The information provided in this presentation is intended only as a general, informal summary of technical legal standards. It is not intended to take the place of the statutes, regulations, and formal policy guidance that it is based upon. This presentation summarizes current policy and operations as of the date it was presented. Links to certain source documents have been provided for your reference. We encourage audience members to refer to the applicable statutes, regulations, and other interpretive materials for complete and current information about the requirements that apply to them. The contents of this document do not have the force and effect of law and are not meant to bind the public in any way, unless specifically incorporated into a contract. This document is intended only to provide clarity to the public regarding existing requirements under the law.

This document generally is not intended for use in the State-based Marketplaces (SBMs) that do not use HealthCare.gov for eligibility and enrollment. Please review the guidance on our Agent and Broker Resources webpage (http://go.cms.gov/CCIIOAB) and Marketplace.CMS.gov to learn more.

Unless indicated otherwise, the general references to “Marketplace” in the presentation only include Federally-facilitated Marketplaces (FFMs) and State-based Marketplaces on the Federal Platform (SBM-FPs).

This communication was printed, published, or produced and disseminated at U.S. taxpayer expense.
Consent Documentation Requirements

» Agents, brokers, and web-brokers are required to document the receipt of consent from the consumer or their authorized representative.
  o The consumer or their authorized representative must take an action to produce the documentation;
  o The documentation must contain, at a minimum, the following information:
    ▪ A description of the scope, purpose, and duration of the consent provided by the consumer or their authorized representative;
    ▪ The date the consent was given;
    ▪ The name of the consumer or their authorized representative;
    ▪ The name of the agent, broker, web-broker, or agency being granted consent;
    ▪ A process through which the consumer or their authorized representative may rescind the consent.
  o The agent, broker, or web-broker must maintain the documentation for a minimum of 10 years.
Agents, brokers, and web-brokers are required to document that eligibility application information has been reviewed by and confirmed to be accurate by the consumer or their authorized representative prior to application submission.

- The consumer or their authorized representative must take an action to produce the documentation;
- The documentation must contain, at a minimum, the following information:
  - The date the information was reviewed;
  - The name of the consumer or their authorized representative;
  - An explanation of the attestations at the end of the eligibility application; and
  - The name of the assisting agent, broker, or web-broker.
- The agent, broker, or web-broker must maintain the documentation for a minimum of 10 years.
When do agents, brokers, and web-brokers need to begin documenting and retaining consumer consent pursuant to the new documentation requirements established in the 2024 Payment Notice?

» The new requirements adopted in the 2024 Payment Notice were effective on June 18, 2023.

» Agents and brokers assisting Marketplace consumers need to comply with the new requirements for current clients for any application or plan changes that occur on or after June 18, 2023.

» The documentation required in the 2024 Payment Notice showing the consumer, or their authorized representative, provided consent prior to the agent, broker, or web-broker providing assistance will also need to be created and maintained for new clients for any application or plan changes that occur on or after June 18, 2023.

» Similarly, in advance of submission of a new Marketplace application and whenever there are changes to the eligibility application information in a consumer’s existing application on or after June 18, 2023, the documentation outlined in the 2024 Payment Notice capturing that the consumer, or their authorized representative, reviewed and confirmed the accuracy of the eligibility information contained in the application must be created and retained.

» If an existing client’s plan renews automatically and there are no changes to the Marketplace application, the new documentation requirements adopted in the 2024 Payment Notice would not be triggered until such time that the consent provided by the consumer (or their authorized representative) expires or is otherwise rescinded, or there is a need to update and make changes to the consumer’s Marketplace eligibility application information.

To see the full list of these 2024 Payment Notice Requirement FAQs, visit https://www.cms.gov/files/document/2024-pn-ab-faq-9823.pdf.
Consumer Scenario

Your client’s plan has renewed automatically with no changes to their Marketplace application.

Do you need to maintain a record that they provided you consent to assist them?
If an existing client’s plan renews automatically and there are no changes to the Marketplace application, the new documentation requirements adopted in the 2024 Payment Notice would not be triggered until such time that the consent provided by the consumer (or their authorized representative):

» Expires or is otherwise rescinded, or

» There is a need to update and make changes to the consumer’s Marketplace eligibility application information.
What are acceptable methods by which an agent or broker may document consumer consent?

