

# AGREEMENT BETWEEN THE CENTERS FOR MEDICARE & MEDICAID SERVICES AND CERTIFIED APPLICATION COUNSELOR DESIGNATED ORGANIZATION IN A STATE IN WHICH A FEDERALLY-FACILIATED EXCHANGE IS OPERATING

THIS AGREEMENT ("Agreement") is entered into by and between THE CENTERS FOR MEDICARE & MEDICAID SERVICES ("CMS"), as the Party (as defined below) responsible for the management and oversight of the Federally-facilitated Exchanges ("FFEs"), and **Sample Organization Name**, an organization that has been designated by CMS as a Certified Application Counselor Designated Organization (hereinafter referred to as "CDO") in **Sample State**, a State/States in which an FFE is operating. CMS and CDO are hereinafter sometimes referred to as "Party" or, collectively, as the "Parties."

#### **WHEREAS:**

- 1. Pursuant to 45 CFR 155.225(b), to facilitate the operation of the FFE, CMS may designate an organization to certify its staff members or volunteers to act as Certified Application Counselors (CACs).
- 2. Pursuant to 45 CFR 155.225(c), CACs are expected to provide the following services to Consumers:
  - a. Provide information about the full range of Qualified Health Plan (QHP) options and Insurance Affordability Programs for which Consumers are eligible which includes: providing fair, impartial, and accurate information that assists Consumers with submitting the eligibility application; clarifying the distinctions among health coverage options, including QHPs; and helping Consumers make informed decisions during the health coverage selection process;
  - b. Assist with applications for coverage in a QHP through the FFE and for Insurance Affordability Programs; and
  - c. Help to facilitate enrollment in QHPs and Insurance Affordability Programs.
- 3. Pursuant to 45 CFR 155.225(b)(1)(i), to be designated as a CDO, an organization must enter into an agreement with the Exchange to comply with the standards and requirements of 45 CFR 155.225, including but not limited to 45 CFR 155.225(d)(3)-(5).
- 4. To facilitate the operation of the FFE, CMS has determined that it would be beneficial to permit CDO, and the staff members and volunteers CDO certifies as CACs, to create, collect, disclose, access, maintain, store, or use Personally Identifiable Information ("PII") from CMS and Consumers, to the extent that these activities are necessary to carry out the Authorized Functions that the Affordable Care Act ("ACA"), implementing regulations, and this Agreement permit.
- 5. 45 CFR 155.260(b) provides that an Exchange, in written contracts or agreements, must bind Non-Exchange Entities to comply with privacy and security standards and obligations the Exchange adopts in accordance with 45 CFR 155.260(b)(3), and CDO is a Non-Exchange Entity.
- 6. CMS, in the administration of the FFEs, has adopted privacy and security standards for CDO, as set forth in the attached Appendix A, "Privacy and Security Standards for Certified Application

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Counselors and Certified Application Counselor Designated Organizations," which is hereby incorporated by reference. Compliance with this Agreement satisfies the requirement under 45 CFR 155.225(d)(3) to comply with Exchange privacy and security standards, and applicable authentication and data security standards.

Now, therefore, in consideration of the promises and covenants herein contained, the adequacy of which the Parties acknowledge, the Parties agree as follows.

- I. <u>DEFINITIONS</u>. Capitalized terms not otherwise specifically defined herein shall have the meaning set forth in the attached <u>Appendix B</u>, "Definitions," and/or in 45 CFR 155.20, which definitions are hereby incorporated by reference.
- II. <u>OBLIGATIONS AND CONDITIONS.</u> To carry out the functions of a CDO, as authorized by 45 CFR 155.225, and as a condition of its designation as a CDO by the FFE, CDO agrees to:
  - 1. Certify, and recertify on at least an annual basis, in a manner consistent with all applicable CMS regulations and guidance, one or more individual staff members and/or volunteers of the CDO to serve as CACs. At least one individual staff member and/or volunteer of the CDO must certified to serve as a CAC within ninety (90) days of program admittance and/or renewal. An initial certification must include the assignment of a unique CAC identification number, as described in Section II.3 of this Agreement, and the issuance of a CAC Certificate to each individual staff member or volunteer that is certified by the CDO to serve as a CAC. The CAC's identification number should be issued only once to one person and not reissued to another person. CAC Certificates must include the staff member or volunteer's name and unique CAC identification number, and an expiration date that is one year from the date of issuance. When recertifying any individual staff member and/or volunteer, the CDO shall issue an updated CAC Certificate, to reflect the date that the CAC has been recertified, and an expiration date that is one year from the date of issuance. CDO must retain a record of each certification provided under this provision for a period of no less than six (6) years, unless a different and longer retention period has already been provided under other applicable Federal law.
  - 2. Prior to certifying or recertifying any staff member or volunteer to serve as a CAC, do all of the following:
    - a. Ensure that each such staff member or volunteer seeking certification or recertification as a CAC completes all required CMS-approved training regarding QHP options, Insurance Affordability Programs, eligibility, and benefits rules and regulations governing all Insurance Affordability Programs operated in the state, as implemented in the state, and completes and achieves a passing score on all CMS-approved certification or recertification examinations, prior to functioning as a CAC;
    - b. Require each such staff member or volunteer seeking certification as a CAC to enter into a written, signed agreement with the CDO that requires the individual staff member or volunteer seeking certification as a CAC to do the following:
      - Register for all required CMS-approved training using his or her unique CAC identification number and the name that will appear on both his or her CAC Certificate and Training Certificate, complete the training and examination requirements described in <u>Section II.2.a</u> of this Agreement, and provide proof in the form of his or her Training Certificate to the CDO that he or she has fulfilled the training and examination requirements;
      - ii. Disclose to the CDO and to Consumers any relationships the CAC has with QHPs or Insurance Affordability Programs, or other potential conflicts of interest, and to comply with <a href="Section II.6">Section II.6</a> of this Agreement by disclosing to any Consumers all potential conflicts of interest of the CDO;

- iii. Comply with the FFE's Privacy and Security Standards for Certified Application Counselors and Certified Application Counselor Designated Organizations specified in Section III and Appendix A of this Agreement;
- iv. Meet any licensing, certification, or other standards prescribed by the State or FFE, if applicable, so long as such standards do not prevent the application of the provisions of title I of the Affordable Care Act;
- v. Prior to creating, collecting, disclosing, accessing, maintaining, storing, or using any PII of Consumers to carry out the Authorized Functions listed at <a href="Section III.2">Section III.2</a> of this Agreement, obtain the authorization required by 45 CFR 155.225(f) and <a href="Section III.10.b">Section III.10.b</a> of this Agreement (hereinafter referred to as "authorization"). This authorization is separate and distinct from any informed consent obtained pursuant to <a href="Section 2(b">Section 2(b)</a> of <a href="Appendix A">Appendix A</a> of this Agreement;
- vi. Maintain a record of the authorization provided under <u>Section II.10.b</u> for a period of no less than six (6) years, unless a different and longer retention period has already been provided under other applicable Federal law;
- vii. Permit the Consumer to revoke the authorization described in <u>Section II.10.b</u> at any time;
- viii. Not impose any charge or fee on Consumers for application or other assistance related to the FFE;
  - ix. Each time the staff member or volunteer assists any Consumers, prominently display a current and effective CAC Certificate provided by the CDO evidencing the staff member's or volunteer's certification as a CAC;
  - x. When assisting Consumers:
    - 1. Inform them of the functions and responsibilities of Certified Application Counselors, including that Certified Application Counselors are not acting as tax advisers or attorneys when providing assistance as Certified Application Counselors and cannot provide tax or legal advice within their capacity as Certified Application Counselors;
    - 2. Act in their best interest;
    - 3. Either directly or through an appropriate referral to a Navigator or non-Navigator assistance personnel authorized under 45 CFR §§ 155.205(d) and (e) or 155.210, or to the FFE call center, provide information in a manner that is accessible to individuals with disabilities, as defined by the Americans with Disabilities Act, as amended, 42 USC § 12101, et seq. and section 504 of the Rehabilitation Act, as amended, 29 USC § 794;
    - 4. Provide information to them about the full range of QHP options and Insurance Affordability Programs for which they are eligible, which includes: providing fair, impartial, and accurate information that assists Consumers with submitting the eligibility application; clarifying the distinctions among health coverage options, including QHPs; and helping Consumers make informed decisions during the health coverage selection process;
    - 5. Assist them in applying for coverage in a QHP through the FFE and for Insurance Affordability Programs;
    - 6. Help to facilitate their enrollment in QHPs and Insurance Affordability Programs;

