Preparing for Plan Year (PY) 2024
Open Enrollment

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

September 21, 2023
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).

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01 Review Marketplace Priorities and Complete Registration and Training
02 Understand Enrollment Pathways and Plan Selection Best Practices
03 Learn more about Transitions in Coverage (Medicaid and CHIP Unwinding)
04 Leverage Marketing and Outreach Resources
05 Utilize Help on Demand and Find Local Help
06 Review Compliance Requirements and Cybersecurity Best Practices
07 Additional Marketplace Reminders
08 Live Question/Answer Section & Agent and Broker Outreach Updates
Review Marketplace Priorities and Complete Registration and Training
CMS has identified the following key priorities for agents and brokers to meet the goals identified by our strategic vision. These priorities will enable more consumers to obtain affordable health coverage.

- Supporting transitions in coverage and Medicaid and Children’s Health Insurance Program (CHIP) Unwinding
- Helping cost-sharing reduction (CSR)-eligible consumers select Silver plans
- Preventing duplicate applications
- Preventing and resolving data matching issues (DMIs)
- Reaching underserved and underinsured communities
- Completing the race/ethnicity questions on Marketplace applications
- Maintaining compliance with Marketplace requirements
The Marketplace sends an annual notice to all enrollees during the fall to inform them of the upcoming Open Enrollment Period (OEP) Nov. 1, 2023 – Jan. 15, 2024

Qualified individuals make OEP plan selections with regular effective dates (i.e., not under a Special Enrollment Period (SEP)) for PY 2024

Plan selections completed and received by the Marketplace from November 1, 2023 to December 15, 2023, become effective

Plan selections completed and received by the Marketplace from December 16, 2023 to January 15, 2024, become effective

**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, 2024. 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, 2024.
REMINDER: Complete Marketplace Registration and Training

» The OEP for PY 2024 begins on **November 1, 2023**. Get ready by completing PY 2024 Marketplace registration and training, now available through the CMS Enterprise Portal at [https://portal.cms.gov](https://portal.cms.gov).

**NEW AGENTS AND BROKERS** (those who did not complete PY 2023 registration or training) must:
» Take the full Individual Marketplace training for PY 2024
» 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** (those who completed PY 2023 registration and training) must:
» Take either the condensed or full Individual Marketplace training for PY 2024
» Execute the Agent Broker General Agreement and the Individual Marketplace Privacy and Security Agreement via the MLMS
» Complete registration and training by **late October**

to avoid having Marketplace system access revoked and so issuers may provide compensation for your Marketplace enrollments

For more information on Marketplace Registration and Training for Plan Year 2024, view these webinar decks for **new** and **returning** agents and brokers.
REMINDER: Complete Marketplace Registration and Training (continued)

» There are two options for completing Plan Year 2024 training:
  o CMS-developed training through the MLMS (Individual Marketplace and Small Business Health Options Program [SHOP]); *(No Continuing Education Units (CEUs))* or
  o HHS-approved vendor (Individual Marketplace only). The two HHS-approved vendors for this year are HealthSherpa and INSXCloud.

» An agent or broker only needs to complete training one time for each plan year.

» The approved vendor is required to offer CEUs in a minimum of five states where the Marketplace operates *(45 CFR § 155.222)*.
  o Agents and brokers can use these CEUs to meet state licensure requirements for continuing education.
  o There is no fee for HHS-approved vendor CEUs.
  o For more information on individual state CEU requirements, check with the respective state Department of Insurance.
Plan Year 2024 Enhancements

» Marketplace training for agents and brokers is now available on mobile devices!

» Marketplace training now has a streamlined look and feel that is easier to navigate.

» Later this year, Marketplace training for Plan Year 2024 will be available to agents and brokers in Spanish on the MLMS.

» There will be two vendors, HealthSherpa & INSXCloud, that will be offering training for Plan Year 2024.
Agents and brokers should confirm that their information appears on the current PY’s Agent and Broker 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 2024 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).
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 2024.

Agents and brokers who still need assistance can send an email to: **FFMProducer-AssisterHelpDesk@cms.hhs.gov**.
LOA Validation Requirements for Marketplace Agents and Brokers

» Background: Each state Department of Insurance (DOI) determines the requirements for agents and brokers in their specific state. CMS validates the status of an agent's or 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 LOA in the resident state for each agent or broker.

