Preparing for Plan Year (PY) 2023
Open Enrollment

Centers for Medicare & Medicaid Services (CMS)
Center for Consumer Information & Insurance Oversight (CCIIO)

September 22, 2022
Disclaimer

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.
Agenda

01 Prepare for the PY 2023 Open Enrollment Period (OEP)
02 Compliance, Privacy, and Security Tips
03 Consumer Consent
04 Working With Navigators and Assisters
05 Marketing Resources and Working With the Marketplace Call Center
06 Additional Marketplace Reminders
Prepare for the Plan Year 2023
Open Enrollment Period (OEP)
The Marketplace sends an annual notice to all enrollees during the fall to inform them of the upcoming OEP.

**Fall 2022**

- Qualified individuals make OEP plan selections with regular effective dates (i.e., not under a special enrollment period (SEP)) for PY 2023.

**Nov. 1, 2022 – Jan. 15, 2023**

Plan selections completed and received by the Marketplace from November 1, 2022 to December 15, 2022, become effective.

**Jan. 1, 2023**

Plan selections completed and received by the Marketplace from December 16, 2022 to January 15, 2023, become effective.

**Feb. 1, 2023**

**NOTE** | Consumers completing plan selections by December 15 generally must pay their portion of the premium by the issuer’s deadline for their health coverage to become effective on January 1, 2023. Consumers completing plan selection between December 16 and January 15 must pay their portion of the premium by the issuer’s deadline for their health coverage to become effective on February 1, 2023.
REMINDER: Complete Marketplace Registration and Training

» The OEP for PY 2023 is **November 1, 2022 - January 15, 2023**.

» All agents and brokers planning to assist consumers with Marketplace coverage must complete PY 2023 registration and training available through the CMS Enterprise Portal at [https://portal.cms.gov](https://portal.cms.gov) prior to assisting consumers with enrolling in coverage.

NEW AGENTS AND BROKERS

Agents and brokers who did not complete PY 2022 registration and training must:

» Take the full Individual Marketplace training for PY 2023

» Execute the Agent Broker General Agreement and the Individual Marketplace Privacy and Security Agreement via the Marketplace Learning Management System (MLMS)

RETURNING AGENTS AND BROKERS

Agents and brokers who completed PY 2022 registration and training:

» Take either the condensed or full Individual training for PY 2023

» Execute the Agent and Broker General Agreement and the Individual Marketplace Privacy and Security Agreement via the MLMS

» **Complete registration by October 24** to avoid having system access revoked and so issuers may provide compensation for enrollments

To learn how to complete registration and training, read this [Frequently Asked Question](https://example.com).
Agents and brokers should confirm that their information appears on the current PY’s Agent and Broker Federally-facilitated Marketplace (FFM) Registration Completion List (RCL).

Information may take one to two business days to appear on the RCL after completing all registration and training steps.

Agents and brokers whose National Producer Number (NPN) does not appear on the RCL for PY 2023 one or two days after they completed Marketplace training and registration can go to the Marketplace Registration Tracker to confirm their completion of all required registration and training steps (see next slide).
Using the Agent and Broker Registration Tracker

» Agents and brokers can enter their NPN and ZIP Code in the Marketplace Registration Tracker to see details of the Marketplace registration and training steps they have completed.

» Agents and brokers should confirm they have completed the applicable required training courses based on whether they are new or returning agents and brokers and the status of the Agreements they must sign.

» Confirm CMS’ validation of the NPN provided in the MLMS profile.

» Information is updated once daily by 5:00 PM ET.

» This tracker is a supplemental tool for the RCL, NOT a replacement. After confirming and completing any missing registration steps, agents and brokers should return to the RCL to confirm their NPN appears for PY 2023.

» Agents and brokers who still need assistance can send an email to: FFMProducer-AssisterHelpDesk@cms.hhs.gov.
Registration and Training Survey

For agents and brokers who have already completed Registration and Training for Plan Year 2023, we encourage you to also complete the Registration and Training Survey. This survey takes only a couple of minutes to complete, and your feedback is important to CMS.

