


Payments, Invoicing, and Collections Process for the Risk Corridors Program

**November 6, 2015 &
November 20, 2015**



Centers for Consumer Information and Insurance Oversight, Financial
Management Group, Division of Financial Transfers and Operations

Agenda

- Session Guidelines
- Purpose
- Risk Corridors Overview
- Payment and Collection Process Overview
- Invoicing Overview
- Questions
- Resources
- Closing Remarks

Session Guidelines

- This is a ninety-minute webinar session.
- For questions regarding content, please submit inquiries at <https://www.regtap.info/>
- For questions regarding logistics and registration, please contact the Registrar at: (800) 257-9520.

Intended Audience

- Qualified Health Plan (QHP) issuers, as defined in 45 CFR §153.500 with respect to the risk corridors program only—
 - (1) A qualified health plan, as defined at 45 CFR §155.20;
 - (2) A health plan offered outside the Exchange by an issuer that is the same plan as a qualified health plan, as defined at 45 CFR §155.20, offered through the Exchange by the issuer. To be the same plan as a qualified health plan (as defined at §155.20 of this subchapter) means that the health plan offered outside the Exchange has identical benefits, premium, cost-sharing structure, provider network, and service area as the qualified health plan (as defined at 45 CFR §155.20);

Intended Audience (Continued)

- (3) A health plan offered outside the Exchange that is substantially the same as a qualified health plan, as defined at 45 CFR §155.20, offered through the Exchange by the issuer. To be substantially the same as a qualified health plan (as defined at 45 CFR §155.20) means that the health plan meets the criteria set forth in paragraph (2) of this definition with respect to the qualified health plan, except that its benefits, premium, cost-sharing structure, and provider network may differ from those of the qualified health plan (as defined at 45 CFR §155.20) provided that such differences are tied directly and exclusively to Federal or State requirements or prohibitions on the coverage of benefits that apply differently to plans depending on whether they are offered through or outside an Exchange.
- Third Party Administrators (TPAs) or Vendors who assist these issuers

Purpose

- Provide information regarding the payment, invoicing, and collections process for the Risk Corridors program including:
 - An overview of receiving risk corridors payments (including a discussion of netting and holdbacks)
 - Invoicing process
 - Remitting payments through Pay.gov

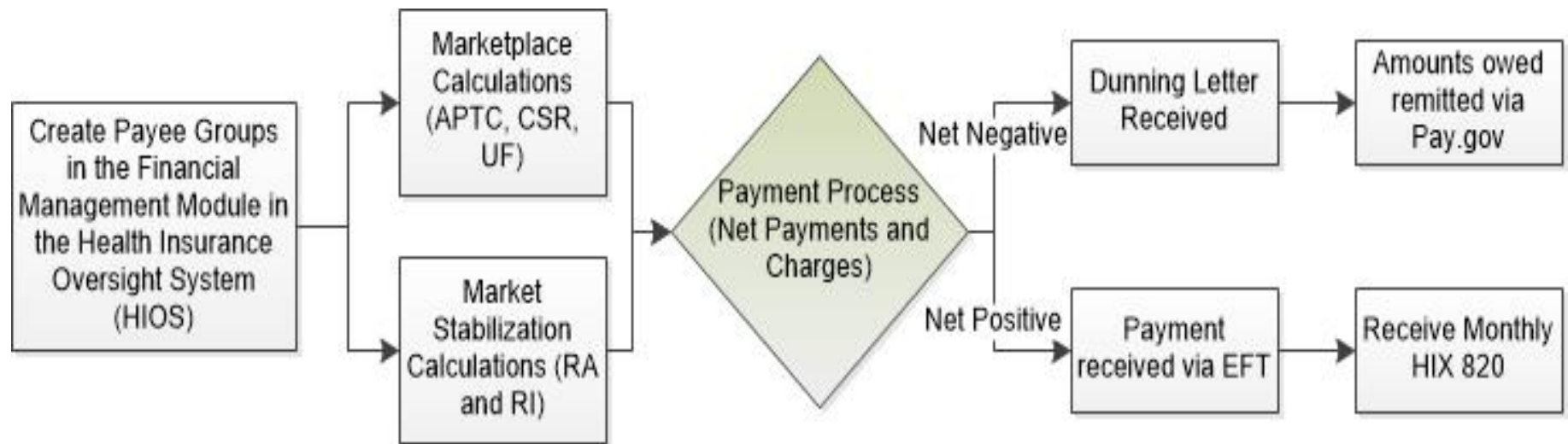
Risk Corridors Overview

Risk Corridors Overview

- The goal of the temporary Risk Corridors program is to provide greater stability for the individual and small group market QHPs during the 2014-2016 benefit years
- The Risk Corridors program applies only to QHP issuers as defined in 45 CFR §153.500
- Issuers make Risk Corridors payments if their allowable costs are 3+% lower than their target amount, and receive payments if allowable costs are 3+% higher than their target amount
 - Risk Corridors payments are made from Risk Corridors charges collected
- Issuers submitted Risk Corridors data through the Health Insurance Oversight System (HIOS) Medical Loss Ratio (MLR) module during two submission windows in July and August/September 2015.

