

CMS Issuer Technical Work Group



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 - ✓ ***CMSzONE Updated Page Design***
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Sun	Mon	Tues	Wed	Thurs	Fri	Sat
31	1	2	3	4 Data Recon & Inbound 834/BAA Workgroup 12:30-1:30pm	5	6
7	8 CCIIO Enrollment Webinar(Policy Focus) 12:00pm-1:00pm	9 CMS Issuer Technical Workgroup 3:00pm-4:30	10	11 Data Recon & Inbound 834/BAA Workgroup 12:30-1:30pm	12	13
14	15	16 CMS Issuer Technical Workgroup 3:00pm-4:30	17	18 Data Recon & Inbound 834/BAA Workgroup 12:30-1:30pm	19	20
21	22 CCIIO Enrollment Webinar(Policy Focus) 12:00pm-1:00pm	23 CMS Issuer Technical Workgroup 3:00pm-4:30	24	25 Data Recon & Inbound 834/BAA Workgroup 12:30-1:30pm	26	27
28	29	30 CMS Issuer Technical Workgroup 3:00pm-4:30	27	28	29	30



Requesting Updates to the CMS Issuer Distribution List

The CMS Issuer Communications Distribution List sends e-mail messages pertaining to :

- ✓ Alerts on Deliveries for Enrollment Pre-Audit files; Enrollment Reconciliation Files; Open Enrollment Activities; IC834 Activities (Specifically processing schedules, delays in processing or reporting), and other alerts.
- ✓ Daily IMP1A status

The CMS Issuer Communications Distribution List sends e-mail alerts:

- ✓ Daily between 10:30 and 11:00 AM EST.

To add yourself to the distribution list:

- ❖ Send an e-mail to CMS_Issuer_Communications@cms.hhs.gov with the subject line:
"Add POC to Distribution List"

To remove yourself from the distribution list:

- ❖ Send an e-mail to CMS_Issuer_Communications@cms.hhs.gov with the subject line:
"Remove POC from Distribution List"

To add multiple contacts to the distribution list:

- ❖ Send an e-mail to CMS_Issuer_Communications@cms.hhs.gov with the subject line:
"Add POC to Distribution List"
- ❖ Include the email addresses of all desired contacts to be added in the body of your message

To remove multiple contacts from the distribution list:

- ❖ Send an e-mail to CMS_Issuer_Communications@cms.hhs.gov with the subject line:
"Remove POC to Distribution List"
- ❖ Include the email addresses of all desired contacts to be removed in the body of your message

***PLEASE NOTE:** Any email addresses included in the body of your distribution requests may be subject to the action requested. Please ensure you omit any superfluous addresses not intended for receipt of your requested action (i.e. IT support distributions, alternate personal email, etc.)

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 to the right of your name (see below).

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.

The screenshot displays the WebEx interface. On the left, the 'Participants' panel shows a list of participants: Ama Emanuel (me) and Philip Descorbeth (Host). A blue arrow points to the raised hand icon next to Ama Emanuel's name. On the right, the 'File Transfer' window is open, showing a file named '20170104 Recon IC83...' with a size of 304057 bytes. A red box highlights the 'Download...' button, which is currently greyed out. A blue arrow points to the 'File' menu, and another blue arrow points to the 'Download...' button. The 'File Transfer' window also shows a 'Share File...' button and a table with columns for File name, Location, Size, and Status.

File name	Location	Size	Status
20170104 Recon IC83...	\\CO-ADHOME1\HOME1\E...	304057 bytes	Shared

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

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)

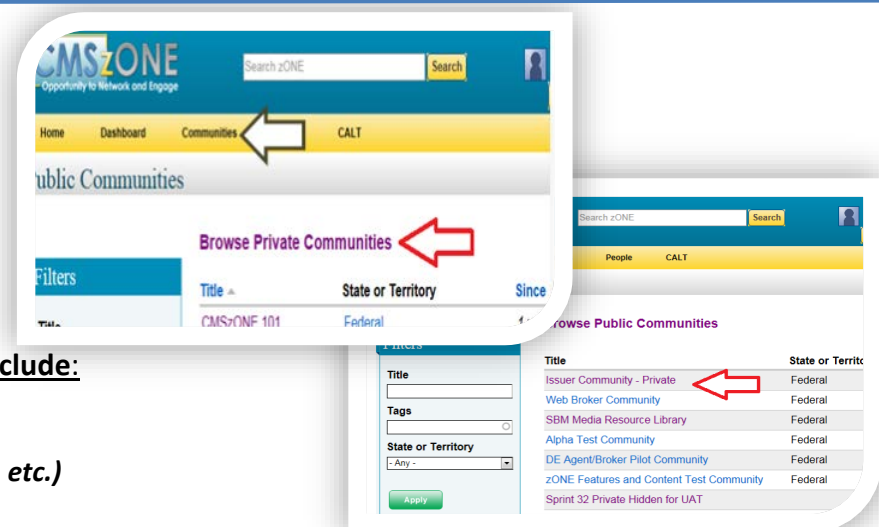
EIDM Registration Process: (Pre-requisite to CMSzONE Access)

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**
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.)