- If you are an agent or broker new to the Marketplace, please complete the survey here: https://www.research.net/r/newABtrainingfeedbackPY23
- If you are a returning agent or broker, please complete the survey here: https://www.research.net/r/ReturningABtrainingfeedbackPY23

We want to hear from you!
Agents and brokers should get licensed in all states where they plan to assist consumers.

Set up appointments with applicable Qualified Health Plan (QHP) issuers in those states.

Each state Department of Insurance (DOI) determines the requirements for agents and brokers in their specific state, and CMS validates the status of agent’s and broker’s licensure through the National Insurance Producer Registry (NIPR) on a weekly basis. Specifically, licensure validation is determined by checking license status and the presence of a valid health-related line of authority (LOA) in their resident state.

Agents and brokers who do not have an approved health-related LOA, as determined by their resident state, will lose their access to Marketplace systems and will not be able to assist consumers in PY 2023.

Agents and brokers can visit the NIPR website to check their state license and LOA status: https://nipr.com/licensing-center/add-a-line-of-authority

Agents and brokers who are concerned that they may not have an approved health-related LOA should contact the appropriate state DOI immediately to resolve the issue.
Review Current Plan Offerings: Use the “See Plans & Prices” Tool

» Historically, updated plan information for the current plan year has been available approximately 1-2 weeks prior to the beginning of the OEP on November 1; CMS will announce when PY 2023 plan information is available for agents and brokers.

» To understand which issuers offered plans in a particular area during last year’s open enrollment, review the “See Plans & Prices” tool.

» This resource can serve as a starting point to select which issuers agents and brokers may wish to seek appointments with for PY 2023.
Agents and brokers should confirm their NPN is entered correctly in their MLMS profile.

- The NPN can be up to 10 digits long and must not begin with a zero.
- The NPN must not include any special characters or letters.
- The NPN is generally not the same as a state license number. Be sure to use an NPN, not a state license number or the Federal Employer Identification Number.

Agents and brokers should check the NIPR database to confirm their NPN and active state license with a health-related LOA for the state(s) where they plan to assist with enrollments.

CMS has a process for validating NPNs and active licensure at the time of registration, in addition to performing routine checks of licensure, to ensure agents and brokers are complying with Marketplace rules.

Tip: CMS needs agents’ and brokers’ Social Security numbers to validate that the NPN entered on their MLMS profile is a match against the NIPR. Agents and brokers who didn’t provide their Social Security number when originally setting up their CMS Portal account may add it by calling the Marketplace Service Desk at 1-855-267-1515.
Learn About Consumer Trends

Use available studies to determine where most consumers are, including:

» **Health Insurance Marketplaces 2022 Open Enrollment Report**: The Health Insurance Marketplaces 2022 Open Enrollment Report summarizes health plan selections through the individual Marketplaces during the 2022 Open Enrollment Period.

» **Kaiser Family Foundation Reports**: Provides state-level enrollment data from 2014–2022.
  - [https://www.kff.org/health-reform/state-indicator/marketplace-enrollment/?activeTab=map&currentTimeframe=0&selectedDistributions=number-of-individuals-who-selected-a-marketplace-plan&sortModel=%7B%22colId%22%3A%22Location%22%2C%22sort%22%3A%22asc%22%7D](https://www.kff.org/health-reform/state-indicator/marketplace-enrollment/?activeTab=map&currentTimeframe=0&selectedDistributions=number-of-individuals-who-selected-a-marketplace-plan&sortModel=%7B%22colId%22%3A%22Location%22%2C%22sort%22%3A%22asc%22%7D)

» **American Community Survey Tables for Health Insurance Coverage**: Provides multiple data sets on health insurance coverage status and type by population demographic and state.
  - Access this data at: [https://www.census.gov/data/tables/time-series/demo/health-insurance/acs-hi.html](https://www.census.gov/data/tables/time-series/demo/health-insurance/acs-hi.html)
Agents and brokers registered with the FFM may assist consumers with enrollment in a Marketplace QHP through one of two pathways:

- **HealthCare.gov**: Work “side-by-side” with consumers.
- **Private Website**: Use an approved private third-party website.
Marketplace Pathway

» In the Marketplace pathway, registered agents and brokers help a consumer obtain an eligibility determination and select a QHP directly at HealthCare.gov.

