Course 1 — Training Overview

Module 1 — Training Overview

Course Introduction

Training Overview

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Welcome

Hi! Welcome to the Training Overview course!

I'm Jo, and I'll be helping you learn more about this year's annual Assister certification training.

- Do you know which training courses your Assister type must take?
- Are there differences among various consumer assistance entities?
- Do you know some of the most important questions to ask when helping consumers?

Disclaimers

You need to be aware of this training disclaimer. This disclaimer applies to every course in the training.

Assister Training Content:

The information provided in this training isn't intended to take the place of the statutes, regulations, and formal policy guidance that it's based upon. This training summarizes current policy and operations as of the date of publication on the Marketplace Learning Management System (MLMS). Links to certain source documents have been provided for your reference. We encourage you to refer to the applicable statutes, regulations, and other interpretive materials for complete and current information.

This training includes references and links to non-governmental third-party websites. The Centers for Medicare & Medicaid Services (CMS) offers these links for informational purposes only, and inclusion of these websites shouldn't be construed as an endorsement of any third-party organization's programs or activities.

How to Navigate This Training

Before you begin, take a moment to review the course navigation features.

- Back: Move to the previous page. Use the Back button at the bottom of the page not the back arrow in your browser window to go to the previous page.
- Next: Move to the next page.
- Menu: Navigate to any module within a course.
- Help: Review these navigation features at any time.
- Glossary: Access a collection of important terms or acronyms.
- Resources: Opens a new window containing the training resources referenced throughout this training to reinforce your learning.
- Map: State-specific information about Marketplace type, Medicaid expansion status, whether the Marketplace can make a final Medicaid eligibility determination, and links to state Departments of Insurance and Marketplaces.
- Required links: Text in this cranberry color must be selected to advance to the next page.
- Exit Course: Closes the course.

Definitions

In this course, the terms "you" and "Assister" refer to the following types of Assisters:

Navigators in Federally-facilitated Marketplaces and

Certified Application Counselors (CACs) in Federally-facilitated Marketplaces

Note: In some cases, "you" is also used to refer to a consumer, but it should be clear when this is the intended meaning.

In this training:

- The terms "Federally-facilitated Marketplace" and "FFM" include Federally-facilitated Marketplaces where the state performs plan management functions.
- The terms "Marketplace" or "Marketplaces," standing alone, often (but not always) refer to FFMs.
- The term "ACA" refers to the Affordable Care Act as amended by the Health Care and Education Reconciliation Act of 2010.
- The term "disability" is defined by the Department of Health and Human Services (HHS)
 Office for Civil Rights (OCR) Final Rule implementing Section 1557 of the ACA (45 CFR
 Part 92) as "a physical or mental impairment which substantially limits one or more major
 life activities of such individual; a record of such an impairment; or is regarded as having
 such an impairment."

Course Goal

Among other duties, you're responsible for providing fair, accurate, and impartial information that helps consumers identify and compare their coverage options and select the coverage that best fits their budgets and specific needs.

The FFM Assister curriculum consists of courses that prepare you to be an Assister, including courses that prepare you to help consumers who are interested in finding their health coverage options through HealthCare.gov. You must successfully complete all required training courses and exams to be certified. You must be certified before you can begin your role as an Assister, which includes performing any education or outreach activities.

Goal:

This course will familiarize you with the format and features of the certification training courses and introduce the types of consumer assistance entities as well as how these entities can provide fair, accurate, and impartial information.

By the end of this course, you will understand:

- navigation, format, and features of training courses
- certification requirements for consumer assistance entities
- available learning resources
- key terminology used throughout this training
- consumer assistance entity roles and responsibilities
- consumer support options
- how to describe HealthCare.gov
- tips for working effectively with consumers
- how to help consumers find the coverage they need
- consumer referrals

Module 2 - Federally-facilitated Marketplace Assister Training Overview

Module Introduction

This module presents an overview of the Federally-facilitated Marketplace (FFM) training and certification program for Navigators and Certified Application Counselors (CACs) in FFMs. By the end of this module, you should be able to understand these concepts and accomplish the associated tasks below them.

