

State of Georgia Section 1332 State Relief and Empowerment Waiver Georgia Access Operational Report

Prepared for the U.S. Department of Health & Human
Services and the U.S. Department of the Treasury

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1.0 Introduction

1.1. Document Purpose and Structure

Pursuant to the Specific Terms and Conditions (STC) 12 of its approved Section 1332 State Relief and Empowerment Waiver, the State of Georgia (“the State”) is required to submit an operational report to the Department of Health & Human Services and Department of the Treasury (collectively, the “Departments”) that *“details the project timeline for implementation of the Georgia Access Model and associated milestones, including but not limited to eligibility verifications and enrollment, at least 12 months prior to the first day of open enrollment for plan year 2023.”*

This operational report contains a description of the State’s approach to implementing the components of Georgia Access and a timeline of key milestones for implementation. The level of detail provided for the approach, assumptions, and milestones is based on the level of detail provided by other states when transitioning off the Federally-facilitated Exchange (FFE) in State-based Exchange Blueprints and the level of detail provided in quarterly and annual 1332 waiver reports.

In this operational report, the State provides the Departments with an overview of its implementation approach across the following key areas:

- Qualified Health Plan (QHP) Certification and Plan Management¹
- Georgia Access Enrollment Platforms (GAEPs)
- Agent Certification
- Marketing, Public Awareness, and Outreach
- Consumer Migration and Open Enrollment (OE) 2023
- Special Enrollment Periods (SEP)
- Consumer Verification and Eligibility
- Consumer Support
- Consumer Appeals
- Technical Implementation Approach

This operational report was developed with the understanding that the Departments will continue to perform the following activities on behalf of Georgia’s individual market, similar to the functions performed for other states that have migrated off the FFE:

- Issue Advance Payments of the Premium Tax Credit (APTC) payments to carriers
- Reconcile consumer Premium Tax Credit (PTC) during tax filing
- Assess and collect the Employer Shared Responsibility Provision (ESRP)
- Receive and resolve employer-filed appeals
- Receive and resolve escalated consumer appeals after exhaustion of the State’s appeals process
- Direct Georgia consumers to the Georgia Access website starting for OE 2023
- Enable Georgia consumers to enroll in SEP(s) for the duration of PY 2022 using HealthCare.gov

1.2. Background on Georgia’s 1332 Waiver

On March 27, 2019, Governor Brian P. Kemp signed Senate Bill 106, *The Patients First Act*, authorizing the Governor to submit a Section 1332 State Relief and Empowerment Waiver to the United States

¹ Throughout this document, references to QHPs also includes Stand Alone Dental Plans (SADPs)

Department of Health & Human Services and the Department of Treasury to pursue and implement innovative solutions to address healthcare challenges in the State.

On November 1, 2020, the State of Georgia received approval for its Section 1332 Waiver. The waiver introduces a two-part approach to address the healthcare access and affordability challenges facing many residents across the State in order to reduce premiums, increase access, and promote a more competitive individual health insurance market. Part I of the waiver is a five-year reinsurance program beginning in Plan Year (PY) 2022. The details of the reinsurance program are not included within this operational report. Part II of the waiver is to transition the State's individual market from the FFE to Georgia Access for OE 2023.

Georgia Access is an innovative approach for expanding consumer access to quality health insurance by leveraging public-private partnerships to provide consumer shopping, enrollment, and support. Upon approval of the 1332 Waiver, Georgia began implementation. This operational report details the State's approach to implementing the components of Georgia Access and associated key milestones from the date of waiver approval on November 1, 2020, through the first day of OE 2023 for Georgia Access on November 1, 2022.

1.3. Overview of Georgia Access

Under Georgia Access, the State is responsible for overseeing and regulating the individual health insurance market, including the certification of QHPs and how consumers shop for and enroll in QHPs. The current operational responsibilities transitioning from the Centers for Medicare & Medicaid Services (CMS) to the State under Georgia Access include:

- QHP certification and plan management
- Oversight of consumer shopping and enrollment platforms
- Oversight of consumer support and resolution
- Marketing and outreach
- Consumer verification and eligibility determination
- Consumer enrollment and reconciliation with carriers
- Consumer appeals
- Agent certification

Within Georgia Access, consumers will shop for, compare, and enroll in QHPs through State-certified GAEPs. The State's approach follows a similar process established between the FFE and Enhanced Direct Enrollment (EDE) providers. Georgia Access further streamlines this approach to enhance the effectiveness of the private market by not running a government portal alongside GAEP shopping platforms. GAEPs will interface with the State's Georgia Access Eligibility System that will provide verification and eligibility determination for consumers for QHPs, APTCs, Cost Sharing Reductions (CSRs), SEPs, and MAGI Medicaid eligibility assessments and referrals to the Medicaid agency.

GAEPs are responsible for providing front-end consumer shopping and enrollment operations, as well as consumer support. Certified GAEP web-brokers will provide shopping and enrollment for all QHPs available to consumers in Georgia's market. Certified GAEP carriers will provide shopping and enrollment for their QHPs. Certified agents will be able to assist and enroll consumers through a GAEP platform. Certified agents who are not affiliated with GAEPs will be able to assist and enroll consumers through the Georgia Access Eligibility System's Agent Portal. The State will receive and resolve escalated consumer support inquiries, data matching issues (DMIs), special enrollment period verifications issues (SVIs), and consumer appeals through the Georgia Access Contact Center.

1.4. Overview of State Interagency Coordination

The Office of Health Strategy and Coordination (OHSC), within the Governor's Office of Planning and Budget (OPB), has overarching authority for the State's 1332 Waiver. OHSC is responsible for coordinating activities across state and federal stakeholders and serves as the main point of contact for all waiver-related reporting. OHSC is responsible for providing oversight to ensure the successful implementation of Georgia Access and that the State's waiver remains in compliance with statutory guardrails. Working closely with OHSC, the Georgia Office of Commissioner of Insurance and Safety Fire (OCI) has been designated as the agency responsible for the implementation and operation of Georgia Access. OHSC and OCI are also collaborating with a number of state agencies and departments for the planning, implementation, and administration of Georgia Access, including:

- Department of Community Health (DCH)
- Department of Human Services (DHS)
- Georgia Technology Authority (GTA)

The integrated teams have established workgroups, both internal and external for the successful stand-up of program operations and technology for Georgia Access.

1.5. Ongoing Collaboration with CMS

The State's implementation approach was developed based on ongoing coordination and input from the Center for Consumer Information and Insurance Oversight (CCIIO) and the CMS Marketplace Appeals Group. Since waiver approval, the State has gathered input from several groups within CCIIO and will continue to work collaboratively with CCIIO and other groups within CMS through Georgia Access go-live.

2.0 QHP Certification and Plan Management

2.1. Inputs to Approach

The State's approach to transitioning plan management functions is based on feedback and input from CCIIO's plan management and State Marketplace and Insurance Programs Group (SMIPG) team members during monthly meetings with the State. The approach is also based upon CCIIO resources, including the State Plan Management Toolkit, the QHP Certification website, and QHP Issuer Certification Toolkit. Georgia also consulted with other states, including Oregon and Pennsylvania, regarding their approach to plan management operations.

Georgia made the following assumptions in developing its approach to plan management based upon ongoing communication with CCIIO:

- CMS will continue to calculate and produce the 1-to-5-star ratings for QHPs in Georgia's individual market.
- The State will not review or validate any Quality Improvement Strategies for plans identified by CCIIO.
- CMS will have additional capabilities to automatically transfer rate filing data (Unified Rate Review Templates and Actuarial Memorandums) from the System for Electronic Rates & Forms Filing (SERFF) to the Health Insurance Oversight System (HIOS) starting for PY 2023.

2.2. Overview

OCI will continue in its current capacity as an effective rate review state to review and validate rate filings by carriers for QHPs. In addition, OCI will be newly responsible for all QHP application reviews

and validation for certification for PY 2023, with ongoing oversight by OHSC. OCI's product review and examinations team will perform QHP application reviews with the support of contracted examiners for PY 2023.

