# FM Payment Processing Series III:

## Vendor Management Implementation, Payment Dispute Guidance

# November 19, 2018

**Division of Financial Transfers and Operations (DFTO)**

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# Session Guidelines

- This is a 90-minute webinar session
- For questions regarding content, submit inquiries to fmcc@cms.hhs.gov
- For questions regarding logistics and registration, contact the Registrar at: (800) 257-9520

# Agenda

- Vendor Management Implementation
- Payment Dispute Guidance

# Vendor Management Implementation

# Vendor Management Module

- Currently, issuers go through the Health Insurance Oversight System (HIOS) to submit and edit their Vendor Management (VM) financial information.
- Starting on January 3rd, CMS will be moving vendor data and access to a new Salesforce system hosted in the CMS Enterprise Portal and users will no longer use the HIOS module to access the VM system.
- All issuers will need to establish access to the new VM system. CMS will follow up with current VM system users over the next few weeks to help with setting up new login information.

# Vendor Management Module




The system migration will not require any system updates on your behalf. All current financial data will be transferred to the new system and will not delay or impact payments.

# Vendor Management Access Request

# Vendor Management Access

The Vendor Management (VM) Tool allows issuers to submit Payee record information in order to process PPACA program payments and user fee assessments.

- In order to access the VM Tool, all users must first request access to Salesforce and the VM application from the CMS Enterprise Portal.




Users only need to request access to Salesforce and the VM application one time.

# Vendor Management Access

Once access is granted, the issuer can access the VM Tool by logging into the CMS Enterprise Portal and navigating to the VM application.

**Prerequisites** for VM Tool access include:

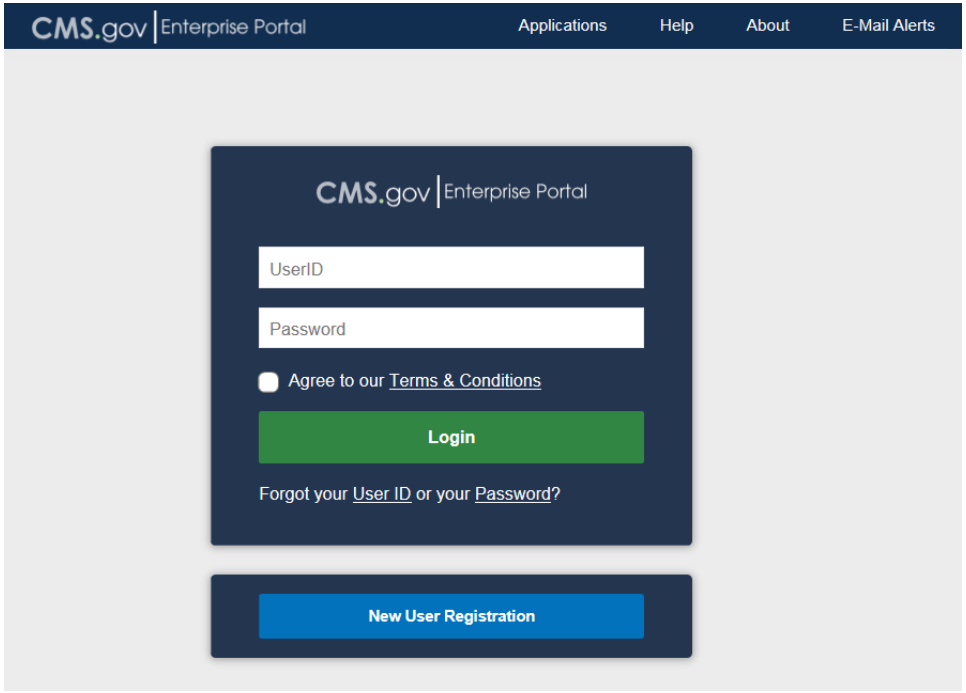
- VM Approver or Submitter designation in HIOS;
- CMS Enterprise Portal account with a current user name and password;
- Completed identity verification; and
- Set up multi-factor authentication.

# Request Salesforce Access

# Request Salesforce Access

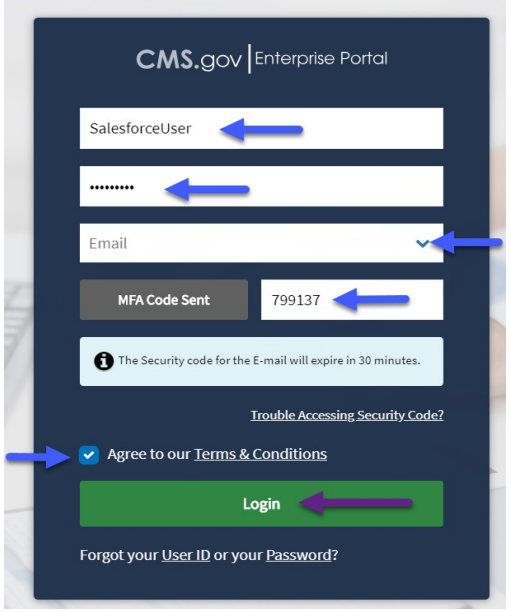
Begin the request for VM Tool access by requesting access to Salesforce.

1. Navigate to CMS Enterprise Portal at https://portal.cms.gov.



# Request Salesforce Access

2. Log in to the CMS Enterprise Portal by entering your user ID, password, and multi-factor authentication (MFA) code, then select the **Login** button to navigate to the *My Portal* page.



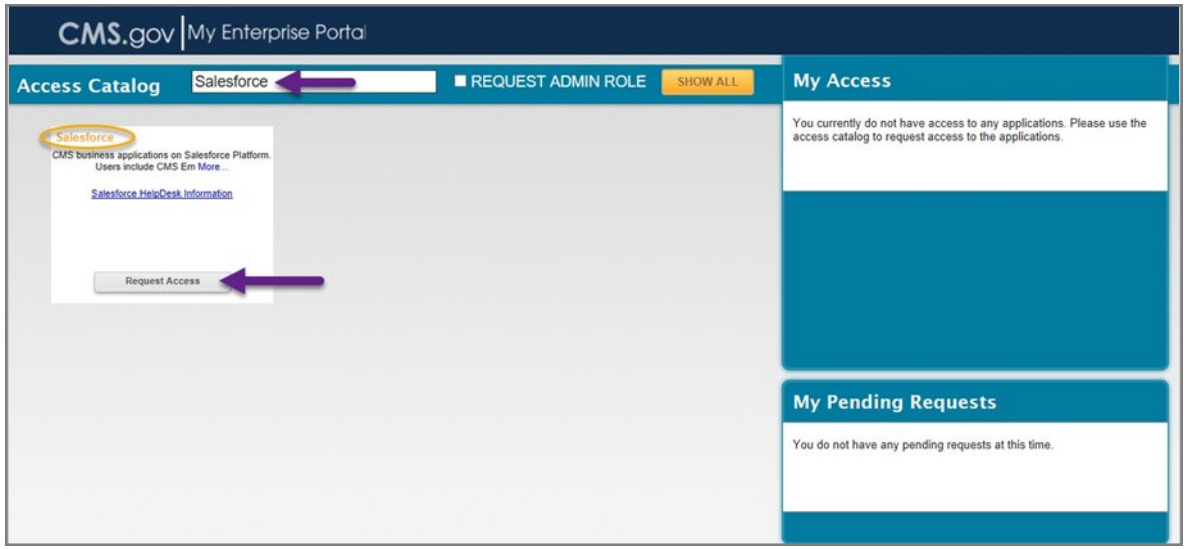
# Request Salesforce Access

3. Select the **Request/Add Apps** tile to navigate to the *Access Catalog* page.



# Request Salesforce Access

4. Scroll as needed to locate the **Salesforce** application tile or enter the first few letters of the application in the Access Catalog text box to narrow the selection criteria.

