

# Welcome to the Marketplace: A Guide for New Agents and Brokers

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

*September 8, 2022*

*The information provided in this presentation is intended only as a general, informal summary of technical legal standards. It is not intended to take the place of the statutes, regulations, and formal policy guidance that it is based upon. This presentation summarizes current policy and operations as of the date it was presented. Links to certain source documents have been provided for your reference. We encourage audience members to refer to the applicable statutes, regulations, and other interpretive materials for complete and current information about the requirements that apply to them. The contents of this document do not have the force and effect of law and are not meant to bind the public in any way, unless specifically incorporated into a contract. This document is intended only to provide clarity to the public regarding existing requirements under the law.*

*This document generally is not intended for use in the State-based Marketplaces (SBMs) that do not use HealthCare.gov for eligibility and enrollment. Please review the guidance on our Agent and Broker Resources webpage (<http://go.cms.gov/CCIIOAB>) and [Marketplace.CMS.gov](http://Marketplace.CMS.gov) to learn more.*

*Unless indicated otherwise, the general references to “Marketplace” in the presentation only include Federally-facilitated Marketplaces (FFMs) and State-based Marketplaces on the Federal Platform (SBM-FPs).*

*This communication was printed, published, or produced and disseminated at U.S. taxpayer expense.*

# Agenda



**01** Marketplace Overview

**02** Role of Agents and Brokers

**03** Helpful Resources for New Agents and Brokers

**04** Working with Consumers and Private Partners

**05** Staying Connected

**06** Marketplace Updates

**07** Live Question/Answer Session and Agent and Broker Outreach Updates

# Marketplace Overview

# Marketplace Basics



- » The Marketplace was created following the passage of the Affordable Care Act (ACA) in 2010.
- » In most states, the federal government runs the Marketplace for individuals and families. This is called the Federally-facilitated Marketplace (FFM) and can be found at [HealthCare.gov](https://www.healthcare.gov).
- » Some other states operate their own State-based Marketplace (SBM).
- » Through the Marketplace, consumers can:
  - Fill out an application and find out if they qualify for lower monthly premiums through advance payments of the premium tax credit (APTC) or cost-sharing reductions (CSRs) based on their income
  - Find out if they qualify for Medicaid or the Children's Health Insurance Program (CHIP)
  - Select and enroll in a plan that best fits their needs

# Marketplace Basics (Continued)



- » Consumers can enroll in Marketplace coverage during the Open Enrollment Period (OEP), which takes place from November 1, 2022–January 15, 2023.
- » Consumers can also enroll in coverage outside the OEP during a Special Enrollment Period (SEP). Consumers qualify for a SEP if they've had certain life events, including losing health coverage, moving, getting married, having a baby or adopting a child, or if their household income is below a certain amount.
- » Consumers with Medicare coverage are **not** eligible to use the Marketplace to buy a health or dental plan. If consumers are eligible for Medicaid, they can still buy a Marketplace plan, but are not eligible for any cost savings and would pay full price.

To be eligible to enroll in coverage through the Marketplace, consumers must:

- » Live in the United States
- » Be a U.S. citizen or national (or be lawfully present)
- » Can't be incarcerated

# Role of Agents and Brokers

# Why Should Agents and Brokers Participate in the Marketplace?

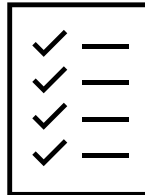


- 1. Help clients enroll in affordable, quality coverage.** Customers may qualify for premium tax credits that lower their monthly premiums — but only through the Marketplace. By selling them a Marketplace plan, agents and brokers help them obtain quality health coverage and save money.
- 2. Find and connect with new clients in your community.** After registration, agents and brokers can add their contact information to Find Local Help and participate in Help On Demand. People in the community looking for agents and brokers can easily search for them through Find Local Help or be connected with them through Help On Demand.
- 3. Provide a variety of valuable services to clients.** Once a client authorizes agents and brokers to represent them in the Marketplace, agents and brokers can provide any service they need — from answering questions to helping complete an application to handling everything from start to finish.
- 4. Handle everything online.** Agents and brokers can help consumers fill out applications, complete enrollments, make changes, and handle renewals online through HealthCare.gov or an approved Direct Enrollment (DE) partner.
- 5. Sell group plans to small businesses.** The Small Business Health Options Program (SHOP) Marketplace offers health and dental plans to small businesses with 1-50 employees. Businesses with less than 25 employees may qualify for tax credits. Agents and brokers can help employers enroll directly through a qualified health plan (QHP) issuer.



# Role of Agents and Brokers

- » Agents and brokers play a crucial role in assisting and educating consumers about the Marketplace, both during annual Open Enrollment and throughout the coverage year.
- » To serve consumers in the Marketplace, agents and brokers must:
  - Complete registration and required training on an annual basis — prior to assisting consumers with enrolling in a plan
  - Be licensed health agents and brokers with a valid line of authority (LOA) in the state where their clients reside, confirm that their National Producer Number (NPN) appears on the Registration Completion List (RCL), and be marked as having a “valid” license for the current plan year
  - Be registered or have an appointment separately with each QHP issuer with which they are assisting individuals



# Maintaining Compliance: Reminders



- » Agents and brokers must obtain consent from each client they work with **prior to** assisting them with Marketplace coverage, including prior to searching for a current application using an approved Classic DE/Enhanced Direct Enrollment (EDE) website.
- » Do not maintain access to a client's HealthCare.gov account or associated email account.
- » Agents and brokers are prohibited from logging into HealthCare.gov and creating HealthCare.gov accounts.
- » Identify and report suspicious activity or potentially fraudulent behavior observed in relation to the Marketplace.
- » Agents and brokers should ensure their clients are reporting accurate income when completing or updating the eligibility application. Reinforce that it is in their best interest to report the **most accurate** income estimate, not the estimate that maximizes the amount of premium tax credit for which they may be eligible.

# Helpful Resources for New Agents and Brokers

# Agent and Broker Resources Webpage



The Agent and Broker Resources webpage provides a space for agents and brokers to receive information from CMS about working in the Marketplace and the SHOP.

**CMS.gov** Centers for Medicare & Medicaid Services

About CMS Newsroom Search CMS.gov

Medicare Medicaid/CHIP Medicare-Medicaid Coordination **Private Insurance** Innovation Center Regulations & Guidance Research, Statistics, Data & Systems Outreach & Education

Home > Programs and Initiatives > Health Insurance Marketplaces > Resources for Agents and Brokers in the Health Insurance Marketplaces

**CCIIO**

## Resources for Agents and Brokers in the Health Insurance Marketplaces

**Welcome**

Welcome to the Agents and Brokers Resources webpage. This page is the primary outlet for agents and brokers to receive information from CMS about working in the Health Insurance Marketplace and the Small Business Health Options Program (SHOP).

Programs and Initiatives

- Consumer Support and Information
- In-Person Assistance in the Health Insurance Marketplaces
- Health Insurance Market Reforms

### Resources for Agents and Brokers

- Resources for Agents and Brokers in the Health Insurance Marketplaces
- General Resources
- Plan Year 2022 Open Enrollment

# Agent and Broker Resources Webpage (Continued)



The Agent and Broker Resources webpage contains a dynamic list of resources that provide helpful information, including guidance, regulations, newsletters, previous webinar slides, quick reference guides, and more. Agents and brokers can filter the list by date, topic, title, and type of resource.