OCI's new responsibilities for QHP review and validation under Georgia Access will include:

- Developing State QHP filing requirements and deadlines
- Drafting and issuing QHP application instructions for carriers
- Reviewing and validating QHP application components submitted by carriers in SERFF
- Developing additional forms and templates for QHP applications, as needed
- Managing communications with carriers through SERFF throughout the QHP certification period regarding QHP applications, including missing data and data corrections
- Reviewing and approving the Plan ID Crosswalk General Requirements
- Performing Plan ID Crosswalk alternate enrollments
- Compiling and maintaining all data contained within the State's Public Use Files (PUFs)
- Providing PUFs to GAEPs ahead of OE

For PY 2023 QHP applications, the State will:

- Follow the federal standards and timelines for QHP certification set by CCIIO.
- Issue communications to carriers regarding state deadlines and requirements based on the timelines and requirements released in the CCIIO-issued *Letter to Issuers* and *QHP Data Submission and Certification Timeline Bulletin*.
- Set state deadlines at least three weeks prior to the CCIIO deadlines.
- Notify CCIIO of carriers filing initial QHP applications by the State deadline.
- Notify carriers that QHP applications cannot be updated between initial and final submission deadlines in HIOS without prior State authorization.
- Notify CCIIO via email at least three business days before the secondary application deadline (i.e., rate filing deadline) and final application deadline of the carriers that need to make changes, in order for CCIIO to re-open HIOS for these carriers.
- Advise carriers of any user fee determination for Georgia Access for PY 2023.
- Conduct a complete review of all QHP application materials, using CCIIO templates and tools, and communicate changes required to carriers prior to CCIIO deadlines.
- Conduct effective rate reviews for QHPs by CCIIO deadlines.
- Assume all ongoing plan management activities once CCIIO has issued a go-decision
- Certify QHPs and SADPs to be sold on Georgia Access

State Coordination with Carriers

All communication to carriers throughout the application review process regarding missing data or required corrections will be conducted by OCI through SERFF. OCI will manage, and where required, respond to all change requests and data correction forms throughout the certification review period.

OCI will also continue to conduct its effective rate review and approve all rate-related application components and associated forms and templates following its current processes. OCI will continue to post a link to the Rate Review page on HealthCare.gov (www.ratereview.HealthCare.gov) to provide public access to information regarding proposed and final rate changes for single risk pool coverage.

Alternate Enrollments

During the QHP application window, OCI will make a determination on alternate enrollments for consumers enrolled in QHPs that are no longer offered for the upcoming plan year.

CCIIO Contingency Review

After the State completes its review and authorization of QHP applications in SERFF, it will instruct carriers to file their information in HIOS by the CCIIO deadlines. CCIIO will then conduct a contingency review. After the completion of the contingency review of Final QHP Applications, CCIIO will hold a Go/No-Go meeting with the State to remove all Georgia QHP data from the FFE. If the “Go Decision” occurs before CCIIO’s final application deadline and/or before CCIIO completes its final application reviews, the State will be solely responsible for all final application and plan data reviews.

Certification

Once data has been removed from the FFE, OCI will conduct all ongoing plan activities through SERFF. OCI will certify QHPs and SADPs to be sold on Georgia Access for PY 2023.

The Georgia Access Eligibility System will integrate with SERFF to receive carrier plan data. These transfers will be initiated from SERFF by OCI. Once the plan data is transferred to Georgia Access, and marked as certified by OCI, carriers will be provided access to the Georgia Access eligibility platform to review the transferred data to ensure it is correct prior to OE 2023.

Carriers will not be required to sign a separate QHP/SADP Certification Agreement as Carriers are required to sign a Business Associate Agreement (BAAs) with the State for Georgia Access. The BAAs include terms for confidentiality, privacy and security standards, general duties of the carrier, nondiscrimination, conflicts of interest, carrier representations, carrier responsibilities regarding eligibility and enrollment, QHP certification standards (i.e., accreditation, benefits standards, participating providers, customer service standards, customer materials, etc.), quality network management and delivery system standards, certification, and participation in Georgia Access as an upstream GAEP, and general contract terms.

Public Use Files

PUF datasets will be created from the Georgia Access Eligibility System once the plan data is transferred from SERFF, certified by OCI, and reviewed by carriers for accuracy. OCI will make the following PUF datasets available for GAEPs:

- Benefit and Cost Sharing
- Rates
- Plan Attributes
- Business Rules
- Service Area
- Network
- Plan ID Crosswalk
- Machine-readable URL
- Quality Rating System (QRS)

The PUF Datasets for Georgia’s market will be in the same format used by CCIIO for FFE States.

2.3. Detailed Information on State and CCIIO QHP Application Reviews

The table below outlines how the State plans to conduct its QHP application reviews alongside CCIIO’s contingency reviews for PY 2023. The CCIIO deadlines in the table are based on the *PY 2023 QHP Data*

Submission and Certification Timeline bulletin that CCIIO released on March 1, 2022. The State deadlines were communicated to carriers on March 24, 2022.

Submission	State Deadline	CCIIO Deadline	Required Materials by Carriers	Review Process
Early Bird QHP	n/a	5/18/2022	Optional deadline for QHP Applications	<i>The State will not offer an early bird submission for PY 2023 and has instructed carriers to not submit an early bird application to CCIIO for PY 2023. The State will be responsible for communicating expectations to the carriers regarding submission. The State will monitor the PM Community and State Evaluation Module in HIOS for carrier activity, and work with CCIIO should carriers submit in HIOS before the State provides approval.</i>
Initial QHP Applications	5/16/2022	6/15/2022	QHP Application materials, including transparency in coverage and Plan ID Crosswalk Machine-Readable Index URL	<ol style="list-style-type: none"> 1. Carriers submit all QHP applications to the State in SERFF by the State deadline. 2. Within 3-4 business days of the State's deadline, the State provides CCIIO with a list of QHP and SADP carriers who filed via email. 3. The State conducts its review of all materials and provides feedback to carriers in SERFF. 4. Carriers make corrections to their applications as necessary for review by the State. 5. The State provides confirmation to the carrier that they may submit their completed applications to HIOS. 6. Carriers submit their state-reviewed materials in HIOS by the initial deadline set by CCIIO (crosswalk data is submitted via the Plan Management Community). 7. Carriers notify the State when their applications have been submitted to HIOS. 8. The State monitors the PM Community and State Evaluation Module in HIOS for carrier activity to confirm carriers are submitting application data. 9. After initial filing in HIOS, the state requests CCIIO lock the system to prevent updates from carriers without prior State authorization; the State includes the specific issuer IDs in this request. 10. CCIIO conducts its review of materials. 11. A designated State POC and CCIIO POC coordinate with each other if corrections are needed to carrier filings after initial submission in HIOS to ensure alignment in communication to carriers. 12. CCIIO provides feedback to carriers in the PM Community. 13. If any changes are required by carriers based on CCIIO's review, carriers update their materials and resubmit in SERFF first for the State's review. 14. HIOS remains locked until the secondary deadline (rate filing deadline) for rates submission, and until the final deadline for final QHP Application Submission.

Submission	State Deadline	CCIIO Deadline	Required Materials by Carriers	Review Process
Initial Rate Filings	5/16/2022: Individual QHP and SADP rates 6/17/2022: Small Group QHP and SADP rates	7/20/2022	Rate Table Templates URRTs Actuarial Memos Consumer Justification Narratives (if applicable)	<ol style="list-style-type: none"> 1. Carriers submit rate filings (URR Templates and Rates Table Templates) to SERFF by the State's deadlines. 2. State conducts its rate review and provides feedback to carriers in SERFF. 3. Carriers make corrections in SERFF for State's review. 4. State approves data in SERFF, initiating transfer of URR Template and Actuarial Memorandum to HIOS. 5. No later than 7/15, the State notifies CCIIO to reopen HIOS for carrier submission of the Rates Table Template. 6. The State communicates to carriers when to submit their Rates Table Templates in HIOS, and monitors the PM Community and the State Evaluation Module in HIOS to confirm carriers are submitting their data. 7. State posts a link to ratereview.HealthCare.gov to publish initial rate filings. 8. CMS posts rates approximately 7/30/2022. 9. CCIIO conducts its review of materials. 10. CCIIO provides feedback to carriers and the State in the PM Community. 11. The State coordinates with PlanManagementStateCoordination@cms.hhs.gov (PMSC inbox) if there are questions regarding the corrections needed to carrier filings. 12. If any changes are required by carriers based on CCIIO's review, carriers update their materials and resubmit in SERFF first for the State's review. If this takes place after the State's final deadline on 8/4, the State will provide additional opportunities for carriers to make corrections. 13. HIOS remains locked until the final QHP Application Submission. <p><i>Note: CCIIO will not conduct rate reviews for PY 2023 as Georgia is an effective rate reviewer for PY 2022.</i></p>