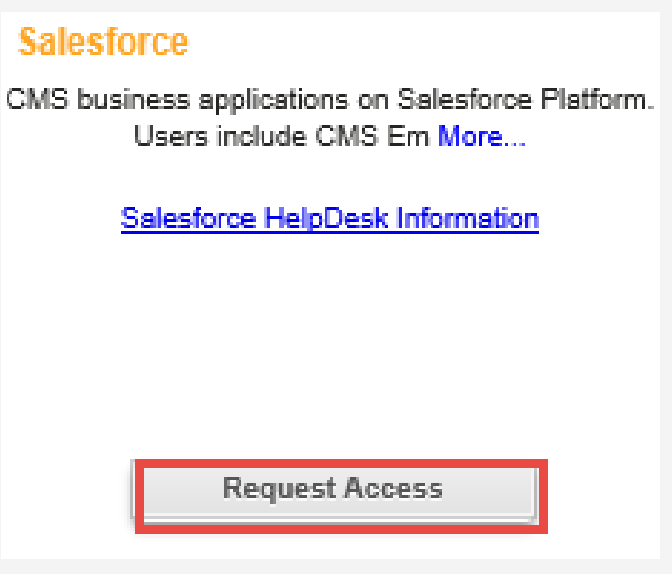



NOTE

The Access Catalog list is presented in alphabetical order.

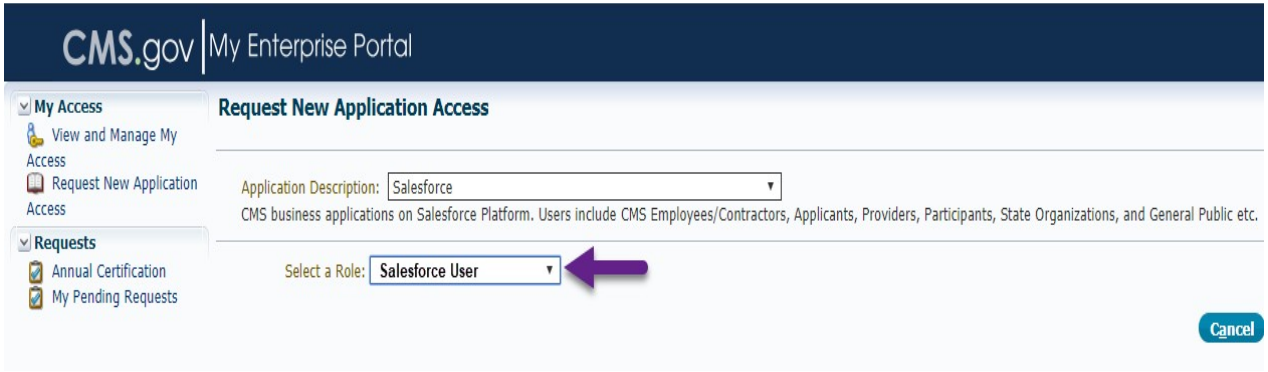
# Request Salesforce Access

5. Select the **Request Access** button on the **Salesforce** application tile. The portal navigates to the *Request New Application Access* page.



# Request Salesforce Access

6. Select **Salesforce User** from the Select a Role drop-down menu and select the **Next** button to proceed with the Salesforce access request.



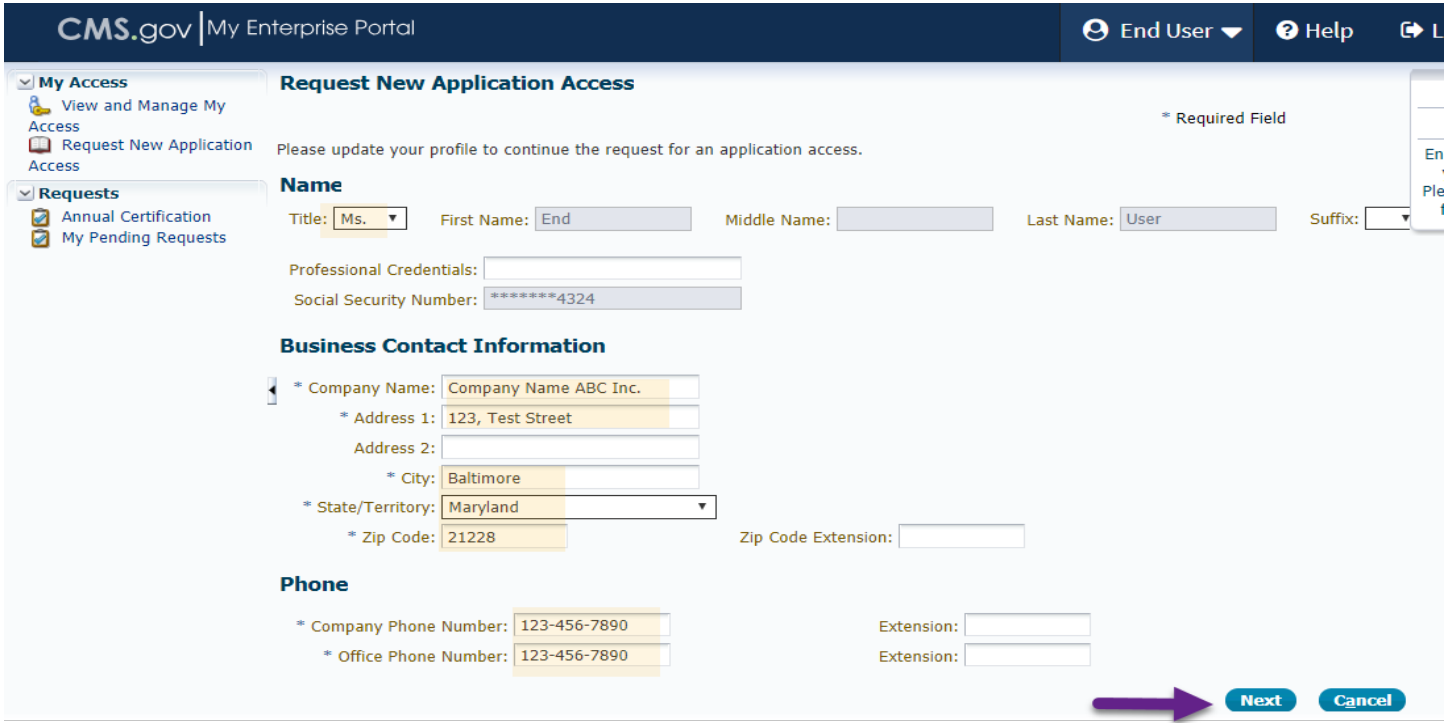

NOTE

The other user roles are Help Desk specific roles and should not be requested by users outside the component organization help desk.