- 7. Provide his or her unique CAC identification number to any Consumer being assisted so that the application reflects that he or she has provided assistance;
- 8. Not provide to a Consumer gifts of any value as an inducement for enrollment, and not provide gifts to Consumers for purposes other than as an inducement for enrollment that exceed Nominal Value, either individually or in the aggregate, when provided to that individual during a single encounter. The term "gifts" includes gift items, gift cards, cash cards, cash, and promotional items that market or promote the products or services of a third party, but does not include the reimbursement of legitimate expenses incurred by a Consumer in an effort to receive Exchange application assistance, such as travel or postage expenses;
- 9. Effective June 18, 2023, outreach and education activities may be conducted by going door-to-door or through other unsolicited means of direct contact, including calling a Consumer, to provide application or enrollment assistance<sup>1</sup>; and
- 10. Not initiate any telephone call to a Consumer using an automatic telephone dialing system or an artificial or prerecorded voice, except in cases where the individual certified application counselor or designated organization has a relationship with the Consumer and so long as other applicable State and Federal laws are otherwise complied with.
- xi. For as long as the CAC continues providing CAC services, seek recertification on at least an annual basis after successfully completing recertification training;
- xii. Upon termination or nonrenewal of CAC's agreement with CDO, or withdrawal of designation from CDO or withdrawal of certification from CAC, immediately cease holding himself or herself out as a CAC to any Consumer, and immediately cease providing CAC services to the public;
- xiii. Not sell or otherwise transfer information that was provided to the CAC by Consumers to any person or entity other than for such actions as are specifically permitted by this Agreement or as expressly authorized;
- xiv. Not collect or otherwise maintain information provided by Consumers, except as specifically provided for in this Agreement;
- xv. Not receive any consideration directly or indirectly from any health insurance issuer or issuer of stop-loss insurance in connection with the enrollment of any individuals in a QHP or non-QHP. This prohibition does not apply to consideration the CAC receives from a health insurance issuer for health care services provided.
- c. When recertifying any staff member or volunteer to serve as a CAC, the CDO must ensure that the written, signed agreement with the CDO specified in <a href="Section II.2.b">Section II.2.b</a> of this Agreement has been entered into and remains in effect.
- 3. Maintain a registration process and method to track the performance of CACs and ensure the CDO does not operate for ninety-one (91) consecutive days without a certified CAC. This tracking method shall include assigning a unique CAC identification number to each staff member or volunteer certified by the CDO to serve as a CAC, which shall consist of an identification number that CMS assigns the CDO and that identifies the CDO, followed by the unique identification number assigned to each individual staff member or volunteer by the

<sup>&</sup>lt;sup>1</sup> See the HHS Notice of Benefit and Payment Parameters for 2024 final rule at <a href="https://www.federalregister.gov/d/2023-08368/p-142">https://www.federalregister.gov/d/2023-08368/p-142</a> that removed the prohibition, on Navigators, non-Navigator assistance personnel, certified application counselors (CACs), and CAC Designated Organizations (CDOs) in FFEs going door-to-door or using unsolicited means of direct contact to provide application or enrollment assistance.

- CDO. The unique CAC identification number should be assigned to only one person, and the CDO should not re-use CAC identification numbers that were previously assigned to staff or volunteers who no longer are CACs;
- 4. Upon request, provide to CMS the names and CAC identification numbers assigned by the CDO of all staff members and volunteers that have been certified by the CDO to serve as CACs, including whether the CAC's certification is active;
- 5. Provide CMS with updates on any changes with organizational program contact information;
- 6. Provide CMS with timely and appropriate updates and corrections to ensure the accuracy of the CDO's publicly available information on CMS's website, HealthCare.gov, through the submission of requests for changes on "Find Local Help," the assister search tool. In the event that the CDO has stopped or will stop providing CAC services to the public, it must submit a request that the CDO's information cease to be displayed on Find Local Help at least seven (7) Days prior to the date when it will cease providing services, and in the event that such advance notice is not feasible, in no more than twenty-four (24) hours after it has ceased providing CAC services to the public. Whenever the CDO has stopped or will stop providing CAC services to the public, the CDO should also provide a notice of termination to CMS as described in Section V of this Agreement;
- 7. Establish procedures for the CDO's CACs to disclose all potential conflicts of interest of the CDO to Consumers prior to providing assistance to any such individuals, including any relationships the CDO has with QHPs or Insurance Affordability Programs, or other potential conflicts of interest;
- 8. Act in the best interests of the Consumers assisted by the CDO and by the staff members and volunteers it has certified as CACs;
- 9. Either directly or through an appropriate referral to a Navigator or non-Navigator assistance personnel authorized under 45 CFR §§ 155.205(d) and (e) or 155.210, or to the FFE call center authorized under 45 CFR § 155.205(a), provide information in a manner that is accessible to individuals with disabilities, as defined by the Americans with Disabilities Act, as amended, 42 USC § 12101, et seq. and section 504 of the Rehabilitation Act, as amended, 29 USC § 794;
- 10. Establish procedures to ensure, pursuant to 45 CFR §155.225(f), that Consumers:
  - a. Are informed of the functions and responsibilities of CACs, including that CACs are not acting as tax advisers or attorneys when providing assistance as CACs and cannot provide tax or legal advice within their capacity as CACs;
  - b. Provide authorization, before CDO or any of CDO's staff members and/or volunteers create, collect, disclose, access, maintain, store, or use any of the Consumer's PII, for CDO and CDO's staff members and volunteers to create, collect, disclose, access, maintain, store, and use the Consumer's PII to carry out the Authorized Functions listed at <a href="Section III.2">Section III.2</a> of this Agreement. This authorization is separate and distinct from any informed consent obtained pursuant to <a href="Section 2(b)">Section 2(b)</a> of <a href="Appendix A">Appendix A</a> of this Agreement. CDO must ensure that it or its staff members and/or volunteers maintain a record of the authorization for a period of no less than six (6) years, unless a different and longer retention period has already been provided under other applicable Federal law; and
  - c. May revoke at any time the authorization provided, pursuant to 155.225(f)(3).
- 11. Oversee and monitor any staff member or volunteer it certifies as a CAC to ensure that each CAC complies with all requirements of the program specified in all applicable CMS regulations and guidance, including 45 CFR 155.225, and with all requirements set forth in <a href="Section II.2">Section II.2</a> of this Agreement.