» The consumer creates an account, logs in to the site with a consumer account, and “drives” the process; agents and brokers are prohibited from logging in to HealthCare.gov.
The Enhanced Direct Enrollment (EDE) Pathway offers enhanced functionality from approved QHP issuers and web-brokers, including fully integrated platforms where agents and brokers can:

- Efficiently enroll a consumer on an approved EDE website without needing to be redirected to HealthCare.gov or the Marketplace Call Center, and
- Easily assist clients with year-round policy and client relationship management, including uploading required documentation and retrieving notices (e.g., Forms 1095-A) from an approved EDE website.

Our goal is to continue to add more approved EDE partners so that agents and brokers have more choices to use when assisting consumers with enrolling in Marketplace coverage.
Find an Approved EDE Website

» Agents and brokers must use an approved issuer or web-broker to access the enhanced private website enrollment and client management capabilities.

» Agents and brokers may find an issuer or web-broker that is approved to offer these services via the Issuer & Direct Enrollment Partner Directory.

» Agents and brokers can search the directory for issuers and web-brokers by state.

EACH DIRECTORY LISTING CONTAINS:

» Company name

» Level of service offered (e.g., classic functionality, simplified, or expanded application capabilities)

» Contact information for agents and brokers

» Information on whether an issuer or web-broker offers Small Business Health Options Program (SHOP) plans and/or stand-alone dental plans
The directory also has information on Direct Enrollment (DE) partners that only offer the Classic Pathway (with the redirect to HealthCare.gov), and issuers that only enroll consumers through HealthCare.gov, that are interested in working with the agent and broker community.
Find Local Help is a tool on HealthCare.gov that consumers can use to get connected with registered agents and brokers in their area.

Find Local Help works by producing a list of Marketplace-registered, state-licensed agents and brokers for the consumer to contact directly. Agents and brokers will have the option to have their information included in Find Local Help when confirming their profile prior to completing the annual training through CMS.
In their MLMS profile, agents and brokers have the following four options to display their contact information for Find Local Help. Agents and brokers may return to the MLMS profile to update their settings at any time.

- **Option 1** | Agents and brokers can display contact information for Find Local Help in all HealthCare.gov states where they have a valid license.
- **Option 2** | Agents and brokers can display contact information, *except for street address*, for Find Local Help in all HealthCare.gov states where they have a valid license.
- **Option 3** | Agents and brokers can display contact information for their home state only.
- **Option 4** | Agents and brokers can indicate that they do not want to participate in Find Local Help or Help On Demand.
Search Find Local Help to confirm the listing is accurate at https://www.healthcare.gov/find-assistance/.

Agents and brokers can fix any issues by updating their MLMS profile or contacting FFMProducer-AssisterHelpDesk@cms.hhs.gov for assistance.

It may take up to three business days for MLMS profile updates to appear on Find Local Help.
Get Connected to Consumers Through Help On Demand

» **Help On Demand** is a consumer assistance referral system 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.

» Only agents and brokers who have completed Marketplace registration and training for the applicable PY are eligible to participate in Help On Demand.

» For more information and resources on Help On Demand, visit the Help On Demand Resources Page, which is accessible via the “Help On Demand” link under “Resources” on the right side of the Agent and Broker Resources webpage (http://go.cms.gov/CCIIOAAB).
Once agents and brokers complete Individual Marketplace Registration and Training and sign the Agent and Broker General Agreement and the Individual Marketplace Privacy and Security Agreement at http://portal.cms.gov, they are ready to complete training and register for Help On Demand.*


2. Agents and brokers should ensure they have an active state license and health-related LOA for the state(s) where they plan to offer assistance with enrollment in Marketplace plans.

3. Confirm that their NPN is listed as valid on the Agent and Broker FFM RCL at https://data.healthcare.gov/ffm_ab_registration_lists.