# Request Salesforce Access

7. Enter your information in the Business Contact Information fields:
   - Company Name
   - Address 1
   - Address 2 (optional)
   - City
   - State/Territory
   - Zip Code
   - Zip Code Extension
8. Enter your information in the Phone fields:
   - Company Phone Number
   - Extension (optional)
   - Office Phone Number
   - Extension (optional)

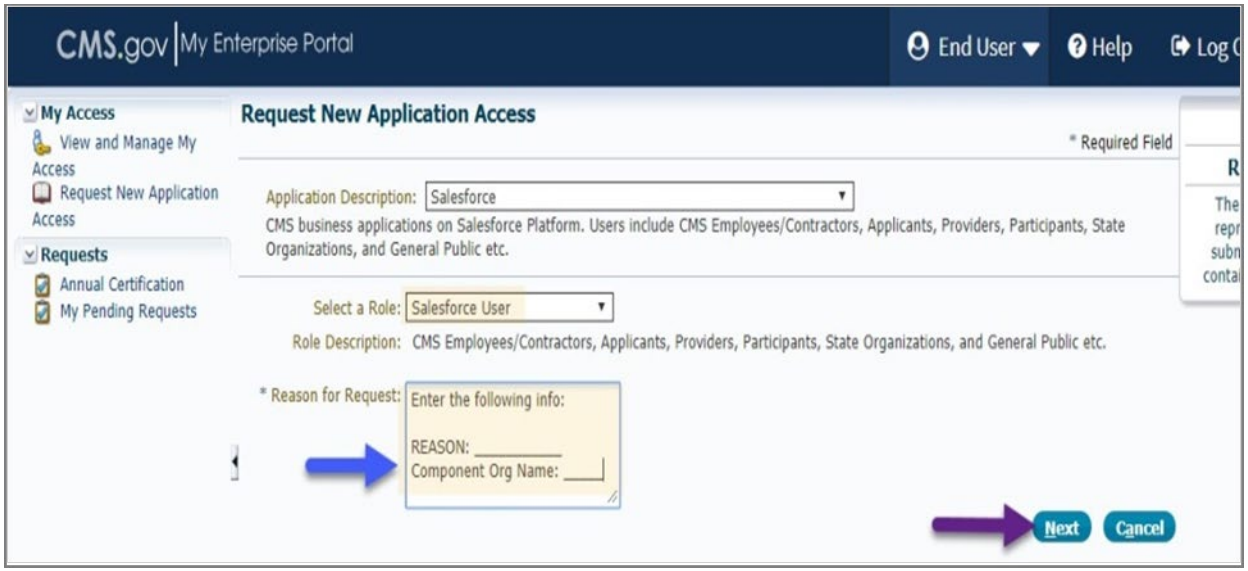
# Request Salesforce Access




9. Select the **Next** button to continue.

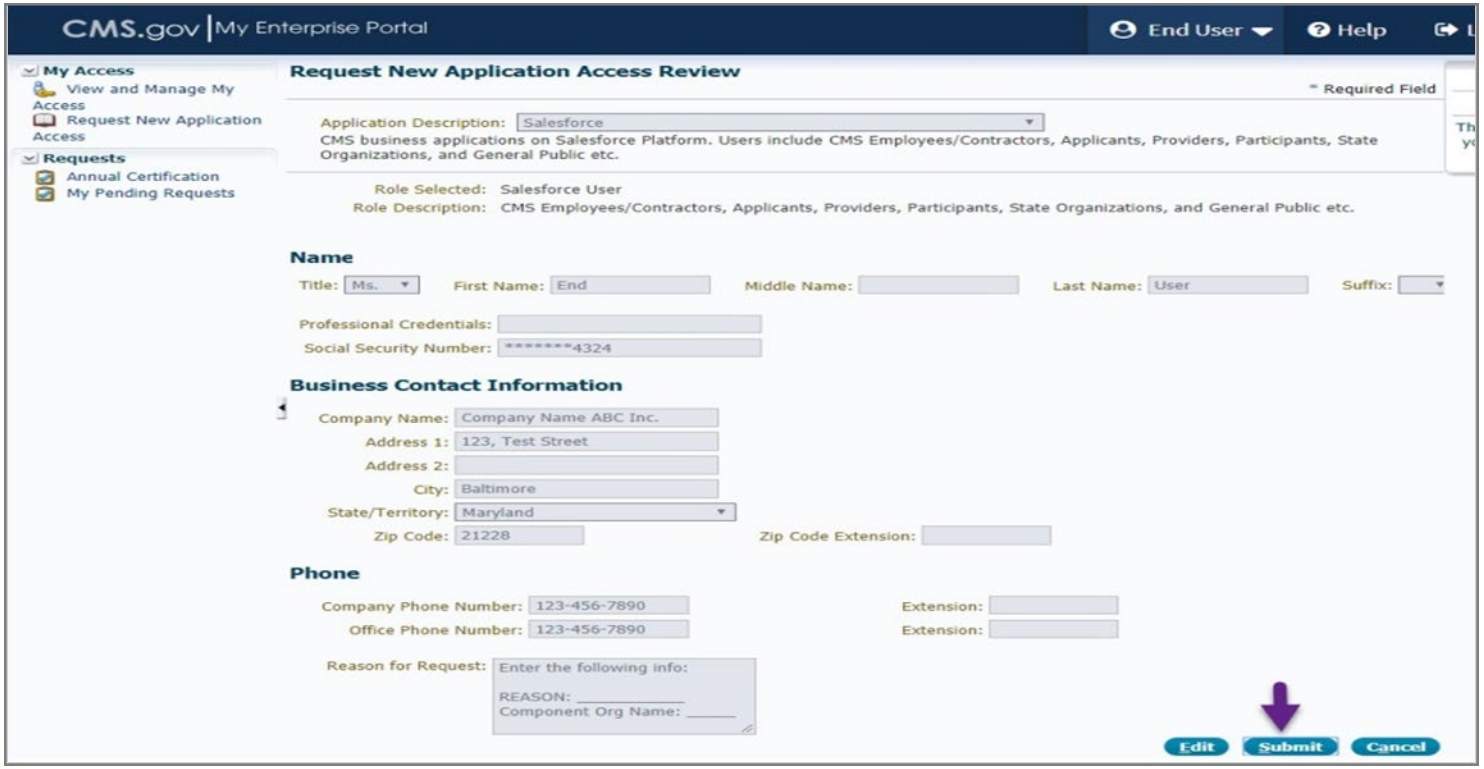
# Request Salesforce Access

10. Enter “Access to Salesforce required for VM application access” in the Reason for Request field and select the **Next** button to continue to the *Request New Application Access Review* page.