- 12. Establish and comply with procedures to do the following:
  - a. As soon as possible, but in no event later than twenty (20) Days after the triggering event (identification or notification of noncompliance), withdraw the certification of any staff member or volunteer that has been certified by the CDO if the CDO learns or is notified by CMS that the staff member or volunteer has failed to comply with the terms and conditions of the CAC's agreement with the CDO or with the requirements of 45 CFR 155.225;
  - b. Protect any PII of Consumers created, collected, disclosed, accessed, maintained, stored, or used by any CAC whose certification is withdrawn, by complying with the obligations set forth in <u>Section VI</u> of this Agreement;
  - c. As soon as possible, but in no event later than twenty (20) Days after the CDO learns that any staff members or volunteers who have been certified as CACs are out of compliance with the terms and conditions of the agreement required by <a href="Section II.2.b">Section II.2.b</a> of this Agreement, or with any of the requirements of 45 CFR 155.225, or upon notification from CMS that the CDO must withdraw certification from any specific staff member and/or volunteer, notify the certified staff member or volunteer that he or she must, immediately upon receipt of this notice, cease holding out him- or herself as a CAC to any Consumer and cease providing CAC services to the public; and
  - d. In the event that CMS has notified the CDO that the CDO's designation as a CDO has been withdrawn, or that immediate termination of this Agreement is necessary and appropriate, as described in <a href="Section V.2.a.">Section V.2.a.</a> of this Agreement, CDO shall immediately refrain from holding itself out as a CDO and refrain from providing CAC services to the public, and shall also ensure that all staff members and volunteers immediately refrain from holding themselves out as CACs and immediately refrain from providing CAC services to the public.
- 13. Not impose any charge on Consumers for application or other assistance related to the FFE;
- 14. Not receive any consideration directly or indirectly from any health insurance issuer or issuer of stop-loss insurance in connection with the enrollment of any individuals in a QHP or non-QHP. This prohibition does not apply to consideration the CDO receives from a health insurance issuer for health care services provided;
- 15. Not provide compensation to CACs on a per-application, per-individual- assisted, or per-enrollment basis;
- 16. Not provide to a Consumer gifts of any value as an inducement for enrollment, and not provide gifts to Consumers for purposes other than as an inducement for enrollment that exceed Nominal Value, either individually or in the aggregate, when provided to that individual during a single encounter. The term "gifts" includes gift items, gift cards, cash cards, cash, and promotional items that market or promote the products or services of a third party, but does not include the reimbursement of legitimate expenses incurred by a Consumer in an effort to receive Exchange application assistance, such as travel or postage expenses;
- 17. Effective June 18, 2023, outreach and education activities may be conducted by going door-to-door or through other unsolicited means of direct contact, including calling a Consumer, to provide application or enrollment assistance;
- 18. Not initiate any telephone call to a Consumer using an automatic telephone dialing system or an artificial or prerecorded voice, except in cases where the individual CAC or the CDO has a relationship with the Consumer and so long as other applicable State and Federal laws are otherwise complied with<sup>2</sup>;

<sup>&</sup>lt;sup>2</sup> See FCC Takes Action to Ensure Americans Receive Critical Information on Health Care Coverage (Jan. 23, 2023); ("federal and state governmental agencies working in conjunction with local governments, governmental contractors, and managed care entities acting under contract with state governments may, under certain circumstances, make autodialed and prerecorded or artificial voice calls or send autodialed text messages to raise awareness of the eligibility and enrollment requirements for these governmental health care programs without violating the Telephone Consumer Protection Act (TCPA)."), available at https://www.fcc.gov/document/fcc-provides-guidance-enable-critical-health-care-coverage-calls.

- 19. Comply with the privacy and security standards adopted by the FFE pursuant to 45 C.F.R. § 155.260(b), and applicable authentication and data security standards, in the manner set forth in Section III and Appendix A of this Agreement; and
- 20. Directly, or through its staff or volunteers it certifies as CACs, provide any and all services in connection with the obligations and conditions in this Agreement, as described in Sections II.1-19 and III of this Agreement, without compensation (excluding wages earned by employees of the CDO for work performed by such employee on behalf of its CDO employer), and hereby waive its rights to any compensation from the Government of the United States of America to which it may be entitled under law.

## III. <u>OBLIGATIONS RELATED TO THE PRIVACY AND SECURITY OF PERSONALLY</u> IDENTIFIABLE INFORMATION.

- 1. CDO hereby acknowledges and agrees to accept and abide by the standards and implementation specifications set forth below and in <u>Appendix A</u>, "Privacy and Security Standards for Certified Application Counselors and Certified Application Counselor Designated Organizations," which is incorporated by reference in this Agreement, when engaging in any CDO Authorized Function pursuant to 45 CFR 155.225. CDO is thereby bound to strictly adhere to the privacy and security standards, and to ensure that its Workforce that creates, collects, accesses, stores, maintains, discloses, or uses PII, is contractually bound to strictly adhere to those standards and implementation specifications.
- 2. <u>Authorized Functions.</u> CDO may create, collect, disclose, access, maintain, store, and use PII of Consumers in order to:
  - a. Provide information to Consumers about the full range of QHP options and Insurance Affordability Programs for which these persons are eligible, which includes: providing fair, impartial, and accurate information that assists Consumers with submitting the eligibility application; clarifying the distinctions among health coverage options, including QHPs; and helping Consumers make informed decisions during the health coverage selection process;
  - b. Assist Consumers with applications for coverage in a QHP through the FFE and for Insurance Affordability Programs;
  - c. Help to facilitate the enrollment of Consumers in QHPs and Insurance Affordability Programs;
  - d. Perform other functions related to carrying out additional obligations as may be required under applicable state law or regulation, provided that (1) such a state requirement does not prevent the application of the provisions of title I of the Affordable Care Act within the meaning of section 1321(d) of the Affordable Care Act, and (2) CDO notifies Consumers in advance, in writing, that collection, handling, disclosure, access maintenance, storage, and/or use of their PII might be required under applicable state law or regulations. CDO should provide the required notification through the authorization obtained in accordance with 155.225(f); and
  - e. Perform other functions authorized under 45 CFR 155.225, including functions substantially similar to those enumerated above, and such other functions that may be approved by CMS in writing from time to time.
- 3. <u>PII Received.</u> Subject to the terms and conditions of this Agreement and applicable laws, in performing the Authorized Functions under this Agreement, CDO, may create, collect, disclose,

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access, maintain, store, and use the following data and PII from Consumers, including but not limited to:

Access to or enrollment in employer or other health coverage

American Indian/Alaska Native status

APTC percentage and amount applied

Auto disenrollment information

Applicant Name

**Applicant Address** 

Applicant Birthdate

Applicant Telephone number

**Applicant Email** 

Applicant spoken and written language preference

Applicant Medicaid Eligibility indicator, start and end dates

Applicant Children's Health Insurance Program eligibility indicator, start and end dates

