

CMS Issuer Technical Work Group

- ***Housekeeping***
 - ***Reminder: New Enrollment***
 - ***Webinar Schedule***
 - ***Registration Reminders:
New Tuesday and Thursday
Issuer Workgroup Calls***
 - ***Reminders: CMS Issuer
Communications***
- ***Pre-Audit and Recon Update***
- ***ERR***
- ***Enhanced Direct Enrollment (EDE) Updates:
Compliance Team***
- ***Enhanced Direct Enrollment (EDE) Updates:
Enrollment Team***

- ***Q&A***

March 24, 2020

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New 2020 Series for the CMS Issuer Technical Workgroup Call (Series I) and the Thursday Recon IC834 Workgroup

- The Tuesday Issuer Technical Workgroup started a new series on today Tuesday, January 7, 2020 at 3:00 PM EST.
- The Thursday Recon-IC834 Workgroup call started a new series on this Thursday, January 9, 2020

Please see the registration URLs for both calls below:

- Tuesday Issuer Technical Workgroup Call
letsmeet.webex.com/letsmeet/k2/j.php?MTID=t01b9595808d2c0225f5bbe4308047786
- Thursday Recon IC834 Workgroup Call
<https://letsmeet.webex.com/letsmeet/k2/j.php?MTID=tf57cab5409c2b02cd5ea749302c3014a>
 - You will register one time, for the entire Tuesday Issuer Technical Workgroup Call Series I (through, July 28, 2020) and the Thursday Recon-IC834 Workgroup Series (through July 30, 2020)
Once the host approves your registration, you will receive a confirmation email with instructions for joining the session.
 - Subsequently, registration information for both the Tuesday Issuer Technical Workgroup call will be sent in our daily CMS Issuer Communication blast messages.

Note: CMS will continue to keep call participants informed of any further changes of the Cisco Web-EX platform.

March 2020

Sun	Mon	Tues	Wed	Thurs	Fri	Sat
01	02	03 CMS Issuer Technical Workgroup 3:00pm-4:30	04	05	06	07
08	09 CCIIO Enrollment Webinar(Policy Focus) 12:00pm-1:00pm	10 CMS Issuer Technical Workgroup 3:00pm-4:30	11	12 Data Recon & Inbound 834/BAA Workgroup 12:30- 1:30pm	13	14
15	16	17 CMS Issuer Technical Workgroup 3:00pm-4:30	18	19 Data Recon & Inbound 834/BAA Workgroup 12:30-1:30pm	20	21
22	23 CCIIO Enrollment Webinar(Policy Focus) 12:00pm-1:00pm	24 CMS Issuer Technical Workgroup 3:00pm-4:30	25	26 Data Recon & Inbound 834/BAA Workgroup 12:30- 1:30pm	27	28
29	30	31 CMS Issuer Technical Workgroup 3:00pm-4:30	01 April	02 Data Recon & Inbound 834/BAA Workgroup 12:30- 1:30pm	03	

CMS ISSUER COMMUNICATIONS

CMS uses a mass communications tool to distribute notices and general communications to issuers regarding topics such as *Enrollment Pre-Audit files; Enrollment Reconciliation Files; Open Enrollment Activities; IC834 Activities (Specifically Processing schedules, delays in processing or reporting), other alerts AND*

Daily UAT status

If you are not receiving these email communications:

1. To immediately see what message was blasted out, **you can access the daily CMS Issuer Communications on CMSzONE at:** <https://zone.cms.gov/community/issuer-community-private>
2. Contact the CMS_Issuer_Communications@cms.hhs.gov and confirm if you are listed as a point of contact (POC) for these communications for your organization.
 - » If you are not listed as a POC please see page 2 of this deck for instructions on being added. If you are a POC please proceed to the next step.
3. CMS recommends the applicable IP addresses (found at the urls below) are whitelisted. CMS recommends users work with their organization's IT support staff to whitelist both Salesforce's IP address as well as the relevant government ranges. More details are provided at the following resources*:

https://help.salesforce.com/articleView?id=000199327&language=en_US&type=1

https://help.salesforce.com/apex/HTViewSolution?urlname=What-are-the-Salesforce-IP-Addresses-to-whitelist&language=en_US