Note: LOA validations for agents and brokers residing in Florida, Texas, Utah, and Wisconsin who are actively enrolling consumers in those states require an appointment with a health insurance carrier.

» Agents and brokers who do not have an approved health-related LOA, as determined by their resident state, will not be able to access Marketplace systems and will not be able to assist consumers with Marketplace activities for PY 2024.

NPN Validation

» 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. Agents and brokers should plan to check the RCL on Fridays to see whether they have a “Y” in the NPN validation column.

» 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.
Understand Enrollment Pathways and Plan Selection Best Practices
Poll

How many consumers do you expect to assist this year?

1. More than last year
2. About the same as last year
3. Less than last year
Agents and brokers registered with the Marketplace may assist consumers with enrollment in a Marketplace qualified health plan (QHP) through one of two primary pathways.

- **Note:** Agents and brokers must obtain consumer consent before accessing any Marketplace systems or data.
On HealthCare.gov, agents and brokers can assist consumers with...

- Determining if they qualify for insurance through the Marketplace
- Completing an application or updating an existing one
- Selecting a plan and enrolling in coverage
Maintaining Compliance: The Do’s and Don’ts for Agents and Brokers

**DO’S**

- Obtain and document consumer consent prior to assisting with, or facilitating enrollment through, an FFM or assisting the individual in applying for APTC and CSRs for QHPs.
- Identify and report suspicious or potentially fraudulent Marketplace activity to the Agent/Broker Email Help Desk at FFMProducer-AssisterHelpDesk@cms.hhs.gov.
- Provide the FFMs with correct information and document that eligibility application information has been reviewed and confirmed to be accurate by the consumer or their authorized representative, including ensuring consumers are reporting their most accurate income estimate(s) and are providing their Social Security numbers (SSNs), when required.
- Make timely updates to your personal and contact information with your state licensing body, in the NIPR, and in the MLMS.
- Walk consumers through the HealthCare.gov application via Zoom screen sharing.

**DON’TS**

- Retain access to a consumer’s HealthCare.gov account or associated email.
- Create accounts, login, or submit applications on HealthCare.gov.
- Enter false or dummy addresses in place of a consumer’s email or mailing address.
- Enter an agent or broker’s own professional or company email or mailing address on a consumer’s application.
- Share Marketplace credentials.
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.

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.
- 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.
- For a video walkthrough on how to use the Issuer and DE Partner Directory, click [here](#).
Poll

Do you have plans to work with any EDE/DE partners this OEP?

1. Yes, I will be working with an EDE/DE partner for the first time.
2. Yes, I’m continuing to work with the same EDE/DE partner as last year.
3. Yes, however I will be trying a new EDE/DE partner this year.
4. No, I do not have plans to work with an EDE/DE partner at this time.
5. Unsure.
Assisting Consumers with Plan Selection

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 2024 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 2024. Approved DE and EDE entities have similar quoting and window shopping features available to you to help clients evaluate plans.
If a consumer qualifies for CSRs, agents and brokers should explain the benefits of enrolling in a Silver plan. *If the consumer qualifies for and enrolls in a Silver plan with CSRs, their deductible will be lower, and they will pay less each time they receive care.*

**Silver Plans:**
Consumers with incomes between 100–200% of the federal poverty level (FPL) may be eligible for high-CSR variant Silver plans, which may offer the lowest overall costs for them even if Bronze plans offer lower or $0 premiums after Advance Payment of the Premium Tax Credit (APTC).

**Bronze Plans:**
These plans can have low monthly premiums, but can pay less of a consumer's costs when they need care and can also have very high deductibles.
During PY 2023, CSR-eligible consumers who worked with agents and brokers enrolled in Bronze plans at a higher rate than those who self-enrolled in Marketplace coverage. Agents and brokers play an essential role in connecting consumers with quality, affordable coverage. It is important for agents and brokers to understand the costs that could arise when their CSR-eligible clients are not enrolled in Silver plans.
Poll

How many consumers do you expect to enroll in a Silver plan, if they are eligible for CSRs?

