

Federal Facilitated Exchanges (FfEs) and State-Based Exchanges on the Federal Platform (SBE-FPs)

Enrollment Processing: Overview and Lessons Learned for IC834s and Reconciliation from 2019 and Enhancements for 2020

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**Qualified Health Plan (QHP)
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Agenda

- Enrollment Reconciliation
 - Reconciling Agent/Broker Information
 - Cancellation and Termination Reasons
- Coming Soon: Enrollment User Interface (EUI), a New Tool for Issuers to Access Real-Time Enrollment Data!
- Your Input: Issuer Thoughts, Suggestions, Observations

Methods of Enrollment Data Alignment



Inbound 834 (IC834) transactions make basic updates to the status of an enrollment such as effectuation, reinstatement, cancellation, termination, or maintenance; IC834s have very strict matching requirements

Monthly Enrollment Reconciliation has greater flexibility to match records using analytic processing, and the capability to update more fields on each enrollment record

ER&R Contractor Dispute Corrections uses both manual and automated components to update enrollment data and may involve direct contact with Issuers

Reconciling Agent/Broker Information

- As a reminder, Enrollment Reconciliation is the proper method for Issuers to ensure the Exchange has the correct Agent/Broker attribution for their enrollments
- This is necessary so that proper attribution is reflected on any Exchange enrollment channel and carries forward to any future enrollment actions including auto-renewal for the following plan year
- Issuers are expected to send the proper National Producer Number (NPN) and name of the Agent/Broker on record for each enrollment record on the RCNI File to the Exchange
 - Records sent with only an NPN or Agent/Broker name but not both will not be updated

Reconciling Agent/Broker Information (continued)

- If the information submitted by the Issuer is different from the information currently stored on the Federal Platform for that enrollment it will be changed on the Federal Platform, with the following caveats:
 - The record match must be even-sided (i.e. the same number of records for the enrollment group on both the Issuer and Federal Platform side)
 - There is a current limitation that only one Agent/Broker can be attributed to a policy, as defined by Exchange-Assigned Policy ID; sending different Agent/Broker information on different records for the same policy will prohibit any update to that information via automated reconciliation
 - It is expected that recon will support the update of Agent/Broker at the segment level later in 2020

Reconciling Agent/Broker Information (continued)

- **Please Note:** Agent/Broker information cannot be removed entirely (i.e. changing from an Agent/Broker attribution on a policy to no Agent/Broker) through automated reconciliation; removal of this information must be done via an ER&R Enrollment Dispute
- *Issuers should not attempt to circumvent this requirement by submitting dummy agent/broker information on the RCNI file*
- A high number of records are still being submitted on Issuer RCNI Files with a dummy NPN – usually a series of 9s – and an Agent/Broker name that indicated an internal Issuer group or that makes it clear that it is not an actual Agent/Broker
- Agent/Broker information should **always** stay on the policy/app unless the consumer is directing the Issuer to remove the Agent/Broker or change the attribution to another Agent/Broker because they have an updated Broker of Record letter
- In addition to constituting an improper removal of/change to data from a Federal system, the removal of Agent/Broker information through automated reconciliation makes it difficult for CMS to run accurate data analysis and conduct program integrity efforts

2020 Reconciliation Focus: Cancellation and Termination Reasons

- Late in 2019, CMS added Cancellation and Termination Reasons to the Enrollment Pre-Audit File and the Enrollment Reconciliation process
- These fields are included to allow Issuers to reconcile the reasons for which they have cancelled or terminated a policy in their system
 - Currently an Issuer can only provide their reason for cancelling or terminating a policy if it is submitted via an Inbound 834 (IC834) transaction
- Reconciliation of reason codes is an important program integrity and audit requirement for the Federal Platform, and will also support verification of Special Enrollment Periods requested for loss of Minimum Essential Coverage (MEC)

2020 Reconciliation Focus: Cancellation and Termination Reasons (continued)

- In cases where an issuer is applying a cancellation or termination via reconciliation to a policy that is not already cancelled or has a different termination date in the FFE, the issuer supplied reason code will also be applied
 - The reason codes used in reconciliation will align to the Additional Maintenance Reason Codes (AMRCs) used to communicate these reasons on EDI 834 files
- Where the cancellation and termination already has been applied on the Federal Platform, the Issuer-supplied reason code *may* update the existing reason code on the Federal Platform per business rules
 - The exact business rules for accepting new reason codes are published in the Enrollment Reconciliation Education Suite available on zONE