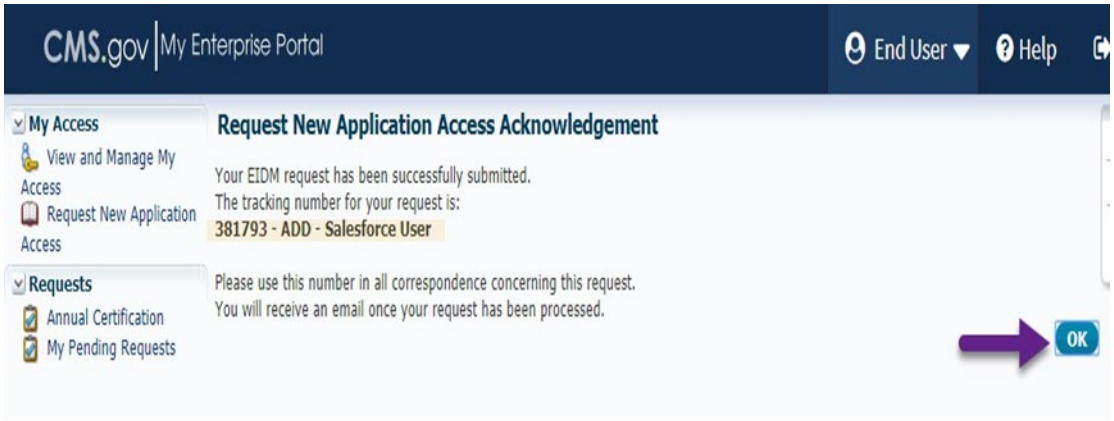
# Request Salesforce Access

11. Review your information and select the **Submit** button to submit the Salesforce application access request.



# Request Salesforce Access

12. The portal displays a message acknowledging successful submission of your request. Record the request tracking number.




13. Select the **OK** button. Close the browser window to logout prior to requesting the VM application.

# Request Salesforce Access

14. The system sends the following email notifications after submission of the request to access Salesforce:
    - Submission of Request email notification
    - Approval of Request email notification



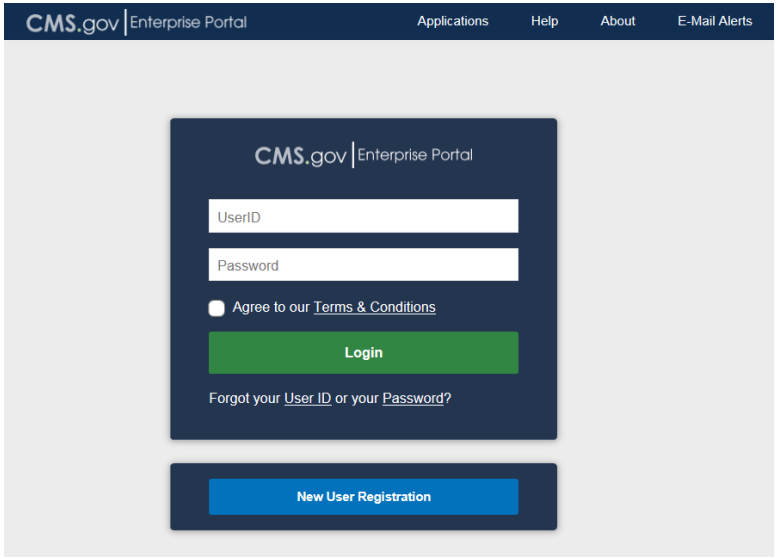

It may take several minutes for the Salesforce tile to appear. It is recommended that you logout and wait approximately 10 minutes to receive the Approval of Request email notification before beginning the steps to request the VM Application.

# Request the Vendor Management Application

# Request the Vendor Management Application

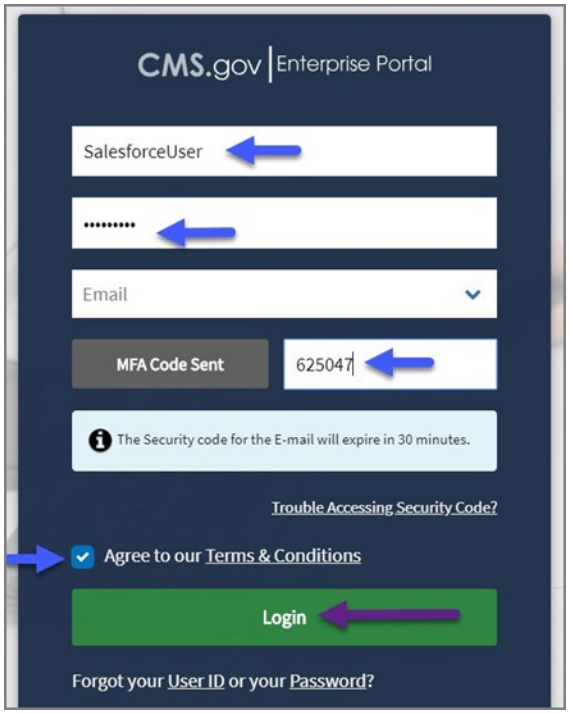
After receiving access to Salesforce, users must request access to the VM application in order to access the VM Tool.

1. Navigate to the CMS Enterprise Portal at https://portal.cms.gov.



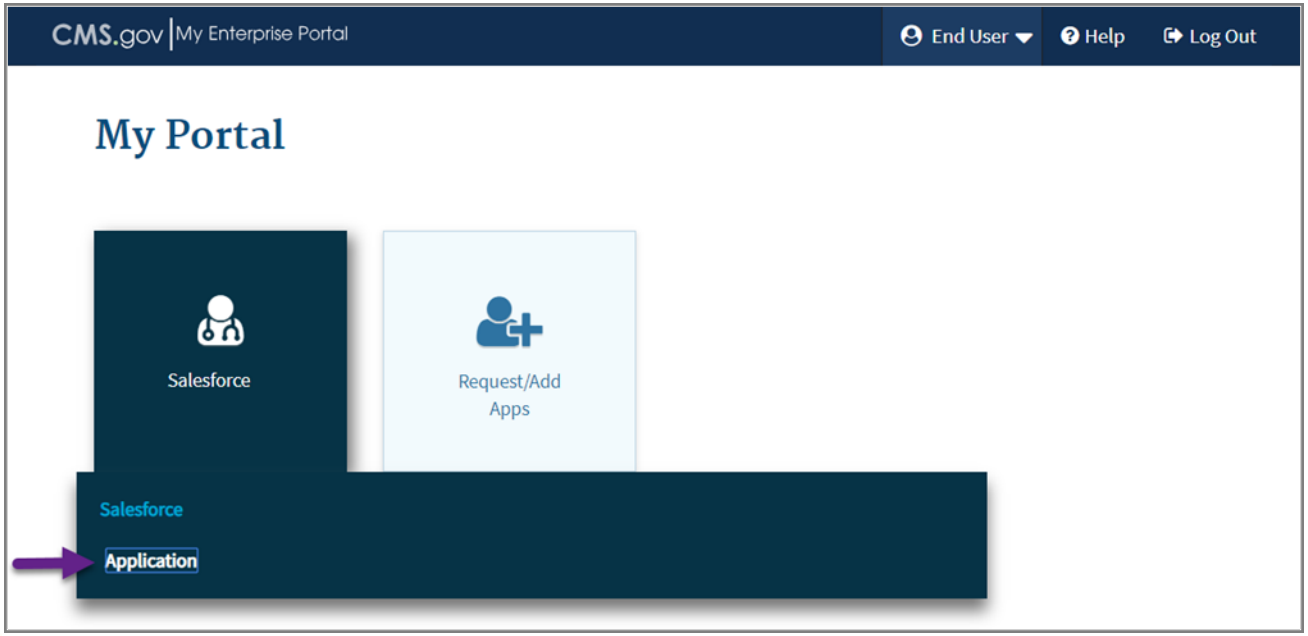
# Request the Vendor Management Application