Submission	State Deadline	CCIIO Deadline	Required Materials by Carriers	Review Process
Final QHP Applications	8/4/2022 (includes crosswalk templates)	8/17/2022	Final QHP application Final rate filings submitted by carriers Final rate determinations made by state	<ol style="list-style-type: none"> 1. Carriers submit final QHP application materials and rate filings to the State via SERFF by the State's deadline. 2. The State conducts its review and provides feedback to carriers through SERFF. 3. Carriers make corrections to applications and re-submit to SERFF, as needed. 4. The State approves QHP applications before CCIIO's final deadline. 5. No later than 8/12, the State notifies CCIIO to reopen HIOS for carrier submission of final application materials and transfer rate filing data through SERFF. 6. Carriers submit state-approved final applications to HIOS by CCIIO deadline. 7. A designated State POC and CCIIO POC coordinate with each other if corrections are needed to carrier filings after final submission in HIOS to ensure alignment in communication to carriers. 8. CCIIO provides feedback to carriers in the PM Community. 9. Carriers submit any required corrections in SERFF for the State to review first. 10. Upon authorization notification by the State, CCIIO reopens HIOS, and carriers upload corrections in HIOS. 11. The State posts a link to ratereview.HealthCare.gov to publish final rate filings. (CMS to post rates approximately 11/1/2022) <p><i>Steps 5-10 will not be necessary if "Go Decision" occurs before this point.</i></p>
Carrier Plan Confirmation	n/a	8/10/22 – 8/24/22	Carriers complete plan confirmation in Plan Management Community Final Plan ID Crosswalk	<ol style="list-style-type: none"> 1. Carriers must file updated crosswalks with the State in SERFF by the State's final QHP application deadline. 2. The State reviews and approves Plan ID Crosswalks. 3. Upon final QHP review and approval, CCIIO issues "Go Decision" to transition data to the State's system for ongoing management of Plan Data. 4. Carriers complete plan confirmation and submit final Plan ID Crosswalk Templates in the Plan Management Community. <i>This step will not be necessary if "Go Decision" occurs before this point.</i> 5. After Go Decision, carriers submit any corrections or changes with the State in SERFF for review and approval. <p><i>Note: For withdrawals that take place outside of plan confirmation, carriers must communicate with the State for any withdrawn plans via SERFF; the State will notify the carriers if they are approved to submit the withdrawal(s) via the Plan Management Community.</i></p>

3.0 Georgia Access Enrollment Platforms (GAEPs)

3.1. Inputs to Approach

The State developed its approach to partnering with private sector entities for the front-end consumer shopping and support services in Georgia Access based upon the processes and business and security requirements established by CCIIO for EDE partners. The State held several discussions with CCIIO's EDE team from December 2020 through September 2021 to inform the State's approach in addition to reviewing CCIIO EDE documentation.

After the State developed its initial GAEP approach for Georgia Access, the State sought input from EDEs and carriers in Georgia's market by facilitating eight workgroup sessions and numerous individual meetings. These sessions identified ways to improve upon the consumer experience and streamline operations between the State and the GAEPs.

3.2. Overview

In the first year of Georgia Access for OE 2023, the State is partnering solely with private sector entities that have been certified by CMS as EDEs. These private sector entities must receive EDE certification, either as primary or upstream entities, by July 31, 2022. In addition, they must meet ongoing Georgia Access program and technical requirements for implementation to be certified as a GAEP for OE 2023. GAEP web-brokers and carriers will provide consumers with online plan shopping, selection, and enrollment services leveraging either their own platform or as an upstream entity leveraging a GAEP technology provider's platform. Consumers will be able to shop for, compare, and enroll in all QHPs available to them in the market on GAEP web-broker sites. Additionally, agents will leverage GAEPs to support customers. If an EDE Phase 1 or Phase 2 entity wishes to be certified to participate in Georgia Access, they must establish a referral process to a Phase 3 entity for consumers they are not able to process. Phase 1 and 2 GAEPs will be required to provide a screening tool within their consumer QHP application to direct consumers to a Phase 3 GAEP if they are not able to handle their complex case. If a consumer starts an application on a Phase 1 or 2 GAEP but can't continue because they are a complex case, they may either continue their application on another GAEP site or the agent supporting the consumer can continue with the last saved pre-populated information within the application in the Georgia Access Agent Portal on their behalf. The State will review each GAEP's proposed referral process during the GAEP operational readiness reviews prior to certification. Georgia will conduct audits of the GAEP at least quarterly post go-live to check ongoing compliance with requirements as well as investigate any issues that are reported by consumers or agents.

3.3. Consumer QHP Application

Pursuant to 1413(b)(1)(A) of the Affordable Care Act, 45 CFR § 155.405(a), and 45 CFR § 155.305, GAEPs must provide a single streamlined application for consumers to access and provide data. GAEPs will then use that information and connect to the Georgia Access Eligibility System to verify information and determine eligibility. GAEPs are required to provide a single, streamlined application for consumers to collect data in accordance with 1413(b)(1)(A) of the Affordable Care Act, 45 CFR § 155.405(a), and 45 CFR § 155.305 in order for the Georgia Access Eligibility System to verify information and determine eligibility. All participating GAEPs must follow CCIIO EDE application requirements. Any proposed changes by the GAEPs from their EDE-approved consumer application must be submitted to the State for review and approval prior to implementation. The State leveraged the EDE API specifications to design the Georgia Access API specifications for the Georgia Access Eligibility System and the GAEPs. The State will issue change request guidance each year for GAEPs following a similar approach to CCIIO's Level 1, 2, and 3 changes for EDEs.

3.4. PY 2023 GAEP Certification Process

The State released its GAEP Application for OE 2023 on June 4, 2021. Twenty-two private sector partners submitted applications by the deadline of June 25, 2021, including nine technology providers, ten web-brokers, and eleven carriers. All GAEPs are required to participate in ongoing program and technical sessions for the planning and implementation of Georgia Access through June 2022 to receive certification. In July of 2022, each GAEP will undergo a readiness review by the State for program, business, and technical requirements to receive GAEP Certification for PY 2023. As part of each GAEP's readiness review, each entity will be required to submit their latest business and security and privacy audit reports to confirm Georgia Access requirements have been met.

GAEP Certification Phases

GAEP applicants will be certified for Georgia Access at their CMS EDE certification level. For example, an EDE certified at Phase 2 as of July 31, 2022, will be reviewed and certified as a GAEP Phase 2. Current Federal EDE² certification phases are as follows:

- **GAEP Phase 1 Certification:** Supports the most basic enrollment scenarios without re-directing to the HealthCare.gov platform.
- **GAEP Phase 2 Certification:** Supports many, but not all, enrollment scenarios not covered in Phase 1 without re-directing to the HealthCare.gov platform. Cases are more complex than those supported in Phase 1.
- **GAEP Phase 3 Certification:** Supports every enrollment scenario, including the most complex cases, without re-directing to the HealthCare.gov platform.

GAEPs can also be certified at an enhanced phase level. GAEPs who want to provide additional functionality in Georgia Access to handle more consumer use cases than their current EDE certification level may receive an enhanced certification phase within Georgia Access. For example, a GAEP that supports all EDE Phase 1 scenarios and adopts additional functionality to serve some consumer use cases for Phase 2 will be certified at a GAEP Phase 1+ Level. In order to receive this approval, GAEPs must first submit a request for the change to the State with supporting documentation on the impact with mock-ups of screenshots. If the change impacts eligibility or APIs, they must complete additional testing to confirm accurate results. The State then reviews the enhancements during ORR for certification.

Third Party Audits

GAEPs are required to submit business audits for certification in Georgia Access. GAEPs are required to submit updated business audits for any phase level changes. Each year, GAEPs are required to provide a third-party privacy and security assessment to the State in alignment with the deadlines required by CCIO to demonstrate ongoing compliance and maintain certification.

Certification

Upon completion of operational readiness reviews for participation in Georgia Access for OE 2023, all GAEPs will be required to sign a Business Associate Agreement (BAA) with the State. The BAAs include terms for confidentiality, privacy and security standards, general duties, nondiscrimination, conflicts of interest, responsibilities regarding eligibility and enrollment, customer service standards, certification and participation in Georgia Access, and general contract terms.

² More information on the requirements associated with Phase 1, 2, and 3 EDE certification can be found at: <https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Guidelines-for-Third-Party-Auditors-EDE-PY21PY22Year4.pdf>.

4.0 Agent Certification

4.1. Overview

Georgia’s approach to Agent Certification in the first year is based upon the approach taken by other states that have recently migrated off the FFE. To minimize the burden on agents in the first year with the transition to Georgia Access, State will continue to leverage the FFE certification for participation in Georgia Access. Agents that are licensed in the State of Georgia and certified with the FFE for PY 2023 will be able to sell plans in Georgia Access. The State will provide online training for agents regarding the unique aspects of Georgia Access compared to the FFE and information regarding how to assist consumers. For subsequent years (OE 2024 and beyond), the State will implement its own Agent Certification process for Georgia Access.