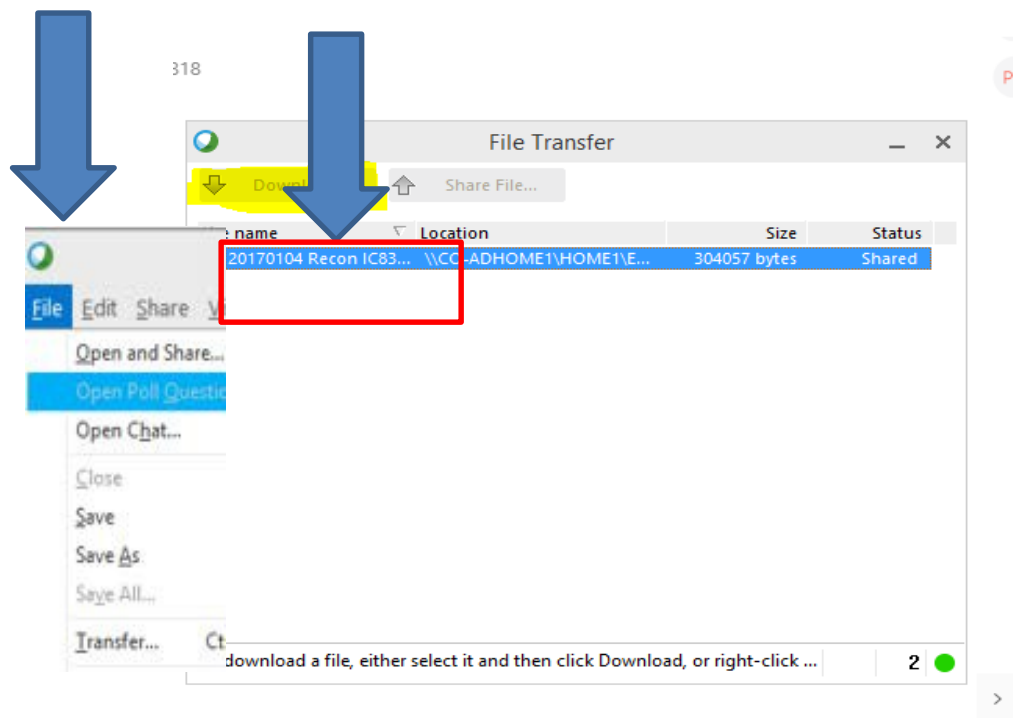
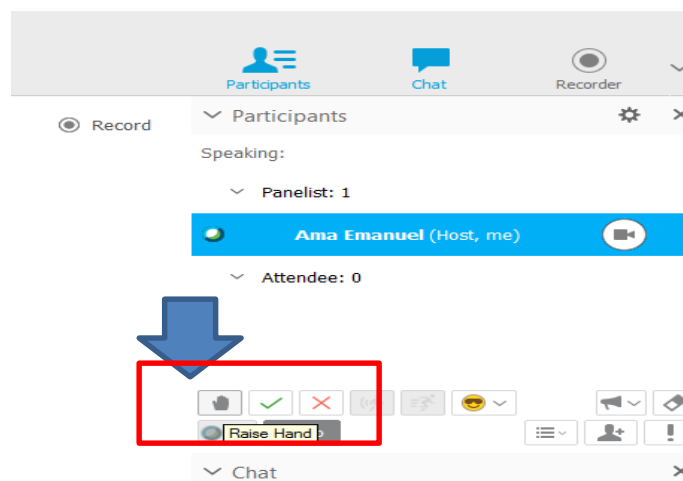
* There are some Issuers/DE Partners that may still experiencing problems after whitelisting. This is a known issue and we will report out once the issue is resolved.

If you have any further questions please contact the CMS FEPS Help Desk at: CMS_Issuer_communication@cms.hhs.gov

Asking a Question/Downloading the Meeting pdf slides in the Web-Ex Platform

To ask a question, please select the raised hand icon at the start of Q&A session. It is the icon at the bottom of the participant list. Please deselect by clicking on the hand again. This would apply whether you no longer have a verbal question or once our question is answered.

To download the pdf version of today's deck, open the "File Transfer" box on your screen. If not, please select "File, then "Transfer" and "Download" (as captured below.) The "Download" button will be grey.



Access to CMSzONE & the Private Issuer Community

User Access Quick Guide

A copy of the comprehensive User Access Quick Guide is posted on zONE @:

<https://zone.cms.gov/document/zone-access-troubleshooting> (pre-log in required to access zONE links)

Three audiences:

1. **New Users** (new to zONE & EIDM)
2. **Existing EIDM Users** (new user to zONE)
3. **Existing zONE Users** (unable to log-in since the EIDM transition)

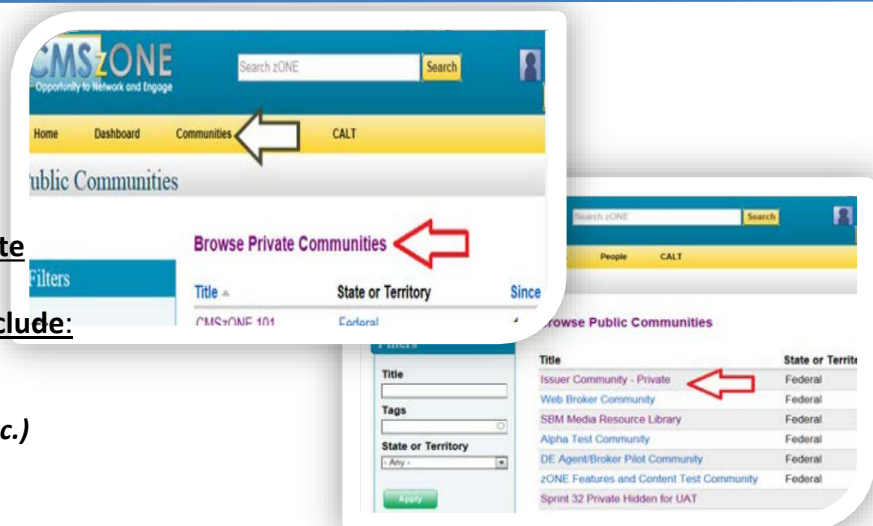
EIDM Registration Process: (Pre-requisite to CMSzONE Access)

1. Register for access at EIDM Enterprise Portal Here: <https://portal.cms.gov/>
2. Log in with your EIDM credentials and click on “Request Access Now”
3. Click on “Request New Access” and choose CMSzONE

CMSzONE Private Issuer Community

Access: (After being granted EIDM access)

1. Log into zONE; click on the **Communities tab**
2. Click **Browse Private Communities** Click **Issuer Community – Private**
3. Click **Join Community**
4. Provide explanation of why you need access to this community; **Include:**
5.
 - name and contact information
 - issuer POC contacts
 - specific work for issuer (i.e. fill out QHP templates, processing 834's, etc.)