Showing 1-10 of 116 entries

Show entries: 10 per page

Filter on

**Apply**

<u>Date</u>	<u>Topic</u>	<u>Title</u>	<u>Type of Resource</u>
<a href="#">2022-06</a>	COBRA	COBRA Coverage & The Marketplace	Webinar Slides
<a href="#">2022-06</a>	Help On Demand	Help On Demand Overview	General Resources
<a href="#">2022-06</a>	Help On Demand	Help On Demand Training and Registration Guide	Guidance

- » Visit <https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/General-Resources> and search by topic or keyword to find relevant resources.

# Agent and Broker Resources Webpage (Continued)



The Agent and Broker Resources webpage contains a section specifically dedicated to Registration and Training. The page contains key registration and training resources, including webinar slides, data dictionaries, and links to the Agent and Broker FFM Registration Completion List.

**CMS.gov** Centers for Medicare & Medicaid Services

About CMS | Newsroom | Search CMS.gov

Medicare | Medicaid/CHIP | Medicare-Medicaid Coordination | **Private Insurance** | Innovation Center | Regulations & Guidance | Research, Statistics, Data & Systems | Outreach & Education

Home > Programs and Initiatives > Health Insurance Marketplaces > Plan Year 2023 Registration and Training

**CCIIO**

## Plan Year 2023 Registration and Training

**Plan Year 2023 Marketplace Registration and Training is Live for New and Returning Agents and Brokers**

Plan year 2023 Marketplace registration and training is now available for new and returning agents and brokers on the Marketplace Learning Management System (MLMS).

### Resources for Agents and Brokers

- Resources for Agents and Brokers in the Health Insurance Marketplaces
- General Resources

Programs and Initiatives

Consumer Support and Information

In-Person Assistance in the Health Insurance Marketplaces

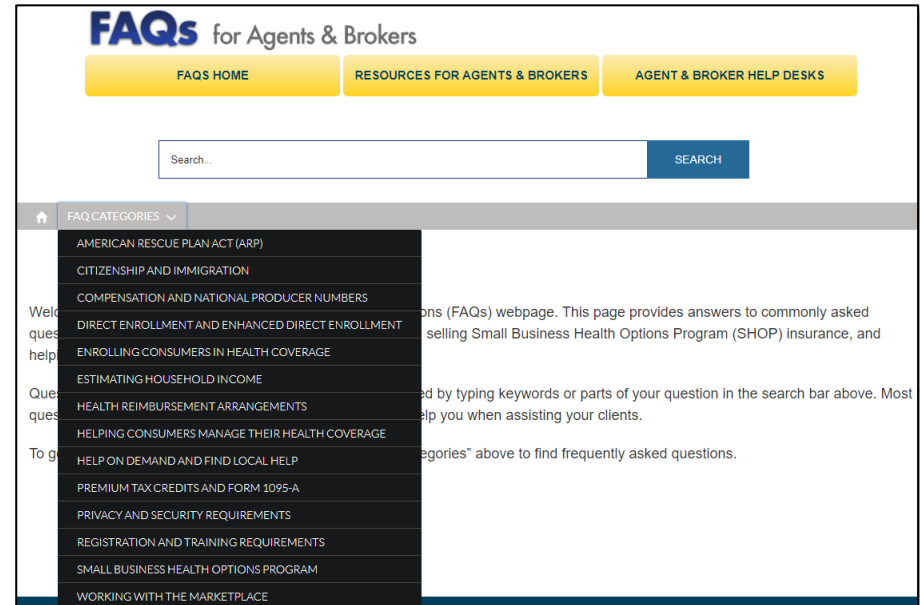
» Visit <https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Marketplace-Registration-and-Training> to access the page.

# Frequently Asked Questions Database



The Agent and Broker Frequently Asked Questions (FAQs) website provides answers to commonly asked questions about working in the Marketplace and helping clients enroll in and maintain coverage.

- » Visit <https://www.agentbrokerfaq.cms.gov/s/> and search by question category, keyword, or part of the question. Most responses also include links to additional resources to help when assisting clients.



# Agent and Broker Video Learning Center



Check out these technical assistance videos for Marketplace agents and brokers at the **Agent and Broker Video Learning Center (VLC)**! There are several types of videos, including overviews, how-to videos for resolving consumer issues, and application walkthroughs. The VLC features a variety of topics to help navigate the Marketplace, such as:

- » [A New Agent and Broker Checklist for Success](#)
- » [Income Calculation Tool Walkthrough: Calculating Annual Income](#)
- » [How to Retrieve Your User ID and Reset Your Password](#)

And more! View the entire playlist at <https://bit.ly/3hXLyru>.





# Help On Demand



- » Help On Demand is a consumer assistance referral system that connects consumers seeking assistance with agents and brokers in their area who can provide immediate assistance with Marketplace plans and enrollments.
- » Only agents and brokers who have completed registration, training, and executed CMS agreements are eligible to complete specific coursework to participate in Help On Demand.
- » Help On Demand sends agents and brokers a notification via mobile app, text, or email when a referral has been received. Agents and brokers have 15 minutes to accept a referral from Help On Demand before the consumer is reassigned to another agent or broker.
- » Learn more about Help On Demand by reading [this overview](#), this [training and registration guide](#), and this [tip sheet](#).

The screenshot shows a CMS website page with a navigation menu on the left containing links for 'Programs and Initiatives', 'Consumer Support and Information', 'In-Person Assistance in the Health Insurance Marketplaces', 'Health Insurance Market Reforms', and 'Health Insurance Marketplaces'. The main content area is titled 'Help On Demand for Agents and Brokers' and contains a paragraph describing the service. A right-hand sidebar is titled 'Resources for Agents and Brokers' and lists links for 'Resources for Agents and Brokers in the Health Insurance Marketplaces', 'General Resources', 'Plan Year 2022 Open Enrollment', and 'Plan Year 2022 Registration and Training'.

**CCIO**

## Help On Demand for Agents and Brokers

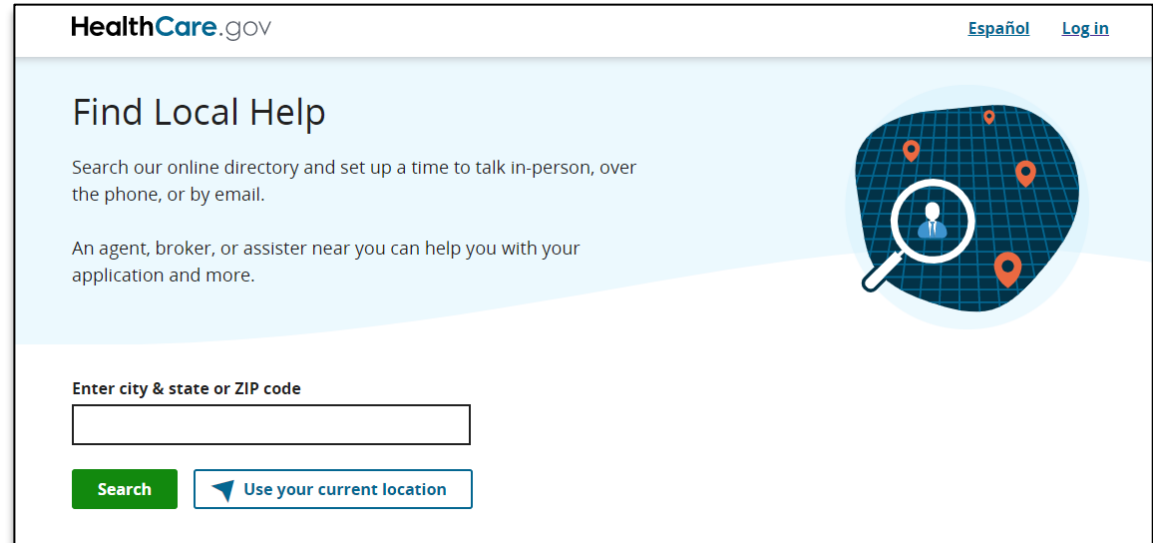
Help On Demand is a consumer assistance referral system that connects consumers seeking assistance with Marketplace-registered, state-licensed agents and brokers in their area who can provide immediate assistance with Marketplace plans and enrollments. Help On Demand is a CMS-contracted service developed and hosted by Help On Demand (formerly known as BigWave Systems). Only agents and brokers who have completed Marketplace training and registration are eligible to participate in Help On Demand. If you are already registered to participate in Help On Demand, you can log into your account at <https://marketplace.helpondemand.com>.