2. Log in to the CMS Enterprise Portal by entering your user ID, password, and multi-factor authentication (MFA) code, then select the **Login** button to navigate to the *My Portal* page.



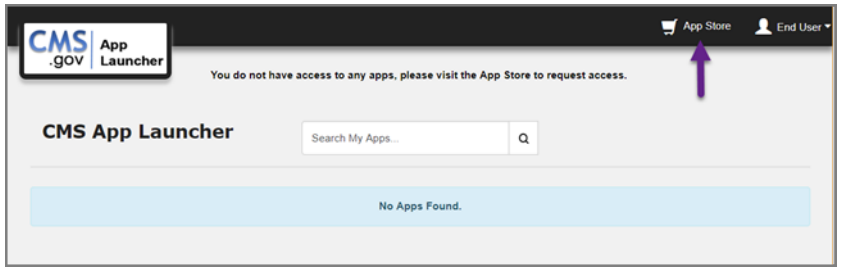
# Request the Vendor Management Application

3. Select the **Salesforce** tile, then select **Application** from the drop-down menu to open the *CMS App Launcher* page in a new browser tab.

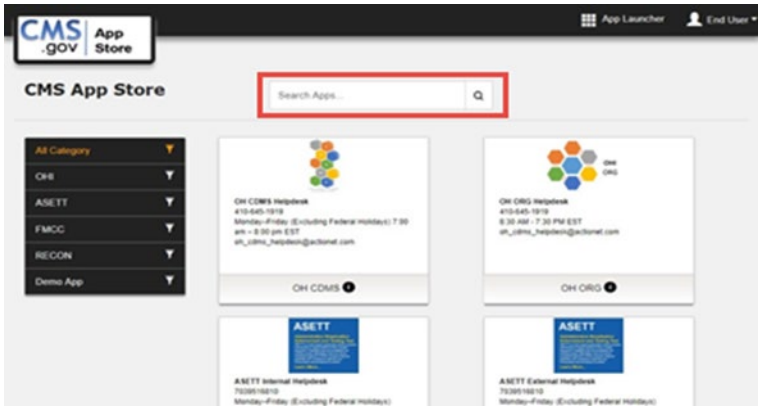


# Request the Vendor Management Application

4. Select the **App Store** link from the menu bar to display the Search My Apps field.

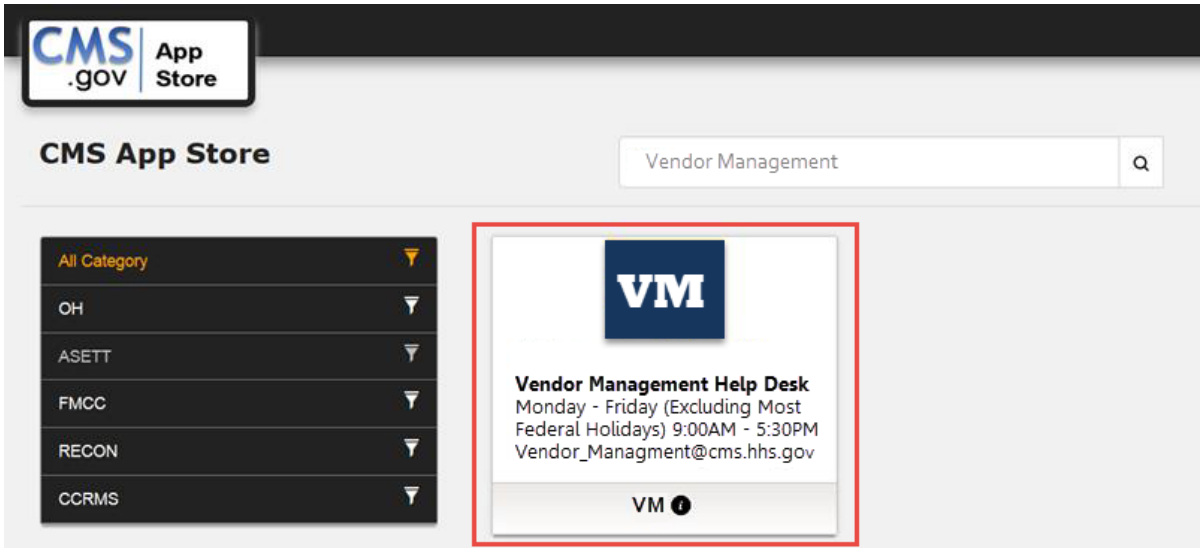



5. Enter Vendor Management in the Search Apps field to navigate to the **VM** tile.



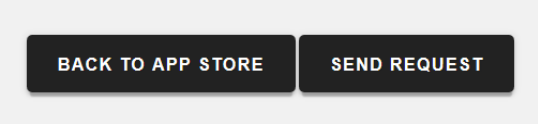
# Request the Vendor Management Application