1. 1-25
2. 26-50
3. 51-75
4. 76+
DMIs and Duplicate Applications

» During the PY 2023 OEP, agent-and-broker-assisted enrollments generated high levels of DMIs. These DMIs led to operational issues and in some cases prevented consumers from receiving coverage and financial assistance.

» It is important to take steps as an agent or broker to both prevent DMIs and assist consumers in resolving them in a timely manner to ensure consumers continue to have access to health coverage.

Social Security number (SSN) DMIs

» During the PY 2023 OEP, of consumers who made active plan selections:
  o 16% of those who worked with an agent or broker submitted Marketplace applications with missing SSNs.
  o Less than 1% of consumers who self-enrolled submitted applications with missing SSNs.

» Remember: it is required for everyone applying for coverage to provide their SSN if they have one. Anyone applying for Marketplace coverage who does not provide their SSN on their Marketplace application will very likely receive a DMI.

» If their DMI goes unresolved, the consumer can lose financial assistance and Marketplace coverage. Agents and brokers may also lose their commissions when this happens.
Duplicate Applications

» When assisting a consumer with an application using an approved Classic DE or EDE website, agents and brokers must search to see if the consumer has an existing application with the Marketplace. If the consumer has an existing application, the agent or broker must update the existing application rather than create a new application. When an agent or broker creates a new application instead of updating an existing application for a consumer, a duplicate application is created.

» Consumers with duplicate applications face a heightened risk of losing their coverage and/or tax credits.

» For information on avoiding duplicate Marketplace applications, view this tip sheet.
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 documented 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.

For information on the help desks available to agents and brokers who assist consumers through the FFM, as well as the types of inquiries handled, contact information, and hours of operation, see this resource.
If agents’ and brokers’ clients contact the Marketplace Call Center without them, they will be asked “Is a professional helping you complete your application?” Make sure they answer “yes” and provide the representative with the name and NPN of the agent or broker who assisted them.

- Marketplace Call Center representatives are trained not to remove your NPN from a consumer’s application unless requested by the consumer.

- Agents and brokers who have a reason to believe their NPN was accidentally or intentionally removed from a consumer’s application can submit the Application ID with a description of the problem (without consumer personally identifiable information (PII)) to the Agent/Broker Email Help Desk at FFMProducer-AssisterHelpDesk@cms.hhs.gov.
Consumer Scenario

If a consumer is not eligible for an SEP, and if this consumer enrolls in PY 2024 coverage on December 17, when would their plan start?

1. January 1, 2024
2. February 1, 2024
3. January 15, 2024
4. December 15, 2023
Consumer Scenario

If a consumer is not eligible for an SEP, and if this consumer enrolls in PY 2024 coverage on December 17, when would their plan start?

1. January 1, 2024
2. February 1, 2024
3. January 15, 2024
4. December 15, 2023
Learn More About Transitions in Coverage
Consumers in Need of Marketplace Coverage When Public Health Emergency Ends

» The continuous enrollment condition ended **March 31, 2023**, meaning that states began to terminate Medicaid enrollment for individuals no longer eligible for Medicaid as early as April 1, 2023.
  
  o The first renewals of Medicaid eligibility determinations began as early as February 1, with the first terminations effective as of April 1.
  
  o Consumers who receive advance notice that their Medicaid coverage is ending may start the process of enrolling immediately in other coverage, such as on the Marketplace, to avoid gaps in coverage.

» Consumers who lose Medicaid or CHIP coverage between March 31, 2023, and July 31, 2024, will be eligible for a SEP between the same dates. Consumers will be determined eligible for the “Unwinding SEP” based on their answers to application questions regarding their recent loss of coverage.
Agents and brokers should prepare to help these consumers as they transition in coverage types by:

- Updating your marketing and advertising strategies to reach new consumers.
- Ensuring you have sufficient staff to assist the increased number of consumers during the entire unwinding period.
- Listing your information on Find Local Help and participating in Help On Demand.

See the resources below for more information on transitions in coverage. CMS will continue to share additional information and resources with agents and brokers in the coming months so they can continue to assist consumers in need of assistance with Marketplace coverage if they are no longer eligible for Medicaid.

- Video: What You Need to Know About Medicaid and the Unwinding Period
Knowledge Check

True or False: The continuous enrollment condition ended on March 31, 2023.