CMSzONE Updated Page Design

- Live in production
- New look & feel
- New pages by subject
- Added page links
- Follow relevant updates
- All documents remain on the main page

Home / Communities / Enhanced Direct Enrollment (EDE) Auditors / Documents

Enhanced Direct Enrollment

View Edit Revisions

 Jonathan Horton...
posted: 02/14/2019

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Use the pages and links below to find all of the necessary documents regarding Enhanced Direct Enrollment (EDE) partners and auditors. Click on the buttons below to access EDE documentation for each topic.

Business Audit Resources

This page contains important information for the business requirements audit, including:

- Templates and toolkits that the auditor uses to conduct the audit
- Audit guidelines and related oversight requirements
- Checklists for the documents that primary and upstream entities must submit to CMS
- CMS-initiated change requests

Business Audit Resources

Privacy And Security Audit Resources

This page contains important information for the privacy and security audit, including:

- CMS Interconnection Security Agreement (ISA)
- Framework for the Independent Assessment of Security and Privacy Controls
- Security and Privacy Assessment Report (SAR)
- Security and Privacy Controls Assessment Test Plan
- EDE System Security and Privacy Plan (SSP) and change log
- Plan of Action and Milestones (POA&M) template
- Privacy Impact Assessment (PIA) form
- Health Insurance Portability and Accountability Act (HIPAA) and Center for Internet Security (CIS) crosswalk to the NIST 800-53 controls

Privacy And Security Audit Resources

Document Details

Community Association
Enhanced Direct Enrollment (EDE) Auditors
Issuer Community - Private
Web Broker Community

Tags

Enhanced Direct Enrollment EDE
EDE audit

Related Content

Business Audit
Privacy and Security Audit
Eligibility Information
API Information
Frequently Asked Questions

CMSzONE Updated Page Design

- Document tracking
- Page navigation
- Follow subject content updates

Home / Communities / Enhanced Direct Enrollment (EDE) Auditors / Documents

Business Audit

View Edit Revisions

 Jonathan Horton...
posted: 01/31/2018

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[Enhanced Direct Enrollment \(EDE\) - HOME](#)

Business Audit Resources

Resources Name	Description	Last Updated	Changes
Guidelines for Third Party Auditors	This document provides the updated audit guidelines and related oversight requirements for DE entities participating in EDE and their respective third-party auditor.	February 2019	
Business Report Template and Toolkits	This file contains all of the business audit templates and toolkits needed for the auditor to conduct the EDE business audit.	April 2019	
EDE CMS-Initiated Change Request Tracker	This Excel spreadsheet tracker provides information about changes that DE entities are required to implement.	March 2019	
EDE Business Agreement	This document is the current EDE Business Agreement that must be signed and completed by EDE partners prior to going live.	June 2018	

Document Details

Community Association
Enhanced Direct Enrollment (EDE) Auditors
Issuer Community - Private
Web Broker Community

Related Content

[Enhanced Direct Enrollment](#)
[Privacy and Security Audit](#)
[Eligibility Information](#)
[API Information](#)
[Frequently Asked Questions](#)

Guidelines for Updating/Removing Issuer Contacts for Marketplace E-mail Lists (4/08/2019)

*Consumer Information &
Insurance Oversight (CCIIO)*

April 8, 2019

<https://www.regtap.info/FFENR.php>

The information provided in this presentation is not intended to take the place of the statutes, regulations, and formal policy guidance that it is based upon. This material summarizes current policy and operations as of the date it was uploaded to RegTap. Links to certain source documents may have been provided for your reference. We encourage persons taking the course to refer to the applicable statutes, regulations, and other interpretive materials for complete and current information

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Updating/Removing Issuer Contacts for Marketplace E-mail Lists

- **Background**

- Issuers provide contact names and emails for the purpose of receiving correspondence about the Marketplace from various CMS CCIIO divisions. (See Tables on slides 4-7)
 - When an issuer point of contact (POC) changes position or leaves the organization, the contact information has to be updated or removed from each CMS Email distribution list separately. The POC can call or email the CMS Help desk (Marketplace Service Desk-MSD) to request instructions for being removed from applicable lists.

For example: A POC who would like to receive communications regarding QHP certification, including QHP Application Notices, can contact the Marketplace Service Desk (MSD) for instructions on receiving e-mail blasts.

CMS Has Better Equipped the Marketplace Service Desk to Help Issuer Contacts

CMS has expanded the instructions housed at the CMS Marketplace Service Desk (MSD), so that we can provide issuers with a more streamlined process on how to update or remove contacts from the various applications and lists. We will continue to accept issuer feedback for continuous improvement to our processes.

- **Benefits of Expanding the MSD Scripting (Instructions to add or remove issuer contacts)**
 - Issuers are able to clearly pinpoint which distribution list their applicable SMEs should be requesting access to.
 - Issuer burden is reduced by providing a central source of instructions for updating and removing contact information.