2020 Reconciliation Focus: Cancellation and Termination Reasons (continued)

- Currently, CMS is analyzing the reason codes submitted by Issuers on the RCNI Files to assess Issuer preparedness for full implementation of reason code updates via reconciliation
 - CMS is also performing detailed analysis for Issuers that are having difficulties providing the reason codes on the RCNI File
 - Each month e-mails are sent to these organizations with details on the issues found regarding reason code submission and recommendations on how to correct
 - Issuers should review all Cancellation Reasons and Termination Reasons that receive a field-level flag of **U**, as that indicates the value submitted (or left blank) is considered invalid
- CMS is planning to move to the next phase of implementation during **Fall 2020** – in this phase the Federal Platform will be updated with the reason codes sent on the RCNI File per the established business rules
 - Issuers will have cancellations and terminations *suppressed* at that time if reason codes are not properly populated on the RCNI File
- If your team needs technical assistance regarding proper submission of reason codes in recon, please contact the Recon Issuer Support Team at recon_issuer_support@bah.com

Coming Soon: The Enrollment User Interface (EUI)!

What You Told Us: The issuer community needs access to real-time FFE Marketplace data. However, most issuers are only able to actively utilize the FFE Enrollment “**Pre-Audit File**” to view FFE enrollment information, which is not current.

What We Did About It: In response, we have built a new tool for issuers—the “**Enrollment User Interface**” (EUI) which is expected to be made available in production soon.

The screenshot displays the Cognosante Enrollment UI. At the top, it says "cognosante - Enrollment UI". Below that is the "Enrollment Search" section with a search bar containing "10413401" and buttons for "Search" and "Reset". Below the search bar, it says "Found 7 Results". The main content area is divided into several sections: "Identifiers" with fields for "Range-Assigned Member ID", "v-Assigned Member ID", and "ID"; "Application" with fields for "Coverage Period Status" (showing "NOT CANCELLED" and "FFM ONLINE") and "Origin Code"; and "Policy Financials" with fields for "Total Premium Amount", "Total Responsibility Amount", "Applied APTC Amount", and "CSR Amount". A table at the bottom lists search results with columns for "View Details", "HIOS ID", "Application ID", "Exchange Policy ID", "Name", "Birth Date", "Exchange Subscriber ID", and "Last Maintained".

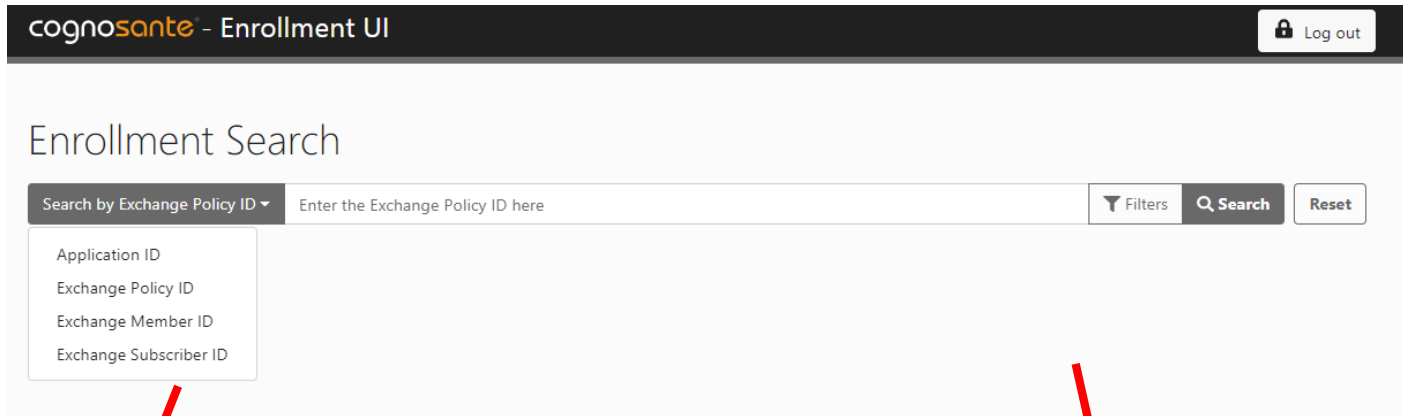
Enrollment UI (EUI) Aims to:

- Provide issuers access to **real-time FFE data** via a safe and secure user interface (UI).
- Provide a real-time enrollment resource to assist with **data reconciliation and casework**.
- Reduce operational costs for issuers, decrease Health Insurance Casework System (HICS) case work, and help **quickly and accurately resolve enrollment and payment issues** by enabling teams to view the current “real-time” snapshot of their respective consumer enrollment data.

What Will EUI Help You Do?