1. True
2. False
**True or False:** The continuous enrollment condition ended on March 31, 2023.

1. True
2. False
How many consumers have you assisted with enrolling in a Marketplace plan that lost Medicaid coverage since April 1?

1. None
2. Less than 10
3. 11-25
4. More than 25
Leverage Marketing and Outreach Resources
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).
- For partner outreach tools and educational resources specific to transitions in coverage, view the following resources:
  - Medicaid.gov webpage
  - Consumer research messaging to promote the use of HealthCare.gov
» **Understand your population:** Ensure that your advertising and marketing efforts are successful by focusing on the population you are trying to reach and serve. Understanding the needs, demographics, and preferences of potential new clients will enable you to create a targeted outreach effort catered directly to them.

» **Communicate your value, knowledge, and expertise:** You offer immense value and knowledge to your potential new clients. Communicate your expertise by offering accurate, clear communication about the services you provide while helping consumers make informed decisions.

» **Accurately communicate Marketplace plan information:** Many consumers will qualify for free or low-cost plans through the Marketplace, but you should not guarantee these benefits to consumers. You should say that consumers “may qualify” for free or low-cost plans or that they "may qualify" for out-of-pocket cost assistance. The Marketplace will calculate and determine eligibility and savings for consumers during the application process.
» **Build strong client relationships:** It is essential to build strong relationships with your clients. This will help you increase your client base through referrals and repeat business. Take steps to make sure that when you seek new customers, you do not neglect those you already serve. Offer friendly, high-quality customer service, and support clients who successfully enroll in Marketplace plans throughout the year.

» **Use various media channels:** To maximize your advertising and marketing efforts and reach a wider audience, consider using a variety of channels such as social and digital media, local television and radio, print advertising, and participation in local community events.

» **Track and analyze your efforts:** It is important to track and analyze your outreach efforts to ensure that your strategies are producing the desired results.
The Do’s and Don’ts of Marketing and Advertising

**DO’S**

- Document consent with the consumer and keep a record of it for ten years.
- Say you are a state-licensed and Marketplace-registered agent or broker who can help individuals with applying for and enrolling in Marketplace coverage.
- Provide accurate information on Marketplace plans, benefits, and savings, if applicable.
- Avoid non-exclusive leads that are sold to multiple agents and brokers.
- Ask consumers to confirm they would like to be contacted by you as part of future marketing efforts.
- Tell consumers they may qualify for Marketplace coverage and help them get a quote or eligibility determination from the Marketplace.

**DON’TS**

- Update or access applications without documented consent of a consumer.
- Mislead consumers about rewards or discounts for enrolling in Marketplace coverage.
- Forget to get consumer consent when using lead generators.
- Conduct unsolicited calls or send unsolicited text messages to consumers.
- Guarantee free or low-cost plans to consumers.
Consumer Scenario

Which forms of Marketing do you plan to use during this OEP? Select all that apply.

1. Social media
2. Radio/TV
3. Newspapers/magazines
4. Community/organizational partnerships
5. I don’t plan to advertise
Utilize Help On Demand and Find Local Help
Find Local Help and Help On Demand

» Find Local Help and Help On Demand are two key consumer assistance tools you should be aware of as an agent or broker.

» **Find Local Help** (left)
  o Consumers can search and produce a list of agents and brokers in their area.
  o Consumers then can reach out to an agent or broker directly for assistance.

» **Help On Demand** (right)
  o A consumer assistance referral system that quickly connects consumers seeking assistance from Marketplace-registered, state-licensed agents and brokers in their area who can provide immediate assistance with Marketplace plans and enrollments.
» The information agents and brokers use to complete their MLMS profile will be used to populate Find Local Help at HealthCare.gov and Help On Demand so consumers can connect with agents and brokers for assistance.

» To learn more about how to participate in 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. Click here to be directed to Find Local Help.

» CMS will host a Help On Demand for PY 2024 webinar later this year.
Review Compliance Requirements and Cybersecurity Best Practices
New Consent and Application Review Documentation Requirements

» New consent and application review documentation requirements are in effect.
  o Agents, brokers, and web-brokers are required to (1) document and maintain the receipt of consent from the consumer or their authorized representative and (2) document and maintain that eligibility application information has been reviewed by and confirmed to be accurate by the consumer or their authorized representative.