E-mail Lists for Marketplace Issuers

Email List Name	Email List Purpose	How to Update Contact information
EDGE Server and Risk Adjustment Operations	Allows users to add, edit, and replace health insurance company/issuer POCs for the EDGE server and the Risk Adjustment program.	These updates must be completed via the RARI Contact Database directly. To add, remove or change a point of contact in your organization, please use the following link: https://acapaymentoperations.secure.force.com/EdgeContactDatabase. Please refer to the EDGE Server Contact Database User Guide for step by step instructions (also available in REGTAP): https://acapaymentoperations.secure.force.com/EdgeContactDatabase/resource/1476479817000/ContactDB_Guidance
The Data Services Hub Support team	For Technical POCs to receive electronic files (Including 834 transactions) via the Marketplace.	Please complete the EDI registration form and provide contact information for the Production Support and Technical Officer listed on the form. The form can be accessed using the following link: * https://zone.cms.gov/document/edi-onboarding-form-and-instructions-connectivity-testing *Access requires active CMSzONE access
XOC	Production alerts including planned outages, unplanned outages and other system production issues (including IRA and SSA services).	Email is sent to Access@hcgov.us requesting to add/delete from Government delivery stakeholder notification Issuer group. Issuers Planned/Unplanned notifications: - o Marketplace - o HUB - o Trusted Data Sources (IRS, SSA, DHS)

E-mail Lists for Marketplace Issuers

Email List Name	Email List Purpose	How to Update Contact information
IC834	For Technical POCs to receive outreach communications pertaining to IC834 transactions, follow-up for performance reports (PO and Summary) on issuer transactions, and other items related to IC834.	To update the contact list for your HIOS IDs (add or remove members), please e-mail the IC834 team directly at Inbound834@bah.com .
HUB/EDI (Issuer Onboarding/EDI Registration)	For Technical POCs to receive outreach and correspondence from the HUB/EDI team. Issuers initially give these contacts when submitting their EDI Onboarding form.	To update the contacts listed on the original EDI Onboarding form, issuers must submit a new Onboarding form (form type of "Change") reflecting the addition of new contacts, or removal of previous contacts The form can be accessed using the following link: * https://zone.cms.gov/document/edi-onboarding-form-and-instructions-connectivity-testing *Access requires active CMSzONE access

E-mail Lists for Marketplace Issuers

Email List Name	Email List Purpose	How to Update Contact information
Enrollment Pre-Audit & Reconciliation	Contacts for your organization will be contacted by CMS resources in regard to any technical issues identified in Issuer-submitted Inbound Reconciliation (RCNI) Files. These contacts may also receive direct communication regarding certain non-EDI enrollment file distributions.	To submit the Enrollment Pre-Audit & Reconciliation Technical Contacts to CMS: Send an e-mail to Marketplace Service Desk (MSD) Help Desk (cms_feps@cms.hhs.gov) with the subject line "RECONCILIATION – TECHNICAL CONTACTS" Please include the name, e-mail address, and business telephone number for each contact provided
Enrollment Reconciliation & Resolution (ER&R) Contacts	CMS requests that each Issuer provide a primary and secondary contact with whom the ER&R contractor can have direct communications. The requested contacts are to be individuals able to assist in resolving conflicts with member and enrollment information; these individuals are more likely to be business end-users rather than EDI or IT representatives.	To submit the ER&R Contacts to CMS: Send an e-mail to the Marketplace Service Desk (MSD) Help Desk (cms_feps@cms.hhs.gov) with the subject line "RECONCILIATION – ERR CONTACTS" Please include the name, e-mail address, and business telephone number for each contact provided If there are distinct contacts for different lines of business within the Issuer organization, please clearly identify which contacts are appropriate for each HIOS ID and/or QHP ID

E-mail Lists for Marketplace Issuers

Email List Name	Email List Purpose	How to Update Contact information
Enrollment Policy Community/Monday Enrollment Policy Call	This community provides webinar logistics for the Enrollment Issuer Policy Call (held Mondays), as well as an online library of previous presentations.	-Must 1st be a Register REGTAP user https://www.regtap.info/ Log in at https://www.REGTAP.info and select “My Account” to update your user account information and email preferences. If you have questions, please contact Registration Support at 1-800-257-9520 or Registrar@REGTAP.info.
Qualified Health Plan/Stand-Alone Dental Plan Community	To receive communications regarding QHP & SADP certification, including Application Notices and blast communications.	The Issuer’s POC subscribes directly to the list. https://www.ghpcertification.cms.gov (Sign up button in upper right corner of webpage)
Health Information Oversight System (HIOS)	HIOS is an application utilized by Marketplace issuers and other stakeholders to provide insurance company and product information, such as the issuer names, addresses, contact information, and product level data.	The Issuer/Organization’s POC must register for a CMS EIDM Account (For New Users), and Navigate to the CMS Enterprise Portal (https://portal.cms.gov) then select <i>New User Registration</i>. Once the Issuer’s POC navigates to the CMS Enterprise Portal they would request a HIOS Role and Complete Remote Identity Proofing (For New Users), then any complete additional steps. Contact the MSD for instructions on receiving notifications.

E-mail Lists for Marketplace Issuers

Email List Name	Email List Purpose	How to Update Contact information
Marketplace Program Integrity	Issuer POCs for this email list should govern program integrity issues, fraud investigations, etc. These POCs should report suspected fraud and misconduct related to agents/brokers, consumers and other Marketplace concerns to MarketplaceIntegrity@cms.hhs.gov. Questions about Unauthorized Enrollment Finder Files (UEFF) can also be sent to that email box.	Please send a message to the MarketplaceIntegrity@cms.hhs.gov stating “Please add” or “Please delete” the Issuer POC from the Issuer Program Integrity list.