4.2. Agent Requirements

To sell plans in Georgia Access beginning OE 2023, agents must:

- Have an active Accident & Sickness Licensure to sell health insurance in the State of Georgia
- Have an active Agent Certification with the FFE for PY 2023
- Complete identity proofing through a GAEP or Georgia Access Agent Portal
- Complete all GAEP-required training if using a GAEP platform
- Complete Georgia’s online training for Georgia Access
- Secure appointments with carriers selling QHPs and SADPs

4.3. Agent Validation

Agent Profiles will be created in the Georgia Access Eligibility System for all agents selling in Georgia Access. The system will validate agent licensure directly from OCI’s licensing database (SIRCON) and completion of the FFE PY 2023 Agent Training from the Agent and Broker FFM Registration Completion List (RCL). Agents who complete these requirements prior to August 23, 2022, will have profiles automatically created ahead of data migration and auto re-enrollment. Agents who complete these requirements by October 23, 2022, will have profiles automatically created ahead of OE. Agents who complete these requirements after the start of OE will have profiles manually created and validated for Georgia Access. GAEPs will continue to conduct RIDP for agents using their systems and validate licensure and FFE certification status following the same processes as EDEs.

4.4. Agent Training

For participation in Georgia Access, agents will need to understand how Georgia Access differs from the federal exchange and how to use the Georgia Access Agent Portal and GAEP websites to support consumers. The following table lists the trainings that agents will take in the first year of Georgia Access and indicates the purpose of the training.

Agent Training	Purpose for Participation in Georgia Access
OCI Georgia Access Agent Training	Informs agents how Georgia Access differs from the federal exchange, how agents can support consumers to apply for and enroll in coverage in Georgia Access, and requirements for participation including adherence to all OCI rules regulations for agents.
Georgia Access Agent Portal Training	Provides instruction to agents through “How-To” videos on common business use cases and FAQs for the Georgia Access Agent Portal, including how to activate and maintain their Agent Profile, how to support consumer applications, and how to upload consumer documentation.

CMS PY 2023 Registration and Training	Provides certification for selling on the federal exchange. Agents must complete certification and registration for the Agent and Broker FFM Registration Completion List (RCL). The RCL will continue to be used by GAEPs and the Georgia Access Agent Portal to validate agents have completed certification. Most agents hold licenses in several states, so we anticipate many agents will continue to sell on the federal exchange as well as Georgia Access.
GAEP-Specific Training	Instructs agents on how to use the specific GAEP's technology platform.
For New Agents: Accident & Sickness Licensure Training	New agents must complete a 40-hour Accident & Sickness pre-licensing course encompassing the fundamentals of various types of live and health insurance products and offerings. Agents must pass an associated licensing exam reviewing medical expense insurance, policies and provisions, fraud prevention, HIPAA, HITECH, and underwriting.
For Returning Resident Agents: Biennial Continuing Education (CE) for renewal of Accident & Sickness Licensure	Renewing agents must complete 20-24 hours of CE every other year for a resident agent to maintain Accident & Sickness Licensure. Non-resident agents are renewed biennially and are considered in compliance with CE provided that they meet the CE requirements in their state of residence. CE requirement courses in Georgia cover HIPAA, HITECH, health and accident insurance, health insurance exchanges, and ethics, among other topics.

5.0 Public Awareness, Marketing, and Outreach

5.1. Public Awareness Campaign

Public outreach is a critical component of the success and adoption of Georgia Access. The State will launch a public awareness campaign ahead of OE 2023 to educate and inform the public on the transition from HealthCare.gov to Georgia Access, and promote the benefits of affordable healthcare provided by Georgia Access. The State has contracted with a marketing vendor to develop and execute an omni-channel marketing and outreach campaign. The campaign will target current consumers in Georgia's individual market, the uninsured population, and other stakeholders, including agents, health care providers, and advocacy groups to attract new enrollees. The marketing vendor will track the effectiveness of the campaign throughout OE to modify the approach as necessary and optimize outreach.

The campaign is expected to begin in mid-August and run through the end of OE 2023. While the campaign is still in the planning phase, it is anticipated that the campaign will run across paid search (e.g., Google), social (e.g., Facebook, Instagram, YouTube), and traditional channels (e.g., radio and newspapers) to reach Georgians across the state, and especially those in rural areas without access to the internet. Relationships with community-based organizations will also be an important part of this initiative as they often have more direct relationships with our target population, especially those in underserved and rural communities. Once the public awareness strategy is finalized, the State will share the details of the comprehensive strategy and relevant dates with CCIIO.

5.2. GAEP Marketing

The State's outreach efforts will be augmented by marketing efforts from the Certified GAEPs. Under Georgia Access, GAEPs will undertake their own marketing campaigns to attract consumers to shop using their platform. The State developed marketing guidelines and requirements to ensure that GAEPs are communicating information to consumers that is clear and accurate.

5.3. Georgia Access Website

The State will launch a Georgia Access website alongside the public awareness campaign. The website is scheduled to launch mid-August 2022. The website will provide information to the public about Georgia Access and how to shop for and enroll in coverage. The information on the website will include but will not be limited to:

- Open Enrollment dates
- Certified GAEPs participating in Georgia Access available carriers selling QHPs in the market
- How to contact local agents
- How to submit applications online, by phone, or paper
- How to file an appeal
- How to receive customer support
- Qualified Life Events (QLEs) and Special Enrollment Periods
- Frequently asked questions
- Chatbot help support

6.0 Consumer Migration and Open Enrollment (OE) 2023

6.1. OE Dates

The OE 2023 period will begin on November 1, 2022, and end on January 15, 2023. GAEPs will provide window shopping starting mid-October 2022.

Consumers who select to enroll in a plan on or before December 15, 2022, will start their coverage on January 1, 2023. Consumers who select to enroll in a plan between December 16, 2022, and January 15, 2023, will begin their coverage on February 1, 2023.

6.2. Consumers Migrating from the FFE

In addition to providing data extracts to the State for data migration, the FFE will also send a notice to all Georgia consumers on the FFE for 2022 regarding the upcoming migration to Georgia Access ahead of OE 2023. These notices are in addition to Georgia's Public Awareness Campaign efforts outlined above.

HealthCare.gov and the Marketplace Appeals Center will direct Georgia consumers to the Georgia Access website for more information on OE 2023, including how to select a GAEP.

6.3. Data Migration to Georgia Access and Auto Re-enrollment

All consumers on the FFE for 2022 will receive a notice from the State when their data is migrated from the FFE. The notice will provide information on the migration, OE 2023 dates, and how to shop for and enroll in coverage in Georgia Access.

The State will also conduct auto re-enrollment for all consumers who are migrated from the FFE. After data migration, the State will run consumers through auto re-enrollment batch processing. The State will send auto re-enrollment notices to consumers ahead of OE 2023 detailing the plan they have been auto-enrolled into, their new premium amount, data matching issues if applicable, and how to update their application information and actively shop and renew through a certified GAEP or certified local agent during OE.

The State will also send enrollment files to the carriers after running auto-enrollment. These files will adhere to standard EDI X12 file formats understood and accepted by carriers. Carriers may also send their

own OE notices to consumers. Carrier EDI testing began at the end of May 2022 for carriers to be prepared to accept and process Georgia Access EDI files.

6.4. Application Updates for Auto Re-enrolled Consumers

Georgia is following a similar process for consumer migration, auto re-enrollment, and application updates as other states that have migrated off the FFE. Just like States that have transitioned their individual markets to State Based Exchanges, consumers will need to access their migrated data to make updates to their applications within Georgia Access for OE 2023. For Georgia Access, migrated consumers will create an account with a GAEP if they are not already affiliated with an EDE that is participating in Georgia Access. Migrated consumers who are not affiliated with an EDE will receive information on their notices regarding selecting a GAEP to access and update their application or to find a local agent. Migrated consumers who are affiliated with an EDE participating in Georgia Access will receive information on their notices regarding their ability to stay with their current GAEP or pick a new GAEP. Once a consumer establishes an account with a GAEP, they will be able to retrieve and view their current Georgia Access application. The consumer will be able to make necessary changes, including updating their information and selecting a new plan. All consumers in Georgia's market will be able to securely access and view all State-generated notices through the State's Georgia Access website as well as through their GAEP account. Any documentation they upload to their GAEP account, such as verification to resolve a DMI, will be transmitted via the Document Upload EDE API to the Georgia Access Eligibility System and stored in the Document Imaging System, which is part of the Georgia Access Eligibility System.