» Acceptable documentation of a consumer’s consent may be obtained in a manner that best suits the business practices of the agent, broker, or web-broker, provided the documentation meets the requirements of the 2024 Payment Notice.

» The consumer or authorized representative must act to produce a record (i.e., documentation) to confirm their consent was provided.

» Non-exhaustive examples of acceptable documentation that would be sufficient to demonstrate compliance with the 2024 Payment Notice include:

  o Documents that capture the date consent was provided, along with the signature of the consumer or authorized representative (electronically or otherwise),

  o Verbal confirmation by the consumer or authorized representative that is captured in an audio recording,

  o A written response (electronic or otherwise) from the consumer or authorized representative to a communication sent by the agent, broker, or web-broker, or

  o Other similar means specified by the Department of Health and Human Services (HHS) in guidance, provided the documentation also satisfies the other minimum content requirements in the 2024 Payment Notice.

» Since documentation is required to record and verify that consent was provided, an unrecorded verbal attestation by the consumer that is not memorialized in a written record will not suffice to demonstrate compliance.

Does CMS have a model consent form that agents, brokers, and web-brokers may use to document consumer consent?

» Yes, CMS developed a model consent form that agents, brokers, and web-brokers may use to document consumer consent. The form can be found [here](https://www.cms.gov/files/document/2024-pn-ab-faq-9823.pdf).

» Please note that this is merely an example form and using it is not compulsory. This form does not include the new application review requirements.
Do you use the CMS Model Consent Form in your process to document consumer consent, or do you have your own method to documenting consumer consent?

1. I use the CMS Model Consent Form to document consumer consent.
2. I use an adapted version of the CMS Model Consent Form with additional updates tailored for my business.
3. I have my own method of documenting consumer consent that is not directly modeled after the CMS Model Consent Form.
4. Unsure.
How do the consent requirements adopted in the 2024 Payment Notice relate to National Producer Numbers (NPNs) being changed on Marketplace applications?

» When an NPN on a Marketplace application is changed from one individual agent’s, broker’s, or web-broker’s to another’s, the new agent, broker, or web-broker must obtain consent from the consumer (or their authorized representative) and document that consent prior to providing assistance with applying for or enrolling in Marketplace coverage, pursuant to the 2024 Payment Notice.

» If a consumer (or their authorized representative) has granted agency-wide consent and the consent has not expired or been rescinded, the agency will not be required to obtain new consumer consent when the NPN on the consumer’s Marketplace application changes, provided the new NPN belongs to an agent, broker, or web-broker of the agency to whom the consumer (or their authorized representative) granted consent.

To see the full list of these 2024 Payment Notice Requirement FAQs, visit https://www.cms.gov/files/document/2024-pn-ab-faq-9823.pdf.
How do the new consent documentation requirements adopted in the 2024 Payment Notice impact advertisements that include a box for consumers to check to indicate that they consent to enrolling in health insurance?

» If an agent, broker, web-broker, agency, or brokerage only requires the consumer to check a box to confirm they provided their consent, that practice will likely not be sufficient to meet the new requirements applicable to obtaining and documenting consumer consent under the 2024 Payment Notice and documenting that eligibility application information has been reviewed by and confirmed to be accurate by the consumer or consumer’s authorized representative under the 2024 Payment Notice.

» The agent, broker, and web-broker standards of conduct related to marketing are set forth in § 155.220(j)(2)(i).

To see the full list of these 2024 Payment Notice Requirement FAQs, visit https://www.cms.gov/files/document/2024-pn-ab-faq-9823.pdf.
Do the consent requirements, including documentation of consent under the 2024 Payment Notice, apply when the consumer (or their authorized representative) fills out the Marketplace application on their own, as opposed to an agent, broker, or web-broker providing assistance with completion and submission of the Marketplace application?

» The requirement related to obtaining and maintaining documentation of consumer consent do not apply under these circumstances.