### Resources for Agents and Brokers

- Resources for Agents and Brokers in the Health Insurance Marketplaces
- General Resources
- Plan Year 2022 Open Enrollment
- Plan Year 2022 Registration and Training

# Find Local Help

- » Find Local Help works by producing a list of Marketplace-registered, state-licensed agents and brokers for the consumer to contact directly. Agents and brokers have the option to have their information included in Find Local Help when confirming their profile prior to completing the annual training through CMS.
- » For more information, view [this FAQ](#) about using Find Local Help.



The screenshot shows the HealthCare.gov website interface for the 'Find Local Help' feature. At the top left is the 'HealthCare.gov' logo, and at the top right are links for 'Español' and 'Log in'. The main heading is 'Find Local Help', followed by a description: 'Search our online directory and set up a time to talk in-person, over the phone, or by email.' Below this is a sub-heading: 'An agent, broker, or assister near you can help you with your application and more.' To the right of the text is a graphic of a globe with a magnifying glass over a person icon. At the bottom, there is a search input field with the placeholder text 'Enter city & state or ZIP code'. Below the input field are two buttons: a green 'Search' button and a blue button with a location pin icon and the text 'Use your current location'.

# Registration Completion List



- » CMS validates agents' and brokers' personal information, such as state licensure status and NPNs, against data stored in the [National Insurance Producer Registry \(NIPR\) Public Database](#).
  - Results of this NIPR NPN validation appear on the public [Agent and Broker Federally-facilitated Marketplace RCL](#)
  - The RCL is updated daily
- » NPN validation occurs during the annual registration process in the Marketplace Learning Management System (MLMS) and is only applicable to the current plan year. CMS also conducts a weekly licensure check throughout the year.
- » To be validated, agents and brokers must:
  - Have a valid state license;
  - Have a [valid health-related line of authority \(LOA\)](#) in their resident state; and
  - Have an active status for their health-related LOA

# Marketplace Registration Tracker



- » The [Agent and Broker Registration Tracker](#) is a searchable database that allows agents and brokers to look up their registration status with the NPN and ZIP Code that they saved in their MLMS profile for the current plan year.
  - Information is updated daily by 5:00 p.m. EST

### Agent and Broker Marketplace Registration Tracker

Current plan year registration status lookup tool

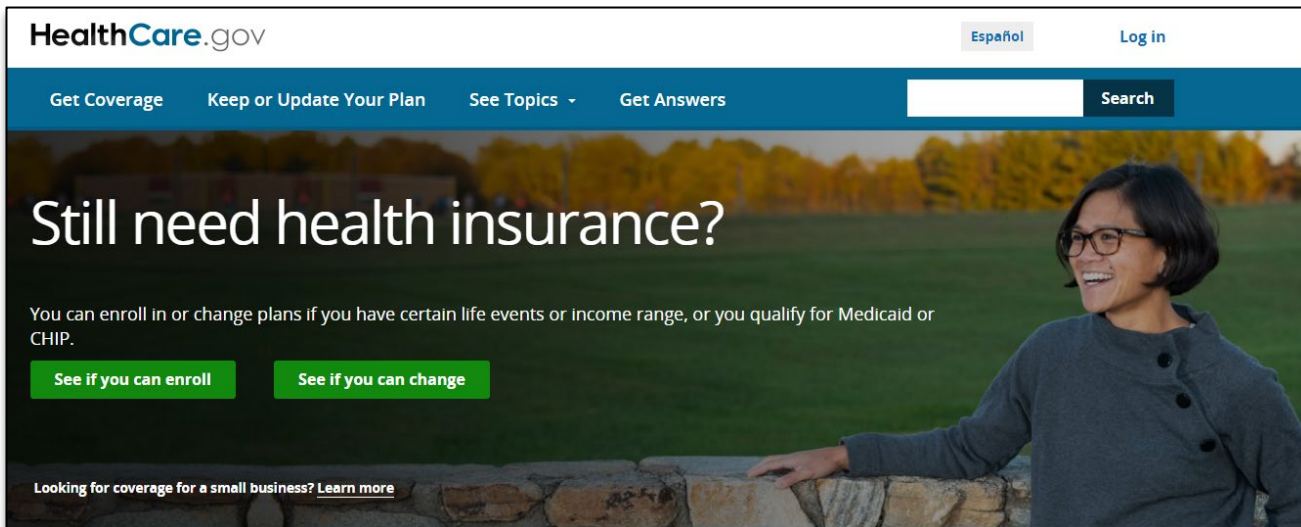
The Agent and Broker Registration Tracker is a searchable database that allows you to look up your Marketplace registration status with the National Producer Number (NPN) and ZIP Code that you have saved in your Marketplace Learning Management System (MLMS) profile for the current plan year.

**Find your status**  
Enter both NPN and ZIP code to lookup your status.

**NPN**  
(numbers only)

  
**ZIP code**  
(5 digit only)

- » On HealthCare.gov, agents and brokers can assist consumers with determining if they qualify for insurance through the Marketplace, completing an application, and enrolling in coverage.
- » Information is also provided about a variety of topics relevant to agents and brokers when assisting consumers, including changing or cancelling coverage, estimating income, and transitioning from the Marketplace to Medicare.



The screenshot shows the HealthCare.gov homepage. At the top left is the "HealthCare.gov" logo. To the right are links for "Español" and "Log in". Below this is a navigation bar with "Get Coverage", "Keep or Update Your Plan", "See Topics", and "Get Answers". A search bar with a "Search" button is on the right. The main content area features a large heading "Still need health insurance?" over a background image of a smiling woman. Below the heading is a paragraph: "You can enroll in or change plans if you have certain life events or income range, or you qualify for Medicaid or CHIP." Two green buttons are present: "See if you can enroll" and "See if you can change". At the bottom left, there is a link: "Looking for coverage for a small business? [Learn more](#)".