Troubleshooting access to CMSzONE

REGISTRATION, PASSWORD RESETS, & FORGOTTEN PASSWORDS

- **New Users:** Registration & community approval are typically completed in 1-3 business days, if not sooner.

If you are unable to access zONE, and/or the issuer community after 3 business days you may email a follow up request to the helpdesk & the issuer communications team (addresses below) for an update. Please include any provided ticket numbers & applicable context for reference.

- **Existing zONE Users :** Password resets are also typically completed in 1-3 business days, if not sooner.

If your request is not completed after 3 business days, you may email a follow up request to the helpdesk & the issuer communications team (addresses below) for an update. Please include any provided ticket numbers & applicable context for reference.

ALL OTHER CMSzONE ACCESS ISSUES

Prerequisite Details

- **Capture screenshots of any errors received so our teams can troubleshoot**

☐ PC = Ctrl + PrtScn to capture, Ctrl + V to paste / Mac = Command+Shift+4 to capture & send to a desktop file

Email

- **Provide screenshots and applicable prerequisite information above, in an email body, as follows:**

- ❖ With the subject line: **“zONE Access Issues”**
- ❖ To: CMS_FEPS@cms.hhs.gov
- ❖ Cc: or Bcc: CMS_Issuer_Communications@cms.hhs.gov

Reminder: Supported Browser Versions

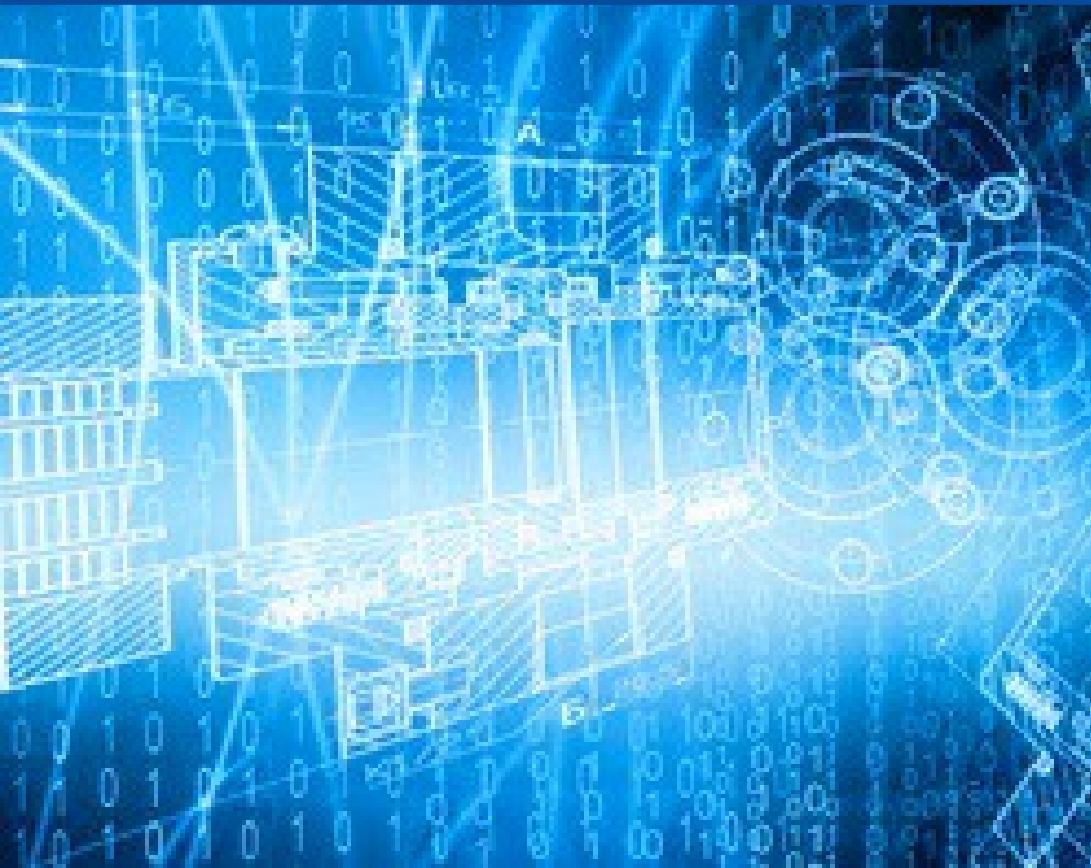
- ✓ Internet Explorer Version 9.0
- ✓ Internet Explore Version 10.0
- ✓ Google Chrome
- ✓ Safari

Follow-Up

- **If the issue is not resolved within 3 business days, you may email a follow up request:**