Applicant QHP eligibility indicator, start and end dates

Applicant APTC percentage and amount applied eligibility indicator, start and end dates

Applicant household income

Applicant Maximum APTC amount

Applicant Cost-sharing Reduction (CSR) eligibility indicator, start and end dates

Applicant CSR level

Applicant QHP eligibility status change

Applicant APTC eligibility status change

Applicant CSR eligibility status change

Applicant Initial or Annual Open Enrollment Indicator, start and end dates

Applicant Special Enrollment Period eligibility indicator and reason code

Citizenship status

Contact Name

Contact Address

Contact Birthdate

Contact Telephone number

Contact Email

Contact spoken and written language preference

Enrollment group history (past six months)

Enrollment type period

FFE Applicant ID

FFE Member ID

Gender

Immigration document type and document numbers

Issuer Member ID

Membership in a Federally-recognized tribe

Net premium amount

Premium Amount, start and end dates

Pregnancy indicator

Race/ethnicity

Sex

Special enrollment period reason

Subscriber Indicator and relationship to subscriber

Social Security Number

Tax filing status (tax filer, tax dependent, non-filer)

Tobacco use indicator and last date of tobacco

4. <u>Authorization.</u> Prior to creating, collecting, disclosing, accessing, maintaining, storing, or using any PII from Consumers, CDO will ensure that the CAC obtains the authorization required under

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Section II.10.b of this Agreement and will permit the authorization to be revoked at any time. This authorization is separate and distinct from any informed consent obtained pursuant to Section 2(b) of Appendix A of this Agreement. The CDO should ensure that a record of the authorization provided is maintained in a manner consistent with the privacy and security standards set forth in Appendix A.

- 5. <u>Collection of PII.</u> Except for collections, uses or disclosures that are specifically authorized by Consumers in accordance with <u>Section 2(b)</u> of <u>Appendix A</u>, PII collected from Consumers may be used only for the Authorized Functions specified in <u>Section III.2</u> of this Agreement.
- 6. Storing PII. To the extent that a CDO maintains or stores PII, it must agree to comply with all provisions of this Agreement and Appendix A that apply to the maintenance or storage of PII.
- 7. <u>Ability of Consumer to Limit Collection and Use.</u> CDO agrees to allow the Consumer to limit the CDO's creation, collection, use, maintenance, storage, and disclosure of their PII to the sole purpose of obtaining CDO's assistance for FFE purposes, and for performing Authorized Functions specified in Section III.2 of this Agreement.

#### IV. EFFECTIVE DATE; TERM AND RENEWAL.

1. Effective Date and Term. This Agreement becomes effective on the date the last of the two Parties executes this Agreement and ends within a timeframe determined by CMS, typically two years from the effective date - unless, in the sole and absolute discretion of CMS, thirty days (30) Days' advance written notice of nonrenewal is provided by CMS to CDO, or the Agreement is terminated pursuant to Section V of this Agreement.

#### V. TERMINATION.

- 1. <u>Termination without Cause.</u> In addition to termination of this Agreement pursuant to Sections <u>IV.1</u> above and <u>VII.8</u> below, and as contemplated in <u>Section II.5</u> above, either party may terminate this Agreement without cause and for its convenience upon at least thirty (30) Days' prior written notice to the other Party, where practicable. Such notice will include the effective date on which the organization will no longer have its staff members or volunteers provide CAC services. CDO agrees to communicate with CMS in good faith, prior to exercising the right to termination for convenience, in order to continue to act in the consumer's best interests.
- 2. Termination with Cause. CMS may terminate this Agreement for cause, as follows:
  - a. Termination with Notice. This Agreement shall terminate immediately upon CMS's withdrawal of CDO's designation as a CDO. In the event that CMS determines, in its sole but reasonable discretion, that the CDO has materially breached this Agreement and that immediate termination of this Agreement is necessary and appropriate, CMS may immediately terminate this Agreement upon providing telephonic or electronic mail notice to CDO, which will be promptly followed by written notice memorializing the termination. In the event that CMS determines, in its sole but reasonable discretion, that the CDO has materially breached this Agreement but should be provided with an opportunity to cure the material breach(es), CMS may provide fourteen (14) Days' written notice to CDO that this Agreement will terminate unless CDO commences curing such breach(es) within such fourteen (14)-Day period to the reasonable satisfaction of CMS, and thereafter diligently prosecutes such cure to completion. In the event that CMS provides CDO with an opportunity to cure, the written notice from CMS shall contain a description of the material breach, whereupon CDO shall have seven (7) Days from the date of the notice in which to propose a plan and a time frame to cure the material breach, which plan and time frame may be rejected, approved or amended in CMS's sole but reasonable discretion. Notwithstanding the foregoing, CDO shall be considered in "Habitual Default" of this Agreement in the event that it has been served with a notice under this subsection more than three (3) times in any calendar year, whereupon CMS

- may, in its sole discretion, immediately thereafter terminate this Agreement as described above without any further opportunity to cure or propose cure.
- 3. Consequences of Termination or Nonrenewal. If this Agreement is not renewed pursuant to Section IV.1 or is terminated pursuant to Sections V.1 or V.2 of this Agreement, CDO's designation is automatically withdrawn. If that occurs CDO must immediately cease holding itself out as a CDO to any Consumer, must immediately cease providing CAC services to the public through its staff members and volunteers, and must carry out procedures described in Section II.5 and II.11 of this Agreement.
- VI. <u>DESTRUCTION OF PII.</u> CDO covenants and agrees to destroy all PII in its possession at the end of the record retention period required under <u>Appendix A</u>. CDO's duty to protect and maintain the privacy and security of PII, as provided for in <u>Appendix A</u> of this Agreement, shall continue in full force and effect until such PII is destroyed and shall survive the termination or expiration of this Agreement.

#### VII. MISCELLANEOUS

1. <u>Notice.</u> Except as otherwise specifically provided herein, all notices required under this Agreement shall be given in writing and shall be delivered as follows:

If to CMS, by email to <a href="mailto:CACQuestions@cms.hhs.gov">CACQuestions@cms.hhs.gov</a>

If to CDO, to CDO's email on record.

- CMS and CDO may change their contact information for notices and other communications by providing thirty (30) Days' written notice of such change in accordance with this provision.
- 2. Assignment and Subcontracting. CDO shall not assign this Agreement in whole or in part, whether by merger, acquisition, consolidation, reorganization or otherwise, nor subcontract any portion of the services to be provided by CDO under this Agreement, nor otherwise delegate any of its obligations under this Agreement, without the express, prior written consent of CMS, which consent may be withheld, conditioned, granted or denied in CMS's sole and absolute discretion. CDO further shall not assign this Agreement or any of its rights or obligations hereunder without the prior written consent of the State. If CDO attempts to make an assignment, subcontract its service obligations or otherwise delegate its obligations hereunder in violation of this provision, such assignment, subcontract or delegation shall be deemed void *ab initio* and of no force or effect, and CDO shall remain legally bound hereto and responsible for all obligations under this Agreement. CDO shall further be thereafter subject to such compliance actions as may otherwise be provided for under applicable law.
- 3. <u>Severability</u>. The invalidity or unenforceability of any provision of this Agreement shall not affect the validity or enforceability of any other provision of this Agreement. In the event that any provision of this Agreement is determined to be invalid, unenforceable or otherwise illegal, such provision shall be deemed restated, in accordance with applicable law, to reflect as nearly as possible the original intention of the parties, and the remainder of the Agreement shall be in full force and effect.
- 4. <u>Disclaimer of Joint Venture</u>. Neither this Agreement nor the activities of CDO contemplated by and under this Agreement shall be deemed or construed to create in any way any partnership, joint venture or agency relationship between CMS and CDO. Neither CMS or CDO is, nor shall either CMS or CDO hold itself out to be, vested with any power or right to bind the other contractually or to act on behalf of the other, except to the extent expressly set forth in ACA and the regulations codified thereunder, including as codified at 45 CFR part 155.
- 5. <u>Remedies Cumulative.</u> No remedy herein conferred upon or reserved to CMS under this Agreement is intended to be exclusive of any other remedy or remedies available to CMS under