# Agent and Broker Marketplace Help Desks and Call Centers



Name	Phone # and/or Email Address	Types of Inquiries Handled	Hours (Closed Holidays)
Agent and Broker Email Help Desk	FFMProducer-AssisterHelpDesk@cms.hhs.gov	<ul style="list-style-type: none"> <li>• General enrollment and compensation questions</li> <li>• Manual identity proofing/Experian issues</li> <li>• Escalated registration and training questions (not related to a specific training platform)</li> <li>• Agent and Broker Registration Completion List issues</li> <li>• Find Local Help listing issues</li> <li>• Help On Demand participation instructions or questions</li> <li>• Report concerns that a consumer or another agent and broker has engaged in fraud or abusive conduct</li> </ul>	Monday-Friday 8:00 a.m.-6:00 p.m. EST
Marketplace Service Desk	855-CMS-1515 855-267-1515 CMS_FEPS@cms.hhs.gov	<ul style="list-style-type: none"> <li>• CMS Enterprise Portal password resets and account lockouts</li> <li>• Other CMS Enterprise Portal account issues or error messages</li> <li>• General registration and training questions (not related to a specific training platform)</li> <li>• Login issues on the Classic DE agent and broker landing page</li> <li>• Technical or system-specific issues related to the MLMS</li> <li>• User-specific questions about maneuvering in the MLMS site, or accessing training and exams</li> </ul>	Monday-Friday 8:00 a.m.-8:00 p.m. EST
Marketplace Call Center Agent and Broker Partner Line	855-788-6275 Note: Enter an NPN to access this line. TTY users 1-855-889-4325	<p>Specific consumer application questions related to:</p> <ul style="list-style-type: none"> <li>• Password reset for a consumer HealthCare.gov account;</li> <li>• Special enrollment period not available on the consumer application;</li> <li>• Consumer-specific eligibility and enrollment questions</li> </ul>	Monday-Sunday 24 hours/day

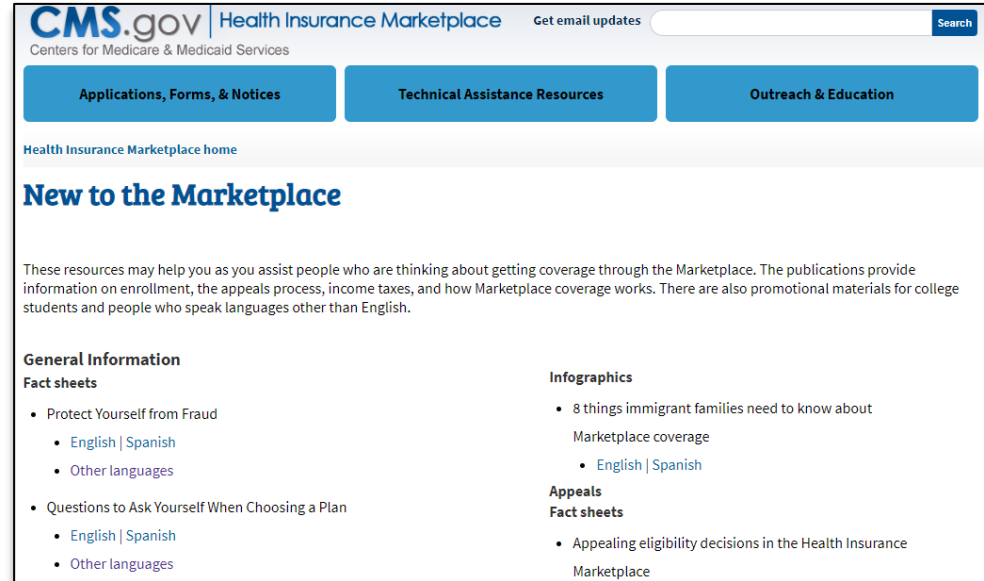
# Agent and Broker Marketplace Help Desks and Call Centers (Continued)



Name	Phone # and/or Email Address	Types of Inquiries Handled	Hours (Closed Holidays)
Agent and Broker Training and Registration Email Help Desk	MLMSHelpDesk@cms.hhs.gov	<ul style="list-style-type: none"> <li>• Technical or system-specific issues related to the MLMS</li> <li>• User-specific questions about maneuvering in the MLMS site, or accessing training and exams</li> </ul>	Monday-Friday 9:00 a.m.-5:30 p.m. EST
SHOP Call Center	800-706-7893	<ul style="list-style-type: none"> <li>• Inquiries related to SHOP eligibility determinations on HealthCare.gov</li> <li>• Contact the insurance company for most questions about SHOP plans, such as applications, enrollment, renewal, or changing or updating coverage.</li> </ul>	Monday-Sunday 24 hours/day
Marketplace Appeals Center	1-855-231-1751 TTY users 1-855-739-2231	<ul style="list-style-type: none"> <li>• Status of a Marketplace eligibility appeal</li> <li>• How to appoint an Authorized Representative to request Marketplace eligibility appeal on a consumer's behalf</li> </ul>	Monday-Friday 7:00 a.m.-8:30 p.m. EST

# New to the Marketplace Webpage

- » The [New to the Marketplace webpage](#) provides resources that may help agents and brokers as they assist people who are thinking about getting coverage through the Marketplace.
- » The publications on this page provide information on enrollment, the appeals process, income taxes, and how Marketplace coverage works.
- » There are also promotional materials for college students and people who speak languages other than English.



The screenshot shows the CMS.gov Health Insurance Marketplace website. At the top, there is a navigation bar with the CMS logo, the text 'Health Insurance Marketplace', a search bar, and a 'Get email updates' button. Below the navigation bar are three main menu items: 'Applications, Forms, & Notices', 'Technical Assistance Resources', and 'Outreach & Education'. The main content area is titled 'New to the Marketplace' and includes a paragraph of introductory text. Below this, there are two columns of links. The left column is titled 'General Information' and contains a 'Fact sheets' section with links for 'Protect Yourself from Fraud' (with sub-links for 'English | Spanish' and 'Other languages') and 'Questions to Ask Yourself When Choosing a Plan' (with sub-links for 'English | Spanish' and 'Other languages'). The right column is titled 'Infographics' and contains a link for '8 things immigrant families need to know about Marketplace coverage' (with a sub-link for 'English | Spanish'). Below the infographics is an 'Appeals' section with a 'Fact sheets' link and a link for 'Appealing eligibility decisions in the Health Insurance Marketplace'.



# Working with Special Populations



CMS.gov | About CMS | Print | Share

CMS.gov | Health Insurance Marketplace | Get email updates | Search

Centers for Medicare & Medicaid Services

Applications, Forms, & Notices | Technical Assistance Resources | Outreach & Education

Health Insurance Marketplace home > Outreach & Education

## Special populations

These resources can help you reach out to people included in special groups, such as American Indians, Medicare beneficiaries, and young adults. The fact sheets, partner publications, and associated web sites explain the programs and services available to them.

### African Americans

- [Strategies for Behavioral Health Organizations to Promote New Health Insurance Opportunities in African American Communities \(SMA14-4819\)](#)