» The requirements do not apply in this situation because the consumer (or their authorized representative) is the individual completing the application, and the agent, broker or web-broker is not providing active assistance with the completion or submission of the Marketplace application.

To see the full list of these 2024 Payment Notice Requirement FAQs, visit https://www.cms.gov/files/document/2024-pn-ab-faq-9823.pdf.
When working with a CMS-approved Enhanced Direct Enrollment (EDE) partner that provides a consumer-facing webpage that consumers can use to enroll themselves, does the agent, broker, or web-broker have to document that the consumer reviewed their application information and consented to the enrollment?

» If the application and enrollment were completed by the consumer through a consumer-facing webpage on an approved non-Exchange website without any active assistance from the agent, broker or web-broker, the agent, broker, or web-broker does not need to create or retain documentation that the consumer (or their authorized representative) provided consent to the enrollment, or reviewed and confirmed the accuracy of, the eligibility application information prior to submission of the application to the Marketplace.

» The documentation requirements do not apply in this situation because the consumer (or their authorized representative) is the individual completing the application, and the agent, broker or web-broker is not providing active assistance with the completion or submission of the Marketplace application.

To see the full list of these 2024 Payment Notice Requirement FAQs, visit https://www.cms.gov/files/document/2024-pn-ab-faq-9823.pdf.
Do I need consent when I assist a consumer who was referred to me through Help On Demand?

Consent must be obtained when assisting Marketplace consumers, including those referred to an agent, broker, or web-broker through a referral received from Help On Demand.

A referral of this nature merely indicates the consumer is interested in health insurance and gives you permission to contact that consumer. The agent, broker, or web-broker must obtain consent during the initial contact with the consumer (or their authorized representative) and prior to providing assistance to a consumer with applying for or enrolling in Marketplace coverage, including before searching for an existing application.

Does an agent, broker, or web-broker need to document that every change made to eligibility information on a consumer’s Marketplace application, including plan and enrollment changes, has been reviewed by and confirmed to be accurate by the consumer or their authorized representative?

» Yes. Only the consumer or their authorized representative may agree to a Marketplace application, enrollment, or plan change and confirm that their eligibility application information is accurate.

» Whenever there are changes made to the eligibility information on a consumer’s Marketplace application, including plan and enrollment changes, the requirements in the 2024 Payment Notice must be met.

To see the full list of these 2024 Payment Notice Requirement FAQs, visit https://www.cms.gov/files/document/2024-pn-ab-faq-9823.pdf.
May agents, brokers, and web-brokers utilize the same form to meet the documentation requirements for both consumer consent and consumer review and confirmation of the accuracy of eligibility application information?

» Yes, the same documentation may be used to comply with both requirements as long as it appropriately captures the two separate events.

» Consumer consent must be obtained prior to assisting the consumer with applying for or enrolling in Marketplace coverage. This is the first event that would need to be captured in the documentation created and retained by the agent, broker, or web-broker. In addition, the documentation would need to capture information showing that the consumer reviewed and confirmed the accuracy of the eligibility application information in their Marketplace application. This is the second event which must occur after the application has been competed, and prior to its submission to the Marketplace.

» Therefore, if the same documentation is used to meet both requirements, the agent, broker, or web-broker will need to ensure there is sufficient information in the documentation to demonstrate these two separate events occurred. For example, a document or electronic file could include a timestamped communication showing when the consumer (or their authorized representative) provided their consent to the agent, broker, or web-broker, and a second timestamped communication showing when the consumer (or their authorized representative) attested to having reviewed and confirmed the accuracy of the eligibility application information in their Marketplace application.

To see the full list of these 2024 Payment Notice Requirement FAQs, visit https://www.cms.gov/files/document/2024-pn-ob-faq-9823.pdf.
What constitutes “eligibility application information” as referenced in the 2024 Payment Notice?

» The phrase “eligibility application information” when used in the 2024 Payment Notice includes all information provided in response to Marketplace eligibility application questions.

» While agents and brokers can assist a consumer with completing the Marketplace application, the consumer (or their authorized representative) are the individuals with the knowledge to provide and confirm the accuracy of the information on the application.