4. Activate their Help On Demand account.
   - Agents and brokers will receive an email invitation from noreply@helpondemand.com with a secure link to the email address listed in their MLMS profile. Note: This email may take 5-7 business days to be sent following NPN validation for eligibility to participate.

*Note: This is an optional service and is not part of the FFM registration requirements.
Compliance, Privacy, and Security Tips
Guidelines for Accessing CMS Systems

» Sharing login credentials is not allowed, including credentials used to access DE and EDE websites.

» A person may log into their CMS Portal account with only a **single login session**.
  
  o EDE partner websites prevent logging in with more than one session concurrently. If agents and brokers are logged in to a partner website and then try to log in again using a new device, their first session will end. This system check will effectively prevent multiple people from using the same login credentials.

» Users may conduct one person search at a time. Use of scripts or automation tools to conduct person searches, complete applications, and submit enrollments on CMS websites is not allowed.

» Agents and brokers may only conduct person searches for consumers who have given them consent to work with them for purposes of applying for and enrolling in a Marketplace plan. As a best practice, CMS recommends getting this consent in writing.

» Agents and brokers must be licensed and have a valid health-related LOA in each state where they are assisting consumers.
Maintaining Compliance: Key Reminders

» Agents and brokers must also:

- Provide correct information to both consumers and the Marketplace;
- Provide correct consumer information (e.g., consumer name, date of birth, address, email address) to the Marketplace for verifying consumer identity;
- Refrain from marketing or conduct that is misleading;
- Obtain consent from each client they work with prior to assisting them with Marketplace coverage, including prior to searching for a current application using an approved Classic DE/EDE website;
- Protect consumers’ Personally Identifiable Information (PII);
- Identify and report suspicious activity or potentially fraudulent behavior observed in relation to the Marketplace; and
- Comply with applicable federal and state law, including licensing requirements, system access terms and conditions, and conflict of interest and confidentiality provisions.
Identity Management Reminder

» **A multi-factor authentication device (MFA) is required** to log into the CMS Enterprise Portal. This is especially critical for users enrolling consumers through the Classic DE pathway. Without an MFA device, the “double redirect” will fail, and users will not be able to log in to HealthCare.gov after being redirected from a private website.

» Agents and brokers working with EDE partners will experience real-time user authentication, improving the overall security posture of the EDE flow.

» Agents and brokers who experience issues logging into the CMS portal can contact the Marketplace Service Desk at 1-855-267-1515 or CMS_FEPS@cms.hhs.gov.
Working With Navigators and Assisters
CCIIO oversees two types of enrollment assisters that operate in states with an FFM: Certified Application Counselors (CACs) and Navigators.

CACs and Navigators have similar responsibilities and training; each must be certified and complete annual federal training.

However, Navigators are held to a higher regulatory standard and must also provide education and outreach to consumers, especially the vulnerable and underserved, about basic concepts and rights of health coverage and how to use it. They must also provide information and assistance to consumers with regard to certain post-enrollment topics.

CACs and Navigators must comply with all applicable federal regulation and applicable state standards as long as any state-specific requirements do not prevent application of the provisions of Title I of the Affordable Care Act.
If agents and brokers plan to host and participate in community events, they can:

- Introduce themselves to Navigators and other assisters in their area and ask to be invited to their events.*
- Invite Navigators and other assisters to any events they may be hosting.
- Search Find Local Help to find Navigators and other assisters.

*REMINDER | Do not attempt to establish an exclusive referral relationship with Navigators and other assisters. Assistors, including Navigators, are strictly forbidden from endorsing specific agents and brokers or referring consumers to specific agents and brokers.
Assisters and agents and brokers may benefit from sharing expertise and best practices with each other. An assister might have experience assisting consumers who qualify for Medicaid or the Children’s Health Insurance Program (CHIP), or with specific populations (such as immigrants). Agents and brokers might have best practices for obtaining detailed plan information, how to recognize the distinctions among different coverage options, or different insurance companies’ administrative or claims practices. Nothing prohibits assisters from networking or sharing knowledge and expertise with agents and brokers or seeking out knowledge and expertise from agents and brokers.
Marketing Resources and Working With the Marketplace Call Center
If agents and brokers plan to prepare Marketplace marketing materials:

- Check out these toolkits and templates for Marketplace materials.
- Agents and brokers may print these documents and add a physical sticker or stamp to them with their contact information (e.g., name, NPN, license number, and phone/email address).
Consumers **must authorize agents and brokers** to work with the Marketplace Call Center on their behalf.