Payment and Collection Process Overview

Payment and Collection Process Overview



Payment and Collection Process Overview (Continued)

1. Issuers create their Payee Group in the Financial Management module (HIOS).
 - Parent Payee Groups for insurance companies end with the designation “000”. (ex. A1234000).
 - Payee Group for Issuers ends in 001 or 051 (ex. A1234001 or A1234051).
 - **NOTE: 051 does not apply to new Payee Groups**
2. Source of Payment and Charge Information
 - For Marketplace Programs (APTC, CSR, UF), Issuers submit data to CMS.
 - For the Risk Corridors program, payments and charges are calculated on the MLR Annual Reporting Form and Risk Corridors Plan-Level Form that are submitted through the HIOS MLR module.

Payment and Collection Process Overview (Continued)

3. Risk Corridors program Issuers received information from CMS communicating the preliminary proration percentage for benefit year 2014 on October 1, 2015.
4. Payment Processing – Netting
 - During each month, transactions (Account Payables [AP] and Account Receivables [AR]) for all programs (APTC, CSR, UF, RA, RI, and RC) are processed together.
 - CMS can only make Risk Corridors payments from the collection of Risk Corridors charges.

Netting

- To repeat, each month all APs and ARs for the financial management programs (APTC, CSR, FFM UF, RA, RA UF, RI and RC) are processed together.
- As set forth in 45 CFR 156.1215(b), the purpose of processing these amounts together each month is to net any amounts owed to a Payee Group (the prorated payment amount for Risk Corridors), from any amounts owed by the Payee Group to CMS.
- After netting, if any amount is still owed by the Payee Group to CMS, this amount will be communicated via a Dunning Letter (that is, an invoice).

Payment and Collection Process Overview (Continued)

5. After all transactions are netted, Payees who have a net positive balance will receive a Payment from Treasury via EFT.
6. After all transactions are netted, Payees who have a net negative balance will receive a Dunning Letter(s).
 - Issuers will pay the Dunning letter/invoiced amount at:
<https://www.pay.gov/public/home>
7. Payees will receive a Payment Report, which will be issued and sent to the Financial Authority Contact (FAC) for the Payee Group via email.

Payment and Collection Process Overview (Continued)

- Example #1

- TIN: 123456789 (Payee ID A1234001)

- Issuer 67891

- RC

	-\$5,000.00
--	-------------

- Issuer 23456

- RC

	-\$7,500.00
--	-------------

Net	-\$12,500.00
-----	--------------

- A Dunning Letter will be sent to Payee ID A1234001 for Issuers 67891 and 23456 for a total of \$12,500

Payment and Collection Process Overview (Continued)

- Example #2

- TIN: 123456789 (Payee ID A1234001)

- Issuer 12345

– APTC	\$1,000.00
– CSR	\$500.00
– FFM UF	-\$200.00

- Issuer 23456

– RC	-\$7,500.00
------	-------------

Net	-\$6,200.00
-----	-------------

- A Dunning Letter will be sent to Payee ID A1234001 for a total of \$6,200.

Hold Back Overview

- CMS will apply hold back to payments for the Risk Corridors program at a rate of 2.5% for appeals.

Holdback and Payment: Risk Corridors Example

- Example:
 - Issuer A is eligible for \$100.00 for Risk Corridors payment.
 - Issuer will receive \$97.50 in December 2015.
 - The hold back amount of \$2.50 whenever the risk corridors appeals in that market are resolved.

Invoicing Overview

Dunning Letters

- CMS will generate a Dunning Letter (that is, an invoice) for any balance owed. There are two (2) types of letters:
 1. **Initial Dunning Letter** – the initial Bill or Invoice that will give the Issuers 30 days to pay the amount due.
 - Issuers will receive one (1) Dunning Letter for each program for which there is an outstanding balance.
 2. **Intent to Refer (ITR) Letter** – the final letter requesting payment is sent 60 days after the Invoice Date on the Initial Dunning Letter.

Dunning Letters Timeline

- Initial Dunning Letters are mailed to Issuers around the middle of the month if the total program-level charges exceed payments in a given month.
- The ITR Letter will be sent 60 days after the invoice date of the Initial Dunning Letter if payment is not received.
- If no payment has been submitted 90 days after the date of the Initial Dunning Letter, Issuers will be referred to the U.S. Department of Treasury for collection.

Dunning Letter Timeline: Illustration

Date	Event
November 15	Initial Dunning Letters transmitted if charges across programs (including RC) exceed program payments (excluding RC)
December 15	Deadline to submit Initial Dunning Letter payments via Pay.gov
January 15	Intent to Refer Letter transmitted if there is an outstanding balance
February 15	Outstanding debt referred to the U.S. Treasury



The timeline above illustrates an example timeframe of the Monthly Payment Submission Process; exact dates are subject to change.