Course Features

Describe the navigation, format, and features of the courses in this training program.

Certification Requirements

State the certification requirements for consumer assistance entities.

Key Terms

Understand key terms used throughout the training.

Certification Requirements

The training and certification requirements for Assisters in the FFMs are summarized here and in the next pages.

As part of the standards for certification, you must complete the Centers for Medicare & Medicaid Services (CMS) requirements for your Assister type.

Navigators must:

- Complete all required Department of Health and Human Services (HHS)-approved training courses, including any applicable continuing and recertification education courses
- Pass all required certification or recertification exams intended for Navigators
- Comply with:
- conflict-of-interest requirements
- FFM privacy and security standards
- the terms and conditions of your or your organization's HHS grant award

CACs must:

- Complete all HHS-approved training courses required for CACs
- Pass all required certification exams intended for CACs
- Meet any licensing, certification, or other standards prescribed by your state, if applicable
- Enter into an agreement with your affiliated CAC designated organization (CDO)
- Comply with the terms of your agreement with your affiliated CDO

Certification Requirements (Continued)

- Your certification after successful completion of this training will be valid until October 31, 2026. FFM Assisters (FFM Navigators and CACs) must complete this training by October 31, 2025, to continue functioning as an FFM Assister. If FFM Assisters do not complete this training by October 31, 2025, they will be decertified and will need a new ID to complete this training.
- If you're affiliated with an Assister organization that has its Assister designation, grant, or contract withdrawn, you may **not** continue functioning as an Assister affiliated with the organization, and your certification as an Assister affiliated with that organization will no longer be valid, even if it has not yet expired.
- You may not hold yourself out as an FFM Assister or perform services as an FFM
 Assister unless you're affiliated with a current FFM Assister organization and have a
 current certification that accurately reflects that affiliation or are yourself certified as a
 current FFM Assister.

More information about FFM training requirements is included in your organization's Navigator grant award terms and conditions, your contract or agreement with the Marketplaces, or your agreement with a CDO, as applicable.

Important Notes

These are some additional important notes to keep in mind while completing the training:

- You must complete all required courses and pass the accompanying exam at the end of each required course to become certified or recertified.
- The training program includes multiple courses that provide approximately 5 to 20 hours of coursework, depending on how many optional courses you complete.
- The **Next** button doesn't display until all content has been reviewed, required links on a page have been selected, and Knowledge Checks have been completed.
- When you exit the course, the last screen you viewed is bookmarked so that you can continue where you left off when you return to the training.

Training Format

Each course in this training program includes several modules. Information about the courses and modules is covered on the following pages.

- This training is web-based and self-guided. You can take this training at your own pace, and you can access the material at any time of the day. You can take the training all at once, or you can take a few hours of training a day until you complete all required courses.
- This training contains audio narration and several videos with audio. To listen to the audio, you'll need speakers and access to volume settings.
- Assisters who use assistive technology can access the 508-compatible PDF for each course at CMS.gov: Navigator and Certified Application Counselor Training Courses.

Course List

Here are the lists of required and optional courses for Navigators and CACs in the FFMs:

New and Returning Navigators & CACs in FFMs

Required:

- 1. Training Overview
- 3. Affordable Care Act Basics
- 4. Privacy, Security, and Fraud Prevention Standards
- 5. Marketplace Application Essentials
- 6. Serving Select Population Groups and Communities
- 7. Cultural Competence and Language Assistance
- 8. Working with Individuals with Disabilities

Optional:

- 2. Health Coverage Basics
- 9. Customer Service Standards and Community Outreach
- 10. Coverage to Care Assistance
- 11. Complex Application Issues

Knowledge Checks and Certification Exams

Knowledge Checks

Each course includes Knowledge Checks, which are practice exercises to help you prepare to pass all required certification or recertification exams. Your score on these practice questions won't be recorded.

Exams

- After completing all courses, you're required to take the course exams. You must score 80 percent or higher to pass each exam.
- If you don't pass an exam the first time, you can retake it. If you're unable to pass the exam after two attempts, we recommend that you review the course before you attempt to complete the exam again. If you would like to move on to the next course and return to the exam later, you may do so.
- A Save/Return feature has been added, allowing you to save your exam progress and return to it later.