Prior to the beginning of OEP, agents and brokers can ask their clients to call the Marketplace Call Center at 1-800-318-2596 and provide their name and NPN to authorize them to work with the Call Center on their behalf for up to 365 days.

This Marketplace authorization is not the same as ensuring agents’ and brokers’ NPNs are on the consumer’s application for payment purposes with issuers. It is also not the same as obtaining consumer consent.

Agents and brokers may also conduct a three-way, toll-free call with the Marketplace Call Center and their clients both on the line.
Marketplace Call Center representatives are trained not to remove NPNs from a consumer’s application unless requested by the consumer. If agents’ and brokers’ clients contact the Marketplace Call Center without them and are asked if anyone has helped them with their application, make sure they answer “yes” and provide the representative with the name and NPN of the agent or broker who assisted them.

Agents and brokers who have a reason to believe their NPN was accidently or intentionally removed from a consumer’s application can submit the Application ID with a description of the problem (without consumer PII) to the Agent/Broker Email Help Desk at FFMProducer-AssisterHelpDesk@cms.hhs.gov.
Additional Marketplace Reminders
The Marketplace communicates regularly with consumers via email, SMS, and autodial throughout the OEP to remind them to take action and complete steps from creating an account, applying, enrolling, and paying their first premium. **Agents and brokers should only be entering accurate consumer phone numbers, email, and mailing addresses on Marketplace applications and not their contact information.**

Consumers can unsubscribe from Marketplace emails within the email itself and can also opt-out through their account.

The Marketplace sends consumers Marketplace Open Enrollment Notices (MOENs) toward the end of September and beginning of October that provide reminders about the upcoming OEP dates and important actions they may need to take to re-enroll in coverage.

Before the OEP starts, issuers may begin contacting current consumers by sending a re-enrollment notice and indicating any plan changes for the upcoming year. Communication during the OEP encourages consumers to update their information with the Marketplace and to visit HealthCare.gov to view projected premium amounts.

Agents and brokers play an important role helping consumers understand issuer and Marketplace emails and notices and any important deadlines that must be met to obtain or retain coverage.
Data Matching Issues (DMIs)

» A DMI is a difference between some information a consumer provides on their Marketplace application and information the Marketplace obtains from other trusted data sources.

» **DMIs may be generated because:**
  - A consumer’s data may not match information at our trusted data sources
  - A trusted data source may not have data for a consumer
  - Information is missing or incorrect on the application
  - A consumer failed to provide a Social Security Number (SSN) on their application
  - A consumer failed to provided all household income on the application
  - A consumer’s name used for their application differs from how it appears on their citizenship document or other document
  - A consumer failed to provide their immigration document numbers and ID numbers
## Impact of DMI Expiration

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<thead>
<tr>
<th>DMI</th>
<th>Expiration Description</th>
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<tbody>
<tr>
<td>Annual Income</td>
<td>Applicant is unable to document annual household income is within 25% or $6,000 of attested income</td>
<td>Household’s eligibility for financial assistance is adjusted, possibly to nothing, based on the level of income on record with Exchange trusted data sources</td>
</tr>
<tr>
<td>Citizenship/Immigration (Cit/Imm)</td>
<td>Consumer is unable to verify an eligible citizenship or lawful presence status</td>
<td>Consumer loses their eligibility for Exchange coverage and is terminated if enrolled</td>
</tr>
<tr>
<td>American Indian/Alaskan Native (AIAN) Status</td>
<td>Consumer is unable to verify they are a member of a federally recognized tribe or shareholder in an Alaska Native corporation (ANCSA)</td>
<td>Consumer loses their eligibility for financial assistance provided specifically to members of federally recognized tribes, which is eliminated if enrolled</td>
</tr>
<tr>
<td>Non-Employer Sponsored Coverage Minimum Essential Coverage (non ESC MEC)</td>
<td>Consumer is unable to verify they are not eligible/enrolled in Non-Employer Sponsored Coverage</td>
<td>Consumer loses their eligibility for financial assistance, which is eliminated if enrolled</td>
</tr>
<tr>
<td>ESC MEC (OPM Only)</td>
<td>Consumer is unable to verify they are not eligible/enrolled in Employee Sponsored Coverage from OPM</td>
<td>Consumer loses their eligibility for financial assistance, which is eliminated if enrolled</td>
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General Tips for Avoiding All DMI Types