Dunning Letter (Invoice) Number Logic

Invoice Number Logic

- **Standard Program Type Invoice Format:**
 - Program Designator+ Year/Month + Payee ID + Transaction Sequential Number
 - [1 + 4 + (7 or 8) + 3]
 - Example: **U1410A004001001**
 - Program Designator:
 - APTC - A
 - CSR - C
 - UF - U
 - SHOPUF - S
 - RI Payments - P
 - RI Charges - E
 - RI Charge Refund – G
 - Risk Corridor Charges – K

Invoice Number Logic (Continued)

- **Risk Adjustment (RA) and Risk Adjustment Default (RAD) Program Type Invoice Format:**

- Program and Market Designator + Program Year + State + Year/Month + Issuer ID + Transaction Sequential Number
 - [1 + 2 + 2 + 4 + 5 + 3]
 - Example: **I15VA141012345001**

- Program and Market Designator

- RA -
 - Individual - I
 - Small Group - L
 - Catastrophic - T
 - Merged - M
- RA Default -
 - Individual - N
 - Small Group - O
 - Catastrophic - H
 - Merged - B
- Program Designator -
 - RA UF – D
 - RA UF Refund – J
 - RA Refund – Q

Initial Request – Dunning Letter

Initial Dunning Letter Header

Date: 15-NOV-2015

The date listed on the letter header is the date the Dunning Letter was generated.

FEPSCUSTOMER1
7500 SECURITY BLVD
BALTIMORE, MD 2124

The contact information is the financial authority contact information provided during the Payee Group and Financial Information Form creation process in the Financial Management Application in HIOS.

DUNNING LETTER– INITIAL REQUEST

Re:	Program:	Risk Corridors Charges
	Entity ID:	B001008
	Invoice Number:	K1402B123456001
	Invoice Date:	15-NOV-2015
	Total Amount Due:	\$275.00

Final Request Dunning Letter Header

(Continued)

- The specific **Program** (3Rs/User Fees) for which a balance due is identified.
- The **Entity ID** is the Payee ID, which is generated in the Financial Management Application.
- The **Invoice Number** will be used to submit payment in Pay.gov.

DUNNING LETTER – FINAL REQUEST

Re:

Program:	Risk Corridors Charges
Entity ID:	B001008
Invoice Number:	K1402B123456001
Invoice Date:	15-NOV-2015
Total Amount Due:	\$275.00



The Dunning Letter is generated by Marketplace and Premium Stabilization programs. CMS transmits separate Dunning Letters if amounts are owed for multiple Marketplace or Premium Stabilization programs.

Failure to Submit Payment Upon First Request

- Any Risk Corridors program amounts owed to CMS and not paid within 30 calendar days from the date of Initial Dunning Letter will be assessed interest starting from the date of delinquency (i.e., from the date of the Initial Dunning Letter.)



CMS updates the interest rate on a quarterly basis. The current CMS-established interest rate is 10.00 percent per year.

Final Letter – Intent to Refer Letter

Intent to Refer Letter Overview

- If payment is not submitted by the Initial Dunning Letter deadline, a Final Letter, the Intent to Refer Letter, is generated 60 days after the date of the Initial Dunning Letter.
- The ITR Letter (**Final Request**) reflects administrative charges and accrued interest in addition to the original balance owed.

ITR Letter Overview (Continued)

Date: 15-NOV-2015

FEPSCUSTOMER1
7500 SECURITY BLVD
BALTIMORE, MD 2124

DUNNING LETTER – FINAL REQUEST

Re: Program:	Risk Corridors Charges
Entity ID:	B001008
Invoice Number:	K1402B123456001
Invoice Date:	15-NOV-2015
Invoice Amount:	\$275.00
Administrative Fee:	\$25.00
Interest Charge:	\$25.00
Total Amount Due:	\$325.00

The Invoice Number matches the Invoice Number transmitted in the Initial Dunning Letter.

The Total Amount Due reflects the total sum of the Invoice Amount, Interest Charge and Administrative Fee.

Failure to Submit Payment Upon Final Request



- Debts that remain unpaid 90 days from the date of the initial request will be referred to the Department of Treasury's Debt Management Services for Cross Servicing and Offset of Federal Payments.
- Treasury will collect all required penalty charges and fees.
- Treasury will use all tools at its disposal to collect debt, including referral to the Department of Justice for litigation.

Submitting Payments on Pay.gov

Please refer to the Appendix of this presentation for instructions on How to submit invoice/dunning letter payments through Pay.gov.

Help Desk Assistance

- Risk Corridors Issuers may send questions related to Dunning Letters, the invoicing process, and payment reports to: CCIIInvoices@cms.hhs.gov
- For general questions about Risk Corridors, contact ACAriskcorridors@cms.hhs.gov
- For Pay.gov customer service, concerns or technical issues contact:
 - **Call:** 800-624-1373 (Toll free, Option #2) **or** 216-579-2112 (Option #2)
 - **Email:** pay.gov.clev@clev.frb.org

Questions?