- ❖ With the subject line: **“zONE Access Issues : 3+day follow up”**
- ❖ To: CMS_FEPS@cms.hhs.gov & CMS_Issuer_Communications@cms.hhs.gov
- ❖ Include (where possible) explanation message, screenshots, ticket #(s) received, and number of days outstanding

Housekeeping: Enrollment Pre-Audit & Reconciliation



Enrollment Pre-Audit & Reconciliation

Tuesday, March 24, 2020

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Housekeeping: Pre-Audit & Reconciliation

- **Prior Plan Years (2014-2019)**
 - The next set of 1095-A Consumer-Initiated Dispute Update (1095Ax) Files are scheduled for distribution to Issuers on Wednesday, April 1st
- **Plan Year 2016**
 - An incremental 2016 FFM extract is scheduled for Monday, April 13th at 6PM EDT
 - Incremental 2016 Pre-Audit (ISIPA6) Files based upon that extract are scheduled for delivery to Issuers on Wednesday, April 15th
- **Plan Year 2017**
 - Next month's 2017 FFM extract is scheduled for Wednesday, April 15th at 6PM EDT
 - Incremental 2017 Pre-Audit (ISIPA7) Files based upon that extract are scheduled for delivery to Issuers on Monday, April 20th
- **Plan Year 2018**
 - Next month's 2018 FFM extract is scheduled for Wednesday, April 15th at 6PM EDT
 - Comprehensive 2018 Pre-Audit (AUD8) Files based upon that extract are scheduled for delivery to Issuers on Monday, April 20th

Housekeeping: Pre-Audit & Reconciliation

- **Plan Year 2019**

- The RCNI9 submission deadline for March's Run 16 was last Thursday, March 19th at 3PM EDT
 - We received files from **100%** of 2019 FFM Issuers – *THANK YOU!*
 - RCNO9 Files for Run 16 are being distributed to Issuers today, Tuesday, March 24th
 - **Reminder:** *Run 16 was the final scheduled reconciliation cycle for PY2019!*
- Next month's 2019 FFM extract is scheduled for Wednesday, April 15th at 6PM EDT
- Comprehensive 2019 Pre-Audit (AUD9) Files based upon that extract are scheduled for delivery to Issuers on Friday, April 17th

Housekeeping: Pre-Audit & Reconciliation

- **Plan Year 2020**

- The RCNIO submission deadline for March's Run 4 is **this Thursday, March 26th at 3PM EST**
 - As of 2PM today, just over **70%** of 2020 FFM Issuers have successfully submitted for Run 4
 - RCNO0 Files will be distributed to participating Issuers on Tuesday, March 31st
- Next month's 2020 FFM extract is scheduled for Wednesday, April 15th at 6PM EDT
- Comprehensive 2020 Pre-Audit (AUD0) Files based upon that extract are scheduled for delivery to Issuers on Friday, April 17th

ER&R Topics

✓ **Topics**

- ✓ Enrollment Dispute Form Version 13
- ✓ Update: 2019 Reinstatements After BAR
- ✓ Reminder: Prior Year and Account Manager Approval for 2019 Policies
- ✓ zONE Publications

✓ **Q&A**

March 24, 2020

Enrollment Dispute Form Version 13

- ER&R is developing v13 of the Enrollment Dispute Form to allow issuers to include Term and Cancel Reason Codes on applicable disputes.
- The implementation date for Enrollment Dispute Form v13 is currently planned for June. ER&R will provide issuers with an exact implementation date as far in advance as possible.
- When v13 is implemented, ER&R will no longer accept v12. Issuers should begin making any necessary changes on their end to support the use of v13.
- The Excel add-ins for Enrollment Dispute Form v12 will not be compatible with v13.
 - ER&R will release complete v13-compatible add-ins prior to implementation.
 - Once implementation of v13 is complete, issuers should discontinue using the v12 add-ins, which will be retired.

Update: 2019 Reinstatements After BAR

- CMS has identified additional consumers whose 2019 health plan enrollments were reinstated through Reconciliation or disputes after BAR ended but who are not enrolled in a 2020 health plan.
- CMS tagged each consumer's Marketplace account with an SEP to allow them to enroll in 2020 coverage. Enrollees who want to access the SEP must contact the Marketplace Call Center (**1-800-318-2596**).
 - Issuers with enrollees who enroll under the SEP will get an 834 transaction with a prospective date and potentially a HICS case to make the enrollment retroactive to January 1, 2020, at the enrollee's option.
- ER&R will send a third EFT file listing the additional qualifying 2019 reinstatements to impacted issuers on **Wednesday, March 25**, along with an email communication including the filename.
 - The subject of the email will be *2019 Reinstatement After BAR File Guidance Update*.
 - The EFT file will include policies reinstated both through Reconciliation and disputes and will be transmitted using the IOUTRC function code.

NOTE: Issuers can locate file specifications for the IOUTRC format on zONE at <https://zone.cms.gov/document/ioutrc-file-layout>.
- ER&R previously sent EFT files to impacted issuers on **January 27** and **February 25**.

Update: 2019 Reinstatements After BAR (Cont.)