- Search for and look up the **real-time enrollment data** for any of your parent issuer organization's covered members
- For any member, quickly survey the key identifiers (Application ID, Exchange Policy ID, more), view the basic information (coverage periods, effectuation status) and **drill into specific details** (coverage periods, effectuation status and much more.)
- Pull up data that helps your team **conduct troubleshooting** and resolve your top data matching issues
- Compare notes with your **Unmatched I Record ("UIR") report** as you drill into data discrepancies
- Quickly determine whether the data scenarios described in **HICS casework** work still exist or have changed

EUI Example: 4 Ways to Search



The screenshot shows the 'cognosante - Enrollment UI' header. Below it is the 'Enrollment Search' section. A dropdown menu is open, showing four search options: 'Application ID', 'Exchange Policy ID', 'Exchange Member ID', and 'Exchange Subscriber ID'. To the right of the dropdown is a text input field labeled 'Enter the Exchange Policy ID here'. Further right are three buttons: 'Filters', 'Search', and 'Reset'. A red arrow points from the dropdown menu to the text below.

Users will be able look up data by searching by:

- Application ID
- Exchange Policy ID
- Exchange Member ID
- Exchange Subscriber ID

Users will also be able to filter search results by individual or multiple Health Insurance Oversight System (HIOS) IDs

EUI Example: Initial Set of Data

Identifier	Example
Application ID	10413401
HIOS IDs	52664 (5 policies), 86728 (2 policies)
Exchange Policy ID	1449387
Exchange Subscriber ID	0000459861
Exchange Member IDs	0000206506, 0000824342

For example, here is the grid of initial data results that displayed when the user searched for a specific Application ID, which was associated across two different HIOS IDs

cognosante - Enrollment UI Log out

Enrollment Search

Search by Application ID Filters Search Reset

Application ID: Found 7 Results Filter:

	HIOS ID	Application ID	Exchange Policy ID	Name	Birth Date	Exchange Subscriber ID	#	Last Maintained	Segment Dates
Details	52664	10413401	1449387 HEALTHCARE	gdodbtu efscoikgut	07/24/1933	0000459861	3	08/08/2019 - 3:35 PM	07/01/2019 → 12/31/2019
Details	52664	10413401	2021367 HEALTHCARE	gdodbtu efscoikgut	06/21/1924	0000459861	3	08/08/2019 - 3:33 PM	05/02/2019 → 06/30/2019
Details	52664	10413401	1498463 HEALTHCARE	gdodbtu efscoikgut	01/08/1923	0000459861	3	08/08/2019 - 3:32 PM	03/01/2019 → 05/01/2019
Details	52664	10413401	2145196 HEALTHCARE	gdodbtu efscoikgut	08/18/1958	0000459861	2	08/08/2019 - 3:26 PM	01/01/2019 → 02/28/2019
Details	86728	10413401	2614878 DENTAL	gdodbtu efscoikgut	01/12/1921	0000205323	3	08/08/2019 - 3:25 PM	03/01/2019 → 12/31/2019
Details	86728	10413401	1897656 DENTAL	gdodbtu efscoikgut	02/12/1945	0000205323	2	08/08/2019 - 3:23 PM	01/01/2019 → 02/28/2019
Details	52664	10413401	1612391 HEALTHCARE	gdodbtu efscoikgut	08/17/1956	0000459861	3	08/08/2019 - 3:22 PM	01/01/2019 → 12/31/2019

EUI Example: Data Details

cognosante - Enrollment UI Log out

Enrollment Search

Application ID: Found 7 Results Filter:

>	HIOS ID	Application ID	Exchange Policy ID	Name	Birth Date	Exchange Subscriber ID	#	Last Maintained	Segment Dates
>	52664	10413401	2145196 HEALTHCARE	gdodbtu efscoikgut	08/18/1958	0000459861	2	08/08/2019 - 3:26 PM	01/01/2019 → 02/28/2019

Identifiers

Exchange-Assigned Member ID: 0000459861

Issuer-Assigned Member ID: AM067674000

QHP ID: 52664OH1530005

Policy

Exchange Policy Status: **TERMINATED** effective 02/28/2019

Origin Code: FFM_ONLINE

Segment Financials

Total Premium Amount: \$1504.52

Total Responsibility Amount: \$469.52

Applied APTC Amount: \$1035.00

CSR Amount: \$330.99

Users can drill into the results to view the Exchange-Assigned Policy ID, Coverage Period, Exchange Policy Status, and Exchange Policy Effectuated Status

Enrollment Detail

Application ID: 10413401 Exchange Policy Status: **ACTIVE**

Exchange-Assigned Policy ID: 1449387 Exchange Policy Effectuated? **Yes**

Coverage Period: 07/01/2019 to 12/31/2019 ▾

Subscriber and Covered Members

>	Name	Relationship to Subscriber	Birthdate	SSN	Exchange-Assigned Member ID	Issuer-Assigned Member ID
>	gdodbtu efscoikgut Subscriber	SELF	07/24/1933	124-74-3048	0000459861	AM067674000
>	BNVNCQRXG DVFPGBQIXF	SPOUSE	01/28/1947	124-74-1779	0000206506	AM067674001
>	GFJIL DVFPGBQIXF	SON_DAUGHTER	10/01/2008	124-72-3797	0000824342	AM067674003