E-mail Lists for Marketplace Issuers

Email List Name	Email List Purpose	How to Update Contact information
Financial Management Coordination Center (FMCC)	Allows State-Based Marketplace or FFM/SBE issuers to submit questions/issues or contact updates related to the following: • Policy-Based Payment program for FFM/SBE issuers • Enrollment Alignment Performance Summary reporting process for FFM issuers • SBMI process for SBEs and SBE issuers	To add, remove, or change a point of contact in your organization, please email the FMCC team directly at FMCC@cms.hhs.gov. Please include the name, e-mail address, and business telephone number for each contact provided
CMS Issuer Communications	Receive daily alerts on topics including testing (e.g. UATO testing environment status); Classic Direct Enrollment; Enhanced Direct Enrollment (EDE); Open Enrollment including Batch Auto Renewal (BAR) updates; IC834 Activities; ER&R; and Reconciliation Files. Also provides updates on any changes to the weekly technical webinars for the all-issuer/DE partner Tuesday technical webinar and Thursday Inbound 834/Recon webinar.	To add yourself to the distribution list: Send an e-mail to CMS_Issuer_Communications@cms.hhs.gov with the subject line: "Add POC to Distribution List" To remove yourself from the distribution list: Send an e-mail to CMS_Issuer_Communications@cms.hhs.gov with the subject line: "Remove POC from Distribution List"

FAQ

- Q) My organization is leaving the Marketplace. How do I remove our team from all of CMS CCIIO Distribution lists?
 - A) Contact the Marketplace Service Desk (MSD) Help Desk and specify which lists you need to be removed from. You will be given instructions on how to request removal from each list.
- Q) Am I able to access the presentation “Guidelines for Updating and Removing Contacts”?
 - A) **For a copy of this deck, “Guidelines for Updating and Removing Contacts” please visit the CMSzONE* Page: <https://zone.cms.gov/document/guidelines-updating-and-removing-contacts>**
 - *Access requires active CMSzONE access
- Q) I am not receiving any issuer communications how can I be added to the various lists?
 - A) Contact the CMS Help Desk(MSD) and specify which lists you want to be added to. You will be given instructions on how to request permission from each list.
- Q) My colleague requested permission to be removed from the list two weeks ago and he is still receiving messages. How can we remove him from the distribution list?
 - A) Contact the Marketplace Service Desk (MSD) Help Desk and request that the removal from the distribution list be escalated.
 - request permission from each list.
- Q) I have several contacts that I wish to add to various distribution lists. Can I send those in bulk or do I need to make these requests individually?
 - A) While Issuer POCs can contact the Marketplace Service Desk (MSD) Help Desk and receive instructions for how to be added/removed from various e-mail distribution lists; Marketplace Service Desk (MSD) Help Desk does not have a central repository that allows them to add/remove issuer POCs on behalf of the owner of that list. In addition, each e-mail list is governed by various CMS groups and may not be able to accommodate a bulk request.

MSD Contact Information

The CMS Help Desk Marketplace Service Desk (MSD) team provides Tier 1 service desk support for Issuer POC (points of contact).

Inquiries can be submitted via phone: **1-855-CMS-1515(1-855-267-1515)** or email: [**CMS_FEPS@cms.hhs.gov**](mailto:CMS_FEPS@cms.hhs.gov).

-The hours of operation are as follows:

- December 1 through September 30 - Monday – Friday 8AM – 8PM ET
- October 1 through November 30
 - o Monday through Friday - 8AM to 8PM ET
 - o Saturday and Sunday - 10AM to 3PM

IC834 Plan Year 2018 Submission Deadline & EDI Registration Form Version 4.2 Now Available



***CClIO Enrollment Operations Updates
April 9, 2019***

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IC834 Plan Year 2018 Submission Deadline

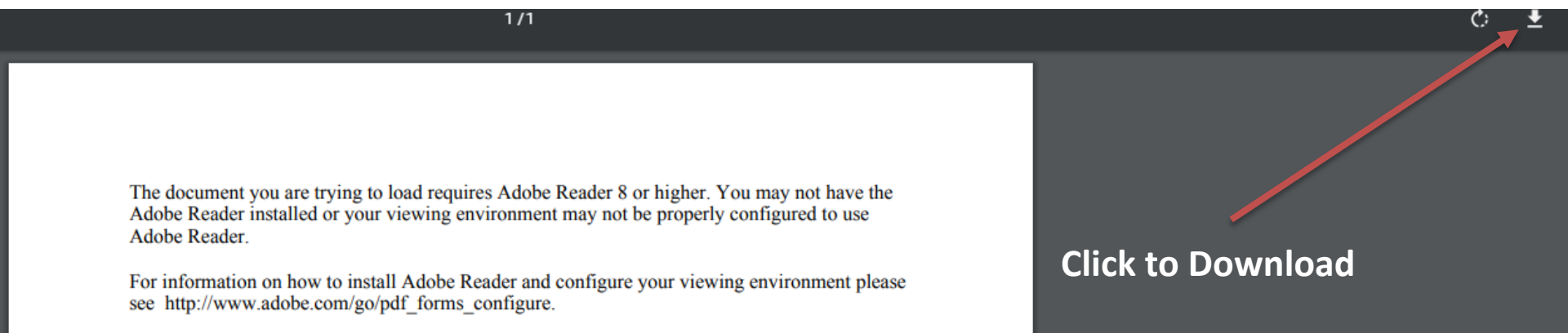
- CMS has established the annual deadline for prior plan year IC834 submissions from Issuers
 - Issuers may continue to submit IC834 transactions to update plan year 2018 policies ***no later than*** August 12, 2019 at 11:59pm EST
- IC834 transactions for 2018 policies received by the FFE on or after August 13 will be rejected (additional details on the specific error code generated will be given at a later date)
- Issuers who wish to apply changes to 2018 policies after the stated deadline will need to leverage other enrollment data alignment channels such as automated Recon and ER&R in order to apply policy changes at the FFE