Completion Screenshot

After you successfully complete all required courses and exams in the training curriculum, a completion screen displays. We strongly recommend that you document your successful completion of the training by saving a screenshot of the completion screen. These screenshots can help the technical team properly record your progress so you do not have to repeat courses if you have issues with course completions not being recorded.

Training Program Resources

- Resources are available to you throughout this training, and you can access a complete list of resources for each course by selecting the Resources button on the course menu.
- You may wish to download, print, and save resources for future reference so you can provide the best possible assistance to consumers.
- After you have completed this training and received your certificate, you may continue to
 access each training course and its Resources section whenever you have a question or
 need to refresh your learning.
- Additional Assister resources are available at CMS.gov.

Marketplace Information by State: PY2026

You can review important characteristics about your state's Marketplace by visiting

<u>The Marketplace in your state website.</u> We encourage you to record your state's information to use as a reference, but you can review the information any time at

The Marketplace in your state website.

Key Terms Used Throughout This Training

Some basic terms are used throughout the training.

Agents and Brokers

Agents and brokers are people or entities licensed by a state to sell, solicit, or negotiate insurance. To the extent permitted under state law, agents and brokers may register with an FFM to facilitate enrollment and assist consumers with applying for qualified health plans (QHPs), premium tax credits (PTCs) and cost-sharing reductions (CSRs) through the FFMs.

CDO

CDOs in FFMs must enter into an agreement with CMS in its role as operator of the FFMs. When an organization agrees to become a CDO in a state with an FFM, each staff member and volunteer it certifies as a CAC must enter into an agreement with the organization that requires the staff member or volunteer to comply with CAC requirements in CMS regulations and guidance. In an FFM, CDOs can include community health centers, hospitals, health care providers, certain types of social service agencies, and governmental entities.

Consumers

In this training, the term consumers refers to:

- individuals and families who may get coverage through the individual market FFMs
- small employers who can offer coverage to qualified employees, former employees, and dependents of employees or former employees through a Federally-facilitated Small Business Health Options Program (FF-SHOP or just SHOP) Marketplace.

Consumer Assistance Entities

In this training, the term consumer assistance entities refers to Navigators and CACs in FFMs. Generally, these are individuals or organizations that are trained and certified to help consumers as they explore coverage options through the Marketplaces.

Facilitate Enrollment

To facilitate enrollment means assisting consumers with submitting their eligibility applications, clarifying distinctions among coverage options, and helping eligible consumers make informed decisions during the coverage selection process.

Marketplaces

The Marketplaces, including FFMs where the state performs plan management functions, are resources where individuals and families can:

learn about coverage options

- find out if they qualify for programs to lower their coverage costs
- compare health plans based on costs, benefits, and other important features
- choose a health plan and
- enroll in coverage.

Marketplaces are also known as and referred to as Exchanges.

The <u>SHOP website</u> is a resource where small employers in states with an FF-SHOP Marketplace or SBM using the federal SHOP platform can:

- learn about the benefits of SHOP, including the availability of tax credits for eligible qualified employers
- compare available medical and dental plans side by side using the SHOP See Plans and Prices tool and
- submit SHOP employer applications and obtain final eligibility determinations.

Throughout this training, the term "SHOP Marketplace" or "SHOP" will be used when referring specifically to an FF-SHOP Marketplace. In the FF-SHOP Marketplaces, qualified employers and employees can enroll in SHOP plans by working with a QHP issuer or SHOP-registered agent or broker.

Key Points

- This training is designed to prepare you to help consumers in the FFMs.
- The courses are designed to be taken in order, and each course should be completed before you begin another one.
- To be certified, you must complete all required courses, successfully pass all course exams with a score of at least 80 percent, and meet all other certification requirements.

Module 3 – FFM Consumer Assistance Entities: Roles and Responsibilities

Module Introduction

A variety of consumer assistance entities help consumers in the Federally-facilitated Marketplaces (FFMs). Each consumer assistance entity has specific roles and responsibilities. Assisters in FFMs are responsible for providing fair, accurate, and impartial information to consumers about the full range of qualified health plans (QHPs) options and insurance affordability programs for which they are eligible. By the end of this module, you should be able to understand these concepts and accomplish the associated tasks below them.