» For more information on these new documentation requirements and maintaining compliance with Marketplace regulations, see the following resources:
  o 45 C.F.R. §§ 155.220(j)(ii)(A) and 155.220(j)(iii)
  o Agent/Broker Summit Presentation: Marketplace Compliance and Agent/Broker Regulations
  o 2024 Payment Notice Requirements FAQs

» CMS recently hosted a Marketplace Compliance webinar that can be found here. An agent/broker panel discussion about compliance requirements will be held in early October, and details are forthcoming.
As it becomes more common for consumer interactions to occur digitally, it is important that agents and brokers recognize cybersecurity threats and aim to prevent them. As part of the Individual Marketplace Privacy and Security Agreement and SHOP Privacy and Security Agreement that agents and brokers signed during registration, **you are required to protect consumers’ PII.**

To follow best practices for cybersecurity during this OEP, consult the resources below.

- Best Practices for Cybersecurity Phishing
- Best Practices for Cybersecurity Encryption
- Protecting Consumer Information and Practicing Cybersecurity Hygiene (also available in Spanish!)

**DID YOU KNOW?**

Known or suspected security or privacy incidents involving CMS information or information systems must be reported immediately to the CMS IT Service Desk by calling 410-786-2580 or 1-800-562-1963, or via e-mail to CMS_IT_Service_Desk@cms.hhs.gov.
Additional Marketplace Reminders
Attend Upcoming Webinars

There are new consumer consent and application review requirements in place for PY 2024. View the Marketplace Compliance webinar slides and attend other upcoming webinars to learn more about what’s new for this year, in preparation for Open Enrollment.

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<thead>
<tr>
<th>Webinar Title</th>
<th>Description</th>
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<tbody>
<tr>
<td>Plan Year 2024 Marketplace Policy Operations &amp; Updates</td>
<td>This webinar will cover policy and operational changes that agents and brokers will encounter when working in the Marketplace for PY 2024. Updates include new legislative changes, regulatory updates for the 2024 Payment Notice, and operational improvements.</td>
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<tr>
<td>Consumer Consent and Application Review Requirements Panel</td>
<td>This panel discussion will provide registered agents and brokers an opportunity to discuss their plans for complying with the new consumer consent and application review requirements that went into effect in June 2023.</td>
</tr>
<tr>
<td>Help On Demand for Plan Year 2024</td>
<td>This webinar will provide an overview of Help On Demand updates. Help On Demand is a real-time consumer assistance tool that allows agents and brokers to access referrals from consumers who need help.</td>
</tr>
<tr>
<td>Mastering the Marketplace Application for Plan Year 2024</td>
<td>This webinar will cover a walkthrough of the Marketplace Application on HealthCare.gov.</td>
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Registration and Training &
Transitions in Coverage Surveys

Registration and Training
» For agents and brokers who have already completed Registration and Training for PY 2024, we encourage you to also complete the Registration and Training Survey you received via email. This survey takes only a couple of minutes to complete, and your feedback is important to CMS.

Transitions in Coverage
» CMS values your contributions to ensuring consumers have access to coverage during this transition period, and we want to learn from your experiences. If you have feedback for CMS regarding Medicaid and Marketplace transitions, please complete the survey at the link located here and in the webinar chat. This information will help CMS understand how to best support agents and brokers during this period.
CMS routinely analyzes data on who is signing up for coverage and how Marketplace 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.

- **Note:** This data also helps CMS demonstrate the impact that agents and brokers are having within underserved communities.

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.
True or False: CMS will use race and ethnicity data to identify possible application, enrollment, or coverage barriers and disparities for all communities seeking coverage through the Marketplace.

1. True
2. False
True or False: CMS will use race and ethnicity data to identify possible application, enrollment, or coverage barriers and disparities for all communities seeking coverage through the Marketplace.