6. Select the **VM** tile to navigate to the *CMS App Listing* page.

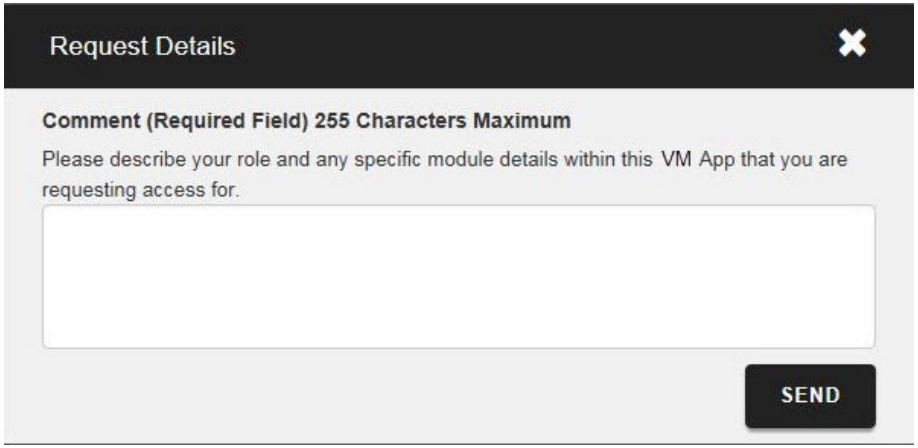


# Request the Vendor Management Application

7. Select the **Send Request** button to submit request.

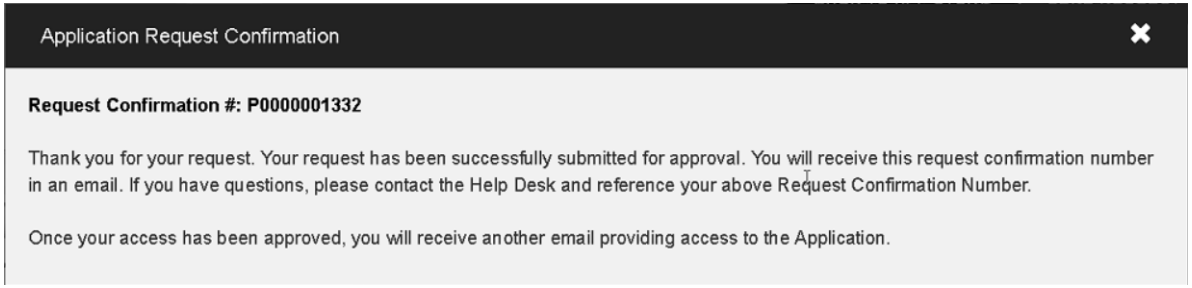



8. Enter “Access required to VM application for conducting FM activities” in the Request Details field.



# Request the Vendor Management Application

9. Select the **Send** button. The portal displays the *Application Request Confirmation* page. The system will send you an email containing your request confirmation number. You will receive another email confirming your VM access once the system has approved your request.




NOTE

Users only need to request access to Salesforce and the VM application one time. After access is granted, users will access the VM Tool directly by logging into the CMS Enterprise Portal and navigating to the VM Tool.

# Upcoming Webinar

- Join this webinar series on December 17, 2018 to learn more about the new VM Tool including:
  - Instructions for ongoing access to the VM Tool
  - A tour of the VM Tool
  - A summary of changes to the forms available in the VM Tool

# Next Steps & Key Dates

| Activity | Timing |
|---|---|
| Carry out steps to Request Salesforce Access | Immediately |
| Carry out steps to Request the Vendor Management Application | Starting November 30th |
| Learn more about the new Vendor Management Tool | December 17, 2018 |
| Start accessing the Vendor Management Tool through Salesforce | December 31, 2018 |

# Payment Dispute Guidance

# Payment Dispute Guidance

## Presentation Outline:

I. Payment Dispute Reminders

II. New Detail Codes:
- PD635
- PD637/PY637

III. Reminder: Detail Codes F8SR4 & F10SR4

IV. BAR Reinstatement Deadline

V. zONE Publications

# Payment Dispute Reminders

## Please submit your Payment Disputes!

- Submit a Payment Dispute for any record perceived to be incorrect.
- Issuers may submit large volumes of Payment Disputes without impeding processing time.

## Payment Dispute Support

- As a reminder, the FMCC team is the primary point of contact for resolving rejected Payment Disputes. Please reach out to the FMCC team at (FMCC@cms.hhs.gov) with any questions regarding rejected Payment Disputes.

# Incorrect APTC Payment with a HICS Case

- New Detail Code: **PD635**
- **PD635** applies to “incorrect payment” disputes for an APTC payment, where a HICS case is present.
  - **PD635 ER&R Action:** Submit the APTC update through the Enrollment Dispute process to modify the FFM value.
  - **PD635 Issuer Action:** Monitor the subsequent Semi-Monthly Detailed Report for any status changes to the dispute and the RCNO file for 1-2 cycles to ensure the update was successful.
- **PD635** results in disposition code I1: In Process

# “Unexpected Payment” Disputes with Conflicting Coverage Spans

- New Detail Codes: **PD637** and **PY637**
- **PD637** and **PY637** apply to “unexpected payment” disputes where the issuer is attempting to term a policy with multiple coverage spans and the change causes a gap in coverage with another span that has an Issuer Premium Paid Indicator of “N”.
  - **PD637 Issuer Action:** Review all records associated to the consumer and cancel the conflicting coverage span in the next RCNI submission.
  - **PY637 Issuer Action:** Use the most recent Pre-Audit file to identify the conflicting coverage span and submit an Enrollment Dispute to make the necessary updates.
- **PD637** results in disposition code R6: Dispute Not Supported By RCNI
- **PY637** results in disposition code R10: Dispute Not Supported By RCNI – Prior Year

# Reminder: Detail Codes F8SR4 & F10SR4

- ER&R identified a large influx of Payment Disputes that received both F8SR4 and F10SR4 in the past run.
- **F8SR4** is applied when an issuer submits a dispute containing an FFM non-zero dollar amount with the Coverage Period Start Date left blank.
- **F10SR4** is applied when an issuer submits a dispute containing an FFM non-zero dollar amount with the Coverage Period End Date left blank.
- **Disposition Code:** R2 – Record Does Not Meet Dispute Requirements
- **Issuer Action:** Verify the data for this policy and resubmit the dispute with the appropriate Coverage Period Start Date and Coverage Period End Date values.

# BAR Reinstatement Deadline

- Batch Auto-Reenrollment (BAR) is the process that creates new policies based on coverage from the previous year.
- UIEs will not BAR due to lack of an FFM record. Issuers should encourage those consumers to enroll during OE.
- Issuers must submit 2018 reinstatement disputes by 11/26/2018 to give ER&R time to process the disputes and make the necessary updates to include those policies in BAR.
- Reinstatement disputes submitted after 11/26/2018 will not be reenrolled, and the consumer will need to complete a new enrollment for 2019 coverage.

# zONE Publications

- The HICS Direct Dispute Cheat Sheet v3.0 is available on CMS zONE. The new version includes the following:
  - Revised information requirements for HICS Direct Dispute types
  - Updated issuer comment examples
- The FFE Payment Disposition and Detail Code List version 19 will be published to available on CMS zONE and REGTAP. The new version includes the PD635, PD637, and PY637 disposition codes.
- Issuers can review the updated documentation on CMS zONE:
  - https://zone.cms.gov/document/enrollment-resolution-and-reconciliation
- Access the updated documentation on REGTAP:
  - https://www.regtap.info/reg_library.php?libfilter_topic=17

# Questions?

**To submit or withdraw questions by phone:**

- Dial *# (star-pound) on your phone's keypad to ask a question.
- Dial *# (star-pound) on your phone's keypad to withdraw your question.