EUI Example: Drilling Down

cognosante - Enrollment UI

Enrollment Detail

Application ID: 10413401
Exchange-Assigned Policy ID: 1449387
Coverage Period: 07/01/2019 to 12/31/2019 ▼

Subscriber and Covered Members

>

Name	Relationship to Subscriber	Birthdate
gdodbtu efscoikgut Subscriber	SELF	07/24/1933

Member Information

Gender	MALE
Marital Status	MARRIED
Race	WHITE
Ethnicity	N/A
Spoken Language	ENGLISH
Written Language	ENGLISH
Tobacco Use Code	TOBACCO_NOT_USED

Users can also drill down into granular details including information about the Subscriber and any Covered Members, summaries of the Premium and Advanced Premium Tax Credit (APTC), and specific Enrollment Information such as the Plan Metal Level and Special Enrollment Period (SEP) Reason Code

\$ Segment Premium (07/01/2019 → 12/31/2019)	
Total Premium Amount	\$1803.06
Applied APTC Amount	\$0.00
Total Responsibility Amount	\$1803.06
CSR Amount	N/A
EHB Premium Amount	\$1797.29
Rating Area	OH012

Enrollment Information

HIOS ID	
Issuer Name	
QHP ID	
CSR Plan Variant	EXCHANGE_VARIANT_NO_CSR
Insurance Line Of Business	HEALTHCARE
Plan Metal Level	SILVER
Origin Code	FFM_ONLINE
Segment Last Maintenance Date & Time	08/08/2019 - 3:35 PM

Coverage Start Date	07/01/2019
Coverage End Date	12/31/2019
SEP Reason Code	FC - SEP has been granted to the Enrollment due to an APTC/CSR Eligibility change.
End of Year Voluntary Term Indicator	N/A
Payment Transaction ID	OH00071601251
Exchange-Assigned Policy ID	1449387
Issuer-Assigned Policy ID	AM0676740
Issuer-Assigned Subscriber ID	AM067674000

EUI Example: Data Details

cognosante - Enrollment UI Log out

Enrollment Detail

Back to results

Application ID: 10413401
Exchange-Assigned Policy ID: 1449387
Coverage Period: 07/01/2019 to 12/31/2019 ▼

Exchange Policy Status: **ACTIVE**
Exchange Policy Effectuated? **Yes**

Subscriber and Covered Members

>	Name	Relationship to Subscriber	Birthdate	SSN	Exchange-Assigned Member ID	Issuer-Assigned Member ID
>	gdodbtu efscoikgut Subscriber	SELF	07/24/1933	124-74-3048	0000459861	AM067674000
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>	GFJIL DVFPGBQIXF	SON_DAUGHTER	10/01/2008	124-72-3797	0000824342	AM067674003

For example, here is the grid of initial data results that displayed when the user searched for a specific Application ID, which was associated across two different HIOS IDs

EUI: Getting Access

- **Who Will be Able to Access to the EUI?**

- **Issuers:** Each parent issuer organization can request up to 5 individuals to access the tool. One of those will be the “Issuer Approver” and organization’s primary point of contact.
- **Third Party Administrators (TPAs):** TPA’s verified to be working on behalf of a parent issuer organization can also request up to 5 individuals to access the tool.

- **What Level of Data Can be Accessed in the EUI?**

- **Parent Issuer Organization:** Each user can access only the enrollment data associated with the HIOS IDs of their respective parent issuer organization.
- **Authentication:** Each user will need to create a CMS Enterprise Portal account (if they do not already have one), and register a Multi-Factor Authentication (MFA) device for the account (such as a mobile phone) for access and authentication.

- **How Will Issuers & TPAs Request Access to the EUI?**

- **Onboarding Forms:** When we are really to roll out EUI, onboarding forms will be provided on CMSzONE that issuers and TPA’s will submit through the Marketplace Service Desk (MSD, aka “the Help Desk”).
- **Technical Webinar:** CMS will announce and roll out details via the weekly Tuesday 3 PM Eastern Time “CMS-Issuer Technical Work Group” and via the “CMS Issuer Communications” e-mail blasts when we are close the rolling out EUI to the broad community. (Expected in the coming weeks, pending final testing results.)

Questions?

- To Submit or Withdraw Questions by Phone:
 - *If you are listening through your computer speakers and want to submit a question by phone, dial 1-866-391-5945 and enter your unique six-digit PIN, then dial “star(*) pound(#)” on your phone’s keypad.*
 - *If you are already dialed in by phone and want to submit a question, then dial “star(*) pound(#)” on your phone’s keypad.*
 - *If you would like to withdraw a question and you are dialed in by phone, then dial “star(*) pound(#)” on your phone’s keypad.*
- To submit questions by webinar:

Type your question in the text box under the “Q&A” tab and click “Send.”