EDI Registration Form Version 4.2 Available for Download

- A new version of the EDI Registration form is now available for download from CMS zONE
 - <https://zone.cms.gov/document/edi-onboarding-form-and-instructions-connectivity-testing>
- In accordance with Section 508 of the Rehabilitation Act of 1973, Version 4.2 made necessary changes to make the form accommodating to individuals with disabilities. Changes include modifying font size, altering highlighting and font colors, and placement of the “Submit” button at the top of the form instead of the bottom.
- CMS recommends using the Internet Explorer browser when downloading the form from zONE as this is the easiest method of viewing and downloading the form. However, other browsers can still be used, but require added steps.

Downloading EDI Registration Form Using Chrome Browser

Chrome will not allow the form to be viewed in the browser itself. Therefore, after clicking the attachment, the error message below will display. However, the form can still be downloaded and subsequently viewed by clicking the download icon indicated by the red arrow below



After clicking the download icon, the save prompt will open and you can select the destination where you wish to save the file. After downloading is complete, you must open the form at the saved destination on your computer. The form will still not be viewable in the Chrome browser.

Housekeeping: Enrollment Pre-Audit and Reconciliation

Housekeeping: Enrollment Pre-Audit & Reconciliation

April 9, 2019

ER&R

- ✓ ***ER&R Topics***
 - ✓ Reminder: 2018 UIE Manual Payment Timeline
- ✓ ***Q&A***

April 9, 2019

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Reminder: 2018 UIE Manual Payment Timeline

- ER&R will conduct manual payment activities as follows:
 - **April 2019:** Analyze Run 16 (March 2019) RCNO data to identify Prior_Year UIEs that are eligible for payment
 - **May 2019:** Deliver Manual Payment Summary and Detail Reports to issuers
 - **June 2019:** Issuers receive adjustments in the June payment cycle
- Issuers should ensure financial alignment of Enrollment Blockers by submitting a dispute through the HICS Direct Dispute or Enrollment Dispute processes, as manual payments will not be made.
- Per the CMS guidance on 08/07/2018, manual payment adjustments will not be made for any issuer-reported coverage after 10/31/2018.
 - Access this guidance on CMS zONE at https://zone.cms.gov/system/files/documents/uie_issuerletter_august_2018.pdf.
 - For additional guidance or if you are new to the UIR process, please refer to the UIR Master Guidance or UIR TRG on CMS zONE at <https://zone.cms.gov/document/enrollment-resolution-and-reconciliation>.

Compliance Team Reminders and Announcements



Tuesday, April 9, 2019

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Updated: Entities Approved to Use Enhanced Direct Enrollment List

- An updated Entities Approved to Use EDE List is available here:
<https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Downloads/EDE-ApprovedPartners.pdf>
- This list includes:
 - **Approved Entity Name**: Name of entity offering an approved EDE platform
 - ***Hosting an EDE Platform**: The checkmark indicates that the entity (referred to as a “primary EDE Entity” in CMS guidance) developed and is hosting an approved EDE platform that may be available for leasing to upstream EDE Entities
 - ***Entity Type**: Qualified health plan (QHP) issuer or web-broker
 - **Website**: The entity’s homepage hyperlink

*Indicates recent updates

Reminder: Auditor Training Modules and Training Requirements

PLAN YEAR (PY) 2020 Enhanced Direct Enrollment (EDE) Auditor Training Modules – Year 2*

EDE Topic	Purpose	Publication Date	Business Auditor Training	Privacy and Security Auditor Training	DE/ Prospective EDE Entity Training	If Entity or Auditor Completed PY 2019 (Year 1) EDE Auditor Training Module in Advance of Publication of a <u>Required</u> PY 2020 (Year 2) EDE Auditor Training Module , then Training:
A. Privacy and Security Standards	To review the required privacy and security standards required of entities for participation in EDE.	March 8, 2019	Not Required	Required	Required	Year 2 Version Required
B. Regulatory and Compliance Standards	To review the CMS policy guidance for EDE.	April 1, 2019	Required	Required	Required	Year 2 Version Required
C. Operational Readiness Review (ORR) and CMS Reporting Requirements	To review the ORR and related CMS Reporting Requirements that will assist in completing the ORR for EDE.	March 22, 2019	Required	Not Required	Required	Year 2 Version Strongly Encouraged
D. Application User Interface (UI) Overview	To review all aspects and features of the Application UI for EDE enrollments available for plan year 2020.	April 1, 2019	Required	Not Required	Required	Year 2 Version Strongly Encouraged
E. Non-Eligibility API Services	To review all UI services offered by CMS.	March 28, 2019	Required	Not Required	Required	Year 2 Version Strongly Encouraged