- Complete all possible fields in the application
- Ensure consumer’s name matches documents such as their Social Security card
- Non-applicants in the household are strongly encouraged to provide an SSN if they have one
- Double check that the information on the application is complete and that there are no errors or typos
Live Question/Answer Session & Agent and Broker Outreach Updates
Consumers in Need of Coverage When Public Health Emergency Ends

» In March 2020, CMS temporarily waived certain Medicaid and CHIP requirements and conditions as part of the response to the COVID-19 Public Health Emergency (PHE). The easing of these rules helped prevent people with Medicaid and CHIP — in all 50 states, the District of Columbia, and the five U.S. territories — from losing their health coverage during the pandemic. However, state Medicaid agencies will soon be required to restart Medicaid and CHIP eligibility reviews.

» In an effort to minimize the number of people that lose Medicaid or CHIP coverage when the PHE ends, CMS is working with states and other stakeholders to inform people about renewing their coverage and exploring other available health insurance options, such as Marketplace coverage, if they no longer qualify for Medicaid or CHIP.

» CMS plans to share additional information and resources with agents and brokers in the coming months so they can prepare to assist consumers in need of assistance with Marketplace coverage if they are no longer eligible for Medicaid.
CMS routinely analyzes data on who is signing up for coverage and how Exchange applicants move through the online workflows in order to measure Marketplace effectiveness and determine whether there is a need for policy, operational, or outreach/marketing updates.

One of the barriers to making informed decisions is that consumers, or individuals filling out applications on consumers’ behalf, often do not provide attestations to the optional race and ethnicity questions in the FFM application.

We encourage all agents and brokers to take the time to ask consumers to respond to these questions. This information will help CMS reduce health disparities, prevent discrimination, promote equity for all communities and FFM consumers, and better follow its mission to improve health care coverage. CMS asks this question in order to ensure outreach is reaching all communities and that the application process does not create barriers for individuals or groups.

CMS will use this data to identify possible application, enrollment, or coverage barriers and disparities for all communities seeking coverage through the FFM. In addition, the question about language preference will help CMS assess language needs of the populations being served and help CMS and insurers have language services ready.

For more information, view this video on race and ethnicity questions in the Marketplace application and this tip sheet on addressing consumer concerns about these questions.
Following the Executive Order On Advancing Racial Equity and Support for Underserved Communities Through the Federal Government, CMS has been engaging in initiatives to understand and better address health disparities and advance equity in health coverage access.

Agents and brokers who would like to learn more about how to reach underserved and/or underinsured communities and help them enroll in health coverage can explore these resources:

- Growing Market, New Opportunities: An Agent and Broker Panel Series
- CMS Diverse Community Panel Data Slides
- Resources by Language
- Health Equity Technical Assistance Program
- Outreach and Education for Special Populations
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:

- Full name, email address, and phone number of agents and brokers assisting the consumer
- The consumer’s Marketplace application ID
- The state in which the consumer resides
- Summary of the case and the request
- Whether the case is medically urgent (and if so, when a response is needed)
- 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.
Check out these technical assistance videos for Marketplace agents and brokers at the Agent and Broker Video Learning Center (VLC)! The VLC features a variety of topics to help navigate the Marketplace, including:

» Marketplace application walkthrough videos for various consumer scenarios
» How to retrieve your user ID and reset your password
» How to use the income calculation tool on HealthCare.gov

And more! View the entire playlist at https://bit.ly/3hXLyru
The Agent and Broker Frequently Asked Questions (FAQs) website provides answers to commonly asked questions about working in the Marketplace, selling SHOP insurance, and helping clients enroll in and maintain coverage.