### American Indian/Alaska Natives

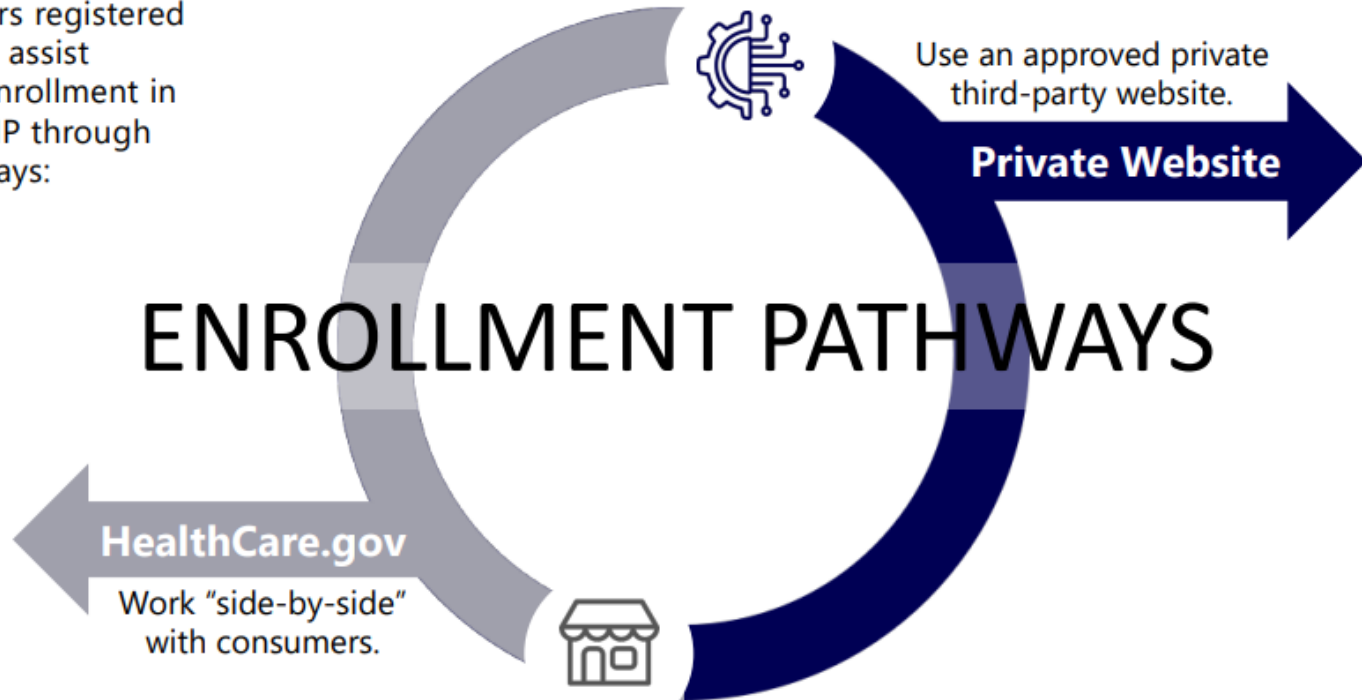
- [Behavioral Health Brochure](#)
- [CMS Important Dates](#)
- [Healthy Students Brochure](#)
- [Employer Sponsored Insurance & Affordability](#)

- » Resources on [this page](#) can help agents and brokers reach out to people included in special groups, such as American Indians, Medicare beneficiaries, and young adults.
- » This page provides fact sheets, partner publications, and associated websites that explain the programs and services available to them.

# **Working with Consumers and Private Partners**

# Enrollment Pathways

Agents and brokers registered with the FFM may assist consumers with enrollment in a Marketplace QHP through one of two pathways:



# Marketplace Pathway



- » In the Marketplace pathway, registered agents and brokers help a consumer obtain an eligibility determination and select a QHP directly at HealthCare.gov.
- » The consumer creates an account, logs in to the site with a consumer account, and “drives” the process.
- » Agents and brokers must not log into HealthCare.gov or create HealthCare.gov accounts. It is the consumer Marketplace pathway.

**Health**  
**Care**  
.gov

# Direct Enrollment

- » QHP issuers and web-brokers with approved DE websites may offer different levels of service on their websites to agents and brokers assisting consumers.



## CLASSIC DIRECT ENROLLMENT (DE)

- » Agents and brokers begin on a QHP issuer's or web-broker's website, redirect to HealthCare.gov for the application and eligibility determination, and then are redirected back to the private partner's website to complete plan selection and enrollment.
- » This functionality is also known as the **Classic DE** or the **"Double Redirect" Pathway**.



## ENHANCED DIRECT ENROLLMENT (EDE)

- » Some approved partners offer enhanced functionality that includes fully integrated platforms that provide a range of custom features and capabilities, enabling agents and brokers to more easily assist clients with year-round policy and client relationship management.
- » This functionality is also known as the **EDE Pathway**.
- » The Marketplace remains responsible for making eligibility determinations.

# Find an Approved Private Partner



- » Approved, participating EDE or Classic DE partners may offer specific resources that enable agents and brokers to more easily assist clients with year-round policy and client relationship management.
- » Agents and brokers may find more issuers and web-brokers that are approved to offer these services via the [Issuer & Direct Enrollment Partner Directory](#). This link is available on the [Agent and Broker Resources page](#).
- » The directory also includes issuers who only offer plans on HealthCare.gov but want to work with Marketplace-registered agents and brokers.

## **EACH DIRECTORY LISTING CONTAINS:**

- » Company name
- » Level of service offered (e.g., classic functionality, simplified, or expanded application capabilities)
- » Contact information for agents and brokers
- » Information on whether an issuer or web-broker offers SHOP plans and/or stand-alone dental plans

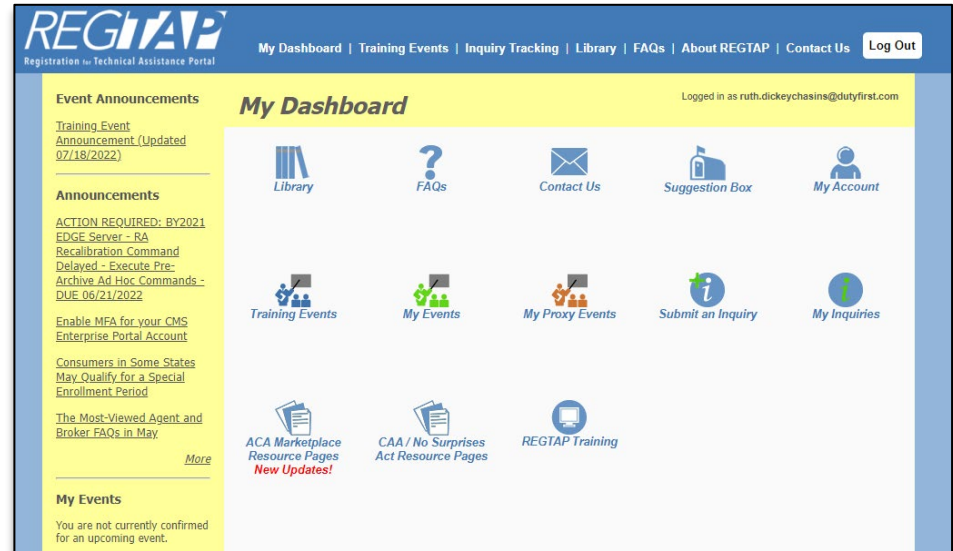
# Staying Connected

# Upcoming Webinars & Office Hours



Register for upcoming office hours by visiting <https://www.regtap.info/> and following the instructions below. Registration for webinars will be available as the date approaches.