» Agents and brokers should not assume they have accurately entered consumer eligibility application information on the Marketplace application without reviewing and confirming its accuracy with the consumer (or the consumer’s authorized representative) they are assisting, and documenting that confirmation as required under the 2024 Payment Notice. Consistent with the policies adopted in the 2024 Payment Notice, application filers may confirm the accuracy of eligibility application information on behalf of the people they are legally authorized to represent (e.g., one spouse applying on behalf of a married couple, or a parent applying on behalf of a child).

To see the full list of these 2024 Payment Notice Requirement FAQs, visit https://www.cms.gov/files/document/2024-pn-ab-faq-9823.pdf.
What attestations do I need to explain to the consumer?

» When a consumer (or their authorized representative) applies for coverage through the Marketplace, they are required to agree (or “attest”) to the truth of the information in the application prior to submission.

» The attestations appear at the end of the Marketplace application. Different attestations will apply based on the consumer’s circumstances. Prior to submitting the Marketplace application, the attestations that apply to a consumer’s circumstances will appear and must be completed.

» As explained in the 2024 Payment Notice, when an agent, broker or web-broker is assisting a consumer, these attestations must be reviewed and explained to the consumer to ensure they are aware of what they are agreeing to and that they have confirmed the accuracy of the information in their application prior to submission.

» For example, one of the attestations that all consumers must currently agree to before submission of their application states: “I’m signing this application under penalty of perjury, which means I’ve provided true answers to all of the questions to the best of my knowledge. I know I may be subject to penalties under Federal law if I intentionally provide false information.”

To see the full list of these 2024 Payment Notice Requirement FAQs, visit https://www.cms.gov/files/document/2024-pn-ab-faq-9823.pdf.
Poll

Which methods do you use to meet the new requirements for documenting and maintaining consumer consent and application review? Select all that apply.

1. Phone call recording
2. Online forms
3. Paper documentation
4. Email
5. Text messaging
6. Other
7. Unsure
You are about to assist a client with enrolling in coverage, but are unsure of how to proceed with accurately documenting consumer consent to comply with the updated regulations.

In this case, what step should you take to ensure compliance with consumer consent and application review requirements regulations?

1. Consult the CMS Model Consent Form for an example of documenting consumer consent.
2. Consult the 2024 Payment Notice.
3. Send any questions you have to the Agent/Broker Email Help Desk at FFMProducer-AssisterHelpDesk@cms.hhs.gov.
4. All of the above.
Consumer Scenario

You are about to assist a client with enrolling in coverage, but are unsure of how to proceed with accurately documenting consumer consent to comply with the updated regulations.

In this case, **what step should you take to ensure compliance with consumer consent and application review requirements regulations?**

1. Consult the CMS Model Consent Form for an example of documenting consumer consent.
2. Consult the 2024 Payment Notice.
3. Send any questions you have to the Agent/Broker Email Help Desk at [FFMProducer-AssisterHelpDesk@cms.hhs.gov](mailto:FFMProducer-AssisterHelpDesk@cms.hhs.gov).
4. **All of the above.**
» CCIIO will provide a forum for information sharing among agents and brokers on these new regulations by hosting a virtual panel discussion with a mix of CMS and agent and broker representatives.

» The purpose of this panel discussion is to provide peer to peer discussion, feedback from CMS subject matter experts, and the opportunity for agents and brokers to ask questions on these regulations.

» The Consumer Consent and Application Review Requirements Panel Discussion will be held in early October with agent/broker panelists from a variety of backgrounds and communities.
» The Model Consent Form is now available to agents and brokers and has been posted to the Agent and Broker General Resources webpage. This form will be available in Spanish soon.

» The Consumer Consent and Application Review Requirements FAQs that were discussed during this presentation are available on the Agent and Broker General Resources webpage, and the Direct Enrollment (DE) and Enhanced Direct Enrollment (EDE) webpage.

» For more information on Compliance, view the Agent/Broker Summit: Marketplace Compliance and Agent/Broker Regulations webinar slides.
Live Question/Answer Session & Agent and Broker Outreach Updates
Agents and brokers should bookmark the Agent and Broker Resources website, which acts as the primary outlet for agents and brokers to find information about working in the Marketplace.