*CMS updated the EDE Acronym List. The updated EDE Acronym List is available at:

https://www.regtap.info/uploads/library/EDE_CBT_Acronym_List_v2_5CR_040119.pdf

NOTE: Prospective EDE Entities and their Auditors who completed the PY 2019 trainings need to complete the updated PY 2020 trainings as shown in the final column of the table (above) prior to submitting the audit. EDE Entities and their Auditors will be accountable for any updates in the PY 2020 training. This applies to existing EDE Entities and Entities with audits in CMS' review queue.

Reminder: Spanish Audit and Category 3 Entity-Initiated Changes (Documentation must be submitted in the Audit Submission Window)

- The Spanish audit documentation should be submitted at the time of audit submission if the prospective EDE Entity is pursuing use of the EDE pathway in Texas. Entities do not have to submit the Spanish audit with the English audit, but it will have to submit it during the audit submission window; therefore, CMS recommends submitting them together.
- Because of the scope of the change, implementing a Spanish application would be a Category 3 EDE Entity-initiated Change Request.
- Independent audits that document the compliance of a Category 3 EDE Entity-initiated Change Request must be submitted to CMS during a scheduled audit window. The only such window this year is the April-June window.
 - For more information, please refer to the Guidelines available here:
<https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Guidelines-for-Third-party-Auditors-EDE-PY19PY20.pdf>

Reminder: New Baseline Toolkits Available on CMS zONE (updated)

- Updated EDE business audit template and toolkits are available on CMS zONE at the following link:
<https://zone.cms.gov/document/enhanced-direct-enrollment-edo-documents-and-materials>.
- The following toolkit documents are included in a zip file labeled “Business_Report_Template_and_Toolkits_3-1-2019.” The updated documents are labeled (in the zip file) as:
 - EDE_Eligibility Results Toolkit_Phase 1_PY2019_FINAL
 - EDE_Eligibility Results Toolkit_Phase 2_PY2019_FINAL
 - EDE_Eligibility Results Toolkit_Phase 3_PY2019_FINAL
 - Application UI Toolkit_PY2019_03012019
 - API_Functional_Integration_Toolkit_PY2019_FINAL
 - EDE Business Audit Instructions and Report Template_PY2019_FINAL
 - Communications Toolkit_09062018 (see update below)
- The Auditor will use these toolkits to verify the EDE Entity’s application and enrollment process is compliant with CMS-defined requirements. The Auditor must use the baseline toolkits (i.e., the versions listed above) for audits that will be submitted in the April 1, 2019 – June 30, 2019 audit submission window.
 - The only change between the baseline versions of the toolkits posted on 3/1/2019, and the most recently posted versions (Eligibility Results Toolkit posted 2/6/2019, Application UI Toolkit posted 2/8/2019, API Functional Integration Toolkit posted 1/19/2019) is the Auditor User Guide tab. Therefore, if Auditors have been using the most recently posted versions, listed above, they should be able to transfer their findings to the baseline versions after reviewing the revised Auditor User Guide tabs in each toolkit. Auditors must also review to assess if they need to re-review requirements before transferring their findings.
 - Regarding the EDE Business Audit Instructions and Report Template, CMS has made several changes since the most recent version was posted, so Auditors will need to review the entire document before transferring their findings (i.e., Auditors will need to review the baseline version to ensure no updates to their findings are needed).
 - **UPDATE: There have been no changes to the file Communications Toolkit 09062018 since it was posted in September 2018. If Auditors are using this version, they do not need to transfer findings to a new toolkit.**

Reminder: Conflict of Interest and Auditor Independence and Objectivity

- Conflict of Interest
 - A prospective EDE Entity must select an Auditor who is free from any real or perceived conflicts of interest, including being free from personal, external, and organizational impairments to independence, or the appearance of such impairments to independence.
 - A prospective EDE Entity must disclose to HHS any financial relationship between the Auditor and individuals who own or are employed by the Auditor or who own or are employed by an agent, broker, or QHP issuer for which the Auditor is conducting an ORR.
- Auditor Independence and Objectivity
 - A prospective EDE Entity's Auditor must remain independent and objective throughout the audit process for both audits.
 - An Auditor is independent if there is no perceived or actual conflict of interest involving the developmental, operational, and/or management chain associated with the system and the determination of security and privacy control effectiveness or business requirement compliance.
 - The Auditor's role is to provide an independent assessment of the compliance of the prospective EDE Entity's EDE environment and to maintain the integrity of the audit process.
- Please refer to the Guidelines, available here: <https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Guidelines-for-Third-party-Auditors-EDE-PY19PY20.pdf>

Reminder: Optional Test Cases Now Available

- A new resource, EDE Partner Test Cases, is available on [CMS zONE](#)
- It is for prospective EDE Entities and includes over 100 test cases that entities can now use when testing their environments
- Document name: ede_partner_test_cases_v1.xlsx
 - Document description: Optional test cases that EDE Partners can use to conduct additional testing.