1. Log in to REGTAP. If an agent or broker is new to REGTAP, click "Register as a New User." Agents and brokers will receive an email to confirm their account.
2. Click "Training Events" on "My Dashboard."
3. Click the "View" icon next to the desired webinar topic/title.
4. Click the "Register Me" button.
5. For further assistance logging in to REGTAP or registering for a webinar, contact the Registrar at 1-800-257-9520 or [registrar@REGTAP.info](mailto:registrar@REGTAP.info). Assistance is available Monday through Friday from 9:00 a.m.-5:00 p.m. EST. *Note: Registration closes 24 hours prior to each event.*





# Upcoming Webinars & Office Hours

## (Continued)



### Upcoming Webinars

Complex Case Scenarios

Preparing for Plan Year 2023 Open Enrollment

Helping Consumers More Effectively for Plan Year 2023

Plan Year 2023 Marketplace Policy and Operations Updates

Help On Demand

Mastering the Healthcare.gov Application

### Upcoming Office Hours





Thursday, November 3, 2022: 2:00 – 3:00 p.m. EST

Thursday, November 17, 2022: 2:00 – 3:00 p.m. EST




Thursday, December 8, 2022: 2:00 – 3:00 p.m. EST

Thursday, January 5, 2023: 2:00 – 3:00 p.m. EST

# Recent Webinars

Webinar Title & Link	Description
 <a href="#">Helping Consumers Resolve Data Matching Issues</a>	This webinar covered information on tips for avoiding data matching issues (DMIs), acceptable documents to resolve DMIs, and more.
 <a href="#">The Marketplace and Cybersecurity</a>	This webinar covered information on information security, identifying and protecting personally identifiable information, preventing cybersecurity breaches, and more.
 <a href="#">Immigration and the Marketplace</a>	This webinar covered information on mixed immigration status households, immigration documentation types, coverage for lawfully present immigrants, and more.
 <a href="#">Compensation: Tips for Making Sure You Get Paid</a>	This webinar covered information on compensation for Marketplace enrollments, working with issuers, how agents and brokers can ensure they get credit for assisting with annual re-enrollments, and more.

# Recent Webinars (Continued)

Webinar Title & Link	Description
 <a href="#">Reaching Underserved Communities</a>	This webinar covered information on health disparities, working with community organizations, serving consumers with limited English proficiency, and more.
 <a href="#">Understanding Marketplace Compliance Rules and Regulations</a>	This webinar covered information on Marketplace requirements for agents and brokers, maintaining compliant business relationships, compliance provisions in the 2023 payment notice, and more.
 <a href="#">Terminating Marketplace Coverage and Coverage Appeals</a>	This webinar covered information on various scenarios regarding ending Marketplace coverage, and how agents and brokers can assist consumers who wish to appeal their Marketplace eligibility determination.

# Computer-Based Trainings (CBTs)



- » Computer-based trainings (CBTs) are self-paced online versions of the webinars, complete with slides, audio, and transcripts.
  - CBTs can be accessed on REGTAP. From the Dashboard, select the Library, then change the Program Area to “Agent and Broker” and the Resource Type to “CBT.”

The screenshot shows the REGTAP Library interface. At the top, there is a navigation bar with the REGTAP logo and links for My Dashboard, Training Events, Inquiry Tracking, Library, FAQs, About REGTAP, Contact Us, and a Log Out button. Below the navigation bar, the word "Library" is displayed. To the right of "Library" are two buttons: "Program Resource Pages" with a book icon and a PDF icon. Below these are three dropdown menus for "Agent and Broker", "Training Event", and "CBT", followed by a "Keyword:" input field, a yellow "Search" button, and a blue "Clear Search" button. The main content area is a table with the following columns: Program Icon, Title, Date, Program Area, Resource Type, and View / Download. The table contains two rows of data.

Program Icon	Title	Date	Program Area	Resource Type	View / Download
	The Marketplace and Cybersecurity	07/19/2022	Agent and Broker (AB)	CBT	<a href="#">Play CBT</a> <a href="#">Transcript</a>
	Helping Consumers Resolve Data Matching Issues (DMIs)	06/22/2022	Agent and Broker (AB)	CBT	<a href="#">Play CBT</a> <a href="#">Transcript</a>

# Growing Market, New Opportunities: An Agent and Broker Panel Series



- » Last summer, CMS hosted a series of panel discussions titled “Growing market, new opportunities: An agent and broker panel series on reaching America’s uninsured and underserved communities.” These panel discussions provided an opportunity for Marketplace agents and brokers to learn more about how they can reach historically underserved communities and bridge the gap to coverage for underinsured consumers; by listening to the experiences of other agents and brokers.
- » All panel recordings are now available to view on REGTAP:
  - [American Indian/Alaska Native Communities](#)
  - [Black and African American Communities](#)
  - [LGBTQ+ Communities](#)
  - [Rural Communities](#)
  - [Hispanic and Latino Communities](#)
  - [Asian American and Pacific Islander Communities](#)

# Marketplace Circle of Champions



- » The Circle of Champions is an annual recognition program for Marketplace-registered agents and brokers who assist at least 20 active enrollments during Open Enrollment.
- » There are three Circle of Champions recognition levels for agents and brokers:



## Circle of Champions

Agents and brokers who complete 20-99 active enrollments



## Elite Circle of Champions

Agents and brokers who complete 100-499 active enrollments



## Elite Plus Circle of Champions

Agents and brokers who complete 500+ active enrollments

# Marketplace Circle of Champions (Continued)



- » If agents and brokers achieve Circle of Champion status at any of the three levels, they will receive a recognition package with the following materials:
  - Appreciation letter from CMS
  - Personalized certificate of recognition
  - Commemorative digital badge
  - Digital and social media toolkit
- » Recognition materials can be used to promote this accomplishment among peers and within the community.
- » Materials are emailed to the address listed on an agents' and brokers' MLMS profiles. All recognition materials can be downloaded from links in the email.
- » Congratulations letters and materials are also available in Spanish.

# Working with Navigators



- » Assistors cannot endorse specific agents and brokers or refer consumers to specific agents and brokers.
- » Assistors cannot accept consideration of any kind (direct or indirect, cash or in-kind), including from agents and brokers that could be tied to the compensation received by agents and brokers from a health insurance or stop loss insurance issuer for enrolling a person in a QHP or non-QHP.
- » Assistors cannot use or rely upon the services of agents and brokers as substitutes for performing any of their federally required duties.
- » Assistors must **not** refer consumers to agents and brokers as a substitute for fulfilling any of their federally required duties.
- » Assistors may **not** try to persuade a consumer to use a specific web-broker or recommend a particular web-broker or subset of web-brokers.



# Working with Navigators (Continued)



- » Assisters and agents and brokers may benefit from sharing expertise and best practices with each other.
- » An assister might have experience assisting consumers who qualify for Medicaid or CHIP or specific populations (i.e., immigrants).
- » Agents and brokers might have best practices for obtaining detailed plan information, how to recognize the distinctions among different coverage options, or different insurance companies' administrative or claims practices.
- » Nothing prohibits assisters from networking or sharing knowledge and expertise with agents and brokers or seeking out knowledge and expertise from agents or brokers.

# Agent and Broker Email Communications

Agents and brokers can manage the emails they want to receive from the Marketplace by updating subscriber preferences. To get started, visit <https://public.govdelivery.com/accounts/USCMHIM/subscriber/new?preferences=true> for HealthCare.gov emails. Agents and brokers can enter the email address at which they receive emails from CMS and click "Continue."

## **To resubscribe or subscribe to additional emails:**

1. Select the "Manage Subscriptions" tab.
2. Click the "Add Subscriptions" link.
3. Select the desired subscription topics.
4. Complete the Subscription questionnaire and click "Save."

## **To adjust the number of emails received:**

1. Select the "Email Frequency" tab.
2. Complete the subscription questionnaire and click "Save."

For additional assistance, contact the Agent and Broker Email Help Desk at [FFMProducer-AssisterHelpDesk@cms.hhs.gov](mailto:FFMProducer-AssisterHelpDesk@cms.hhs.gov).