- Issuers are encouraged to complete outreach and advise the consumers to contact the Marketplace Call Center to enroll in a 2020 plan.
- CMS recommends including the following messaging in any outreach to consumers listed on the **Wednesday, March 25**, EFT file:
 - Due to a processing error, the Health Insurance Marketplace does not have a complete application record for your 2020 healthcare plan.
 - You **MUST** complete a new 2020 Marketplace application to get 2020 coverage.
 - Call the Marketplace **by May 25** to complete a new 2020 application. You are eligible to enroll through a Special Enrollment Period, but you can only access this Special Enrollment Period by calling the Health Insurance Marketplace at **1-800-318-2596**.
 - If you want to stay in your 2019 plan, select [insert plan name and plan ID]. You can select a coverage start date in the future or a start date retroactive to January 1, 2020.
 - To complete your 2020 application quicker and easier, gather income information for everyone in your household before you call. The Marketplace needs this information to make sure you receive the correct eligibility and cost information.
 - For more information on applying, visit www.healthcare.gov/apply-and-enroll/get-ready-to-apply/.

Reminder: Prior Year and Account Manager Approval for 2019 Policies

- 2019 disputes are considered prior year starting April 1, 2020.
- When submitting disputes for 2019 records after April 1, 2020, issuers should:
 - Use the correct dispute type when changing end dates.
 - Refrain from using dispute types that are reserved for current year records.
 - Consider using the FFM Exchange Assigned Policy ID and Segment ID fields instead of the FFM Internal Record Inventory Number field.
- Starting on May 1, 2020, issuers will need to send completed Issuer Prior Year Approval Request Forms to their Account Managers to submit 2019 disputes to ER&R.
 - For more information regarding requesting Account Manager approval for prior year disputes or to download the request form, issuers should access the [poryeardisputeapprovalmasterguidance.pptx](https://zone.cms.gov/document/enrollment-resolution-and-reconciliation) and [issuerprioryearapprovalrequest_final_5.28.2019.xlsx](https://zone.cms.gov/document/enrollment-resolution-and-reconciliation) files on zONE at <https://zone.cms.gov/document/enrollment-resolution-and-reconciliation>.

zONE Publications

- The new FFE Disposition and Detail Code List v26 is now available on zONE. This updated version contains new and updated detail codes for Payment Disputes and is available in both Word and Excel formats.
- CMS has removed several outdated documents and consolidated several existing UIR issuer letters into the new UIE Issuer Letter and Outreach Samples zip file. This new file contains letters related to UIEs and manual payments from 2016–2019.
- Access the updated documentation on CMS zONE at <https://zone.cms.gov/document/enrollment-resolution-and-reconciliation>.

Enhanced Direct Enrollment (EDE) Updates: Compliance Team



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EDE Business Requirements Audit Toolkit Update

- CMS released updated baseline Eligibility Results Toolkits (Phase 1, 2, and 3) on 3/18/20 (e.g. Auditor User Guide tab correction [1N], updated 1.D, 2.B, 3.E & 3.C)
- Prospective EDE Entities (including Entities considering phase changes) that intend to submit EDE audits this year and their Auditors must use the updated versions found in the Business Requirements Audit Baseline toolkit zip folder (named “2020 Business Report Template and Toolkits”) available at the following link on CMS zONE: <https://zone.cms.gov/document/business-audit>
- Entities and Auditors that did not use the prior version of the toolkits can disregard this update, and simply start this portion of the audit using the versions available on CMS zONE
- For Auditors that used the prior versions, when transferring findings to the updated toolkits, they must first review the updated toolkits to assess if they need to re-review requirements before transferring their findings

Updated EDE Audit Materials

- CMS released an updated baseline Business Reports Template on 3/20/20.
 - Prospective EDE Entities and Auditors must use this version, which can be found in the “2020 Business Report Template and Toolkits,” available at the following link on CMS zONE: <https://zone.cms.gov/document/business-audit>
- CMS released an updated EDE UI Eligibility Technical Assistance Credentials Form on 3/23/20 (i.e., updated to include mini audit access credentials)
 - Approved and Prospective EDE Entities must use the updated version found in the Eligibility Information available at the following link on CMS zONE: <https://zone.cms.gov/document/eligibility-information>
 - Please refer to the form for more detailed instructions
- CMS intends to release an updated baseline Communications Toolkit soon
- If you have any questions about this request, please contact directenrollment@cms.hhs.gov

Updated EDE Auditor Guidelines Now Available

- The updated *Third-party Auditor Operational Readiness Reviews for the Enhanced Direct Enrollment Pathway and Related Oversight Requirements*, can be found here: <https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Guidelines-for-Third-Party-Auditors-EDE-PY20PY21-Year3.pdf>
- It is important for prospective and existing EDE Entities and Auditors to review the entire document as updates have been made throughout.
- The following sections included notable updates (compared to the Guidelines from PY2019/2020):
 - Section I. Summary
 - Section IV. Enhanced Direct Enrollment Critical Decision Factors
 - Section VI. Business Audit Requirements and Scope
 - Section VI.B. Application Technical Assistance
 - Section VIII. Required Auditor and EDE Entity Training
 - Section X.C. Completeness Requirements
 - Reminders: Section II. Background & Section X.A. Pre-Audit Notification to CMS

Direct Enrollment (DE) Updates: Enrollment Team



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Reminder and Update for EDE Partners: New Update Policy API – Cancel/Termination Functionality