1. True
2. False
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 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

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<th>Upcoming Webinar Topics (Dates and Registration Details Forthcoming)</th>
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<tr>
<td>Plan Year 2024 Marketplace Policy Operations &amp; Updates</td>
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<td>Help On Demand for Plan Year 2024</td>
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<td>Mastering the Marketplace Application for Plan Year 2024</td>
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Register for upcoming office hours by visiting https://regtap.cms.gov/ 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.**

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<tr>
<td>Thursday, November 2, 2023</td>
<td>1:30 – 2:30 PM EST</td>
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<tr>
<td>Thursday, November 16, 2023</td>
<td>1:30 – 2:30 PM EST</td>
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<td>Thursday, December 7, 2023</td>
<td>1:30 – 2:30 PM EST</td>
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<td>Thursday, January 4, 2024</td>
<td>1:30 – 2:30 PM EST</td>
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</tbody>
</table>
The video recordings, and corresponding transcripts, of the **2023 Agent and Broker Summit** presentations are now available for viewing on REGTAP.

### Additional Resources: 2023 Agent and Broker Summit

<table>
<thead>
<tr>
<th>Topic</th>
<th>Video Link</th>
<th>Transcript Link</th>
</tr>
</thead>
<tbody>
<tr>
<td>Welcome to the 2023 Agent and Broker Summit</td>
<td>Video</td>
<td>Transcript</td>
</tr>
<tr>
<td>Agent and Broker Panel Discussion – Connecting Consumers to Coverage: Increasing Access to Health Insurance Coverage and Advancing Health Equity</td>
<td>Video</td>
<td>Transcript</td>
</tr>
<tr>
<td>CMS SME Panel Discussion: Ask CMS: Understanding Best Practices and Challenges Faced by Agents and Brokers in the Marketplace</td>
<td>Video</td>
<td>Transcript</td>
</tr>
<tr>
<td>Expanding Your Reach: Utilizing Find Local Help, Help On Demand, and Agent &amp; Broker Recognition Programs to Increase Access to Coverage</td>
<td>Video</td>
<td>Transcript</td>
</tr>
<tr>
<td>Data Matching Issues Workshop: Minimizing and Resolving Enrollment Blockers</td>
<td>Video</td>
<td>Transcript</td>
</tr>
<tr>
<td>Navigating the Medicaid Unwinding Period: Ensuring Consumers Stay Covered</td>
<td>Video</td>
<td>Transcript</td>
</tr>
<tr>
<td>Marketplace Compliance and Agent/Broker Regulations: Understanding Key CMS Rules and Regulations to Maintain Marketplace Compliance</td>
<td>Video</td>
<td>Transcript</td>
</tr>
<tr>
<td>Eligibility Workshop: Navigating Complex Eligibility and Enrollment Scenarios</td>
<td>Video</td>
<td>Transcript</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 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          |
# 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</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>
</tr>
<tr>
<td>Resource</td>
<td>Description</td>
<td>Link</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-Authority">https://data.healthcare.gov/AB-NIPR-Health-Line-Of-Authority</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>
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<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>
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</tbody>
</table>
# Acronym Definitions

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
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</thead>
<tbody>
<tr>
<td>CCIIO</td>
<td>Center for Consumer Information and Insurance Oversight</td>
</tr>
<tr>
<td>CEU</td>
<td>Continuing Education Unit</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>
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<tr>
<td>EDE</td>
<td>Enhanced Direct Enrollment</td>
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<tr>
<td>FFM</td>
<td>Federally-facilitated Marketplace</td>
</tr>
<tr>
<td>LOA</td>
<td>Line of Authority</td>
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<tr>
<td>MLMS</td>
<td>Marketplace Learning Management System</td>
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<tr>
<td>NIPR</td>
<td>National Insurance Producer Registry</td>
</tr>
<tr>
<td>NPN</td>
<td>National Producer Number</td>
</tr>
<tr>
<td>OEP</td>
<td>Open Enrollment Period</td>
</tr>
<tr>
<td>PII</td>
<td>Personally Identifiable Information</td>
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<tr>
<td>PY</td>
<td>Plan Year</td>
</tr>
<tr>
<td>QHP</td>
<td>Qualified Health Plan</td>
</tr>
<tr>
<td>RCL</td>
<td>Registration Completion List</td>
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<tr>
<td>SBM</td>
<td>State-based Marketplace</td>
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<tr>
<td>SBM-FP</td>
<td>State-based Marketplace on the Federal Platform</td>
</tr>
<tr>
<td>SEP</td>
<td>Special Enrollment Period</td>
</tr>
<tr>
<td>SHOP</td>
<td>Small Business Health Options Program</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 during this OEP and beyond!