Consumer Assistance Entities

Identify the different types of consumer assistance entities available to assist consumers in the FFMs.

Roles & Responsibilities

Identify the roles and responsibilities of each consumer assistance entity.

Strategies

Identify strategies to provide fair, accurate, and impartial information to consumers regardless of your own opinions or preferences.

Navigator Duties: Recent Updates

Beginning with Navigator grants awarded in 2022, including non-competing continuation awards, Navigators are required to provide information on and assistance with all of the following topics:

- understanding the process of filing Marketplace eligibility appeals
- understanding and applying for hardship and affordability exemptions granted through the Marketplace for consumers age 30 and older seeking to enroll in a Catastrophic plan
- Marketplace-related components of the premium tax credit reconciliation process, and understanding the availability of Internal Revenue Service (IRS) resources on this process
- understanding basic concepts and rights related to health coverage and how to use it and
- referrals to licensed tax advisers, tax preparers, or other resources for assistance with tax preparation and tax advice related to consumer questions about the Marketplace application and enrollment process and premium tax credit reconciliations.

Navigator Duties

Navigators are required to fulfill specific duties:

- 1. Maintain expertise in eligibility, enrollment, and program specifications and conduct public education activities to raise awareness about the Marketplace
- 2. Provide information and services in a fair, accurate, and impartial manner, which includes: providing 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. Such information must acknowledge other health programs.
- Facilitate selection of a QHP.
- 4. Navigators provide information in a manner that is culturally and linguistically appropriate to the needs of the population being served by the Marketplace, including individuals with limited English proficiency, and ensure accessibility and usability of Navigator tools and functions for individuals with disabilities in accordance with the Americans with Disabilities Act and section 504 of the Rehabilitation Act
- 5. Ensure that applicants:
 - a. are informed, prior to receiving assistance, of the functions and responsibilities of Navigators, including that Navigators are not acting as tax advisers or attorneys when providing assistance as Navigators and cannot provide tax or legal advice within their capacity as Navigators;
 - b. provide authorization in a form and manner as determined by the Marketplace prior to a Navigator's obtaining access to an applicant's personally identifiable information, and that the Navigator maintains a record of the authorization provided in a form and manner as determined by the Marketplace. In FFMs, this period is no less than six years, unless a different and longer retention period has already been provided; and
 - c. may revoke at any time their authorization; and
- 6. Provide targeted assistance to serve under-resourced or vulnerable populations, as identified by the Marketplace, within the Marketplace service area.
- 7. As mentioned previously, beginning with Navigator grants awarded in 2022, including non-competing continuation awards, Navigators are required to provide information and assistance with all of the following topics:
 - 1. understanding the process of filing Marketplace eligibility appeals
 - 2. understanding and applying for exemptions from the requirement to maintain minimum essential coverage granted through the Marketplace
 - 3. the Marketplace-related components of the premium tax credit reconciliation process, and understanding the availability of IRS resources on this process
 - 4. understanding basic concepts and rights related to health coverage and how to use it and
 - referrals to licensed tax advisers, tax preparers, or other resources for assistance with tax preparation and tax advice related to consumer questions about the Marketplace application and enrollment process, and premium tax credit reconciliations

For more information, refer to ecfr.gov at 45 C.F.R. 155.210(e)(2).

CAC Roles and Responsibilities

CACs are required to fulfill specific duties:

- 1. Provide information to individuals and employees about the full range of QHP options 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.
 - Helping consumers make informed decisions during the health coverage selection process.
- 2. Assist individuals and employees to apply for coverage through the Marketplace (also known as the Exchange); and
- 3. Help to facilitate enrollment of eligible individuals in QHPs.