» Visit https://www.agentbrokerfaq.cms.gov/s/ and search by question category, keyword, or part of the question. Most responses also include links to additional resources to help when assisting clients.
The Agent and Broker Resources webpage contains a link to the Agent and Broker Marketplace Registration Tracker. This resource allows agents and brokers to look up their Marketplace registration status with the NPN and ZIP Code that is saved in their MLMS profile for the current plan year.

Visit the Registration Tracker link under “Quick Links” on the Agent and Broker Resources webpage to access this resource.
# Upcoming Webinars & Additional Resources

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<thead>
<tr>
<th>Upcoming Webinar Topics</th>
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<tbody>
<tr>
<td>Helping Consumers More Effectively for Plan Year 2023</td>
<td>September 29, 2022</td>
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<tr>
<td>Plan Year 2023 Marketplace Policy and Operations Updates</td>
<td>October 6, 2022</td>
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<td>Help On Demand</td>
<td>October 13, 2022</td>
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<tr>
<td>Mastering the HealthCare.gov Application</td>
<td>October 20, 2022</td>
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## Additional Resources – Recently Posted Webinar Slides, CBTs, and Transcripts

- 9/15/22 Webinar Slides: Complex Case Scenarios
- 9/1/22 Webinar Slides: Understanding Marketplace Compliance Rules & Regulations
- 8/25/22 Webinar Slides: Reaching Underserved Communities
- 8/3/22 CBT: [COBRA Coverage and the Marketplace](#) and [Transcript](#)
- 7/14/22 Webinar Slides: [Compensation: Tips for Making Sure You Get Paid](#)
Office Hour registration is open all year, and registration for webinars will open as each date approaches. Register for upcoming webinars and office hours by visiting https://www.regtap.info/ and following the instructions below:

1. Log into REGTAP. If agents and brokers are new to REGTAP, select "Register as a New User." Agents and brokers will receive an email to confirm their account.

2. Select "Training Events" from "My Dashboard."

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

4. Click the “Register Me” button.

5. If agents and brokers require 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. Note: Registration closes 24 hours prior to each event.

### Office Hour Dates

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
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<tbody>
<tr>
<td>Thursday, November 3, 2022</td>
<td>2:00 – 3:00 PM EST</td>
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<td>Thursday, November 17, 2022</td>
<td>2:00 – 3:00 PM EST</td>
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<tr>
<td>Thursday, December 8, 2022</td>
<td>2:00 – 3:00 PM EST</td>
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<tr>
<td>Thursday, January 5, 2023</td>
<td>2:00 – 3:00 PM EST</td>
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<tr>
<td>Resource</td>
<td>Description</td>
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<tr>
<td>Agents and Brokers Resources Webpage</td>
<td>Primary outlet for agents and brokers to receive information about working in the Health Insurance Marketplace; provides the latest news and resources, including newsletters, webinars, fact sheets, videos, and tip sheets</td>
</tr>
<tr>
<td>HealthCare.gov</td>
<td>Official site of the Health Insurance Marketplace; used for researching health coverage choices, eligibility, and enrollment</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>
</tr>
<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>
</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>
</tr>
<tr>
<td>Resource</td>
<td>Description</td>
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<tr>
<td>List of Approved Health-related Lines of Authority (LOAs)</td>
<td>Provides a list of valid health-related LOAs for agents and brokers by resident state</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>
</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>
</tr>
<tr>
<td>FAQs 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>
</tr>
<tr>
<td>Resource</td>
<td>Description</td>
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</tr>
<tr>
<td>Agent and Broker FFM Registration Completion List</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>
</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>
</tr>
<tr>
<td>Agent and Broker Video Learning Center</td>
<td>The Agent and Broker VLC features technical assistance videos on a variety of topics to help navigate the Marketplace</td>
</tr>
</tbody>
</table>
## Frequently Used Agent and Broker 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** | 1-855-CMS-1515               | • 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 DE agent/broker landing page  
• 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  
8:00 AM–8:00 PM ET  
October–November only: Saturday-Sunday  
10:00 AM–3:00 PM ET |
| **Agent/Broker Email Help Desk** | **FFMProducer-AssisterHelpDesk@cms.hhs.gov** | • General enrollment and compensation questions  
• Manual identity proofing/Experian issues  
• Escalated general registration and training questions (not related to a specific training platform)  
• Agent/Broker RCL issues  
• Find Local Help listing issues  
• Help On Demand participation instructions or questions  
• Report concerns that a consumer or another agent or broker has engaged in fraud or abusive conduct | Monday-Friday  
8:00 AM–6:00 PM ET |
| **Marketplace Call Center** | 1-855-788-6275               | Specific consumer application questions related to:  
• Password reset for a consumer HealthCare.gov account,  
• SEP not available on the consumer application, or  
• Consumer specific eligibility and enrollment questions | Monday-Sunday  
24 hours/day |
| **Agent/Broker Partner Line** | 1-855-889-4325               | Specific consumer application questions related to:  
• Password reset for a consumer HealthCare.gov account,  
• SEP not available on the consumer application, or  
• Consumer specific eligibility and enrollment questions | Monday-Sunday  
24 hours/day |
| **SHOP Call Center**        | 800-706-7893 TTY users 1-888-201-6445 | • Inquiries related to SHOP eligibility determinations on HealthCare.gov  
• Contact the health insurance issuer 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 |