- operative law and regulation, and each and every such remedy, to the extent permitted by law, shall be cumulative and in addition to any other remedy now or hereafter existing at law or in equity or otherwise.
- 6. Compliance with Law. CDO covenants and agrees to comply with any and all applicable laws, statutes, regulations or ordinances of the United States of America, and any Federal Government agency, board or court, that are applicable to the conduct of the activities that are the subject of this Agreement, including but not necessarily limited to, any additional and applicable standards required by statute, and any regulations or policies implementing or interpreting such statutory provisions hereafter issued by CMS. In the event of a conflict between the terms of this Agreement and, any statutory, regulatory, or sub-regulatory guidance released by CMS, the requirement which constitutes the stricter, higher or more stringent level of compliance shall control.
- 7. Governing Law. This Agreement shall be governed by the laws and common law of the United States of America, including without limitation such regulations as may be promulgated from time to time by the HHS or any of its constituent agencies, without regard to any conflict of laws statutes or rules. CDO further agrees and consents to the jurisdiction of the Federal Courts located within the District of Columbia and the courts of appeal therefrom, and waives any claim of lack of jurisdiction or forum non conveniens.
- 8. Amendment. CMS may amend this Agreement for purposes of reflecting changes in applicable law, regulations, or CMS implementation guidance, with such amendments taking effect upon thirty (30) Days' written notice to CDO ("CMS notice period"). CDO may reject such amendment, by providing to CMS, during the CMS notice period, thirty (30) Days' written notice of its intent to reject the amendment ("rejection notice period"). Any such rejection of an amendment made by CMS shall result in the termination of this Agreement upon expiration of the rejection notice period. Additionally, a CDO may update its Service Location or Head Quarters Address by providing written notice of the change to CMS at least thirty (30) days before the change goes into effect. CMS will acknowledge this change through an update to the organization's record with CMS, and written confirmation confirming of the amendment to this Agreement. Should a CDO desire to change its Operating State, Organization Name or Senior Official, it must execute an entirely a new agreement with CMS. Any amendments made under this provision will only have prospective effect and will not be applied retrospectively.
- 9. <u>Audit.</u> CDO agrees that CMS, the Office of the Inspector General of HHS, and the Comptroller General, as applicable, or their designees have the right to audit, inspect, evaluate, examine, and make excerpts, transcripts, and copies of any books, records, documents, and other evidence of CDO compliance with the requirements of this Agreement, upon reasonable notice to CDO and during CDO's regular business hours and at CDO's regular business location. CDO further agrees to allow reasonable access to the information and facilities requested by CMS, the Office of the Inspector General of HHS, and the Comptroller General, as applicable, or their designees for the purpose of such an audit.

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SAMPLE

This Agreement between CDO and the Centers for Medicare & Medicaid Services for the Federally-facilitated Exchange has been signed by:

#### **FOR CDO**

The undersigned is an official of CDO who is authorized to represent and bind CDO for purposes of this Agreement.

Signature of Senior Official of CDO	Date
Name and Title of Senior Official of CDO  Insert Name of Senior Official of CDO	
Insert Title of Senior Official of CDO	
CDO Name Insert CDO Name	
Corresponding Application ID  Insert Application-ID	
CDO Address Insert Street Name	
Insert City	
Insert State	
Insert Zip Code	

Note: Please proceed to the next page to complete and sign the COI Attestation form before submitting this renewal.

### **Conflict of Interest Attestation**

To implement the CMS regulations prohibiting certain relationships, I, as the Senior Officia organization, agree or attest to the following for myself and on behalf of the organization I resign your initials on each line)	
I. I attest that to the best of my knowledge I and my organization do not receive any consideration, directly or indirectly, from any health insurance issuer or issuer of stop-loss insurance in connection with the enrollment of any individual(s) in a QHP or non-QHP <sup>1</sup> . Consideration received from a health insurance issuer for health care services provided is not prohibited.	Initials
II. I attest that to the best of my knowledge the staff and volunteers of my organization subject to the conflict of interest requirements <sup>2</sup> do not receive any consideration, directly or indirectly, from any health insurance issuer or issuer of stop-loss insurance in connection with the enrollment of any individual(s) in a QHP or non-QHP <sup>1</sup> . Consideration received from a health insurance issuer for health care services provided is not prohibited.	Initials
III. My organization agrees to set up a process to determine the individual potential and actual conflicts of interest of applicable staff members or volunteers subject to the COI and attestation requirements <sup>1</sup> .	Initials
IV. My organization and I agree to disclose to CMS, the CDO, and to consumers who we assist any actual or potential conflicts of interest including relationships we have with QHPs and Insurance Affordability Programs <sup>3</sup> .	Initials
V. My organization and I agree to establish procedures for the CDO's CACs to disclose all potential conflicts of interest of the CDO or the individual CAC prior to assisting consumers <sup>3</sup> .	Initials
VI. My organization and applicable staff members or volunteers subject to the COI and attestation requirements agree to act in the best interest of the consumer in all matters <sup>4</sup> .	Initials

#### **Footnotes**

- 1 See section on the previous screen on CDO staff members and volunteers subject to conflict of interest disclosure and attestation requirements.
- 2 See page 6 of "Tip Sheet: FFM Assister Conflict of Interest Requirements" accessed at

 $\underline{https://marketplace.cms.gov/technical-assistance-resources/cms-cdo-agreement.pdf}$ 

- 3 https://marketplace.cms.gov/technical-assistance-resources/cms-cdo-agreement.pdf
- 4 Section II(8) on page 5 of the CMS-CDO Agreement. See also 45 CFR 155.225(d)(4).

My organization, any applicable staff members or volunteers subject to the COI and attestation requirements, and I disclose the following actual or potential conflicts of interest <sup>5</sup>.

Company	Type	of Relationship	Content Area		
I have carefully read and completed this form myself and provided current and accurate information to the best of my ability. I understand that typing my name below serves as an electronic signature for purposes of this form.					
Senior Official's Name (I	Electronic Signature)		Date		

#### **Footnotes**

5 See footnote 3.

#### **APPENDIX A**

# PRIVACY AND SECURITY STANDARDS FOR CERTIFIED APPLICATION COUNSELORS AND CERTIFIED APPLICATION COUNSELOR DESIGNATED ORGANIZATIONS

These standards and implementation specifications are established in accordance with Section 1411(g) of the Affordable Care Act (42 U.S.C. § 18081(g)) and 45 CFR 155.260. As used in this Appendix, all terms used herein carry the meanings assigned in Appendix B.