To submit questions by webinar:

- *type your question in the text box under the 'Q&A' tab*

Resources

Resource	Resource Link
Centers for Medicare & Medicaid Services (CMS)	http://www.cms.gov/
U.S. Department of Health & Human Services	http://www.hhs.gov/
The Center for Consumer Information & Insurance Oversight (CCIIO) Web page	http://www.cms.gov/ccio
Consumer website on Health Reform	http://www.healthcare.gov/
Pay.gov Web Help	https://www.pay.gov/WebHelp/HTML/about.html
Registration for Technical Assistance Portal (REGTAP) - presentations, FAQs	https://www.REGTAP.info

Inquiry Tracking and Management System (ITMS)

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

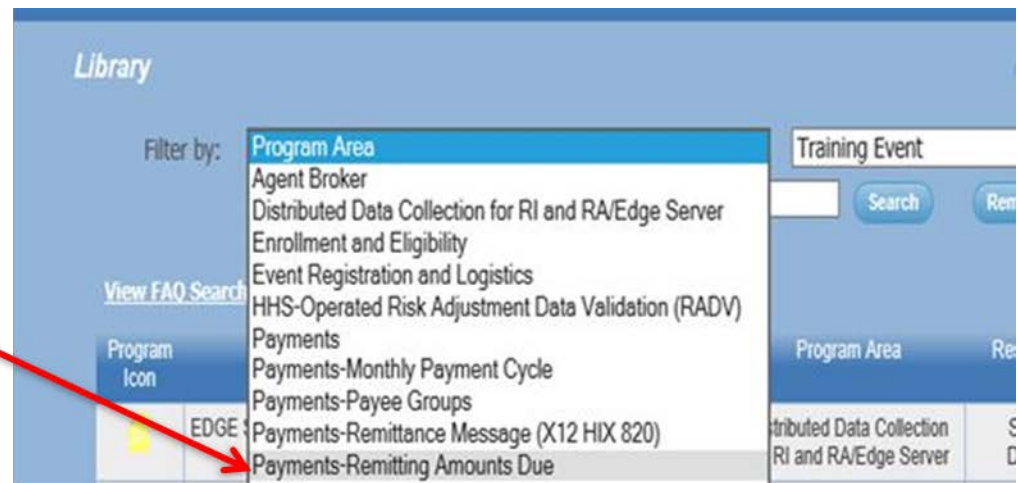
Select “Submit an Inquiry” from My Dashboard.



Document Location

Additional Materials for the Invoicing and Collections Webinar are available in the REGTAP Library at <https://www.REGTAP.info>

Under Program Area, select “Payments – Remitting Payments Due”



FAQ Database on REGTAP

My Dashboard



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

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

FAQ Search

FAQ ID Enter numeric FAQ ID only

Keyword/Phrase

Program Area

Select All
Agent Broker
Distributed Data Collection for RI and RA/Edge Server
Enrollment and Eligibility
Event Registration and Logistics

Primary Category

Secondary Category

Publish Date

Start Date

22

End Date

22

Search

Clear Search

Closing Remarks

Appendix

Submitting Payment on Pay.gov

Pay.gov

- Pay.gov was developed to meet the needs of the United States Treasury in implementing an electronic collections process.
- The website serves as a government-wide portal for many different government agencies to receive and process collections payments.
- Access Pay.gov at <https://pay.gov/public/home>

- Pay.gov is the portal to access the CMS Health Insurance Marketplace and Premium Stabilization Programs Payment Form, which allows for the submission of payments for Marketplace-related charges.
- The CMS Health Insurance Marketplace and Premium Stabilization Programs Payment Form (Marketplace Payment Form) is accessible directly through Pay.gov.

Pay.gov (Continued)

- Issuers may use the following link, <https://www.pay.gov/WebHelp/HTML/about.html>, for additional assistance using Pay.gov.
- Additionally, Issuers may access this link by clicking “Online Help” from anywhere within Pay.gov. If an Issuer needs additional help making payment via the Pay.gov Form, they should first contact Pay.gov to see if the issue is related to a system error.
- If the issue is not a system error, the Issuer should refer back to the training slides and job aids posted on REGTAP. If the Issuer still needs assistance after reviewing the materials, the Issuer should contact CMS at CCIInvoices@cms.hhs.gov.

Registering on Pay.gov

- CMS is implementing a streamlined approach to complete the CMS Health Insurance and Premium Stabilization Programs Payment Submission process through Pay.gov.
- Issuers should create a Pay.gov account before completing the CMS Health Insurance and Premium Stabilization Programs Payment Form, or “Payment Form.”

Registering on Pay.gov (Continued)

- Registration information is used to create a user profile containing both user data and the user's company data – some of this data is used to pre-populate the Form:
 - **Primary Contact for Submission:** User's name, e-mail, and phone number within the Pay.gov profile will pre-populate the Form as 'Contact 1 for Submission'
 - **NOTE: Issuers will have the option to supply a secondary contact within the Payment Form, though a secondary contact is not required to complete the process.**
 - **Company Name:** The legal business name (LBN) within the Pay.gov profile will pre-populate the Form as "Legal Business Name (LBN)" associated with the organization's Federal Tax Identification Number (TIN)
 - **Billing Address:** The company address within the Pay.gov profile will pre-populate the Form as "Billing Address"

Registering on Pay.gov (Continued)