The website also includes a link to the General Resources page, a searchable list of resources that provide helpful information, including guidance, regulations, previous webinar slides, quick reference guides, and more.

- To filter for Spanish resources, enter the keyword "Spanish" into the search bar on the General Resources webpage.
The **Agent and Broker Video Learning Center** on YouTube features technical assistance videos on a variety of topics to help agents and brokers navigate the Marketplace.

Agents and brokers can view the full playlist [here](#).

View the new **Guide to 2024 Marketplace Updates video** to learn more about policy updates that agents and brokers should keep in mind while assisting consumers during the Plan Year 2024 Open Enrollment Period (OEP).
The **Agent and Broker Frequently Asked Questions (FAQs) website** is a self-service resource and is linked in the **Agent and Broker Resources website**.

FAQ categories include topics such as:

- Working with the Marketplace
- Enrolling Consumers in Health Coverage
- Registration and Training Requirements
- Transitions in Coverage
- Privacy and Security Requirements
- And more!
# Upcoming Webinars

## Upcoming Webinar Topics (Dates and Registration Details Forthcoming)

<table>
<thead>
<tr>
<th>Topic</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preparing for Plan Year 2024 Open Enrollment</td>
<td></td>
</tr>
<tr>
<td>Plan Year 2024 Marketplace Policy Operations &amp; Updates</td>
<td></td>
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<tr>
<td>Help on Demand for Plan Year 2024</td>
<td></td>
</tr>
<tr>
<td>Mastering the Marketplace Application for Plan Year 2024</td>
<td></td>
</tr>
</tbody>
</table>
Register for upcoming office hours by visiting https://www.regtap.info/ and following the instructions below. Once an agent or broker registers for office hours on REGTAP, they are registered for the entire office hours series. Registration for webinars will be available as the date approaches.

1. Log in to REGTAP. If an agent or broker is new to REGTAP, click “Register as a New User.” Agents and brokers will receive an email to confirm their account.

2. Click "Training Events" on "My Dashboard."

3. Click the "View" icon next to the desired webinar topic/title.

4. Click the “Register Me” button.

5. For further assistance logging in to REGTAP or registering for a webinar, contact the Registrar at 1-800-257-9520 or registrar@REGTAP.info. Assistance is available Monday through Friday from 9:00 AM - 5:00 PM ET. **Registration closes 24 hours prior to each event.**

<table>
<thead>
<tr>
<th>Office Hour Dates</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thursday, November 2, 2023</td>
<td>1:30 – 2:30 PM EST</td>
</tr>
<tr>
<td>Thursday, November 16, 2023</td>
<td>1:30 – 2:30 PM EST</td>
</tr>
<tr>
<td>Thursday, December 7, 2023</td>
<td>1:30 – 2:30 PM EST</td>
</tr>
<tr>
<td>Thursday, January 4, 2024</td>
<td>1:30 – 2:30 PM EST</td>
</tr>
</tbody>
</table>
## Agent and Broker Marketplace Help Desks and Call Centers