**To submit questions by webinar:**

- Type your question in the text box under the 'Q&A' tab.

# APPENDIX

# Payment Activity Key Dates

| Key Payment Activities | December | January | February |
|---|---|---|---|
| Initial Invoice sent to Issuers | December 11th-13th | January 9th-11th | February 8th-12th |
| Preliminary Payment and Payee Information Reports sent to Issuers | December 11th-14th | January 11th-15th | February 13th-15th |
| Treasury issues payments to Issuers | December 20th | January 22nd | February 20th |
| HIX 820 Payment transactions sent to Issuers | December 31st | January 31st | February 28th |

# ACCESS TO CMSzONE

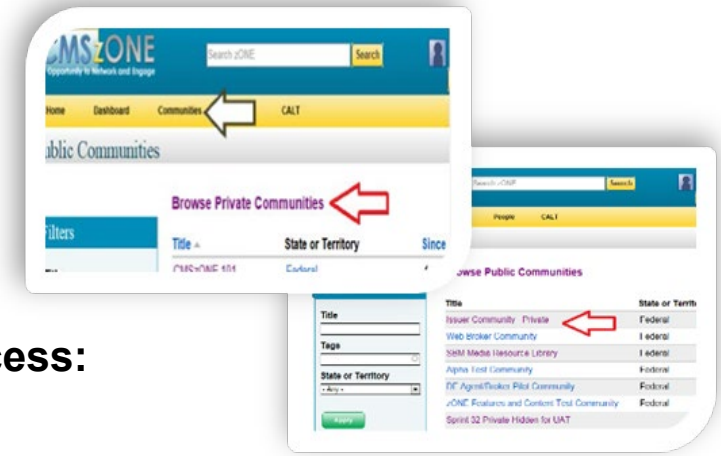
## Step 1: CMS Secure Portal Registration Process:

***(Pre-requisite to CMSzONE Access)***

1. Register for access at CMS Secure Portal Here: https://portal.cms.gov/
2. Click on "New User Registration" under CMS Secure Portal
3. Complete information and create User ID and Password

## Step 2: CMS zONE Access Request:

1. Log in at https://portal.cms.gov/ with your CMS Secure Portal credentials
2. Click on "Request Access Now"
3. Scroll down the page to find "zONE" and click on "Request Access"
4. Complete information and wait for confirmation email
5. Once confirmation email is received, user may log-in to CMSzONE




## Step 3: CMSzONE Private Issuer Community Access:

**(*After being granted CMS zONE access)***

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

## User Access Quick Guide

A copy of the comprehensive User Access Quick Guide is posted on zONE @:
https://zone.cms.gov/document/zone-end-user-access-quick-guide *(pre-log in required to access zONE links)*

# Reference Documents

- SBE Issuer Information page (all of the following documents are available on this page): https://zone.cms.gov/wiki/sbm-Issuer-information
- SBE Issuer ICD: https://zone.cms.gov/document/sbe-Issuer-icd
- SBE PBP Transition Guide: https://zone.cms.gov/document/sbe-Issuer-transition-guide
- SBE Issuer PBP FAQ: https://zone.cms.gov/document/policy-based-payments-transition-faq
- CSR Operations FAQ: https://zone.cms.gov/document/csr-operations-faq
- Monthly Batch Cycle Calendars: https://zone.cms.gov/wiki/sbm-Issuer-information

# Reference Documents Continued

- PBP Transition FAQ: https://zone.cms.gov/document/policy-based-payments-transition-faq
- SBE Payment Disputes Technical Reference Guide: https://www.regtap.info/reg_librarye.php?i=2664.
- Issuer Dispute Form: https://zone.cms.gov/document/Issuer-dispute-form
- SBE Disputes Disposition and Detail Code List: https://zone.cms.gov/document/sbm-disputes-disposition-and-detail-code-list
- Enrollment and Payment Files Chart: https://zone.cms.gov/document/sbm-pbp-files-chart

# Reference Documents Continued

- CMS HIX 820 Companion Guide: https://zone.cms.gov/document/hix-820-companion-guide-version-august-2017
- CMS Individual Market HIX 820 X12 Scenarios: https://zone.cms.gov/document/cms-individual-market-hix-820-x12-scenarios
- Payee Information Report (Function code: PNR) for Payee: https://zone.cms.gov/document/payee-information-report
- Temporary Manual Adjustment Scenarios: https://zone.cms.gov/document/temporary-manual-adjustments-scenarios

# Vendor Management Reminders

Records that are not approved or remain in an incomplete status at the time of module closing jeopardize Patient Protection and Affordable Care Act (PPACA) program payments for that cycle

- If your edits include changes to your banking information, your financial institution is required to fax a Bank Verification Letter (BVL) directly to CMS at (443) 380-5196 to allow CMS to approve these updates. In the interim, your record is in a state of limbo and payments will not be processed
- You can reach the CMS Vendor Management Team at Vendor_Management@cms.hhs.gov

# Sample Intent to Refer Letter

**DUNNING LETTER- FINAL REQUEST**

| | | |
|---|---|---|
| Re: Program | : | Advance Payments of the Premium Tax Credit |
| Entity ID | : | A123456 |
| Invoice Number | : | A1111A011001001 |
| Invoice Date | : | 13-JUL-2018 |
| Invoice Amount | : | $101.99 |
| Interest Charge | : | $10.01 |
| Administrative Fee | : | $15.00 |
| Total Amount Due | : | $127.00 |

- The Program, Entity ID, Invoice Number, Invoice Date, and Invoice Amount are the same fields transmitted in the Initial Invoice.
- Interest Charge – The interest charge is the interest owed and is calculated based on the original invoice amount, number of months outstanding, and the current interest rate
  - Interest is assessed on a monthly basis
- Administrative Fee – The administrative fee is a fixed fee of $15 that is applied only once when an invoice is over 30 days old
- Total Amount Due – The total amount due is the sum of the invoice amount, interest charge, and administrative fee

# Points of Contact

- CMS directs Issuers to contact the Federal Enrollment and Payment System (FEPS) Helpdesk with technical questions or issues. Issuers can contact the FEPS Helpdesk at CMS_FEPS@cms.hhs.gov
- CMS directs Issuers to contact the Marketplace Payments Team with questions related to the Manual Payment Process. Issuers can contact Marketplace Payments at marketplacepayments@cms.hhs.gov
- CMS directs Issuers to contact the Financial Management Coordination Center (FMCC) with questions regarding the PBP process. Issuers can contact the FMCC at FMCC@cms.hhs.gov
- CMS directs Issuers to contact the Enrollment Reconciliation and Resolution (ER&R) contractor with questions regarding the discrepancy reporting process, as well with dispute form submissions. Issuers can contact the ER&R contractor at errsupportcenter@cognosante.com

# Contacting FMCC



**When contacting the FMCC, Issuers should include their five (5)-digit Health Insurance Oversight System (HIOS) ID and their seven (7)-character Payee ID, along with their request**