7.0 Special Enrollment Period (SEP)

Consumers who enroll during an SEP for 2022 coverage will continue to apply through HealthCare.gov. The State is determining its process with CMS for receiving "catch-up" files, or data on new or existing consumers who have requested SEPs for 2022 via the FFE throughout OE 2023, to migrate these consumers to Georgia Access.

Consumers who enroll during a SEP for PY 2023 will do so through Georgia Access.

8.0 Consumer Verification and Eligibility Determination

8.1. Overview

The State's approach to consumer data validation and eligibility determination will mirror the federal policies and processes in place between EDEs and the FFE. The Georgia Access Eligibility System will verify consumer-attested information using electronic data sources. If the system is unable to verify the consumer's data using an electronic data source, it will generate a DMI notice for the consumer to resolve.

8.2. Data Matching Issues (DMIs)

The Georgia Access Eligibility System will generate a DMI when there is a discrepancy between a consumer's self-attested information and verification from electronic sources. DMI notices will be generated for:

- Social Security Number
- Death Match
- Incarceration

- Immigration Status
- Citizenship
- Non-Employer Sponsored Insurance Coverage
- Income
- American Indian/Alaska Native

The Georgia Access Eligibility System will generate all APTC/CSR eligibility and DMI notices, which consumers will be able to access through their GAEP accounts. Consumers using the GAEP platform may upload documentation to verify their self-attested information to their application. If they are working with an agent who uses the Georgia Access Eligibility System Agent Portal, the Agent will be able to upload the documents on the consumer's behalf. Consumer may also mail their documents to the Georgia Access Contact Center. If consumers have questions about the documentation they need to provide, they are instructed on their notice to contact their GAEP call center or agent. The GAEP will send the documentation to the Georgia Access Eligibility System for storage in the Document Imaging System. Georgia Access Contact Center staff will review and validate the documentation to resolve the DMI and update the system accordingly.

The Georgia Access Eligibility System will generate reminder notices for consumers 30, 60, and 75 days ahead of the DMI expiration date. In addition, ad hoc notices will be sent if the documentation provided is incomplete. The Georgia Access Eligibility System will generate updated notices for consumers who are redetermined as a result of an expired DMI and experience a loss of financial assistance or loss of coverage. For PY 2023, Georgia will not flag a DMI for American Indian/Alaska Native attestations. The State will gauge the volume of American Indian/Alaskan Native attestations for PY 2023 and potentially implement an alternate course of action for future plan years.

8.3. Periodic Data Match

Consistent with SBEs operated by GetInsured, the Georgia Access Eligibility System will conduct periodic data matches (PDMs) bi-annually for all consumers, leveraging the DMI workflow. In case of receiving a discrepancy from respective PDM services, the system initiates a Reasonable Opportunity Period (ROP) process and sends a warning notice to the consumers indicating a loss of financial subsidies and coverage. If the consumer does not resolve the DMI before the ROP expiry, the system redetermines the eligibility, terminates the financial subsidies and coverage, and sends the updated Eligibility Determination Notice. During the application process, consumers attest to allowing the State to terminate their QHP coverage if found to be dually enrolled in Medicaid/CHIP/Medicare. Therefore, if the PDM process shows that a consumer is enrolled in qualifying health coverage (Minimum Essential Coverage (MEC), including Medicaid/CHIP (via Non-ESI-MEC) /Medicare (via PVC)) outside of Georgia Access, the consumer will be terminated from their QHP, per this attestation. Regarding death match PDMs (via PVC), consumers will be terminated from coverage if they do not resolve their DMI within 30 days.

8.4. Income Verification

If the annual household income reported on the consumer's application is not within the threshold specified by the State when verified against trusted data sources (Internal Revenue Service or Verify Current Income Service), a DMI will be generated. For consumers who fail to resolve their DMI by the due date, the Georgia Access Eligibility system will rerun APTC/CSR eligibility based on the IRS trusted data source. Any unused premium tax credits that the consumer is entitled to can be claimed with their tax returns.

The Georgia Access Eligibility System will generate a DMI when there is a discrepancy in underreported income greater than 50% or \$12,000 of the consumer's actual income, following the FFE's standards.

The State will leverage the following data sources to verify income:

- Verify Current Income Service (accessed through the Federal Data Services Hub (FDSH))
- Previous year IRS tax data (accessed through the FDSH)
- Consumer documentation manually submitted (e.g., Paystubs)

A DMI will only be created after checking all electronic sources.

8.5. Failure to File and Reconcile (FTR) Tax Return

The Georgia Access Eligibility System will decouple the FTR process from the annual renewals process and will annually check each household's tax filing reconciliation status via the FDSH (IFSV).

Consumers whose accounts are flagged as not having been reconciled will receive a notice in their account. After 60 days, Georgia Access will again check to determine if the household has reconciled their taxes for the prior year. If they still have not reconciled, the household will have their subsidies removed pursuant to 45 CFR 155.305(f)(4) and will receive a notice to that effect. No Federal Tax Information (FTI) data is shared within the notice content.

8.6. Reasonable Opportunity Period Expiration

The Georgia Access Eligibility System provides members with a Reasonable Opportunity Period (ROP) to resolve DMIs and finalize their eligibility results. The ROP begins when a member submits their application and ends after 90 days.

If the member does not resolve all DMIs before the ROP expires, the system triggers an automated process that re-evaluates the member's eligibility for QHPs and/or subsidies. The table below summarizes how each type of unresolved DMI affects eligibility after the ROP expires.

If a member's eligibility for QHP or subsidies changes based on ROP expiration, the system triggers an automated process that updates the enrollments based on the finalized eligibility.

The Georgia Access Eligibility System is equipped to operationalize both Good Faith Extensions (GFEs) (155.315(f)(3)) and Special Circumstances (155.315(g)). OCI will work with the technology provider to review these on a case-by-case basis to assess next steps.

Note: If the consumer reports any changes, the prior ROP expiration status is cleared and all applicants in the household are re-evaluated for eligibility.

Type of Unresolved DMI	Effect of ROP Expiration on Eligibility
Social security number (SSN)² Death Incarceration Citizenship Lawful Presence (Immigration)	<ul style="list-style-type: none"> • Results in loss of QHP eligibility and termination of coverage for the enrollee who has the unresolved DMI³ • It takes effect at the end of the current month in which the ROP expires.

Income	<ul style="list-style-type: none"> • Results in the redetermination of APTCs/CSR subsidies based on IRS trusted data source. • Takes effect the first of the following month
Non-employer-sponsored insurance (non-ESI) MEC	<ul style="list-style-type: none"> • Results in loss of APTC and/or CSR subsidies for the enrollee who has the unresolved DMI • Takes effect the first of the following month

² Lack of SSN will cause a DMI to be generated, but there will not be adverse action upon DMI expiration.

8.7. Eligibility Determination

The Georgia Access Eligibility System will determine a consumer's eligibility for:

- QHPs – The State will follow federal eligibility rules.
- APTC/PTCs – The State will follow federal eligibility rules.
- CSRs – The State will follow federal eligibility rules.
- Medicaid/CHIP – The Georgia Access Eligibility System will do an assessment for potential Medicaid/CHIP eligibility based on State's Medicaid/CHIP eligibility rules. Medicaid/CHIP assessed households will be referred to Georgia Gateway for an eligibility determination.
- SEPs –The State will follow the SEP eligibility rules as outlined in 45 CFR § 155.420 with the additions of the State opening an SEP due to a State-declared emergency.

8.8. Medicaid/CHIP Referrals

Consumers seeking financial assistance are required to consent to their personal information being used and retrieved from trusted data sources accessed through FDSH and State sources. This information is used to determine consumers' eligibility for financial assistance including assessing the consumer for potential Medicaid/CHIP eligibility when submitting their application. The Georgia Access Eligibility System will perform the APTC/CSR eligibility determination and the potential MAGI Medicaid/CHIP eligibility assessment. The consumer's potential eligibility for MAGI Medicaid/CHIP will be determined based on the State's eligibility rules. If the consumer or a member of the household is assessed to be potentially eligible for MAGI Medicaid/CHIP, the Georgia Access Eligibility System will send the individual's information to Georgia Gateway (the State's Medicaid eligibility system via the Account Transfer Protocol, as defined in the ATP Business Services Description (BSD). Consumers will receive notice of Medicaid referral on the Eligibility Determination Notice (EDN) for their pending Medicaid/CHIP eligibility.