The screenshot shows the Pay.gov homepage. At the top right, there are links for 'Alert', 'Log in', and 'Register'. The 'Register' link is highlighted with a red box, and a red arrow points from it to a larger white box on the right side of the page. This box contains the text 'Log in | Register'. Below the navigation bar, there is a search bar with the placeholder text 'Find Forms, Agencies...' and a 'Search' button. To the right of the search bar are links for 'MAKE A PAYMENT', 'FIND AN AGENCY', and 'ONLINE HELP'. The main content area features a large image of classical columns and the text 'Welcome to Pay.gov'. Below this, there is a paragraph explaining that Pay.gov is a convenient way to make secure electronic payments to Federal Government Agencies. A red button labeled 'Make a Payment' is visible. On the left side, under the heading 'I NEED TO PAY', there is a list of categories: LOAN PAYMENT, MEDICAL EXPENSE, FINE, VIOLATION, OR PENALTY, FOIA REQUEST, DEBT, NATIONAL PARK SERVICE, TRAINING OR CONFERENCE, and MAKE A DONATION OR CONTRIBUTION. On the right side, under the heading 'COMMON PAYMENTS', there is a paragraph explaining that Pay.gov processes payments for hundreds of Federal government agencies. Below this, there are three sections: 'DEPARTMENT OF VETERAN AFFAIRS' with a link to 'VA Medical Care Copayment', 'SMALL BUSINESS ADMINISTRATION (SBA)' with a link to 'View all SBA forms', and 'DEPARTMENT OF DEFENSE' with a link to 'Out of Service Debt Account Information'. At the bottom, there is a section for 'UNITED STATES COURTS' with a link to 'Payment of Violation Notice'.

Pay.gov

Alert | Log in | Register

Find Forms, Agencies... Search

MAKE A PAYMENT FIND AN AGENCY ONLINE HELP

Welcome to Pay.gov

Pay.gov is the convenient and fast way to make secure electronic payments to Federal Government Agencies. Many common forms of payment are accepted, including credit cards, debit cards, and direct debit.

Click on a link below or use the search box above to get started.

[Make a Payment](#)

I NEED TO PAY

Select one of the options below to see a list of forms and agencies that fall into that category.

- ★ [LOAN PAYMENT](#)
- ★ [MEDICAL EXPENSE](#)
- ★ [FINE, VIOLATION, OR PENALTY](#)
- ★ [FOIA REQUEST](#)
- ★ [DEBT](#)
- ★ [NATIONAL PARK SERVICE](#)
- ★ [TRAINING OR CONFERENCE](#)
- ★ [MAKE A DONATION OR CONTRIBUTION](#)

COMMON PAYMENTS

Pay.gov processes payments for hundreds of Federal government agencies, the most common of which are listed below.

DEPARTMENT OF VETERAN AFFAIRS

- ▶ [VA Medical Care Copayment](#)

SMALL BUSINESS ADMINISTRATION (SBA)

- ▶ [View all SBA forms](#)

DEPARTMENT OF DEFENSE

- ▶ [Out of Service Debt Account Information](#)

UNITED STATES COURTS

- ▶ [Payment of Violation Notice](#)

Registering on Pay.gov (Continued)

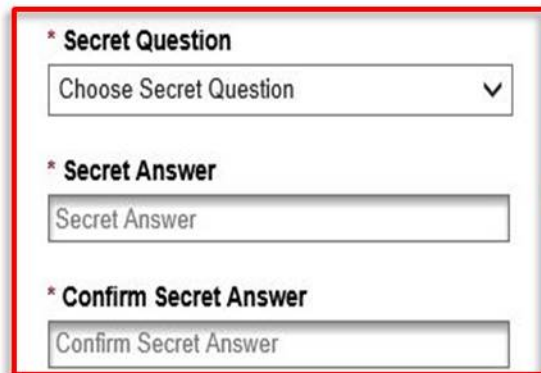
Register for a Pay.gov Account

Please enter the following information to create your account. After you have provided all the necessary data, please click the Register Account button. You will then be redirected to the Log in page where you will log in to gain access to Pay.gov. Required fields are marked with an *.

* First Name <input type="text" value="ARDX"/>	* Address <input type="text" value="7500 Security Blvd"/>
* Last Name <input type="text" value="User 1"/>	Address 2 <input type="text" value="Address 2"/>
* Username <input type="text" value="ardxuser2"/>	* City <input type="text" value="Baltimore"/>
* Email Address <input type="text" value="ardxuser2@gmail.com"/>	* Country <input type="text" value="United States"/>
* Confirm Email Address <input type="text" value="ardxuser2@gmail.com"/>	* State/Province <input type="text" value="Maryland"/>
* Password <input type="password" value="....."/>	* ZIP/Postal Code <input type="text" value="21240"/>
* Confirm Password <input type="password" value="....."/>	* Phone Number <input type="text" value="757-222-1234"/>

1. In order to register in Pay.gov, users must first fill out account user information

Registering on Pay.gov (Continued)



* **Secret Question**

Choose Secret Question ▼

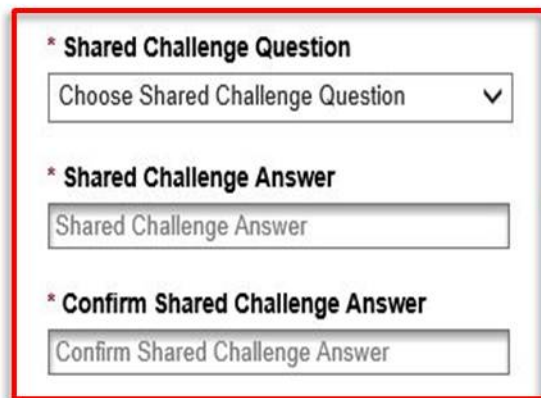
* **Secret Answer**

Secret Answer

* **Confirm Secret Answer**

Confirm Secret Answer

2. Users must choose a secret question and answer in order to reset password information.



* **Shared Challenge Question**

Choose Shared Challenge Question ▼

* **Shared Challenge Answer**

Shared Challenge Answer

* **Confirm Shared Challenge Answer**

Confirm Shared Challenge Answer

2a. Users must then choose a shared challenge question. A shared challenge question allows Pay.gov to verify user identities.