Reminder: New Auditor Guidelines Released

- New Auditor Guidelines, *Third-party Auditor Operational Readiness Reviews for the Enhanced Direct Enrollment Pathway and Related Oversight Requirements*, were released on February 19, 2019 and are available here: <https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Guidelines-for-Third-party-Auditors-EDE-PY19PY20.pdf>
- These guidelines define EDE program requirements and discuss requirements and considerations for prospective EDE Entities' selection of an Auditor, as well as the scope of the operational readiness review (ORR) prospective EDE Entities must undertake to demonstrate they are prepared to provide EDE services through use of the EDE pathway.

Reminder: Enhanced Direct Enrollment (EDE) Timeline Reminders and Upstream Documentation Package

- The **primary audit submission window** for EDE Entities interested in implementing EDE in calendar year 2019 for PYs 2019 and 2020 is **now open through June 30, 2019**. The notice of intent was due by February 28, 2019. Entities that submitted notices of intent should note the following:
 - EDE Entities that are already live and intending to implement a new phase must also submit complete audits.
 - If an EDE Entity submits an audit, and then resubmits its audit, the resubmitted audit submission is reprioritized at the end of the review queue.
 - CMS does not guarantee any approval timelines.
- **Note:** *This is a summary of information presented previously. For more information, please refer to the [ITWG slides](#) from January 8, 2019 and February 26, 2019 located on CMS zONE.*
- **Documentation Packages:** Primary and upstream EDE Entities must submit several documents, including a data request form, to CMS along with their audit. CMS has not yet made these files available to primary and upstream EDE Entities, but expects to publish them soon on CMS zONE. CMS will send an email to all primary EDE Entities when these files are available.

Clarification: Instructions for Upstream Entities

- **Upstream Documentation Package:** Upstream EDE Entities did not need to notify CMS of their participation by February 28th. Instead, Upstream Entities will notify CMS of their participation by submitting an upstream documentation package (to be provided by CMS) at the time the primary EDE Entity submits its audits or after.
 - Note: The deadline (March 15, 2019) has passed for prospective upstream EDE Entities that intend to add functionality to the EDE pathway (excluding branding differences) to contact the DE Help Desk to discuss whether an audit may be needed.

Reminder: Request for EDE Auditor Agreement and Audit Kickoff Calls

- **Request for Auditor Agreement**
 - CMS requested a copy of the signed agreement or contract between the Auditor(s) and prospective primary EDE Entity.
 - The contract must describe the Auditor's entire scope of work and include provisions similar to those described in 45 C.F.R. 156.340.
 - The primary EDE Entity may redact information (e.g., pricing) that is not necessary for CMS review.
- **Reminder about Audit Kickoff Calls**
 - The primary EDE Entity must notify the DE Help Desk before its Auditor begins its audit (at least one to two weeks prior). CMS will schedule a kickoff call before the audit is initiated to answer questions, ensure expectations are clear, and ensure the Auditor and prospective EDE Entity are using the correct audit documents.

Reminder: EDE Audit Office Hours Now Available

- CMS is planning to host office hours each week. During these office hours, CMS will aim to provide targeted, detailed technical assistance to prospective and active EDE Entities and their Auditors.
- These office hours have limited availability and will be assigned on a first-come, first-served basis based on the following categories:
 - Category 1: EDE Entities and Auditors with difficult legal, policy, or technical inquiries as offered by CMS.
 - Category 2: EDE Entities and Auditors who request a walkthrough or explanation of audit or technical documentation with subject matter experts (e.g., technical experts, security and privacy experts, or eligibility experts).
- CMS will not schedule office hours sessions to discuss standard help desk inquiries that can be resolved through DE Support. EDE Entities and Auditors can only request office hours pursuant to category 2 above. Category 1 requests will be offered and assigned in CMS's sole discretion.
- EDE Entities should submit requests for office hours under category 2 above to DE Support (directenrollment@cms.hhs.gov).

Reminder: Maintenance of an Accurate Testing Environment

- Each EDE Entity must maintain a testing environment that accurately represents the compliance of the EDE Entity's production environment as documented in any CMS-approved or CMS-conducted audits.
- If the testing environment is not appropriately firewalled from the production environment and PII, the testing environment must comply with the privacy and security requirements.
 - EDE Entities shall not submit actual PII to the FFE Testing Environments.
- Each EDE Entity must provide CMS, via the DE Help Desk, with a set of credentials that CMS can use to access the testing environment.
 - Each EDE Entity must ensure that the testing credentials are valid and that all APIs and components of the EDE Pathway in the testing environment, including the remote identity proofing (RIDP) services, are accessible.
- Please refer to the EDE Business Agreement located on [CMS zONE](#) and the *Third-party Auditor Operational Readiness Reviews for the Enhanced Direct Enrollment Pathway and Related Oversight Requirements* located at: <https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Guidelines-for-Third-party-Auditors-EDE-PY19PY20.pdf>. Please note, an updated EDE Business Agreement is forthcoming.