# Marketplace Updates

# American Rescue Plan (ARP) & Inflation Reduction Act (IRA)



- » During Plan Years 2021 and 2022, the ARP expanded eligibility for APTC to include consumers with an annual household income greater than 400% of the federal poverty level (FPL). This change allowed more consumers to enroll in affordable health insurance coverage.
- » The IRA includes a three-year extension of the expanded APTC provisions of the ARP so that consumers have access to expanded APTC until January 1, 2026. These provisions will ensure greater consumer access to expanded cost savings and affordable health insurance coverage.
- » The IRA also extends the 150% FPL SEP, ensuring that consumers making at or below 150% of the FPL have increased access to health insurance and plan flexibility.



Read the statement from CMS Administrator Chiquita Brooks-LaSure here:

<https://www.cms.gov/newsroom/press-releases/statement-cms-administrator-chiquita-brooks-lasure-senate-passage-inflation-reduction-act>

# Silver vs. Bronze Plans



- » While assisting consumers during Open Enrollment, it is important to help them consider **total health care costs** and **not just the monthly premium** for the plans they are exploring.
- » Bronze Plans:
  - These plans can have low monthly premiums but very high deductibles and pay less of a consumer's costs when they need care.
- » Silver Plans:
  - If a consumer qualifies for CSRs, agents and brokers should explain the benefits of enrolling in a Silver plan. If the consumer qualifies for and enrolls in a Silver plan with CSRs, their **deductible will be lower**, and **they'll pay less each time they receive care**.
  - Consumers with incomes between 100-200% of the FPL may be eligible for high-CSR variant Silver plans, which may offer the lowest overall costs for them, even if Bronze plans offer lower or \$0 premiums after APTC.
- » If a consumer does not qualify for CSRs and expects a lot of doctor visits or needs regular prescriptions, a Gold or Platinum plan may be a good option for them. Use the See Plans and Prices tool (<https://www.healthcare.gov/see-plans/#/>) to compare plans and prices.
  - For more information, visit <https://www.healthcare.gov/choose-a-plan/plans-categories/>

# Data Matching Issues (DMIs)



- » A DMI is a difference between some information a consumer provides on their Marketplace application and information the Marketplace obtains from other trusted data sources.
- » **DMIs may be generated because:**
  - A consumer's data may not match information at our trusted data sources
  - A trusted data source may not have data for a consumer
  - Information is missing or incorrect on the application
  - A consumer failed to provide a Social Security Number (SSN) on their application
  - A consumer failed to provided all household income on the application
  - A consumer's name used for their application differs from how it appears on their citizenship document or other document
  - A consumer failed to provide their immigration document numbers and ID numbers

# Reminder About Submitting Documents for DMIs



Large numbers of consumers are now **running out of time** to submit documents to resolve their data matching issues.



Consumers who do not resolve their issues will **lose APTC or coverage**.



Agents and brokers will **lose commissions** for many of these consumers if documents are not submitted and issues not resolved.



**Check consumer accounts NOW** and have consumers submit any needed documents.

For additional information on resolving DMIs, visit: <https://marketplace.cms.gov/technical-assistance-resources/helping-consumers-resolve-dmi-.pdf>

# Impact of DMI Expiration



DMI	Expiration Description	Impact
<b>Annual Income</b>	Applicant is unable to document annual household income is within 25% or \$6,000 of attested income	Household's eligibility for financial assistance is adjusted, possibly to nothing, based on the level of income on record with Exchange trusted data sources
<b>Citizenship/Immigration (Cit/Imm)</b>	Consumer is unable to verify an eligible citizenship or lawful presence status	Consumer loses their eligibility for Exchange coverage and is terminated if enrolled
<b>American Indian/Alaskan Native (AIAN) Status</b>	Consumer is unable to verify they are a member of a federally recognized tribe or shareholder in an Alaska Native corporation (ANCSA)	Consumer loses their eligibility for financial assistance provided specifically to members of federally recognized tribes, which is eliminated if enrolled
<b>Non-Employer Sponsored Coverage Minimum Essential Coverage (non ESC MEC)</b>	Consumer is unable to verify they are not eligible/enrolled in Non-Employer Sponsored Coverage	Consumer loses their eligibility for financial assistance, which is eliminated if enrolled
<b>ESC MEC (OPM Only)</b>	Consumer is unable to verify they are not eligible/enrolled in Employee Sponsored Coverage from OPM	Consumer loses their eligibility for financial assistance, which is eliminated if enrolled



# General Tips for Avoiding All DMI Types



Complete all possible fields in the application

Ensure consumer's name matches documents such as their Social Security card

Non-applicants in the household are strongly encouraged to provide an SSN if they have one

Double check that the information on the application is complete and that there are no errors or typos

# Best Practices When Assisting Underserved Communities



- » Consider other relevant factors and context that may impact consumer experience.
  - Not all consumers have reliable access to Wi-Fi or Internet or access to a computer or smart phone
  - Consumers may have different income and education levels, and these backgrounds can affect their beliefs and opinions about health and coverage
  - For immigrants, the health system in their country of origin may be very different than in the U.S.
- » Health literacy and providing education is vital to ensuring that consumers choose the plan that is right for them.
  - Some consumers may qualify for income-based CSRs for which they must enroll in a Silver plan. In many cases, consumers may maximize their overall savings in a Silver plan with a higher premium, rather than a Bronze plan.

*“When you empower people with knowledge, they feel equipped to not only make the right decisions and choices, but they can feel confident that the plan that they have in place is what’s going to be most suitable.”*

- A panelist on the African American and Black Communities panel.

# Best Practices When Assisting Underserved Communities (Continued)



- » Avoid stereotypes – consumers from the same background or from the same region may differ greatly in their traditions, customs, and opinions about health and coverage.
- » Consumers may be embarrassed or ashamed to say they don't understand – it is important to build trust to address this, and to clearly explain each piece of the process without having to be asked.
- » Being authentic in interactions with consumers is important. Acknowledge, respect, and accept cultural differences among consumers.



*"Intersectionality is a very important thing to consider when working with LGBTQ+ individuals because we're not just queer, or we're not just trans, we also may have a disability, we may be a person of color."*

- A panelist on the LGBTQ+ Communities panel

# Race and Ethnicity Questions in the Marketplace Application



- » CMS routinely analyzes data on who is signing up for coverage and how applicants move through the online workflows in order to measure Marketplace effectiveness and determine whether there is a need for policy, operational, or outreach/marketing updates.
- » One of the barriers to making informed decisions is that consumers, or individuals filling out applications on consumers' behalf, often do not provide attestations to the optional race and ethnicity questions in the FFM application. In the Marketplace, non-reporters of race and ethnicity data are disproportionately Black and Latino, leading to an undercount of these individuals.
- » We encourage all agents and brokers to take the time to ask consumers to respond to these questions. This information will **help CMS reduce health disparities, prevent discrimination, promote equity for all communities and FFM consumers**, and better follow its mission to improve health care coverage. CMS asks this question in order to ensure outreach is reaching all communities and that the application process does not create barriers for individuals or groups.
- » CMS will use this data to identify possible application, enrollment, or coverage barriers and disparities for all communities seeking coverage through the FFM. In addition, the question about language preference will help CMS assess language needs of the populations being served and help CMS and insurers have language services available.