- EDE Partners, as a reminder, CMS is deploying a new Update Policy API
 - The API has already been deployed to UAT0 and is available for testing
 - EDE Partners are encouraged to test the API as soon as possible, and to report any potential defects to both CMS_FEPS@cms.hhs.gov and CMS.FFM.EDESupport@accenturefederal.com
 - The API is expected to be available for production use beginning on 3/20/2020
 - EDE Partners are required to integrate with the API and provide their users with UI cancellation/termination functionality by 6/15/2020
 - » CMS has created CR #30, which is now reflected on the EDE CMS Initiated CR Tracker available on zONE at <https://zone.cms.gov//document/enhanced-direct-enrollment-edo-documents-and-materials>
 - The Update Policy API Specs are available on zONE at <https://zone.cms.gov//document/enhanced-direct-enrollment-edo-documents-and-materials>
 - The new Hub endpoints for the Update Policy API are below:
 - UAT0: <https://impl.hub.cms.gov/ede-ies/v1/policies>
 - Production: <https://hub.cms.gov/ede-ies/v1/policies>

Reminder and Update for EDE Partners: New Update Policy API – Cancel/Termination Functionality

- **General Business Rules:**
 - EDE Partners will need to use the Get Enrollment API to determine which policies exist and subsequently which can be cancelled/terminated
 - The initial rollout of the cancel/termination functionality in this API will mirror what is allowed in My Account on HealthCare.gov (additional enhancements to cancel/termination functionality are on the long-term CMS roadmap):
 - If cancelling/terminating health coverage, the API request will only allow for cancellation/termination of all active health policies at one time
 - » In other words, if multiple active health policies exist, a user will not be able to cancel/terminate an individual health policy; all health policies will need to be cancelled/terminated at the same time
 - If cancelling/terminating health or dental coverage, only the entire health or dental policy can be cancelled
 - » In other words, the initial implementation of the API will not allow for member-level cancellation/termination of coverage
 - The API will allow for cancellation/termination of an individual dental policy, when multiple active health and dental policies exist
 - » The API will not however allow for dental-only coverage
 - In other words, if multiple health and dental policies exist, the health coverage cannot be cancelled/terminated without also cancelling/terminating the dental coverage

Reminder and Update for EDE Partners: New Update Policy API – Cancel/Termination Functionality

- **General Business Rules Continued:**
 - The FFM will derive whether the action is a cancellation or a termination based on the actionEffectiveDate provided in the Update Policy API request, however EDE Partners should be aware of the following:
 - Cancellation of a policy can only occur up until the coverage start date of the policy; the actionEffectiveDate for a cancellation will need to be either the coverage start date, or the day prior to the coverage start date
 - Termination of a policy can occur after the coverage start date, but the termination cannot be applied retroactively; the actionEffectiveDate for a termination will need to be either the date the termination is initiated or a future date
 - Cancellation of a Pended Plan Selection (PPS) can occur at any point while the PPS is still active; the actionEffectiveDate for a cancellation will need to be either the coverage start date, or the day prior to the coverage start date
 - **Update:** In the event that a consumer has a future termination date for their dental coverage, and the consumer requests to cancel or terminate their health coverage for an earlier date, the EDE Partner must ask the consumer within their UI whether they would also like to cancel or terminate their dental coverage for the earlier date
 - The Update Policy API will allow the dental termination date to be shifted to an earlier date, as long as the requested cancellation/termination date doesn't violate any of the previously mentioned business rules
 - Example: On 12/15, a consumer enrolls in both a health and dental policy, effective 1/1
 - » On 3/1, the consumer uses an EDE site to terminate their dental policy only, effective 4/30
 - » On 3/15, the consumer uses an EDE site to terminate their health policy, effective 3/31
 - At this time, the consumer must be given the option to also terminate their dental policy, effective 3/31
 - Issuers should take note of the exception on the next slide

Reminder and Update for EDE Partners: New Update Policy API – Cancel/Termination Functionality

- **General Business Rules Continued:**
 - In situations where a consumer or a consumer's agent/broker is working with an EDE issuer, and the consumer has a PPS or policy that is not owned by the EDE issuer, the EDE issuer is permitted to either:
 - Display available details for the PPS or policy in the issuer's UI, and allow the user cancel/terminate the PPS or policy
 - » Note, issuers may only receive limited details for the PPS or policy in the Get Enrollment response
 - Or alternatively, display messaging to the user indicating that a PPS or policy exists that is owned by a different issuer, and that the user can go to HealthCare.gov or the FFE Call Center to cancel/terminate coverage
 - Classic DE users will continue to cancel/terminate through My Account on HealthCare.gov or via the FFM Call Center

Update for EDE Partners: BAR Opt-Out Functionality Coming Soon to the Update Policy API