The Gateway system will receive potential Medicaid/CHIP-eligible applicants from the Georgia Access Eligibility System and will perform a full eligibility determination. Consumers will receive notice of their Medicaid/CHIP eligibility from DFCS.

The Georgia Access Eligibility System will also receive inbound referrals from Gateway for consumers who are denied and terminated for Medicaid/CHIP. If all data elements are received, the Georgia Access Eligibility Systems will auto run consumers for APTC/CSR eligibility and send an EDN informing them of their potential eligibility and how to select a plan. If there are data elements missing, Georgia Access will notify the consumer that a referral was received and to complete the application. The consumer will be required to claim the account and then to submit the application which will result in an EDN notice, and DMIs depending on the verification results from the HUB. When the consumer claims their account from the GAEP, or they work with an Agent via the Georgia Access Agent portal, their application will be pre-filled with data received from Georgia Gateway, to reduce consumer effort.

9.0 Noticing

All consumers enrolled through the FFE at migration will receive a paper notification from the State welcoming them to Georgia Access and outlining the process for plan shopping and enrollment. Consumers will also receive a notice for auto re-enrollment and how to update their application and plan selection in Georgia Access. All future noticing for migrated consumers is dependent upon the following factors: 1) their noticing preferences from the FFE, 2) if they were previously affiliated to an EDE that is participating in Georgia Access as a GAEP, and 3) if they have updated their application.

The State will print and mail all State-generated notices for consumers who opt for paper noticing. All consumers in Georgia's market will be able to securely access and view all State-generated notices through the State's Georgia Access website as well as through their GAEP account, if they are affiliated with a GAEP.

For migrated and new consumers who opt for electronic noticing and have an associated GAEP, the State will send email notifications to the consumer, notifying them they have a new available notice. Consumers will be able to download and print their notice from their GAEP account.

For migrated consumers who opt for electronic noticing but were not previously associated to an EDE and have not updated their application through a GAEP, the State will send email notifications to the consumer, notifying them they have a new available notice. These consumers will have secure access to view their notices on the Georgia Access website.

10.0 Enrollment and Reconciliation with Carriers

The implementation plan for the Georgia Access Eligibility System is designed to maintain enrollment data integrity from the outset. Carriers will be onboarded to the Georgia Access Eligibility System via the dedicated Carrier Portal, where they are able to view and validate their plan and rate information once transferred from SERFF. The carrier onboarding plan includes end-to-end EDI testing of simple and complex scenarios that can occur. The test suite has been refined based on carrier input and input from other states that have transitioned off of the FFE to cover common and edge scenarios. EDI testing provides the carriers and the State with assurance that enrollment data transactions will work optimally when the system goes live. Carrier EDI testing began on schedule on May 31, 2022.

Following testing acceptance by the carriers and the State, plan and rate information is automatically loaded into the Georgia Access Eligibility System's production environment for all plans that are certified in SERFF via an interface. Plan and rate information will then be shared as PUFs with GAEPs to be loaded into the GAEP systems, ensuring that all platforms offering QHPs in Georgia have identical plan and rate information.

The Georgia Access Eligibility System supports a monthly carrier reconciliation process that leverages the platform's Reconciliation Workbench. By making it easy for carriers to find and resolve errors, the system increases the quality of data received by carriers and Georgia's federal partners for payment reconciliation purposes.

The process includes the steps below:

1. The carriers generate the reconciliation file (RCNI file) based on a current snapshot of data in their system and send it to the Georgia Access Eligibility System in financial segments—the same format used by the FFE. This file includes all enrollments in the Georgia Access Eligibility System for a given coverage year for the carrier.

2. This carrier's data is translated and stored in a format that is convenient for comparison.
3. The Georgia Access Eligibility System automatically performs the comparison and analysis to generate the discrepancy report.
4. The discrepancy report is sent to the carriers for remediation based upon agreed-upon rules for responsibility.
5. The Georgia Access Eligibility System finds cases that can be automatically fixed in the platform's data, such as confirming pending enrollments.
6. Carriers review the discrepancy report and either correct or contest the discrepancy. The Reconciliation Workbench helps to manage and track this process at the individual discrepancy level.

11.0 Consumer Support

The State will provide a Georgia Access Contact Center for GAEPs, carriers, and agents to escalate issues for resolution. In addition, unaffiliated consumers can call the contact center to receive information on the migration and how to update their application and plan selection in Georgia Access.

11.1. Tier 1 Support – Private Market Support

Within Georgia Access, consumer support is comprised of three tiers. The first, and primary, tier of consumer support will be a robust network of GAEP web-brokers, carriers, and agents. These private sector partners will provide support services to assist consumers in plan shopping, selection, and enrollment. They will also help consumers identify and submit information needed to resolve DMIs. Consumers may also receive support from local certified agents who will assist individuals with shopping and enrolling through a GAEP. Consumers will continue to receive information and assistance from local community organizations and volunteers.

GAEPs will be required to provide, at a minimum, the same consumer support services required by CCIIO for EDEs. GAEP consumer support requirements for Georgia Access include, but are not limited to:

- Providing consumers with a toll-free telephone number to receive assistance and support
- Operating a call center to provide support for consumers in all counties within Georgia
- Assisting consumers with manual ID Proofing (IDP) when necessary
- Supporting consumers with information and support to resolve DMIs/SVIs
- Providing website content and applications in both English and Spanish

11.2. Tier 2 Support – State Program Support

If the consumer issue cannot be resolved through Tier 1 support, the State will provide escalated, Tier 2 program support to resolve the consumer's application, notice, eligibility, or enrollment issues. The State will implement a contact center and ticketing process for receiving, tracking, and resolving issues escalated from GAEP web-brokers, carriers, and agents. Upon receipt of an issue, workers will review the consumer's records in the Georgia Access Eligibility System. If possible, the worker will resolve the issue, perform manual overrides, and/or communicate remedial steps to the GAEP web-broker, carrier, or agent for resolution with the consumer.

11.3. Tier 3 Support – State Technical Support

If Tier 2 program support is not able to identify or resolve the consumer's issue, the issue will be escalated to Tier 3 technical support for further investigation and resolution.

11.4. Other Available Channels

Consumers will be able to receive support for frequently asked questions from a chatbot on the Georgia Access website. In addition, consumers will continue to be able to file complaints or grievances against web-brokers, carriers, and agents online or by phone to OCI for investigation and resolution.

12.0 Consumer Appeals

12.1. State Appeals

Georgia Access consumers who want to appeal an eligibility determination may submit a request either through their GAEP or by mail to the Georgia Access Contact Center. Upon receipt of the appeal request, contact center staff will review the consumers' information in the Georgia Access Eligibility System and attempt to contact the consumer for an informal resolution. All contact with the consumer and actions taken on the application in regard to a submitted appeal will be documented within the Georgia Access Eligibility System for historical record. If informal resolution cannot be reached, consumers may escalate their appeal request to OCI for formal resolution.

Level 1: Informal Resolution within OCI

Contracted appeals staff within the Georgia Access Contact Center working under the oversight of Georgia Access OCI Eligibility staff will review the appeals request for validity in accordance with eligibility rules and policies and also determine if the submitted documentation by the consumer is complete.

Upon receipt of the appeal request, an appeal worker will check if the request is valid. Validity checks include checking to determine if the appeal is germane under Georgia Access policies. Appeal workers will also validate whether the appeal request is submitted within the appropriate timeframe. If the request is not submitted within the appropriate timeframe, the appeal worker will review whether the consumer submitted the appeal with Good Cause; if so, the appeal worker will consider the appeal timely. If after review of the appeal request, the request is determined untimely or not germane, and therefore invalid, the appeal worker will generate a Notice of Appeal Received and Request Determined Invalid for the consumer. If the appeal request is valid, the appeal worker will send a Notice of Appeal Received and check the request for completeness.

The completeness check will review whether the appeal request is sufficiently completed and whether appropriate documentation is included. If the request is incomplete, the appeal worker will attempt to contact the consumer and/or the consumer's authorized representative via phone and secure email to request the additional information. If the consumer fails to respond or does not provide sufficient documentation prior to the appeal deadline (10 days following the initial appeal request), the appeal worker will generate a Notice of Appeal Closed due to Non-Responsiveness. If the appeal request is complete, the appeal worker will attempt to resolve with the consumer. If the appeal is closed informally via informal resolution, the appeal worker will send an Appeal Withdrawal Receipt via secure messaging.