# Documents Available on REGTAP

The ***Managed File Transfers (MFT) Thin Client Help Guide*** and ***Manual Payment and Enrollment Data Workbook User Guide*** are currently available in the REGTAP Library at the following links:

- https://www.regtap.info/reg_librarye.php?i=1778
- https://www.regtap.info/reg_librarye.php?i=1758

# Acronyms

| Acronym | Definition |
|---|---|
| APTC | Advance Payments of the Premium Tax Credit |
| PY | Policy Year or Prior Year |
| FFE | Federally-facilitated Exchange |
| FMCC | Financial Management Coordination Center |
| HIOS | Health Insurance Oversight System |
| HIX | Health Insurance Exchange |
| PBP | Policy-based Payments |
| PNR | Payee Information Report |
| PPR | Preliminary Payment Report |
| RCNI | Reconciliation Inbound |
| SBE | State-based Exchange |
| ER&R | Enrollment Reconciliation and Resolution |

# Acronyms

| Acronym | Definition |
|---|---|
| HICS | Health Insurance Caseworker System |
| QHPID | Qualified Health Plan ID |
| PNR | Payee Information Report |
| CSR | Cost-sharing Reduction |

# Resources

# Resources

Inbound 834 Process (CMS zOne Dedicated Page):

- Production Overview, Technical Specifications, Reporting
- For further assistance, please contact: Inbound834@bah.com

Enrollment Reconciliation:

- For further assistance, please contact: recon_Issuer_support@bah.com

Dispute submission:

- Resources
  - Enrollment dispute form: https://zone.cms.gov/system/files/documents/enrollment_dispute_form_v10_20170901_1.xlsx
  - Payment dispute form: https://zone.cms.gov/system/files/documents/ft_ppr_820_dispute_form_002.xlsx
  - Combined Enrollment and Payment Dispute Technical Reference Guide: https://www.regtap.info/reg_librarye.php?i=2664.
  - For further assistance, please contact the ER&R Support Center at errsupportcenter@cognosante.com or (855) 591-7113

# Combined Enrollment and Payment Dispute Technical Reference Guide

- The Combined Enrollment and Payment Dispute Technical Reference Guide (TRG) provides guidelines for Issuers regarding how to submit Payment Disputes
- Issuers can access the TRG at the following links:
  - https://www.regtap.info/reg_librarye.php?i=2664
  - https://zone.cms.gov/system/files/documents/combined_enrollment_and_payment_disputes_trg_v3.2.docx

# Resources

| Resource | Resource Link |
|---|---|
| Centers for Medicare & Medicaid Services (CMS) | http://www.cms.gov/ |
| U.S. Department of Health & Human Services (HHS) | http://www.hhs.gov/ |
| The Center for Consumer Information & Insurance Oversight (CCIIO) web page | http://www.cms.gov/cciio |
| Consumer website on Health Reform | http://www.healthcare.gov/ |
| ASC X12 Store | http://store.x12.org/store/health-insurance-exchanges |
| Registration for Technical Assistance Portal (REGTAP) - presentations, FAQs | https://www.REGTAP.info |
| CMS zONE – reference material | https://zone.cms.gov |

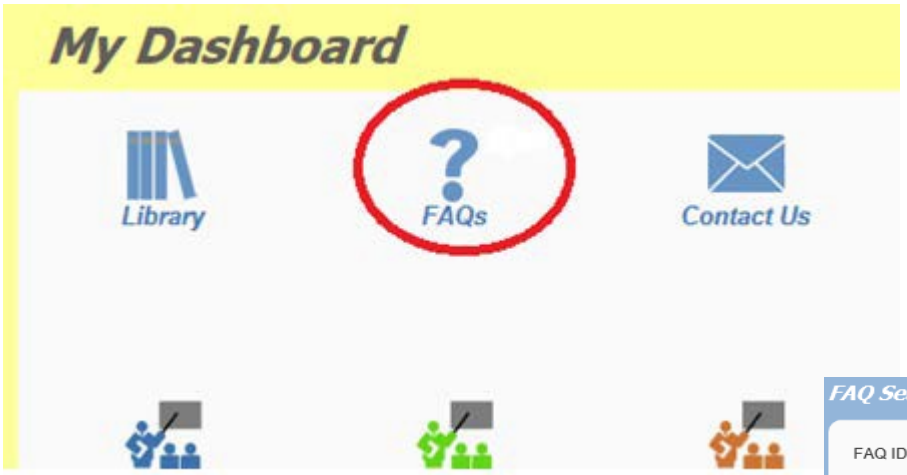
# Inquiry Tracking and Management System (ITMS)

Stakeholders can submit inquiries to ITMS at https://www.REGTAP.info

Select “Submit an Inquiry” or to view submitted inquiries select ‘My Inquiries’ from My Dashboard.

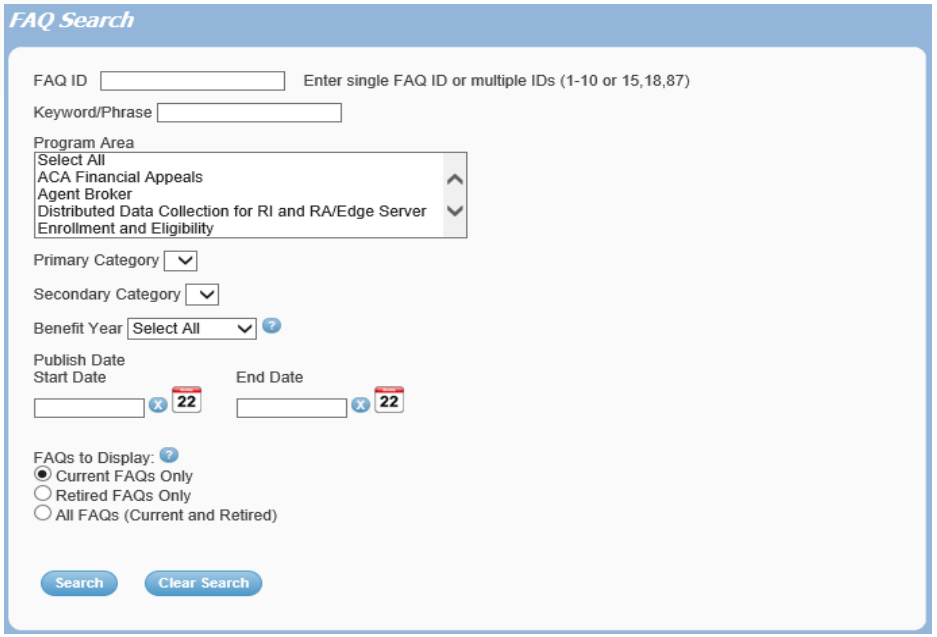


# FAQ Database on REGTAP




The FAQ Database allows users to search FAQs by FAQ ID, Keyword/Phrase, Program Area, Primary and Secondary Categories, Benefit Year, Retired and Current FAQs, and Publish Date.

FAQ Database is available at https://www.regtap.info/



# Closing Remarks