- **Background:**
 - The intent of the BAR opt-out functionality is to allow consumers to specifically opt-out of auto re-enrollment for next year's coverage, effectively ending their coverage at the end of the current year
 - BAR opt-out is displayed for applications with at least 1 BAR-eligible policy (active policy, not cancelled or terminated)
 - **Update:** Note that consumers cannot initiate BAR opt-out on Pended Plan Selections
 - This functionality is dynamically displayed between a configurable date range, normally between early October and the end of the year (~10/6-12/31)
 - If a consumer is opting out of BAR, they currently need to opt out of BAR for all policies tied to the application; policy-level and/or member-level BAR opt-out is not currently supported
- **EDE Partner implementation of BAR opt-out functionality:**
 - **Update:** EDE entities will be required to integrate with and expose BAR opt-out functionality to their users by 8/15/2020
 - CMS-initiated Change Request (CR) #40 is available on zONE at <https://zone.cms.gov//document/enhanced-direct-enrollment-edo-documents-and-materials>, and outlines the BAR opt-out integration requirements
 - BAR opt-out will be an additional action within the Update Policy API
 - **Update:** UATO deployment of BAR opt-out functionality is expected to occur on April 3rd, 2020
 - EDE entities are encouraged to wait until April 13th to begin testing, which will allow CMS time to complete initial shake-out testing in UATO
 - CMS will set the BAR opt-out reference dates in UATO to 1/1/2020-12/31/2020, which will allow EDE entities to test BAR opt-out functionality throughout the year
 - Production deployment of BAR opt-out functionality is expected to occur on May 1st, 2020
 - Again, EDE Partners will not be required to integrate with BAR until August 15th, 2020

Update for EDE Partners: BAR Opt-Out Functionality Coming Soon to the Update Policy API

- When integrating with the BAR opt-out functionality available via the Update Policy API, EDE entities should familiarize themselves with the business rules outlined below:
 - EDE entities will need to use the Get Enrollment API to determine which active policies exist and subsequently which policies are eligible for BAR opt-out
 - EDE entities should note that Pended Plan Selections are not eligible for BAR opt-out
 - EDE entities will need to use the System Reference Data API to determine when BAR opt-out should be displayed for eligible consumers, based on the configurable BAR opt-out period returned in the System Reference Data API response
 - If a consumer is opting out of BAR, note that the initial Update Policy BAR opt-out functionality will only allow the consumer to opt out of BAR for all existing policies tied to the application
 - This mirrors the existing HealthCare.gov My Account BAR opt-out functionality
 - » In other words, policy-level and member-level BAR opt-outs are not currently supported
 - In situations where a consumer or a consumer's agent/broker is working with an EDE issuer, and the consumer has a policy that is eligible for BAR opt-out that is not owned by the EDE issuer, the EDE issuer is permitted to either:
 - Display available details for the policy in the issuer's UI, and allow the user to opt out of BAR for the policy
 - » Note, EDE issuers may only receive limited details for the policy in the Get Enrollment response
 - Or alternatively, display messaging to the user indicating that a BAR-eligible policy exists that is owned by a different issuer, and that the user can go to HealthCare.gov or the FFE Call Center to opt out of BAR
 - The table on the next slide also outlines when BAR opt-out would be displayed in the UI, along with the outcome of the BAR opt-out

EDE Partners: BAR Opt-Out Functionality Coming Soon to the Update Policy API – BAR Opt-Out Scenarios

Scenario Description	Display BAR Opt-Out?	Result of BAR Opt-Out
Application with: No policies tied to it	No	N/A
Application with: No active policies tied to it (i.e. cancelled/terminated enrollments only)	No	N/A
Application with: Active policies tied to it, but outside of configurable BAR opt-out window	No	N/A
Application with: - Active policies tied to it, and inside of configurable BAR opt-out window - BAR has not occurred	Yes	- Current year policy is terminated with a 12/31 termination date (EOY indicator = true) - BAR will not be processed
Application with: - Active policies tied to it, and inside of configurable BAR opt-out window - BAR has occurred	Yes	- Current year policy is terminated with a 12/31 termination date (EOY indicator = true) - Future year BAR policy is cancelled

EDE Partners: EDE API Companion Guide Version 5.1

- EDE Partners, please be advised that a new version of the EDE API Companion Guide has been posted to zONE at <https://zone.cms.gov//document/enhanced-direct-enrollment-edo-documents-and-materials>
 - Version 5.1 of the EDE API Companion Guide includes the following updates:
 - Section 3 has been added to outline basic API usage information, and includes the following new subsections:
 - » Section 3.1 – Added to outline API onboarding requirements
 - » Section 3.2 – Added to outline the current API endpoints and other related connectivity information
 - » Section 3.3 – Added to outline certain API header requirements
 - Subsection 3.3.1 – Role ID
 - Subsection 3.3.2 – User ID
 - Subsection 3.3.3. – Role ID and User ID for API Calls Made on Behalf of the EDE Entity
 - » Section 3.4 – API Requests that Require a Prerequisite Store Permission or Store ID Proofing API Requests
 - Subsection 6.1.1 – Updated to clarify that EDE Partners using the FFE’s RIDP and FARS services for the consumer pathway will need to store consumer demographic data for future Person Search API requests
 - Subsection 6.1.1.1 – Added agent/broker pathway Person Search attestation requirements which have been outlined previously on this call
 - Subsection 15.2.1 – Updated to clarify that APTC cannot be applied towards catastrophic coverage
 - Subsection 17.2 – Updated to include cancellation/termination functionality integration requirements that have been previously discussed on this call
 - Subsection 17.3 – Added to outline BAR opt-out integration requirements