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone # and/or Email Address</th>
<th>Types of Inquiries Handled</th>
<th>Hours (Closed Holidays)</th>
</tr>
</thead>
</table>
| Marketplace Service Desk                  | 855-CMS-1515 855-267-1515 CMS_FEPS@cms.hhs.gov | • CMS Enterprise Portal password resets and account lockouts  
|                                           |                              | • Other CMS Enterprise Portal account issues or error messages  
|                                           |                              | • General registration and training questions (not related to a specific training platform)  
|                                           |                              | • Login issues on the Classic Direct Enrollment agent and broker landing page  
|                                           |                              | • Technical or system-specific issues related to the Marketplace Learning Management System (MLMS)  
|                                           |                              | • User-specific questions about maneuvering in the MLMS site, or accessing training and exams  | Monday-Friday 8:00 AM-8:00 PM ET |
| Agent and Broker Email Help Desk          | FFMProducer-AssisterHelpDesk@cms.hhs.gov | • General enrollment and compensation questions  
|                                           |                              | • Manual identity proofing/Experian issues  
|                                           |                              | • Escalated registration and training questions (not related to a specific training platform)  
|                                           |                              | • Agent and Broker Registration Completion List issues  
|                                           |                              | • Find Local Help listing issues  
|                                           |                              | • Help On Demand participation instructions or questions  
|                                           |                              | • Report concerns that a consumer or another agent and broker has engaged in fraud or abusive conduct  | Monday-Friday 8:00 AM-6:00 PM ET |
| Marketplace Call Center Agent and Broker Partner Line | 855-788-6275  
Note: Enter an NPN to access this line. TTY users 1-855-889-4325 | Specific consumer application questions related to:  
• Password reset for a consumer HealthCare.gov account,  
• Special enrollment period not available on the consumer application, or  
• Consumer specific eligibility and enrollment questions | Monday- Sunday 24 hours/day |
### Agent and Broker Marketplace Help Desks and Call Centers (continued)

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone # and/or Email Address</th>
<th>Types of Inquiries Handled</th>
<th>Hours (Closed Holidays)</th>
</tr>
</thead>
</table>
| Agent and Broker Training and Registration Email Help Desk | MLMSHelpDesk@cms.hhs.gov | • Technical or system-specific issues related to the MLMS  
• User-specific questions about maneuvering in the MLMS site, or accessing training and exams                                                                                                                   | Monday-Friday 9:00 AM-5:30 PM ET     |
| SHOP Call Center                          | 800-706-7893                              | • Inquiries related to SHOP eligibility determinations on HealthCare.gov  
• Contact the insurance company for most questions about SHOP plans, such as applications, enrollment, renewal, or changing or updating coverage.                                                                | Monday-Sunday 24 hours/day           |
| Marketplace Appeals Center                | 1-855-231-1751 TTY users 1-855-739-2231   | • Status of a Marketplace eligibility appeal  
• How to appoint an Authorized Representative to request Marketplace eligibility appeal on a consumer’s behalf                                                                                                        | Monday-Friday 7:00 AM-8:30 PM ET     |
Dedicated Agent and Broker Support Available for Complex Consumer Cases

» For complex cases, **agents and brokers must first attempt to resolve the case by contacting the Marketplace Consumer Call Center or the EDE partner** (if applicable).

» If agents and brokers are unsuccessful in resolving the case with the Call Center or EDE partner (if applicable) and still require assistance, contact the FFM Agent/Broker Email Help Desk ([FFMProducer-AssisterHelpDesk@cms.hhs.gov](mailto:FFMProducer-AssisterHelpDesk@cms.hhs.gov)) and provide the following information:
  
  o Full name, email address, and phone number of agents and brokers assisting the consumer
  o The consumer’s Marketplace application ID
  o The state in which the consumer resides
  o Summary of the case and the request
  o Whether the case is medically urgent (and if so, when a response is needed)
  o Indicate that the Marketplace Call Center or EDE partner has already been called and provide the date of the call

» The Help Desk will refer the information provided to representatives from the Complex Case Help Center (CCHC) so they can respond to the issue. A member of the CCHC team will reach out via phone for additional information or to communicate the outcome of the case.
# Agent and Broker Resource Links