Registering on Pay.gov (Continued)

Rules of Behavior

PAY.GOV INFORMATION AND USER RESPONSIBILITY STATEMENT

USER RESPONSIBILITIES:
Once assigned a Username and password, you agree to be responsible for the consequences that result from the disclosure or use of the password. To avoid compromising the password, you agree that you will:

* Not make the password known to anyone or put it in written form unsecured

[View and Print Rules of Behavior](#)

* ☒ I agree to the Pay.gov Rules of Behavior

Register Account

[Cancel](#)

3. Users must agree to Pay.gov Rules of behavior and then click “Register Account.”

Submitting Payment on Pay.gov

Access the Marketplace Payment Form directly from the Pay.gov website: <https://pay.gov/public/home>

Welcome to Pay.gov

Pay.gov is the convenient and fast way to make secure electronic payments to Federal Government Agencies. Many common forms of payment are accepted, including credit cards, debit cards, and direct debit.

Click on a link below or use the search box above to get started.

Make a Payment

1. In order to access the Pay.gov forms, users must click the “Make a Payment” button

Submitting Payment on Pay.gov (Continued)

2. Search by keyword such as the type of payment, agency name, form name or number:



2a. Users can search by form, “CMS Health Insurance and Premium Stabilization Programs Payment Form”

OR

3. [Click here to view a listing of all forms](#)

4. [Click here to view a listing of all agencies](#)
- 

2b. Users can click “Click here to view a listing of all agencies” to search by Agency

Submitting Payment on Pay.gov (Continued)

Find an Agency

Below is a list of all agencies that accept payments on Pay.gov. Many of the agencies listed support online public forms, which are web pages where you type in information about yourself and the payment. Clicking on the agency name below will take you to a list of public forms for the chosen agency.

A B C D E F G **H** I J K L M N O P Q R S T U V W X Y Z 0-9



3. If users choose to search by agency, Issuers must select “H” from the A-Z Index.

Submitting Payment on Pay.gov (Continued)

[Health and Human Services \(HHS\) Program Support Center](#)

[Health and Human Services \(HHS\) Program Support Center HQ](#)

[Health and Human Services \(HHS\) Program Support Center SSC](#)

[Health and Human Services \(HHS\): Centers for Disease Control](#)

[Health and Human Services \(HHS\): Centers for Medicare & Medicaid Services \(CMS\)](#)



4. Users must click the “Health and Human Services (HHS): Centers for Medicare & Medicaid Services (CMS)” link.


Submitting Payment on Pay.gov (Continued)

CMS Health Insurance Marketplace and Premium Stabilization Programs Payment Form

Please use this form to pay amounts owed related to the Health Insurance Marketplace and Premium Stabilization Programs.

Form Number: HHSC110 | OMB Number: 0938-1187

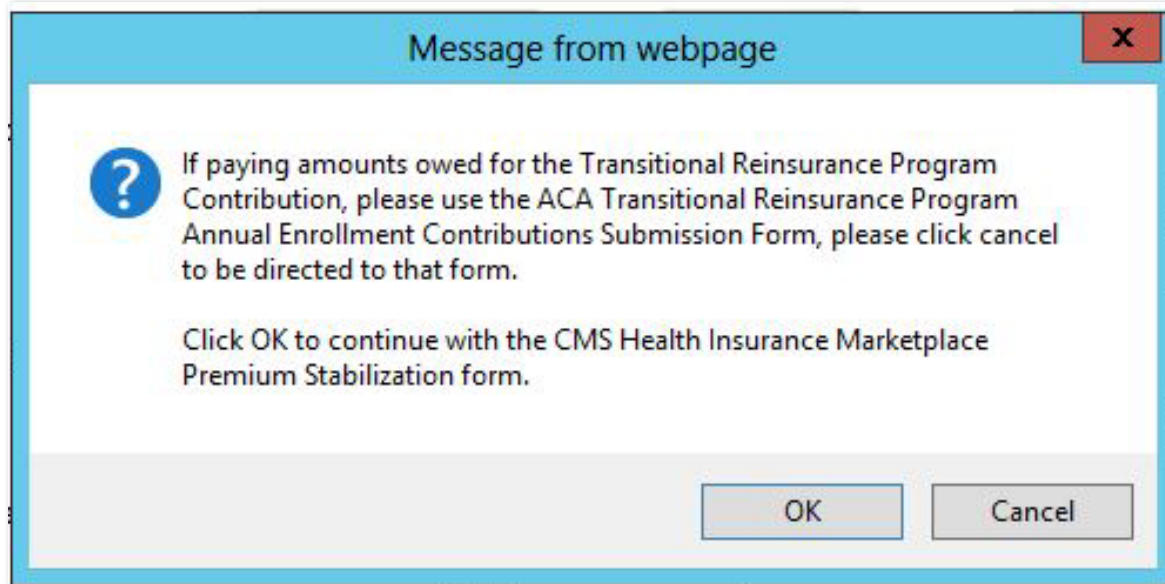
Continue to the Form



5. Users must click the “Continue to the Form” link under “CMS Health Insurance and Premium Stabilization Programs Payment Form”

Submitting Payment on Pay.gov

(Continued)



Users must click “OK” in order to be directed to the Payment Form. Issuers may click “Cancel” to be redirected to the Transitional Reinsurance forms.