Level 1: Formal OCI Appeals Hearing

If the consumer is dissatisfied with the informal resolution, or is unreachable, the appeal will be escalated and assigned to a Hearing Officer within OCI who will schedule a hearing with the consumer and issue the State's final eligibility determination. OCI's Administrative Procedure Division (APD) will appoint a Hearing Officer and a legal representative to the case. The Hearing Officer will schedule a hearing with the consumer following the APD's current policies and processes. Once adjudicated, the Hearing Officer will communicate the determination to the Georgia Access Contact Center appeals staff who will update

the eligibility results if applicable and send a Notice of Appeal Decision to the consumer with any exhibits generated during the formal appeal process.

12.2. Federal Appeals

If the consumer wishes to appeal the outcome from the State hearing or a notice denying a request to vacate a dismissal, they may do so by filing a Marketplace Eligibility Appeal Request with CMS' Marketplace Appeals Center within thirty days of the State's decision. They may file an appeal online, by mail, or fax.

Upon receipt of the appeal request, the Marketplace Appeals Center will review for validity. The Marketplace Appeals Center may request additional documentation from the State and the consumer. OCI will use the CMS Electronic File Transfer (EFT) site to submit any documentation related to the appeal.

The Marketplace Appeals Center will schedule a hearing with a Federal Hearing Officer (FHO) and the consumer. The State will be invited to attend the hearing. The FHO will render a written final, binding decision. The final appeal decision will be communicated to OCI via EFT. As necessary, OCI appeals staff will update the consumer's eligibility results within Georgia Access.

13.0 Exemptions

Georgia will follow eligibility rules for exemptions as defined in 45 CFR 155 subpart G. Consumers will be required to file their request for an exemption with CMS. If the exemption request is approved, CMS will provide approval documentation to the consumer which the consumer may attach to their application in Georgia Access. A POC at CMS and at the State will be established to coordinate information and questions regarding exemption requests and CMS will coordinate with Serco to obtain the exemption application and determination, following the same processes established with SBEs and CMS.

14.0 Employer Appeals

Georgia will follow eligibility rules for employer appeals. The State will send notices to employers notifying them if their employee received APTCs and reported that they did not have access to affordable coverage from their employer. This automated noticing is on a roadmap for after OE; in the interim, the Georgia Access Contact Center will provide noticing as necessary.

Employers may file an appeal with the Marketplace Appeals Center. A POC at the Marketplace Appeals Center and at the State will be established to coordinate information and questions regarding employer appeal requests, following the same processes established with SBEs and CMS. The determination for an employer appeal is issued based on information from the State, employer, and employee, and will be made without a formal hearing. Once the Marketplace Appeals Center renders a decision, the Marketplace Appeals Center will notify the state, employer, and employee. The State's appeal worker will notify the consumer and update eligibility, if required.

15.0 Technical Implementation

15.1. Overview

The State will leverage GetInsured's SaaS platform to provide verification, eligibility, and enrollment for Georgia Access. GetInsured is the technology provider for multiple states that have transitioned off of the FFE, including Pennsylvania and Nevada where GetInsured provides the entire enrollment and eligibility system along with the customer assistance center. The system is web-based and is compliant with relevant Affordable Care Act (ACA) and Health Insurance Portability and Accountability Act (HIPAA)

provisions. GetInsured has a proven track record of successfully integrating with five state Medicaid agencies via the Account Transfer protocol, obtaining Authorities to Connect and Operate, and generating accurate monthly Policy-Based Payment reports to CMS. While the core GetInsured eligibility platform is fully developed and will operate in largely the same manner as it does in other states, GetInsured will be developing a new EDE API Gateway in order to enable GAEPs to transact applicant and enrollee data between GAEP systems and the GetInsured platform. These EDE APIs, based on the FFE's EDE APIs, will allow GAEPs to interface with the Georgia Access Eligibility System in much the same way as they do with the FFE today.

15.2. Coordination with CCHIO MITG

The State is working closely with MITG to confirm activities, timelines, and requirements for connection with the FDSH and the technical migration of consumers off the FFE. These technical updates, reviews, and workplans between the State and MITG are ongoing. The following outlines the state's high-level approach to systems development and implementation for Georgia Access.

15.3. Georgia Access Eligibility System Development Life Cycle Phases

The State is following a hybrid agile/waterfall approach in the development and implementation of Georgia Access within Gateway. The State's approach can be summarized by the following phases and accompanying activities.

Planning & Requirements Phase

During this phase, documentation was gathered from various sources to build the plan for the State's implementation of Georgia Access. The State met with CMS's EDE team to gather documentation on functional requirements and EDE application programming interface (API) specifications and business design documentation. The State met with MITG to understand timelines and critical milestones. The State also received information from State Based Exchanges, including states that recently transitioned off the FFE. These inputs resulted in the identification of requirements for Georgia Access.

Design Phase

A series of joint application design (JAD) sessions were held throughout this phase to confirm the technical and function design for Georgia Access. GAEPs and carriers were invited to these sessions to validate the integration design specifications.

Development Phase

GetInsured began development activities on January 13, 2022, with the State to extend the SaaS solution for Georgia Access. which is occurring in iterative phases. Additional new functionality required for Georgia Access is also being developed; specifically, GetInsured is extending its platform to support connectivity with GAEPs via the EDE APIs through an EDE API Gateway. GAEPs and carriers will connect with the GetInsured EDE API Gateway in a manner similar to that which they use to interact with the EDE pathway on the FFE today.

Systems Integration Testing (SIT) Phase

During SIT, the Georgia Access Eligibility System will be tested to verify that it is meeting functional and technical requirements and that it is performing as expected when connected or integrated with other new or existing systems. As part of SIT, interface testing with respective GAEPs and carriers will also be conducted. This testing will validate that the system components, web-service testing, file/data exchanges between the Georgia Access Eligibility System and trading partners are meeting the requirements and design specifications.

User Acceptance Testing (UAT) Phase

During UAT, an independent third-party UAT vendor will validate the functional and technical requirements to verify that the system is performing as expected. This also consists of testing with GAEPs and carriers.

Data Migration and Preparation Phase

The State will receive production exacts from MITG as part of a dry run to confirm the information and systems are working as expected.

Implementation Phase

The implementation phase is comprised of three main elements:

1. **Soft Launch** – Georgia Access Eligibility System receives production data from MITG.
2. **Data Migration** – Georgia Access Eligibility System generates data migration notices for consumers.
3. **Auto re-enrollment** – Georgia Access Eligibility System performs auto re-enrollment, generate notices to consumers, and sends enrollment files to carriers prior to OE 2023.

16.0 Summary Timeline

The timeline below outlines the key milestones for the implementation of Georgia Access beginning with Waiver approval on November 1, 2020, through the first day of Georgia Access Open Enrollment for 2023 on November 1, 2022. Note that budget and legislative dates are subject to change. State deadlines for QHP Certification and Plan Management are subject to change based on the deadlines set by CCIIO for PY 2023 filings.

Key Activities and Milestones for the Implementation of Georgia Access	Start Date	End Date	Status
Federal Coordination			
Receive 1332 Waiver Approval	11/01/2020	11/01/2020	Complete
Attend monthly implementation meetings with CCIIO 1332 Waiver team	12/18/2020	11/01/2022	In progress
Attend FFE Transition Kick-off meeting with CCIIO MITG	05/21/2021	05/21/2021	Complete
Attend monthly Georgia Access Transition CCIIO MITG meetings	08/14/2021	11/01/2022	In progress
Attend biweekly CCIIO SBE transition meetings	06/02/2021	11/01/2022	In progress
Conduct Operational Readiness Review Activities	05/20/2022	07/29/2022	In progress
Receive Go/No Go decision to transition to Georgia Access	08/05/2022	08/05/2022	Future Date
Funding & Budget			
Confirm funding needs for State Fiscal Year (SFY) 2022	11/01/2020	12/31/2020	Complete
Governor submits SFY 2022 Budget Report to the General Assembly	01/14/2021	01/14/2021	Complete
General Assembly passes House Bill (HB) 81, the SFY 2022 State Budget	03/15/2021	03/15/2021	Complete
Governor signs HB 81	05/10/2021	05/10/2021	Complete
SFY 2022 Begins	07/01/2021	07/01/2021	Complete
Draft Amended Fiscal Year (AFY) 2022 and SFY 2023 Budget Request	08/01/2021	08/31/2021	Complete
Submit and review AFY 2022 and SFY 2023 Budget Request with OPB	09/01/2021	09/30/2021	Complete
Finalize request in Governor's Budget Report	09/01/2021	12/31/2021	Complete
Receive passthrough funding estimate from the Departments for PY 2022	01/01/2022	03/24/2022	Complete
Governor submits Budget Report to the General Assembly	01/10/2022	01/21/2022	Complete
General Assembly passes appropriations bills for AFY 2022 and SFY 2023	03/01/2022	03/31/2022	Complete

