 56: View Application from Audit History below</u>).

Figure 56: View Application from Audit History



Step 7: Select 'Detailed Description' link.

Once the user clicks on the 'Detailed Description' link, a pop-up window will appear that displays the specific approved edits to the application. (Please see <u>Figure 57: Detailed Description from Audit History</u> below).

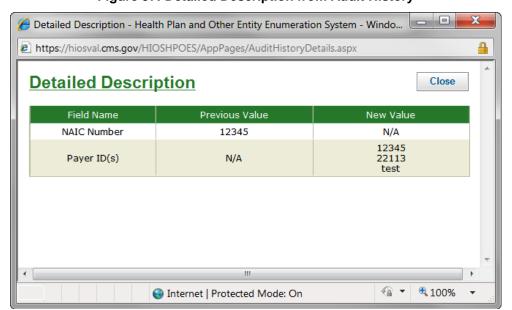


Figure 57: Detailed Description from Audit History

4 Definitions

Health Plan:

[A]n individual or group that provides, or pays the cost of medical care (as defined in section 2791(a)(2) of the Public Health Service Act (42 U.S.C. 300gg–91(a)(2))...

Health plan includes the following, singly or in combination:

- (i) A group health plan, as defined in this section.
- (ii) A health insurance issuer, as defined in this section.
- (iii) An HMO, as defined in this section.
- (iv) Part A or Part B of the Medicare program under title XVIII of the Act.
- (v) The Medicaid program under title XIX of the Act, 42 U.S.C. 1396, et seq.
- (vi) An issuer of a Medicare supplemental policy (as defined in section 1882(g)(1) of the Act, 42 U.S.C. 1395ss(g)(1)).
- (vii) An issuer of a long term care policy, excluding a nursing home fixed indemnity policy.
- (viii) An employee welfare benefit plan or any other arrangement that is established or maintained for the purpose of offering or providing health benefits to the employees of two or more employers.
- (ix) The health care program for active military personnel under title 10 of the United States Code.
- (x) The veterans' health care program under 38 U.S.C. chapter 17.
- (xi) The Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) (as defined in 10 U.S.C. 1072(4)).
- (xii) The Indian Health Service program under the Indian Health Care Improvement Act, 25 U.S.C. 1601, et seq.
- (xiii) The Federal Employees Health Benefits Program under 5 U.S.C. 8902, et seq.
- (xiv) An approved State child health plan under title XXI of the Act, providing benefits for child health assistance that meet the requirements of section 2103 of the Act, 42 U.S.C. 1397, et seq.
- (xv) The Medicare+Choice program under Part C of title XVIII of the Act, 42 U.S.C. 1395w–21 through 1395w–28.
- (xvi) A high risk pool that is a mechanism established under State law to provide health insurance coverage or comparable coverage to eligible individuals.
- (xvii) Any other individual or group plan, or combination of individual or group plans, that provides or pays for the cost of medical care (as defined in section 2791(a)(2) of the PHS Act, 42 U.S.C. 300gg–91(a)(2)).
- 2) Health plan excludes:
- (i) Any policy, plan, or program to the extent that it provides, or pays for the cost of, excepted benefits that are listed in section 2791(c)(1) of the PHS Act, 42 U.S.C. 300gg–91(c)(1); and
- (ii) A government funded program (other than one listed in paragraph (1)(i)–(xvi) of this definition):
- (A) Whose principal purpose is other than providing, or paying the cost of, health care; or
- (B) Whose principal activity is:
- (1) The direct provision of health care to persons; or
- (2) The making of grants to fund the direct provision of health care to persons.

Controlling Health Plan (CHP):

A CHP means a health plan that:

- 1. Controls its own business activities, actions, or policies OR is controlled by an entity that is not a health plan; and
- 2. If it has a sub health plan(s) exercises sufficient control over the sub health plan(s) to direct its/their business activities, actions, or policies

Subhealth Plan (SHP):

A SHP means a health plan whose business activities, actions, or policies are directed by a controlling health plan.

Small Health Plan:

Small health plan means a health plan with annual receipts of \$5 million or less.

Other Entity:

An entity that meets ALL of the following:

- 1. Needs to be identified in the standard transactions;
- 2. Is NOT eligible to obtain an HPID;
- 3. Is NOT eligible to obtain an National Provider Identifier (NPI); and
- 4. Is NOT an individual.

Individual:

Individual means the person who is the subject of protected health information.

5 Contact Us/Support

The following section captures support information for questions related to policy, technical installation, and downloads.

5.1 Contact Us/ Support Details

If you have questions related to application installation or need technical support please contact the Exchange Operations Support Center (XOSC) at CMS_FEPS@cms.hhs.gov or at 1-855-267-1515.

The Exchange Operations Support Center (XOSC) hours of operation currently are 9 AM to 6 PM ET, Monday – Friday.