<table>
<thead>
<tr>
<th>Resource</th>
<th>Description</th>
<th>Link</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agents and Brokers Resources Webpage</td>
<td>Primary outlet for agents and brokers to receive information about working in the Marketplace; provides the latest news and resources, including newsletters, webinars, fact sheets, videos, and tip sheets</td>
<td><a href="https://www.cms.gov/marketplace/agents-brokers/resources">https://www.cms.gov/marketplace/agents-brokers/resources</a></td>
</tr>
<tr>
<td>HealthCare.gov</td>
<td>Official site of the Marketplace; used for researching health coverage choices, eligibility, and enrollment</td>
<td><a href="https://www.healthcare.gov/">https://www.healthcare.gov/</a></td>
</tr>
<tr>
<td>CMS Enterprise Portal</td>
<td>Allows agents and brokers to securely complete identity proofing and access the MLMS to complete annual, required Marketplace agent and broker training and registration</td>
<td><a href="https://portal.cms.gov">https://portal.cms.gov</a></td>
</tr>
<tr>
<td>Agent and Broker FFM Registration Completion List (RCL)</td>
<td>Public list of agents and brokers who have completed Marketplace registration; used by issuers to verify agents’ and brokers’ eligibility for compensation for assisting with Marketplace consumer enrollments</td>
<td><a href="https://data.healthcare.gov/ffm_ab_registration_lists">https://data.healthcare.gov/ffm_ab_registration_lists</a></td>
</tr>
<tr>
<td>Agent and Broker Marketplace Registration Tracker</td>
<td>Searchable database that allows users to look up their Marketplace registration status with the NPN and ZIP Code saved in their MLMS profile for the current Plan Year</td>
<td><a href="https://data.healthcare.gov/ab-registration-tracker/">https://data.healthcare.gov/ab-registration-tracker/</a></td>
</tr>
<tr>
<td>Find Local Help</td>
<td>Tool available on HealthCare.gov that enables consumers to search for a local, Marketplace-registered agent and broker to assist with Marketplace enrollment</td>
<td><a href="https://localhelp.healthcare.gov/">https://localhelp.healthcare.gov/</a></td>
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<tr>
<td>Resource</td>
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<tr>
<td>Help On Demand</td>
<td>Consumer assistance referral system operated by Help On Demand (formerly known as BigWave Systems) that connects consumers seeking assistance with Marketplace-registered, state-licensed agents and brokers in their area who can provide immediate assistance with Marketplace plans and enrollments</td>
<td><a href="https://www.cms.gov/ccio/programs-and-initiatives/health-insurance-marketplaces/help-on-demand-for-agents-and-brokers">https://www.cms.gov/ccio/programs-and-initiatives/health-insurance-marketplaces/help-on-demand-for-agents-and-brokers</a></td>
</tr>
<tr>
<td>Agent and Broker Video Learning Center</td>
<td>The Agent and Broker Video Learning Center features technical assistance videos on a variety of topics to help agents and brokers navigate the Marketplace.</td>
<td><a href="https://bit.ly/3hXLyru">https://bit.ly/3hXLyru</a></td>
</tr>
<tr>
<td>Frequently Asked Questions for Agents and Brokers</td>
<td>Provides answers to commonly asked questions about working with the Marketplace and helping clients enroll in and maintain their coverage</td>
<td><a href="https://www.agentbrokerfaq.cms.gov/s/">https://www.agentbrokerfaq.cms.gov/s/</a></td>
</tr>
<tr>
<td>List of Approved Health-related Lines of Authority</td>
<td>Provides a list of valid health-related lines of authority for agents and brokers by resident state</td>
<td><a href="https://data.healthcare.gov/AB-NIPR-Health-Line-Of-Delay">https://data.healthcare.gov/AB-NIPR-Health-Line-Of-Delay</a></td>
</tr>
<tr>
<td>Partner Directory for Agents and Brokers</td>
<td>List of approved, participating issuers and web-brokers includes entities that offer online resources for agents and brokers, such as enrollment and client management functionality</td>
<td><a href="https://data.healthcare.gov/issuer-partner-lookup">https://data.healthcare.gov/issuer-partner-lookup</a></td>
</tr>
<tr>
<td>Resource</td>
<td>Description</td>
<td>Link</td>
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<td>-----------------------------------------------</td>
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</tr>
<tr>
<td>Agent and Broker NPN Search Tool</td>
<td>Enables users to search and find the correct NPN to enter in the MLMS profile and on Marketplace applications</td>
<td><a href="https://nipr.com/help/look-up-your-npn">https://nipr.com/help/look-up-your-npn</a></td>
</tr>
<tr>
<td>Acronym</td>
<td>Definition</td>
<td></td>
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Agents and brokers are valued partners to all of us at CMS for the vital role you play in enrolling consumers in qualified health coverage.

We thank you for the trusted advice, support, and assistance you provide throughout the year and wish you continued success during this OEP and beyond!