Differences Between Assister Duties

Unlike Navigators, CACs are not required to conduct outreach or public education activities. CACs must assist consumers who seek individual market coverage in their FFM service area. CACs are permitted, but not required, to help small employers submit applications and obtain eligibility determinations through the Small Business Health Options Program (SHOP) website. While they're responsible for providing information in a manner that is accessible to individuals with disabilities, they can do so either directly or through referrals to Navigators or the Marketplace Call Center.

Assister Do's and Don'ts

All types of Assisters are required to do the following.

To provide fair, accurate, and impartial information you should:

- Provide information on all qualified health plans (QHPs), and help consumers submit a Marketplace eligibility application for coverage and financial assistance.
- Provide comprehensive information about the substantive benefits and features of each
 plan, including any specific consumer needs, such as the availability of and distance to a
 preferred provider, prescription drug coverage, proximity to an in-network hospital, etc.
- Help consumers find plans with cost-sharing reductions or other federal financial assistance, if they are eligible.
- Clarify distinctions among coverage types, including QHPs, Medicaid, and the Children's Health Insurance Program (CHIP).

Additionally, if you have a non-disqualifying relationship with a health insurance company, you must generally disclose that relationship to consumers. A non-disqualifying relationship is a relationship that doesn't prevent you from becoming an Assister. Some relationships that present a conflict of interest are completely prohibited for certain Assister types. You're expected to help consumers by focusing on their expressed interests, needs, and desires, not on your own interests or those of any health insurance company.

Assisters must not:

- Charge consumers or receive any compensation from consumers for your assistance.
- Receive compensation from your organization on a per-application, per-individualassisted, or per-enrollment basis.
- Receive consideration directly or indirectly from a health insurance issuer (or issuer of stop loss insurance) in connection with enrolling a consumer in a QHP or non-QHP.

Note: This topic is covered in Course 4: Privacy, Security and Fraud Prevention Standards. However, it is vital that Assisters comply with these standards whenever assisting consumers for any reason.

- For Navigators, these standards are a part of their grant terms and conditions.
- For CACs, they are outlined in the CDO-CMS agreement.

Navigators in FFMs are not required to maintain a physical presence in their Marketplace service area. In some cases, Navigators may provide remote application assistance (for example, online or by phone), provided that such assistance is permissible under their organization's contract, grant terms and conditions, or agreement with CMS and/or their organization.

CACs in FFMs may also provide remote application assistance if such assistance is permissible with their Certified Application Counselor Designated Organization (CDO).

Providing Fair, Accurate, and Impartial Information

Do:

- Make sure consumers make their own informed choices about which coverage option best meets their needs and budget.
- Make sure consumers perform the acts of selecting, applying for, and enrolling in a plan.
- If a consumer requests to work with an agent or broker, then do refer the consumer to a list of all licensed agents and brokers in their area or to Find Local Help.

Don't:

- Log into the consumer's online Marketplace account, fill out the Marketplace application, or select a plan for the consumer.
- Recommend that a consumer selects a specific plan or set of plans.
- Refer a consumer to a specific agent or broker if a consumer asks to work with one.

Conflict-of-Interest Disclosure Requirements

You must follow specific conflict-of-interest requirements as a Navigator in an FFM. Specifically, you must make sure that you and your organization don't have a relationship that could interfere with your ability to provide unbiased outreach and enrollment assistance to consumers.

In Navigator organizations, the following individuals must follow certain duties, prohibitions, and disclosure requirements:

- staff and volunteers of a Navigator organization
- sub-awardees or subcontractors of a Navigator organization
- anyone supervising Navigator program activities
- anyone engaging in outreach and education activities

These duties, prohibitions, and disclosure requirements don't apply to those who aren't involved with the organization's Navigator programs.

Individuals or entities subject to the conflict-of-interest requirements for Navigators in FFMs must provide information and services to consumers in a fair, accurate, and impartial manner.

Individuals or entities that perform Navigator services and individuals or entities that perform work related to Navigator program activities must not be:

- a health insurance issuer, issuer of stop loss insurance, or a subsidiary of either or
- an association that includes members of, or lobbies on behalf of, the insurance industry or
- an association that receives direct or indirect consideration, including any form of compensation, from a health insurance issuer or issuer of stop loss insurance in connection with the enrollment of any consumer in a QHP or non-QHP.