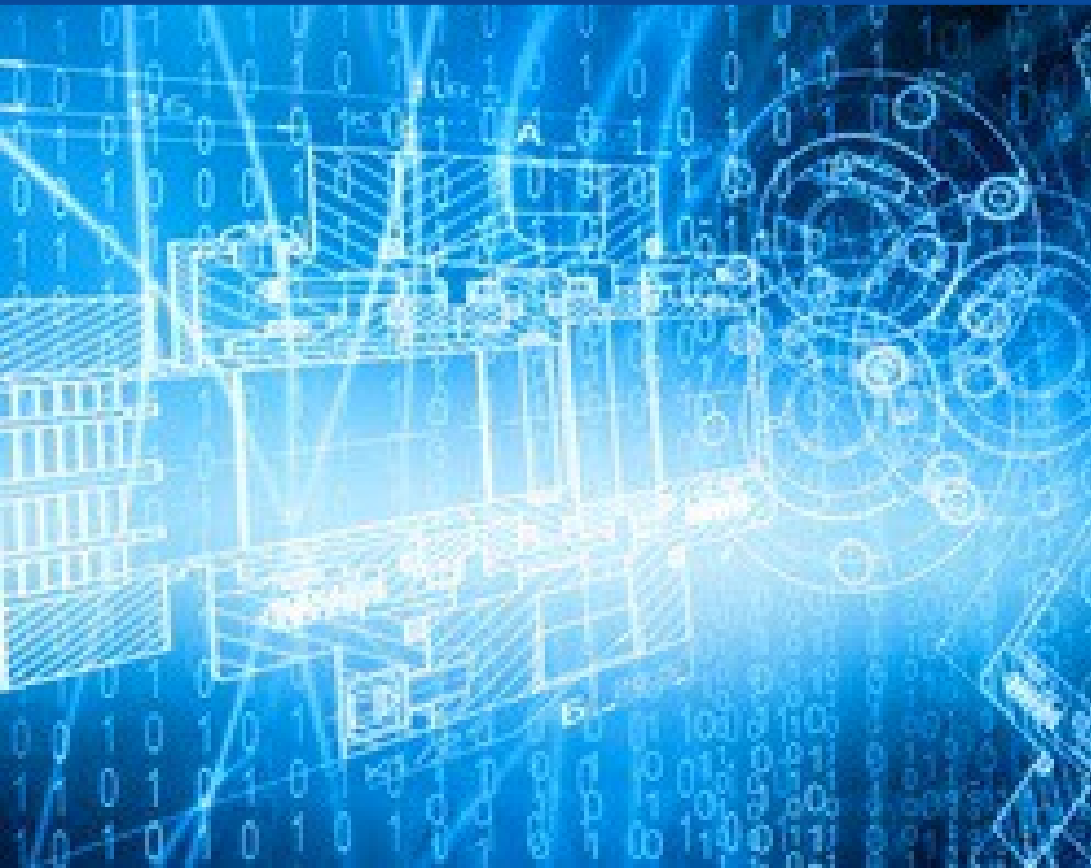
EDE Partners: RIDP/FARS Endpoints Changing and New Error Responses

- EDE Partners, please be advised that the Data Services Hub will be deploying new endpoints for the RIDP and FARS services
 - The new endpoints will be deployed to UAT0 on 5/18/2020 and then to production on 6/14/2020
 - The current RIDP and FARS endpoints are below:
 - Current RIDP UAT0 Endpoint: <https://impl.hub.cms.gov/RIDPServiceDE>
 - Current RIDP PROD Endpoint: <https://hub.cms.gov/RIDPServiceDE>
 - Current FARS UAT0 Endpoint: <https://impl.hub.cms.gov/FARSServiceDEV3>
 - Current FARS PROD Endpoint: <https://hub.cms.gov/FARSServiceDEV3>
 - The new RIDP and FARS endpoints will be:
 - New RIDP UAT0 Endpoint (5/18): <https://impl.hub.cms.gov/RIDPService>
 - New RIDP PROD Endpoint (6/14): <https://hub.cms.gov/RIDPService>
 - New FARS UAT0 Endpoint (5/18): <https://impl.hub.cms.gov/FARSService>
 - New FARS PROD Endpoint (6/14): <https://hub.cms.gov/FARSService>
 - The date in which the current RIDP and FARS endpoints will be decommissioned has yet to be determined
 - A follow-up will be provided when the date has been determined
 - EDE Partners should also be aware of the following two changes that will occur for the new versions of the RIDP and FARS endpoints:
 - When date of birth is not provided in an API request for the current endpoints, the error that is returned to the EDE Partner is an HE027000 with an error message of “Schema Validation Failure”
 - » When date of birth is not provided in an API request for the new endpoints, the error that will be returned to the EDE Partner is an HE200026 with an error message of “Date of Birth required to access consumer, have consumer resubmit with DOB”
 - When a LevelOfProofingCode other than LevelTwo is provided in an API request for the current endpoints, the error that is returned to the EDE Partner is an HE027000 with an error message of “Schema Validation Failure”
 - » When a LevelOfProofingCode other than LevelTwo is provided in an API request for the new endpoints, the error that will be returned to the EDE Partners is an HE200040 with an error message of “Input validation error, verify data validation rules”

Q&A



CMS Issuer Technical Workgroup Call Appendix



To view the full Appendix, please visit
CMSzONE at the following url:
https://zone.cms.gov/system/files/documents/issuer_technical_slides_appendix_a_2018_3_20_v1.pdf