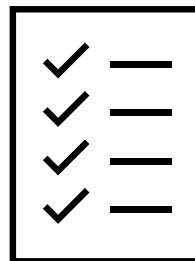
# Consumers in Need of Coverage When Public Health Emergency Ends



- » In March 2020, CMS temporarily waived certain Medicaid and CHIP requirements and conditions as part of the response to the COVID-19 Public Health Emergency (PHE). The easing of these rules helped prevent people with Medicaid and CHIP — in all 50 states, the District of Columbia, and the five U.S. territories — from losing their health coverage during the pandemic. **However, state Medicaid agencies will be required to restart Medicaid and CHIP eligibility reviews when the PHE ends.**
- » In an effort to minimize the number of people that lose Medicaid or CHIP coverage when the PHE ends, CMS is working with states and other stakeholders to inform people about renewing their coverage and exploring other available health insurance options, such as Marketplace coverage, if they no longer qualify for Medicaid or CHIP.
- » As a best practice, agents and brokers should educate consumers on important Marketplace plan design elements, such as the use of premiums, cost-sharing, and differences in benefits and provider networks. Agents and brokers should also ensure that consumers review provider directories before enrolling in coverage, to make sure that any providers upon whom they rely are in network.
- » CMS plans to share additional information and resources with agents and brokers in the coming months so they can prepare to assist consumers in need of assistance with Marketplace coverage if they are no longer eligible for Medicaid.

# Failure to Reconcile Flexibilities for Plan Year 2023

- » In Plan Years 2021 and 2022, CMS did not act on data from the Internal Revenue Service (IRS) for consumers who have failed to file tax returns and reconcile a previous year's APTC with the premium tax credit (PTC) allowed for the year.
- » CMS will continue to not act on data from the IRS for consumers who have failed to file tax returns and reconcile a previous year's APTC with the PTC allowed for the year for Plan Year 2023. The continuation of this operations flexibility is due to the continued impact of the COVID-19 pandemic on the processing of 2021 federal income tax returns.
- » For more information, view the announcement released on July 18, 2022:  
<https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/FTR-flexibilities-2023.pdf>



# **Live Question/Answer Session & Agent and Broker Outreach Updates**

# Agent and Broker Resource Links



Resource	Description	Link
Agents and Brokers Resources Webpage	Primary outlet for agents and brokers to receive information about working in the Health Insurance Marketplace; provides the latest news and resources, including newsletters, webinars, fact sheets, videos, and tip sheets	<a href="http://go.cms.gov/CCIOAB">http://go.cms.gov/CCIOAB</a>
HealthCare.gov	Official site of the Health Insurance Marketplace; used for researching health coverage choices, eligibility, and enrollment	<a href="https://www.healthcare.gov/">https://www.healthcare.gov/</a>
Marketplace Information	Official Marketplace information source for assisters and outreach partners about Marketplace eligibility, financial assistance, enrollment, and more	<a href="https://marketplace.cms.gov">https://marketplace.cms.gov</a>
Find Local Help	Tool available on HealthCare.gov that enables consumers to search for a local, Marketplace-registered agent and broker to assist with Marketplace enrollment	<a href="https://localhelp.healthcare.gov/">https://localhelp.healthcare.gov/</a>
Help On Demand	Consumer assistance referral system operated by Help On Demand (formerly known as BigWave Systems) that connects consumers seeking assistance with Marketplace-registered, state-licensed agents and brokers in their area who can provide immediate assistance with Marketplace plans and enrollments	<a href="https://www.cms.gov/CCIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Downloads/Help-On-Demand.pdf">https://www.cms.gov/CCIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Downloads/Help-On-Demand.pdf</a>
Agent and Broker NPN Search Tool	Enables users to search and find the correct NPN to enter in the MLMS profile and on Marketplace applications	<a href="https://npr.com/help/look-up-your-npn">https://npr.com/help/look-up-your-npn</a>



# Agent and Broker Resource Links (Continued)



Resource	Description	Link
List of Approved Health-related Lines of Authority (LOAs)	Provides a list of valid health-related LOAs for agents and brokers by resident state	<a href="https://data.healthcare.gov/AB-NIPR-Health-Line-Of-Authority">https://data.healthcare.gov/AB-NIPR-Health-Line-Of-Authority</a>
National Insurance Producer Registry	Provides licensure and compliance information for agents and brokers	<a href="https://nipr.com/licensing-center/add-a-line-of-authority">https://nipr.com/licensing-center/add-a-line-of-authority</a>
CMS Enterprise Portal	Allows agents and brokers to securely complete identity proofing and access the MLMS to complete annual, required Marketplace agent and broker training and registration	<a href="https://portal.cms.gov">https://portal.cms.gov</a>
Partner Directory for Agents and Brokers	List of approved, participating issuers and web-brokers includes entities that offer online resources for agents and brokers, such as enrollment and client management functionality	<a href="https://data.healthcare.gov/issuer-partner-lookup">https://data.healthcare.gov/issuer-partner-lookup</a>
Assisting Clients with Marketplace Eligibility Appeals	Reviews the Marketplace eligibility appeal process and describes consumers' rights to appeal a Marketplace eligibility determination	<a href="http://cbt.regtap.info/cbt/regtap/AB_MarketplaceEligibilityAppeals_CBT_5CR_061119/story_html5.html">http://cbt.regtap.info/cbt/regtap/AB_MarketplaceEligibilityAppeals_CBT_5CR_061119/story_html5.html</a>
Frequently Asked Questions for Agents and Brokers	Provides answers to commonly asked questions about working with the Marketplace and helping clients enroll in and maintain their coverage	<a href="https://www.agentbrokerfaq.cms.gov/s/">https://www.agentbrokerfaq.cms.gov/s/</a>

# Agent and Broker Resource Links (Continued)



Resource	Description	Link
Agent and Broker FFM Registration Completion List (RCL)	Public list of agents and brokers who have completed Marketplace registration; used by issuers to verify agents' and brokers' eligibility for compensation for assisting with Marketplace consumer enrollments	<a href="https://data.healthcare.gov/ffm_ab_registration_lists">https://data.healthcare.gov/ffm_ab_registration_lists</a>
Agent and Broker Marketplace Registration Tracker	Searchable database that allows users to look up their Marketplace registration status with the NPN and ZIP Code saved in their MLMS profile for the current Plan Year	<a href="https://data.healthcare.gov/ab-registration-tracker/">https://data.healthcare.gov/ab-registration-tracker/</a>
Agent and Broker Video Learning Center (VLC)	The Agent and Broker VLC features technical assistance videos on a variety of topics to help navigate the Marketplace.	<a href="https://bit.ly/3hXLyru">https://bit.ly/3hXLyru</a>

# Acronym Definitions



Acronym	Definition
ACA	Affordable Care Act
APTC	Advance Payment of the Premium Tax Credit
CCIIO	Center for Consumer Information and Insurance Oversight
CMS	Centers for Medicare & Medicaid Services
CHIP	Children's Health Insurance Program
CSR	Cost-Sharing Reduction
DE	Direct Enrollment
EDE	Enhanced Direct Enrollment
FAQ	Frequently Asked Question
FFM	Federally-facilitated Marketplace
FTR	Failure to Reconcile
HHS	Department of Health & Human Services

Acronym	Definition
HOD	Help On Demand
LOA	Line of Authority
MLMS	Marketplace Learning Management System
NPN	National Producer Number
OE	Open Enrollment
OEP	Open Enrollment Period
PTC	Premium Tax Credit
QHP	Qualified Health Plans
RCL	Registration Completion List
SEP	Special Enrollment Period
SHOP	Small Business Health Options Program
VLC	Video Learning Center



Agents and brokers are valued partners to all of us at CMS for the vital role you play in enrolling consumers in qualified health coverage.

We thank you for the trusted advice, support, and assistance you provide throughout the year and wish you continued success!