The <u>Assister Conflict of Interest Requirements</u> webinar provides more information about conflict-of-interest requirements for each Assister type.

Providing an Accurate Description of the FFMs

Providing fair, accurate, and impartial information includes accurately describing the FFMs. To accurately describe the FFMs, you might need to:

- Access information about the FFMs online to help keep consumers informed while they
 make their decisions.
- Establish operating procedures for finding information about the FFMs that will help you effectively assist consumers (e.g., create a list of key resources and contacts).

In interactions with consumers, you should remain flexible, ask questions, listen, and provide the information they need to make informed decisions.

Tips on Effectiveness

You should:

- 1. Understand the coverage options and insurance affordability programs available through the FFMs, including Medicaid and CHIP.
- 2. Tell consumers about the full range of QHP options and insurance affordability programs for which they are eligible and help them find coverage that best fits their budgets and specific needs.
- 3. Use the resources available on the technical assistance resources page at CMS.gov to:
 - i. Help inform consumers about their coverage options.
 - ii. Answer any questions you may have about your role as an Assister.
- 4. Visit <u>HealthCare.gov</u> and <u>CMS.gov</u> to find resources to help you better serve consumers, including language assistance resources, such as translation services, and educational materials.
- 5. Connect with community organizations to learn more about the characteristics and needs of communities in your area.

Knowledge Check

You're now meeting with Ebele, who is eligible for coverage through the Health Insurance Marketplace® in her state and would like to enroll in a health plan that has low monthly costs and covers the treatments she needs to manage her diabetes.

Four years ago, you worked for the health insurance company that offers this health plan. To be fully open and honest and to comply with FFM Assister conflict-of-interest requirements, you let Ebele know that you previously worked for this company.

After reviewing the health plan she is interested in, you realize it has low monthly costs, but it doesn't cover her specific diabetes treatment needs. What should you do to provide her with fair, accurate, and impartial information?

Answer: You should tell Ebele that the plan she's most interested in doesn't cover her specific diabetes treatment needs, help her find health plans that offer coverage for her diabetes treatment needs, and let Ebele make her own decision about which plan to choose.

Key Points

- There are several types of consumer assistance entities available to help consumers find coverage through the FFMs, including Navigators and CACs.
- These consumer assistance entities are responsible for helping consumers enroll in coverage through the FFMs.
- Consumer assistance entities have different roles and responsibilities they must fulfill as
 they assist consumers in the FFMs. These responsibilities vary depending on the type of
 entity and range from conducting public education activities to assisting small employers
 with finding coverage.
- Assisters are responsible for providing fair, accurate, and impartial information.
- Assisters must tell consumers about all QHP options and insurance affordability
 programs for which they are eligible and should help consumers choose coverage that
 meets their budgets and specific needs.

Module 4 – Assister Resources

Module Introduction

You'll feel more capable and confident in your ability to provide assistance to consumers when you have up-to-date resources. By the end of this module, you should be able to understand these concepts and accomplish the associated tasks below them.

Centers for Medicare & Medicaid Services (CMS) Resources

List CMS resources available to Assisters like manuals, toolkits, newsletters, and webinars.

Internal Revenue Service (IRS) Resources

List IRS resources available to Assisters like consumer tax forms and premium tax credit forms.

IRS Form 1095-A and Form 8962

Describe how to use IRS Form 1095-A and IRS Form 8962.

CMS.gov Resources Overview

<u>CMS.gov</u> is your best source for Marketplace tools and materials to help you counsel consumers.

On the Marketplace & Private Insurance section, in the In-person Assisters tab, you will find:

- Training materials for Navigators and other Assisters
- Assister webinars

Marketplace Assister Microlearning Modules

Another resource located at <u>CMS.gov</u> is the Marketplace Assister Microlearning series. The CMS Center for Consumer Information & Insurance Oversight (CCIIO) developed these short and interactive modules for Assisters in Federally-facilitated Marketplaces (FFMs), including FFMs where the state performs plan management functions and State-based Marketplaces using the federal platform. CCIIO will periodically add Marketplace microlearning modules for Assisters as relevant regulations, guidance, and policies are released.