CMS Health Insurance Marketplace and Premium Stabilization Programs Payment Form

CMS Health Insurance Marketplace and Premium Stabilization Programs Payment Form

- The CMS Health Insurance Marketplace and Premium Stabilization Programs Payment Form contains four (4) sections:

1. Company Information
2. Contact Information
3. Program Information
4. Invoice Information



Users must complete all four (4) sections in order to submit payment. All fields marked with an asterisk (*) are required.

CMS Health Insurance Marketplace and Premium Stabilization Programs Payment Form (Continued)

- Data elements provided in the header of the **Dunning Letter** are necessary to complete the CMS Health Insurance Marketplace and Premium Stabilization Programs Payment Form.
- Multiple payments cannot be combined on one (1) form and **must** be submitted on separate forms.

CMS Health Insurance Marketplace and Premium Stabilization Programs Payment Form (Continued)

Company Information:

* Company Name

* Address

* City

* State

* Zip Code

Users should enter Company Information including Company Name, Address, City, State and Zip Code.

Primary Contact Information:

* Name First * Name Last

* Phone Ext: * Email

Secondary Contact Information:

Name First Name Last

Phone Ext: Email

Users should enter Primary Contact Information and Secondary Contact information including First and Last Name, Phone Number, Extension and Email.

Program Information:

* Program Type

- Advanced Premium Tax Credit Program
- Cost Sharing Reductions Program
- Federally Facilitated Marketplace User Fee Program
- Reinsurance Payment Overpayments
- Risk Adjustment Charges
- Risk Corridors Charges
- User Fees for Risk Adjustment

Users should select the Marketplace Program, UF, Reinsurance Payment Overpayments, Risk Adjustment or Risk Corridors Charges.

CMS Health Insurance Marketplace and Premium Stabilization Programs Payment Form (Continued)

Invoice Information:

* Date	10-15-2015
* Entity ID	B001008
* Verify Entity ID (Retype)	B001008
* Invoice Number	K1402B123456001
* Verify Invoice Number (Retype)	K1402B123456001
* Payment Amount: \$	275.00
* Verify Payment Amount (Retype): \$	275.00
<div>Save PDF Preview Continue</div>	

The system auto-populates the date field with the current date. This field cannot be changed.

Users should enter the **Entity ID** found on the Dunning Letter.

Users should enter the **Invoice Number** found on the Dunning Letter.

Users should enter the **Total Amount Due** found on the Dunning Letter.

Users may choose “**Continue**” to submit payment, or “**PDF Preview**” to view the completed form.

Enter Payment Information Screen

Before You Begin 1 Complete Agency Form 2 Enter Payment Info 3 Review & Submit 4 Confirmation

Please provide the payment information below. Required fields are marked with an *.

* Payment Amount:

\$275.00

* Payment Date (mm/dd/yyyy)

06/15/2015

* Account Holder Name

ARDX User1

☒ I want to enter a new account

☐ I would like to save this payment account to my profile

* Select Account Type

Select Account Type



* Routing Number

Routing Number

* Account Number

Account Number

* Confirm Account Number

Confirm Account Number

Users should confirm Payment amount before submitting payment to Pay.gov.

Users may enter Payment information by selecting “I want to enter a new account.” Users will be prompted to enter Bank Account Routing and Account Numbers.

Enter Payment Information Screen

(Continued)

COMPANY NAME

FEPSCustomer1

ENTITY ID

B001008

INVOICE NUMBER

K1402B123456001

PROGRAM TYPE

Risk Corridors Charges

ADDRESS

7500 Security Blvd

CITY, STATE ZIP

Baltimore, Virginia - VA 21240

CONTACT NAME LAST

User1

CONTACT NAME FIRST

ARDX

CONTACT PHONE

757-222-1234

CONTACT EMAIL

ardxuser1@gmail.com

[Previous](#)

[Return to Form](#)

[Cancel](#)

[Review and Submit Payment](#)

Once payment information has been entered and confirmed, Users should click “Review and Submit Payment” button.

Pay.gov: Helpful Hints

Issuers should:

- **Not** click twice on the “Review and Submit Payment” button. This **will** result in an overpayment.
- **Not** click browser “back” button when submitting payment.
- **Not** wait to submit payment until the date the payment is due.