Key Activities and Milestones for the Implementation of Georgia Access	Start Date	End Date	Status
Governor signs appropriations bills for AFY 2022 and SFY 2023	04/01/2022	04/30/2022	Complete
Notify Departments of SFY 2023 funding secured	04/01/2022	04/30/2022	Complete
Receive passthrough funding from the Departments for PY 2022	04/01/2022	05/25/2022	Complete
SFY 2023 Begins	07/01/2022	07/01/2022	Complete
Draft AFY 2023 and SFY 2024 Budget Request	08/01/2022	08/31/2022	Future activity
Submit and review AFY 2023 and SFY 2024 Budget Requests with OPB	09/01/2022	09/30/2022	Future activity
Finalize request in Governor's Budget Report	10/01/2022	12/29/2022	Future activity
Staffing			
Identify staffing needs and strategy	11/01/2020	03/25/2021	Complete
Hire staff within OHSC	07/01/2021	10/01/2021	Complete
Hire staff within OCI	01/01/2022	11/01/2022	In progress
QHP Certification & Plan Management			
Develop plan management transition approach	05/15/2021	10/31/2021	Complete
Contract with plan management vendors	11/15/2021	02/28/2022	Complete
Confirm SERFF functionality for State's QHP review	12/01/2021	02/28/2022	Complete
Issue <i>QHP Application Filing Instructions and State Deadlines</i> in SERFF	03/01/2022	03/31/2022	Complete
Accept initial QHP applications from carriers in SERFF	04/22/2022	05/16/2022	Complete
Review initial QHP certification applications in SERFF	05/17/2022	06/15/2022	Complete
Accept initial rate filings from carriers in SERFF	04/28/2022	06/17/2022	Complete
Review initial rate filings in SERFF	06/18/2022	07/20/2022	Complete
Accept final QHP certification application from carriers in SERFF	07/18/2022	08/04/2022	In Progress
Go/No-Go determination for the State to transition plan management	08/05/2022	08/05/2022	Future activity
Review final QHP certification applications and rate filings in SERFF	08/04/2022	08/17/2022	Future activity
Conduct Plan ID Alternate Enrollments	08/04/2022	08/25/2022	Future activity
State QHP plan data no longer managed by FFE	08/05/2022	08/05/2022	Future activity
Certify plans for Georgia Access	09/01/2022	09/15/2022	Future activity
Create PUFs	09/29/2022	09/30/2022	Future activity
Release PUFs to GAEPs	10/13/2022	10/13/2022	Future activity
GAEPs			
Host EDE and carrier workgroups	02/01/2021	04/30/2021	Complete
Release GAEP applications for OE 2023	06/08/2021	06/08/2021	Complete
Receive GAEP applications for OE 2023	06/22/2021	06/22/2021	Complete
Issue acceptance letters to GAEPs	07/09/2021	07/09/2021	Complete
Review GAEP consumer application demos	11/03/2021	12/31/2021	Complete
Host ongoing implementation workgroup with GAEPs	11/29/2021	11/01/2022	In progress
Release GAEP API Companion Guide	03/16/2022	03/16/2022	Complete
Establish connectivity with GAEPs for testing	03/16/2022	05/02/2022	Complete
Perform API system integration testing	05/04/2022	06/30/2022	Complete
Conduct API user acceptance testing	06/27/2022	07/22/2022	In Progress
Sign Business Associate Agreements for integration	07/01/2022	08/19/2022	In Progress
Conduct GAEP readiness reviews	07/25/2022	07/29/2022	Future activity
Conduct blind audits on GAEPs	07/25/2022	08/19/2022	Future activity
Issue GAEP certification for OE 2023	08/01/2022	08/19/2022	Future activity
GAEPs conduct marketing and outreach activities	08/19/2022	11/01/2022	Future activity

Key Activities and Milestones for the Implementation of Georgia Access	Start Date	End Date	Status
GAEPs provide window shopping for consumers	10/24/2022	10/31/2022	Future activity
GAEPs begin enrolling consumers for OE 2023	11/01/2022	11/01/2022	Future activity
Agent Certification			
Define Georgia Access agent policies & processes for PY 2023	07/01/2021	12/31/2021	Complete
Develop Georgia Access agent online course for PY 2023	01/01/2022	8/14/2022	In progress
Roll out information on Georgia Access agent certification to stakeholders	05/01/2022	08/31/2022	In progress
Receive list of FFE Certified Agents with data migration	09/09/2022	09/30/2022	Future activity
GAEPs validate agent licensure, certification, Georgia Access training	09/01/2022	11/01/2022	Future activity
Public Awareness, Marketing & Outreach			
Secure www.GeorgiaAccess.gov domain rights	10/01/2021	02/07/2022	Complete
Identify potential vendors for the Public Awareness Campaign (PAC)	01/15/2022	04/13/2022	Complete
Contract with a vendor for PAC support	04/13/2022	04/13/2022	Complete
Define the PAC strategy & develop materials	04/28/2022	08/17/2022	In Progress
Develop www.GeorgiaAccess.gov website & chatbot	04/01/2022	08/14/2022	In Progress
Hold meetings with PY 2022 Navigator organizations	07/18/2022	08/05/2022	Future activity
Hold webinar for PY 2022 Certified Application Counselors	08/08/2022	08/26/2022	Future activity
Launch www.GeorgiaAccess.gov website	08/15/2022	08/15/2022	Future activity
Roll out of the PAC marketing and media campaign	08/17/2022	01/15/2023	Future activity
SEP			
Define SEP eligibility rules and processes for Georgia Access	07/12/2022	02/01/2022	Complete
Consumer Verification and Eligibility Determination			
Define verification and eligibility rules and processes for Georgia Access	07/12/2022	02/01/2022	Complete
Consumer Support			
Define consumer support policies & processes	07/01/2021	06/30/2022	Complete
Contract with a vendor to provide state support	01/07/2022	01/07/2022	Complete
Stand up state operations for escalated consumer support	07/01/2022	09/15/2022	In Progress
Provide information to GAEPs on processes for escalated consumer issues	07/01/2022	08/31/2022	In Progress
Provide consumer support	09/15/2022	11/01/2022	Future activity
Consumer Appeals			
Define consumer appeals policies & processes	07/01/2021	06/02/2022	Complete
Draft and provide appeals request information and form to GAEPs	02/01/2022	08/19/2022	In progress
Post appeals information on www.GeorgiaAccess.gov	09/01/2022	09/30/2022	Future activity
Begin accepting appeals requests	11/01/2022	11/01/2022	Future activity
Technical Implementation			
Conduct planning and requirements preparation	05/10/2021	06/21/2021	Complete
Identify system requirements	06/14/2021	07/09/2021	Complete
Conduct system design sessions	07/27/2021	10/21/2021	Complete
Conduct system development	01/13/2022	07/29/2022	In Progress
Conduct System Integration Testing (SIT)	03/15/2022	07/28/2022	In Progress
Conduct IV&V	03/15/2022	09/01/2022	In Progress
Conduct Third Party Security Testing	02/15/2022	06/01/2022	Complete
Submit Authority to Connect / Authority to Operate change to CMS & IRS	04/15/2022	04/15/2022	Complete
Conduct Trading Partner Testing	05/31/2022	09/21/2022	In Progress
Conduct User Acceptance Testing (UAT)	06/28/2022	08/05/2022	In Progress

Key Activities and Milestones for the Implementation of Georgia Access	Start Date	End Date	Status
Conduct End User System Training	06/15/2022	08/31/2022	In Progress
Submit Final System Security Plan (SSP) Package to CMS	06/07/2022	06/09/2022	Complete
Perform data conversion dry runs	08/01/2022	08/12/2022	Future activity
Perform soft launch	09/09/2022	09/09/2022	Future activity
Execute data migration	09/19/2022	09/30/2022	Future activity
Execute auto re-enrollment for PY 2023	10/12/2022	10/18/2022	Future activity
Send Welcome to Georgia Access Notice to migrated consumers	10/12/2022	10/25/2022	Future activity
Send Auto Re-Enrollment Notice to migrated consumers	10/12/2022	10/25/2022	Future activity
Launch Open Enrollment	11/01/2022	11/01/2022	Future activity