Microlearning series can be found at this <u>CMS.gov Microlearning website</u>.

Assister Webinars, Publications and Communications

Additional resources for Assisters include:

CMS.gov E-mail updates:

CMS routinely sends out Assister emails with important updates for the Assister community.

To sign up for these, visit the <u>CMS Subscriber Preferences page</u> and log in using your email address to select the subscriptions you would like.

To find the Assister-related subscriptions, scroll down to the heading "CCIIO" to access the options listed:

- FFM Assister Navigator Grantee Updates (for Navigator updates and webinar announcements)
- FFM Assister Certified Application Counselor (CAC) Updates (for CAC updates and webinar announcements)
- No Surprises Act Dispute Resolution (for information and updates regarding the No Surprises Act)

You may also update your subscriptions, modify your password or email address, or stop subscriptions at any time on your Subscriber Preferences page. If you have questions or problems with the subscription service, please contact subscriberhelp.govdelivery.com.

Webinars:

Whether you're a new or returning Assister, we encourage you to participate in the Assister webinar series for additional training opportunities. Webinars cover various Marketplace and health coverage topics and provide up-to-date information about the latest tools to help consumers.

To attend Marketplace Assister Webinars, you will be required to create or update a REGTAP account and then register for the series. Assisters will only need to register one time for the series to be invited to all upcoming webinars. Once registered for the series, you will receive E-flyers announcing upcoming webinars with specific details on topics, time, and dates.

Step 1: Create a REGTAP Account or update your existing Account:

To create a REGTAP account, go to <u>Regtap.cms.gov</u> and select "Create an Account". Complete the form and select "Submit". You will receive an email to complete the process.

For new accounts and existing REGTAP users, please be sure to select your correct applicable Organization Type. For the Federally-facilitated Assisters Group, there are six unique organization types; please select the organization type that most closely represents your organization.

Selecting the appropriate organization type helps ensure you receive communication relevant to your organization and appropriate event access. Please do not select "issuer" as part of your organization type. Issuers are insurance companies such as Aetna, Blue Cross - Blue Shield, etc. Content is not relevant to Issuers, and Issuers are not permitted to attend our webinar series.

Step 2: Register for the Marketplace Assister Webinar Event Series

Log into your REGTAP account and select the "Training Events" icon. Next, select the event. Lastly, select "Register Me." You will receive notification of registration status within 30 minutes of registering for a training event. You will only need to register once to be confirmed for all event dates within the Marketplace Assister Webinar Series. When you register for the entire series, you will automatically be registered for EACH webinar.

Job aids:

Job aids are available in the <u>Eligibility & enrollment resources</u> section at <u>CMS.gov.</u> These job aids cover a variety of different topics like:

- application process assistance
- eligibility and enrollment
- ID proofing
- special populations
- Special Enrollment Periods (SEPs)

Keeping Up With Marketplace News and Information

When communicating with consumers, it's important to have the latest, most accurate information available. You can sign up for updates directly at HealthCare.gov for the most up-to-date information about the Marketplaces. You can also check out videos and other resources available at CMS shares updates during Marketplace Assister webinars and in email blasts. Other resources that are tailored to specific state issues, like local nonprofit groups, may also be helpful.

You can keep up with the latest Marketplace news through other social media channels, including the following:

- YouTube: Watch <u>youtube.com/user/HealthCareGov</u> for videos highlighting important information about the Marketplaces.
- Facebook: "Like" facebook.com/HealthCare.gov.
- X: Follow <u>@HealthCareGov</u> on X (formerly known as Twitter) for up-to-date Marketplace news.

<u>REGTAP</u>: Once registered for a REGTAP account and the Marketplace Assister webinar series, you will receive email updates each time new information is added to the REGTAP site.

IRS Consumer Tax Forms and Resources

Now, we will review forms and resources at <u>IRS.gov</u> that might be useful to you when helping consumers. Remember, you aren't permitted to provide tax advice to consumers in your capacity as an Assister.