A full list of Agent and Broker Help Desks and Call Centers is available from the Agent and Broker Resources webpage (http://go.cms.gov/CCIIOAB) under Quick Links.
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
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<tbody>
<tr>
<td>CCHC</td>
<td>Complex Case Help Center</td>
</tr>
<tr>
<td>CCIIO</td>
<td>Center for Consumer Information and Insurance Oversight</td>
</tr>
<tr>
<td>CHIP</td>
<td>Children’s Health Insurance Program</td>
</tr>
<tr>
<td>CMS</td>
<td>Centers for Medicare &amp; Medicaid Services</td>
</tr>
<tr>
<td>DE</td>
<td>Direct Enrollment</td>
</tr>
<tr>
<td>DOI</td>
<td>Department of Insurance</td>
</tr>
<tr>
<td>EDE</td>
<td>Enhanced Direct Enrollment</td>
</tr>
<tr>
<td>FFM</td>
<td>Federally-facilitated Marketplace</td>
</tr>
<tr>
<td>LOA</td>
<td>Line of Authority</td>
</tr>
<tr>
<td>MLMS</td>
<td>Marketplace Learning Management System</td>
</tr>
<tr>
<td>SHOP</td>
<td>Small Business Health Options Program</td>
</tr>
<tr>
<td>MOEN</td>
<td>Marketplace Open Enrollment Notices</td>
</tr>
<tr>
<td>CAC</td>
<td>Certified Application Counselors</td>
</tr>
<tr>
<td>NIPR</td>
<td>National Insurance Producer Registry</td>
</tr>
<tr>
<td>NPN</td>
<td>National Producer Number</td>
</tr>
<tr>
<td>OE</td>
<td>Open Enrollment</td>
</tr>
<tr>
<td>OEP</td>
<td>Open Enrollment Period</td>
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<tr>
<td>SEP</td>
<td>Special Enrollment Period</td>
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<tr>
<td>PII</td>
<td>Personally Identifiable Information</td>
</tr>
<tr>
<td>PY</td>
<td>Plan Year</td>
</tr>
<tr>
<td>FAQ</td>
<td>Frequently Asked Questions</td>
</tr>
<tr>
<td>VLC</td>
<td>Video Learning Center</td>
</tr>
<tr>
<td>QHP</td>
<td>Qualified Health Plans</td>
</tr>
<tr>
<td>RCL</td>
<td>Registration Completion List</td>
</tr>
<tr>
<td>PHE</td>
<td>Public Health Emergency</td>
</tr>
<tr>
<td>MFA</td>
<td>Multi-factor Authentication Device</td>
</tr>
</tbody>
</table>
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!