Certified Application Counselor Designated Organization ("CDO") and any Certified Application Counselor certified by CDO ("CAC") must meet the following privacy and security standards and implementation specifications in performing the duties and functions outlined under 45 CFR 155.225(c) as further detailed in the Agreement Between the Centers for Medicare & Medicaid Services and Certified Application Counselor Designated Organization in a State in Which a Federally-facilitated Exchange is Operating ("CMS-CDO Agreement") and as further detailed in the CDO's agreement with CAC ("CDO/CAC Authorized Functions").

(1) <u>Privacy Notice Statement.</u> Prior to collecting PII or other information from Consumers for the purpose of fulfilling a CDO/CAC Authorized Function, CDO and/or CAC must provide Consumers with a privacy notice statement. The privacy notice statement must be in writing and must be provided on, or simultaneously with, any electronic and/or paper form the CDO and/or CAC will use to gather and/or request PII or other information from Consumers. The privacy notice statement must also be prominently and conspicuously displayed on the CDO's public facing Web site, if applicable, if the CDO and/or CAC will gather or request PII or other Consumer information through that Web site.

#### (a) Privacy Notice Statement Requirements.

- i. The privacy notice statement must be written in plain language and, to the extent possible, provided in a manner that is accessible and timely to people living with disabilities and with limited English proficiency.
- ii. The statement must contain at a minimum the following information:
  - 1. A description of the information to be collected;
  - 2. The purpose for which the information is being collected;
  - 3. The intended use(s) of the information;
  - 4. To whom the information may be disclosed, for what purposes, and how a record of any disclosures may be requested from the CDO;
  - 5. What, if any, notice or opportunities for consent will be provided regarding the collection, use or disclosure of the information;
  - 6. How the information will be secured;
  - 7. Whether the request to collect information is voluntary or mandatory under the applicable law;
  - 8. Effects of non-disclosure if a Consumer chooses not to provide the requested information;
  - 9. Any rights the person may have under state or federal laws relevant to the protection of the privacy of an individual; and
  - 10. Information on how to file complaints with CMS and the CDO related to the CDO's and CAC's activities in relation to the information.

- iii. The CDO shall maintain its privacy notice statement content by reviewing and revising it as necessary on an annual basis, at a minimum, and before or as soon as possible after any change to its privacy policies and procedures.
- (b) Notwithstanding the general requirement above to provide a written privacy notice statement prior to collecting PII or other information from Consumers, this provision does not require CDO and/or CAC to provide a written privacy notice statement to Consumers prior to collecting a Consumer's name, physical address, e-mail address, or telephone number, so long as such information will be used solely for the purpose of making subsequent contact with the Consumer to conduct a CDO/CAC Authorized Function or sending to the consumer educational information that is directly relevant to CDO/CAC Authorized Functions. Nonetheless, with regard to such names, physical addresses, e-mail addresses, or telephone numbers, CDO and/or CAC still must comply with all privacy and security standards and requirements outlined in the CMS-CDO Agreement, the agreement between CDO and CAC, and this Appendix A.
- (2) <u>Permissible Uses and Disclosures of PII.</u> The CDO and CAC may create, collect, disclose, access, maintain, store, and use PII from Consumers only for CDO/CAC Authorized Functions identified in <u>Section III.2</u> of the CMS-CDO Agreement and <u>Section III.b</u> of the agreement between CDO and CAC that is in effect as of the time the information is collected, unless the CDO and/or CAC obtains informed consent as described in <u>Section 2(b)</u> of this <u>Appendix A</u>.

#### (a) Authorization:

- i. Prior to creating, collecting, disclosing, accessing, maintaining, storing, or using any Consumer PII to perform an Authorized Function, CDO and/or CAC must obtain the authorization required by 45 CFR 155.225(f), Section II.10.b of the CMS-CDO Agreement (hereinafter referred to as "authorization"), and Section III.d of the agreement between CDO and CAC. This authorization is separate and distinct from the informed consent referenced in Section 2(b) below;
- ii. CDO and/or CAC must maintain a record of the authorization provided for a period of no less than six (6) years, unless a different and longer retention period has already been provided under other applicable Federal law; and
- iii. CDO and/or CAC must permit the Consumer to revoke the authorization at any time.

#### (b) Informed Consent:

- i. CDO and/or CAC must obtain informed consent from Consumers for any creation, collection, use or disclosure of information that is not authorized under the CMS-CDO Agreement and the agreement between CDO and CAC. Such informed consent must be in writing, signed by the consenting party, and subject to a right of revocation.
- ii. CDO and CAC are prohibited from denying information or assistance described in the CMS-CDO Agreement and CDO-CAC Agreement to persons or entities who decline to grant the informed consent described in section 2(b)(i) above.

#### iii. Informed consent must:

- 1. Be provided in specific terms and in plain language;
- 2. Identify who will obtain access to the Consumer's information under the terms of the informed consent;
- 3. Describe the purpose for which the informed consent is being obtained;
- 4. Explain what information the CDO and/or CAC will use or disclose to a specific

recipient(s);

- 5. Provide notice of a Consumer's ability to revoke the consent at any time; and
- 6. Include an expiration date or event, unless effectively revoked in writing by the Consumer before that date or event.
- iv. Informed consent documents must be appropriately secured and retained for no less than six (6) years, unless a different and longer retention period has already been provided under other applicable Federal law.
- (3) Limitations on creation, collection, disclosure, access, maintenance, storage, and use.
  - (a) <u>Permissible creation and use of PII.</u>

Other than in accordance with the informed consent procedures outlined above, the CDO and/or CAC shall only create, collect, disclose, access, maintain, store, or use PII it receives in its capacity as a CDO or CAC:

- i. In accordance with the privacy notice statement referenced in Section (1) above; and/or
- ii. In accordance with the CDO/CAC Authorized Functions.
- (b) Prohibited requests for, collections, or uses of PII.

The CDO and CAC shall not:

- i. request or require a social security number, information regarding citizenship, status as a national, or immigration status for any individual who is not seeking coverage for himself or herself on an application;
- ii. request information from or concerning any individual who is not seeking coverage for himself or herself, unless the information is necessary for the eligibility determination for enrollment in a Qualified Health Plan or Insurance Affordability Programs for those seeking coverage, or is required as part of a SHOP employer application under 45 C.F.R. §155.730. Such necessary information may include information on individuals who are in an individual's tax household or who live with an individual applying for coverage, including contact information, addresses, tax filing status, income and deductions, access to employer-sponsored coverage, familial or legal relationships, American Indian or Alaska Native status, or pregnancy status; or
- iii. use a Consumer's or any other individual's PII to discriminate against them, such as by refusing to assist individuals who have significant or complex health care needs.
- (c) <u>Accounting for Disclosures</u>. Except for those disclosures that are necessary to carry out CDO/CAC Authorized Functions, CDOs and/or CACs that maintain and/or store PII shall maintain an accounting of any and all disclosures of PII. The accounting shall:
  - i. Contain the date, nature, and purpose of such disclosures, and the name and address of the person or agency to whom the disclosure is made;
  - ii. Be retained for at least six (6) years after the disclosure, or the life of the record, whichever is longer; and
  - iii. Be available to CMS, or the Consumer who is the subject of the record, upon request.