<u>IRS.gov</u> is the official IRS website, and it provides information on the Affordable Care Act (ACA)-related tax benefits and responsibilities for individuals and families. This includes information about the individual shared responsibility provision and premium tax credit provision. It also provides basic information about how the health insurance choices consumers make may affect their tax returns.

Marketplace-related IRS electronic publications include:

- Pub. 5187 Affordable Care Act: What You and Your Family Need to Know.
- Pub. 974 Premium Tax Credit.
- Pub. 5093 Health Care Law Online Resources.
- Pub. 5120 Premium Tax Credit: Fact Sheet.
- Pub. 5152 Premium Tax Credit: Report Changes to the Marketplace.
- Pub. 5172 Facts about Health Coverage Exemptions.

Remember, important forms found at IRS.gov include Form 8962 (for reconciling the premium tax credit) and instructions for using Form 1095-A (the Health Insurance Marketplace ® Statement).

<u>IRS.gov</u> also contains information about IRS-related rules and responsibilities for employers and tax provisions for insurers, tax-exempt organizations, and other businesses.

Key Points

- Resources located at <u>CMS.gov</u> include Assister webinars, jobs aids and microlearning modules.
- <u>IRS.gov</u> also offers forms and resources that can be useful when you're helping consumers.

Conclusion

Great job! In this course, you reviewed what courses make up the Assister curriculum, learned important terms, clarified your roles and responsibilities as Federally-facilitated Marketplace consumer assistance entities, and studied how to provide fair, accurate, and impartial information to consumers.

You've finished the learning portion of this course. The code to proceed to the end of the course is 278019.

Resources

Note: There are some references and links to nongovernmental third-party websites in this section. CMS offers these links for informational purposes only, and inclusion of these websites shouldn't be construed as an endorsement of any third-party organization's programs or activities.

Module 1 – Training Overview

HealthCare.gov: A resource where consumers can create a HealthCare.gov account and access information about health coverage and the Health Insurance Marketplace[®].

HealthCare.gov

HealthCare.gov Small Business Health Options Program (SHOP): A resource where small employers (generally employers with 1-50 employees) can access information about Small Business Health Options Program (SHOP) coverage.

Healthcare.gov/small-businesses/employers/

Module 2 – Federally-facilitated Marketplace Assister Training Overview

Consumer Assistance Programs (CAPs): General information about CAPs and links to program contact information by state.

CMS.gov/CCIIO/Resources/Consumer-Assistance-Grants

Federally-facilitated Marketplace (FFM) Call Center: Contact information for the FFM Call Center, a 24-hours-a-day, 7-days-a-week resource for consumers seeking health coverage through the FFMs.

Healthcare.gov/contact-us/

Module 3 – FFM Consumer Assistance Entities: Roles and Responsibilities

45 CFR 155.210 -- Navigator program standards: Federal regulations regarding Navigator duties.

Ecfr.gov/current/title-45/subtitle-A/subchapter-B/part-155/subpart-C/section-155.210

Assister Do's and Don'ts Webinar – October 2024: Specific requirements for Assisters.

CMS.gov/marketplace/technical-assistance-resources/assister-dos-and-donts.pdf

Module 4 – Assister Resources

CMS.gov: Official CMS website offering information and resources on the Health Insurance Marketplace[®]

CMS.gov/marketplace/in-person-assisters/information-partners

Office for Civil Rights (OCR) website: Official website of HHS OCR, which contains information about federal regulations on discrimination and privacy.

HHS.gov/ocr/index.html

Office for Civil Rights (OCR) website: Consumers who believe they have been discriminated against on the basis of race, color, national origin, sex, age, disability, or religion may file a complaint with OCR.

HHS.gov/civil-rights/filing-a-complaint/complaint-process/index.html

Marketplace Assister Microlearning Landing Page: Marketplace Assister Microlearning is designed as an optional supplemental education resource for Assisters.

CMS.gov/marketplace/technical-assistance-resources/marketplace-assister-microlearning

The Assister's Roadmap to Resources: A quick guide to the resources developed to help Assisters and consumers navigate the FFMs.

CMS.gov/marketplace/technical-assistance-resources/assisters-roadmap-to-resources.pdf