Review and Submit Screen

Before You Begin 1 Complete Agency Form 2 Enter Payment Info 3 Review & Submit 4 Confirmation

Please review the payment information below. Required fields are marked with an *

Payment Information

Payment Type: Bank account (ACH)
Payment Amount: \$275.00
Payment Date: 10/15/2015
COMPANY_NAME: FEPSCustomer1
ENTITY_ID: B001008
INVOICE_NUMBER: K1402B123456001
PROGRAM_TYPE: Risk Corridors Charges
ADDRESS: 7500 Security Blvd
CITY_STATE_ZIP: Baltimore, Virginia - VA 21240
CONTACT_NAME_LAST: User1
CONTACT_NAME_FIRST: ARDX
CONTACT_PHONE: 757-222-1234
CONTACT_EMAIL: ardxuser1@gmail.com

Account Information

Account Holder Name: ARDX User1
Routing Number: 122105278
Account Number: *****9999

☐ I would like to receive an email confirmation of this transaction.



Users should review and confirm payment information before submission. In order to receive confirmation emails, Issuers must select the “I would like to receive an email confirmation of this transaction.”

Review and Submit Screen (Continued)

Authorization and Disclosure Statement

[Printable version](#)

prevent the transfer, despite reasonable precautions that we have taken. PLEASE BE SURE TO PRINT OUT A COPY OF THIS AUTHORIZATION AND DISCLOSURE LANGUAGE AND KEEP A COPY FOR YOUR RECORDS.

II. Businesses

A. Authorization

You acknowledge that you have read and understand the Pay.gov business disclosure language, have the authority to act on behalf of your business with regard to the named financial institution account, and authorize the Federal Reserve Bank of Cleveland to debit the named financial institution account. This

* ☒ I agree to the Pay.gov authorization and disclosure statement

[Previous](#)

[Return to Form](#)

[Cancel](#)

[Submit Payment](#)



Users should click the box above to agree with the Authorization and Disclosure Statement before clicking “Submit Payment”.

Pay.gov Payment Confirmation

Before You Begin 1 Complete Agency Form 2 Enter Payment Info 3 Review & Submit 4 Confirmation

Payment Confirmation

Your payment is complete

Pay.gov Tracking ID: 3FOVKJ70

Agency Tracking ID: 120024734090

Form Name: CMS Health Insurance Marketplace and Premium Stabilization Programs Payment Form

Application Name: CMS Health Insurance Marketplace and Premium Stabilization Programs

Payment Information

Payment Type: Bank account (ACH)

Payment Amount: \$275.00

Transaction Date: 10/15/2015 03:20:08 PM EDT

Payment Date: 10/19/2015

COMPANY NAME: FEPSCustomer1

ENTITY ID: B001008

INVOICE NUMBER: K1402B123456001

PROGRAM TYPE: Risk Corridors Charges

ADDRESS: 7500 Security Blvd

CITY, STATE ZIP: Baltimore, Virginia - VA 21240

CONTACT NAME LAST: User1

CONTACT NAME FIRST: ARDX

CONTACT PHONE: 757-222-1234

CONTACT EMAIL: ardxuser1@gmail.com

Account Information

Account Holder Name: ARDX User1

Routing Number: 122105278

Account Number: *****9999

Email Confirmation Receipt

Confirmation Receipts have been emailed to:

ardxuser1@gmail.com

Once users have submitted their payment form, and then reviewed and confirmed payment information, this confirmation screen will appear.

Pay.gov Payment Confirmation Email

Your payment has been submitted to Pay.gov and the details are below. If you chose the option to receive payment reminders in your user profile and this is a deferred or recurring payment, you will receive a reminder email several days before the payment is processed. You may change your payment reminder preferences and email address in your user profile at any time.

If you wish to cancel this transaction, log in to your account at <https://qa.pay.gov/> and choose the Pending tab of the Payment Activity page. If you have any questions regarding this payment, please contact Exchange Operations Center at (855) 267-1515 or CMS_FEPS@cms.hhs.gov.

Application Name: CMS Health Insurance Marketplace and Premium Stabilization Programs
Pay.gov Tracking ID: 3FOVKJ7O
Agency Tracking ID: 120024734090

Account Holder Name: ARDX User1
Transaction Type: ACH Debit
Transaction Amount: \$275.00
Payment Date: 10/19/15
Account Type: Business Checking
Routing Number: 122105278
Account Number: *****99999

Transaction Date: 10/15/2015 03:20:08 PM EDT
Total Payments Scheduled: 1
Frequency: OneTime

COMPANY NAME: FEPSCustomer1
ENTITY ID: B001008
INVOICE NUMBER: K1402B123456001
PROGRAM TYPE: Risk Corridors Charges
ADDRESS: 7500 Security Blvd
CITY, STATE ZIP: Baltimore, Virginia - VA 21240
CONTACT NAME LAST: User1
CONTACT NAME FIRST: ARDX
CONTACT PHONE: 757-222-1234
CONTACT EMAIL: ardxuser1@gmail.com

THIS IS AN AUTOMATED MESSAGE. PLEASE DO NOT REPLY.



Issuers should keep the payment confirmation email pictured above as proof of payment.

Pay.gov: Helpful Hints

Issuers should:

- Submit payment as early as possible.
- Register in Pay.gov so a record of all completed transactions will exist within the Pay.gov account in the Payment Activity section under “My Account.”
- Utilize the Dunning Letter to complete the Payment Form.
- Retain the confirmation email transmitted once payment is submitted.