#### (4) Safeguarding PII.

(a) CDO and CAC must ensure that PII is protected with reasonable operational, administrative, technical, and physical safeguards to ensure its confidentiality, integrity, and availability and to prevent unauthorized or inappropriate access, use, or disclosure. Specifically, a CDO is required to establish, and CDO and CAC are required to implement operational, technical, administrative and physical safeguards that are consistent with any applicable laws, to ensure that PII is protected against any

physical safeguards that are consistent with any applicable laws, to ensure that PII is protected against any reasonably anticipated threats or hazards to the confidentiality, integrity, and availability of such information. Such safeguards must include:

- i. Email/Web Browser Protections Including, but not limited, to assuring that transfer protocols are secure and limit the threat of communications being intercepted.
- ii. Endpoint Protection and Network Management Including, but not limited, to protecting against known threat vectors within the system's environment to mitigate damage and security breaches.
- iii. Access Management Including, but not limited, to managing access to the system's environment and data, and maintaining access controls to the system.
- iv. Asset Management Including, but not limited, to maintaining an inventory of hardware and software within the environment to help identify vulnerable aspects left open to threat vectors without performing vulnerability scans and maintaining specific knowledge of physical and digital assets within the system's environment.
- v. Configuration Management Including, but not limited, to managing baseline configurations of system servers and endpoints to mitigate threat factors that can be utilized to gain access to the system and data.
- vi. Vulnerability Management Including, but not limited, to identifying, classifying, remediating, and mitigating vulnerabilities on a continual basis by conducting periodic vulnerability scans to identify weaknesses within an environment.
- vii. Patch Management Including, but not limited, to ensuring every client and server is up to date with the latest security patches throughout the environment.
- viii. Incident Response Including, but not limited, to detecting security events, investigating, and mitigating or limiting the effects of those events.
- ix. Governance and Privacy Compliance Program Including, but not limited, to appointing a responsible official to develop and implement operational privacy compliance policies for information systems and databases.
- x. Privacy Impact/Risk Assessment Including, but not limited, to appointing a responsible official to develop and implement formal policies and procedures to assess the organization's risk posture.
- xi.Data Protection and Loss Prevention Including, but not limited to ensuring that PII is only used by or disclosed to those authorized to receive or view it; PII is protected against any reasonably anticipated threats or hazards to the confidentiality, integrity, and availability of such information; and PII is protected against any reasonably anticipated uses or disclosures of such information that are not permitted or required by law.
- xii. Data Retention and Destruction Including, but not limited to, developing formal policy and procedures for data retention and destruction of PII consistent with CMS and the Exchange system requirements.
- (b) CDO must monitor, periodically assess, and update the security controls and related system risks to ensure the continued effectiveness of those controls.
- (c) CDO must develop and CDO and CAC must utilize secure electronic interfaces when transmitting PII electronically.
- (5) Incident and Breach Reporting Requirements.
  - (a) <u>Reporting.</u> CDOs must implement and comply with Breach and Incident handling procedures that are consistent with CMS' current edition of the Risk Management Handbook for Incident Management and memorialized in the CDO's own policies and procedures. Such policies and procedures must be in writing and:

personnel authorized and responsible for reporting and managing Incidents or Breaches to CMS;

- ii. Address how to identify Incidents;
- iii. Determine if personally identifiable information (PII) is involved in the Incidents;
- iv. Require all CACs to report all potential Incidents or Breaches to CDO;
- v. Require reporting any Incident or Breach of PII to the CMS IT Service Desk by telephone at (410) 786-2580 or 1-800-562-1963 or via email notification at <a href="mailto:cms\_it\_service\_desk@cms.hhs.gov">cms\_it\_service\_desk@cms.hhs.gov</a> within one hour of discovery of the Incident or Breach;
- vi. Provide details regarding the identification, response, recovery, and follow-up of Incidents and Breaches; and
- vii. Require the CDO Designated Privacy Official and/or other authorized personnel to be available to CMS upon request.
- (b) CAC must comply with CDO's Breach and Incident handling procedures.
- (c) <u>Cooperation</u>. CDO and CAC must cooperate with CMS in resolving any Incident or Breach, including (if requested by CMS) the return or destruction of any PII; the provision of a formal response to an allegation of unauthorized PII use, reuse or disclosure; and/or the submission of a corrective action plan with steps designed to prevent any future unauthorized uses, reuses or disclosures.
- (6) <u>Training and Awareness Requirements.</u> The CDO shall develop role-based training and awareness programs for members of its Workforce, and CAC shall participate in such training and awareness programs. Specifically, the CDO must require members of its Workforce to successfully complete privacy and security training that is specifically tailored and relevant to their work duties and level of exposure to PII, and prior to when they assume responsibility for/have access to PII, and CAC must successfully complete such training prior to assuming responsibility for/having access to PII.
- (7) <u>Standard Operating Procedures Requirements.</u> The CDO shall incorporate the privacy and security standards and implementation specifications required under this Appendix A, where appropriate, in its standard operating procedures that are associated with the functions authorized under the CMS-CDO Agreement involving the creation, collection, disclosure, access, maintenance, storage, or use of PII. CAC must comply with these standard operating procedures. The CDO's standard operating procedures:
  - (a) Must be written in plain language and be available to all of the CDO's Workforce;
  - (b) Must ensure the CDO's and CAC's cooperation with CMS in resolving any Incident or Breach, including (if requested by CMS) the return or destruction of any PII files it received under the CMS-CDO Agreement or agreement between CDO and CAC; the provision of a formal response to an allegation of unauthorized PII use, reuse or disclosure; and/or the submission of a corrective action plan with steps designed to prevent any future unauthorized uses, reuses or disclosures; and
  - (c) Must be designed and implemented to ensure the CDO and its Workforce comply with the standards and implementation specifications contained herein, and must be reasonably designed, taking into account the size and the type of activities that relate to PII undertaken by the CDO, to ensure such compliance.
- (8) <u>Required Monitoring of Security Controls.</u> CDO must monitor, periodically assess, and update its security controls and related system risks to ensure the continued effectiveness of those controls.
- (9) <u>Required Flow-Down of Privacy and Security Agreements.</u> CDO must bind, in a signed writing, any CACs and Downstream Entities to the same privacy and security standards and obligations

contained in this Appendix A.

- (10) Compliance with the Internal Revenue Code. If any 'return information,' as defined in section 6103(b)(2) of the Internal Revenue Code (the Code), is accessed or used by CDO and/or CAC, it must be kept confidential and disclosed, used, and maintained only in accordance with section 6103 of the Code.
- (11) <u>Penalties for improper use and disclosure of information</u>. CDO and CAC acknowledge that any person who knowingly and willfully uses or discloses information in violation of section 1411(g) of the Affordable Care Act will be subject to a civil money penalty, consistent with the bases and process for imposing civil penalties specified at 45 C.F.R. 155.206 and/or 155.285, in addition to other penalties that may be prescribed by law.
- (12) Access to the FFEs and SBE-FPs. CDO and CAC are prohibited from remotely connecting or transmitting data to the FFE, SBE-FP or their testing environments, or remotely connecting or transmitting data to IT systems that maintain connections to the FFE, SBE-FP or their testing environments, from locations outside of the United States of America or its territories, embassies, or military installations. This includes any such connection through virtual private networks ("VPNs").

