

#### MARKETPLACE ASSISTER NEWSLETTER

**May 2019** 

#### **News Flash!**

# Open Season Announcement for Certified Designated Organizations - Live Application Link will be available June 12th

The Centers for Medicare & Medicaid Services (CMS) is inviting organizations who would like to become Certified Application Counselor Designated Organizations (CDOs) to apply during CMS's Open Season beginning **June 12**, **2019**, **and ending September 16**, **2019**. Certified Application Counselor Designated Organizations are a vital component of the assister community. In the Federally-facilitated Marketplace, CDOs oversee certified application counselors (CACs) who are trained and able to help consumers seeking health coverage options through the Marketplace.

Any organization seeking to provide CAC enrollment assistance to consumers for Plan Year 2020 must be a certified CDO. In order to be designated as a CDO, you must submit an online application and enter into an agreement with CMS.

If your organization completed the CDO refresh process last year and received a new CDO identification number and a welcome packet, then you do not need to reapply.

We invite all interested organizations, as well as all CDOs that did not complete the application process during the CDO refresh, to submit an application to become a CDO for Plan Year 2020. In preparation for the next Open Enrollment Period, the deadline to submit an application to become a CDO is September 16, 2019. We look forward to working together!

CDO Application technical assistance webinar recordings, user guides, and more can be found here.

For additional questions, contact us at CACQuestions@cms.hhs.gov.

# Centers for Medicare & Medicaid Services Issues a Funding Opportunity Announcement for the Federally-facilitated Exchange Navigator Program

The Centers for Medicare and Medicaid Services (CMS) issued a Notice of Funding Opportunity (NOFO) for the Federally-facilitated Exchange (FFE) Navigator Program that funds Navigator organizations to provide in-person enrollment assistance for individuals seeking health coverage.

The NOFO announces the same \$10 million annual level of funding as last year. The announcement also expands the period of performance from one year to two years in order to promote stability in the program and improve the consumer experience. The total available funding for the first 12-month budget period will be allocated among the 34 FFE states based on the size of the remaining eligible



uninsured population in each FFE state. A minimum of \$100,000 will be available to each eligible state.

As required in previous years, under the Terms and Conditions of cooperative agreements awarded under this NOFO, funding for the second 12-month budget period will be contingent on the awardee continuing to meet all Navigator program requirements, current program priorities, and the availability of funds.

To access the Notice of Funding Opportunity (NOFO), please visit <u>Grants.gov</u> and search for CFDA # 93.332.

### In Case You Missed It

# CMS issued the Final Rule for the 2020 Annual Notice of Benefit and Payment Parameters

The Centers for Medicare & Medicaid Services (CMS) released the final annual Notice of Benefit and Payment Parameters for the 2020 benefit year, also known as the 2020 Payment Notice. The rule reduces user fees for plans offered on HealthCare.gov, and encourages the use of lower-cost generic drugs, while improving market stability and consumer choice. The rule also includes new rules for Navigators related to annual certification training and required duties.

Changes in the 2020 Payment Notice also created new flexibility for the Navigator Program. Certain types of assistance, including post-enrollment duties, for FFE Navigators are now permissible, but not required. This change will provide grantees with more flexibility and allow them to allocate their grant funding based on the unique needs of their community.

The final 2020 Payment Notice is available here.

The Fact Sheet about this rule is available <u>here</u>.

#### CMS released the Final 2020 Letters to Issuers

CMS also released the Final 2020 Letters to Issuers which provides updates on operational and technical guidance for the 2020 plan year for issuers seeking to offer qualified health plans (QHPs), including stand-alone dental plans (SADPs), in the Federally-facilitated Marketplaces (FFMs) or the Federally-facilitated Small Business Health Options Programs (FF-SHOPs).

The Final 2020 Letter to Issuers is available here.

Qualified Health Plan Certification Key Dates for the 2019 Calendar Year are available here.

# Interoperability and Patients Access Proposed Rule Comment Period

This proposed rule is intended to move the health care ecosystem in the direction of interoperability and to signal CMS' commitment to the vision set out in the 21st Century Cures Act and Executive Order 13813 to improve access t, and the quality o, information that Americans need to make informed health care decisions, including data about health care prices and outcomes, while minimizing reporting burdens on affected plans, health care providers, or payers.



For more information, refer to the rule posted <u>here</u>, and the comment period closes on June 3. If you would like to comment, please do so <u>here</u>.

### **Previous Webinars / Q&A**

- 1. Review of Federally-Facilitated Marketplace Special Enrollment Periods and Plan Category Limitations February 2019 (slides)
- 2. Form 1095-A and Exemptions Processing Overview February 8, 2019 (slides)
- 3. Consumer Options for Terminating Plans and Reporting Changes March 8, 2019 (slides)
- 4. Assister Approaches to Helping Consumers During Tax Season March 8, 2019 (slides)

## **Important Reminders / Tips**

#### **Links to Helpful Resources**

- Marketplace Assister Training Resources and Webinars
- Technical Assistance Resources
- CMS Marketplace Applications, Forms, & Notices
- CMS Outreach and Education Resources
- Marketplace.CMS.gov Page
- CMSzONE Community Online Resource Library Pilot for Marketplace Assisters
- Find Local Help

# Marketplace Call Center and SHOP Center Hours

Health Insurance Marketplace Call Center: 1-800-318-2596 (TTY: 1-855-889-4325). For customer service support, to start or finish an application, compare plans, enroll or ask a question. Available 24 hours a day, 7 days a week (except holidays). CACs and Navigators should call their dedicated phone lines so the Call Center can better track the needs of assisters. The Assister Line can also help with password resets and can help with access to non-application SEPs. Contact your Navigator Project Officer (for Navigators) or your CDO leadership (for CACs) for more information on the Assister Line.

- Navigator Marketplace Call Center line: 1-855-868-4678
- CAC Marketplace Call Center line: 1-855-879-2683
- General consumer Call Center line: 1-800-318-2596 (TTY: 1-855-889-4325).

**SHOP Call Center:** For SHOP related questions, you and employers or employees you interact with may contact the SHOP Call Center at 800-706-7893 or by using the TTY phone number (for hearing impaired) at 1-888-201-6445.



### Stay in Touch

To sign up for the CMS Assister Newsletter, please send a request to the Assister Listserv inbox (ASSISTERLISTSERV@cms.hhs.gov) write "Add to listserv" in the subject line, please include the email address that you would like to add in the body of your email. For requests to be removed from the listserv, please forward a copy of a webinar invite or newsletter received and write "Remove" in the subject line.

If you have specific questions or issues that you would like to see us highlight in our webinar series or here in this newsletter please contact us.

For CMS Navigator grantees - please get in touch with your Navigator Project Officer.

For **CAC Designated Organizations in FFM States** - please send an email to <u>CACQuestions@cms.hhs.gov</u>.

We welcome questions, suggestions and comments, so please feel free to contact us!

Please note that the information presented in this Assister Newsletter is informal, technical assistance for assisters and is not intended as official CMS guidance.