#### **APPENDIX B**

#### **DEFINITIONS**

This Appendix defines terms that are used in the Agreement and other Appendices to the Agreement. Any capitalized term used in the Agreement that is not defined here, or in the Agreement or other Appendices, has the meaning provided. in 45 CFR 155.20.

- (1) **Affordable Care Act (ACA)** means the Patient Protection and Affordable Care Act of 2010 (Public Law 111-148), as amended by the Health Care and Education Reconciliation Act of 2010 (Public Law 111-152), which are referred to collectively as the Affordable Care Act.
- (2) Advance Payments of the Premium Tax Credit (APTC) has the meaning set forth in 45 CFR 155.20.
- (3) **Applicant** has the meaning set forth in 45 CFR 155.20.
- (4) **Authorized Function** means a task performed by a Non-Exchange Entity that the Non-Exchange Entity is explicitly authorized or required to perform based on applicable law or regulation, and as enumerated in the Agreement that incorporates this <u>Appendix B</u>.
- (5) **Authorized Representative** means a person or organization meeting the requirements set forth in 45 CFR 155.227.
- (6) **Breach** has the meaning contained in OMB Memoranda M-17-12 (January 3, 2017), and means the loss of control, compromise, unauthorized disclosure, unauthorized acquisition, or any similar occurrence where (1) a person other than an authorized user accesses or potentially accesses personally identifiable information or (2) an authorized user accesses or potentially accesses personally identifiable information for anything other than an authorized purpose.
- (7) CAC Certificate means the certificate issued to each CAC by his or her CDO, indicating that he or she has been certified as a CAC, and containing the CAC's name and unique CAC identification number.
- (8) **CCHO** means the Center for Consumer Information and Insurance Oversight within the Centers for Medicare & Medicaid Services (CMS).
- (9) **Certified Application Counselor** (CAC) means a staff member or volunteer who is certified by a Certified Application Counselor Designated Organization to perform the duties and meet the standards and requirements for CACs in 45 CFR 155.225.
- (10) **Certified Application Counselor Designated Organization** (CDO) means an organization designated by the Federally-facilitated Exchange to certify its staff members or volunteers to act as CACs.
- (11) **CMS** means the Centers for Medicare & Medicaid Services.
- (12) **Consumer** means an Applicant, Enrollee, Qualified Individual, Qualified Employer, or Qualified Employee, and (if applicable) their legal or Authorized Representatives, or any individual who presents himself or herself for assistance related to an Authorized Function from a Non-Exchange Entity, or who is offered assistance related to an Authorized Function by a Non-Exchange Entity, as applicable.
- (13) Cost-sharing Reduction (CSR) has the meaning set forth in 45 CFR 155.20.
- (14) **Day or Days** means calendar days unless otherwise expressly indicated in the relevant provision of the Agreement that incorporates this <u>Appendix B</u>.
- (15) **Designated Privacy Official** means a contact person or office responsible for receiving complaints related to Breaches or Incidents, able to provide further information about matters covered

by the Non-Exchange Entity privacy notice statement required by Section (1) of Appendix A of the Agreement that incorporates this Appendix B, responsible for the development and implementation of the privacy and security policies and procedures of the Non-Exchange Entity, and responsible for ensuring the Non-Exchange Entity has in place appropriate safeguards to protect the privacy and security of PII.

- (16) **Downstream Entity** means any party that enters into an agreement with CDO or with another Downstream Entity for purposes of providing services related to the agreement between CDO and CMS. The term "downstream entity" is intended to reach the entity that directly provides services to Consumers.
- (17) **Enrollee** has the meaning set forth in 45 CFR 155.20.
- (18) Exchange has the meaning set forth in 45 CFR 155.20.
- (19) **Federally-facilitated Exchange (FFE)** means an **Exchange** (or **Marketplace**) established by HHS and operated by CMS under Section 1321(c)(1) of the ACA for individual or small group market coverage, including the Federally-facilitated Small Business Health Options Program (**FF-SHOP**). **Federally-facilitated Marketplace (FFM)** has the same meaning as FFE.
- (20) HHS means the U.S. Department of Health & Human Services.
- (21) **Incident,** or **Security Incident,** has the meaning contained in OMB Memoranda M-17-12 (January 3, 2017) and means an occurrence that (1) actually or imminently jeopardizes, without lawful authority, the integrity, confidentiality, or availability of information or an information system; or (2) constitutes a violation or imminent threat of violation of law, security policies, security procedures, or acceptable use policies.
- (22) **Information** means any communication or representation of knowledge such as facts, data, or opinions in any medium or form, including textual, numerical, graphic, cartographic, narrative, or audiovisual.
- (23) **Insurance Affordability Program** means a program that is one of the following:
  - (1) A State Medicaid program under title XIX of the Social Security Act.
  - (2) A State children's health insurance program (CHIP) under title XXI of the Social Security Act.
  - (3) A State basic health program established under section 1331 of the Affordable Care Act.
  - (4) A program that makes coverage in a Qualified Health Plan through the Exchange with Advance Payments of the Premium Tax Credit established under section 36B of the Internal Revenue Code available to Qualified Individuals.
  - (5) A program that makes available coverage in a Qualified Health Plan through the Exchange with Cost-sharing Reductions established under section 1402 of the Affordable Care Act.
- (24) **Navigator** has the meaning set forth in 45 CFR 155.20.
- (25) **Nominal Value** means having a cash value of \$15 of less, or having worth of \$15 or less, based on the retail purchase price of the item, regardless of the actual cost.
- (26) **Non-Exchange Entity** has the meaning at 45 CFR 155.260(b), and includes but is not limited to Certified Application Counselor Designated Organizations, and Certified Application Counselors under agreement with a Certified Application Counselor Designated Organization.
- (27) **OMB** means the federal government's Office of Management and Budget.
- (28) **Personally Identifiable Information (PII)** has the meaning contained in OMB Memoranda M-17-12 (January 3, 2017), and refers to information that can be used to distinguish or trace an

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individual's identity, either alone or when combined with other information that is linked or linkable to a specific individual.

- (29) Qualified Employee has the meaning set forth in 45 CFR 155.20.
- (30) Qualified Employer has the meaning set forth in 45 CFR 155.20.
- (31) Qualified Health Plan (QHP) has the meaning set forth in 45 CFR 155.20.
- (32) Qualified Individual has the meaning set forth in 45 CFR 155.20.
- (33) **Security Control** means a safeguard or countermeasure prescribed for an information system or an organization designed to protect the confidentiality, integrity, and availability of its information and to meet a set of defined security requirements.
- (34) **State** means the State where the Non-Exchange Entity that is a party to this Agreement is operating.
- (35) **State Partnership Exchange (SPE)** means a type of FFE in which a State engages actively with the federal government in the operation of certain aspects of the FFE.
- (36) **Training Certificate** means the certificate issued to each potential CAC by the Medicare Learning Network upon their completion of the required CMS-approved training courses and examinations.
- (37) Web means the World Wide Web.
- (38) **Workforce** means a Non-Exchange Entity's or FFE's employees, agents, contractors, subcontractors, officers, directors, agents, representatives, and any other individual who may create, collect, disclose, access, maintain, store, or use PII in the performance of his or her duties.