Eligibility Team Updates



*Center for Consumer
Information and Insurance
Oversight (CCIIO)*

April 9, 2019

Documentation Updates on zONE

CMS has released updated documentation available at <https://zone.cms.gov/document/enhanced-direct-enrollment-edc-documents-and-materials>. The updates include:

- UI Question Companion Guide
 - Clarifications and corrections as described in subsequent slides
 - All updates are in pink font
- App Services Companion Guide
 - Corrections on item #s
 - Up to date for SES R12
- SES Integration Manual (aka FFE UI Application Services for Eligibility: General and Technical FAQs)
 - New example JSONs
 - Clarifications on complex integration areas such as income, immigration status, Medicaid denial, and household composition

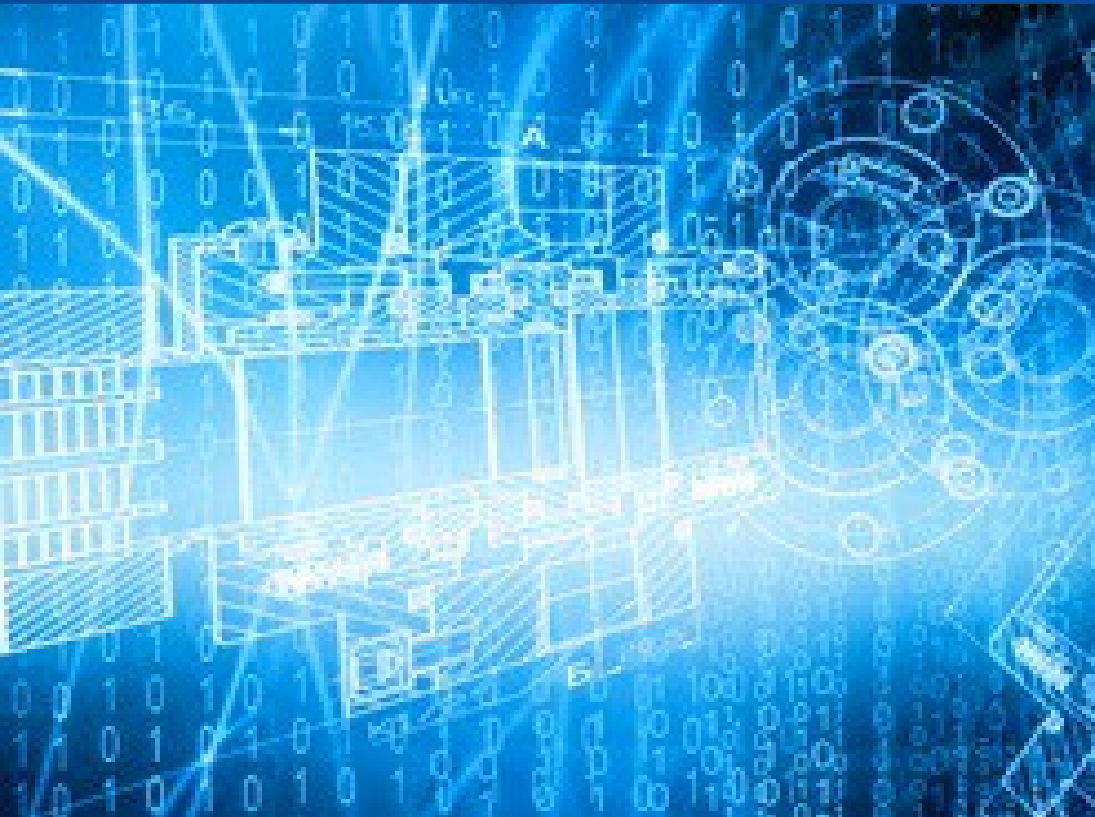
UI Question Companion Guide Updates

- The following are examples of updates in pink font to the UI Questions tab of the companion guide:
 - Phase 1: Phase 1 applications must provide an opportunity for non-applicants to provide their SSNs, and this was clarified in the UI Question Companion Guide (Items #33-34)
 - Phases 2 and 3: The More About This Household section of the application was updated to reflect HealthCare.gov enhancements. This includes non-substantive changes on questions about pregnancy, former foster care and American Indian status (Items #268-251)
 - Phases 2 and 3: The incarceration attestation was moved from the Sign & Submit section of the application to the More About This Household section of the application (Item #249)
 - Phases 2 and 3: Selecting an eligible immigration document was clarified as optional for consumers to answer. Clarification was added that if a consumer provides an alien number or I-94 number, then adding another alien number or I-94 number should not be allowed in a subsequent question (Item #46 and Item #71)
 - Phases 2 and 3: Updated the data element to set `medicaidDeniedDueToImmigrationIndicator` = false when no or “None of these people” are selected (Item #141)
- Please note all updates are not listed in the PowerPoint slides and partners are encouraged to refer to the updated UI Question Companion Guide to view all changes

Other UI Question CG Updates

- The following are examples of updates to the Backend Response for UI tab of the companion guide:
 - All Phases: The conditional display logic based on API responses to collect income discrepancy explanations for job incomes was updated to `jobIncomeExplanationRequiredIndicator = Y OR jobIncomeExplanationAcceptable = Y or N` (Item #7)
 - Phases 2 and 3: The conditional display logic based on API responses to display the naturalized or derived citizen question was updated to `citizenshipStatus <> 999_N_A_RULE_INDICATOR_IS_Y` (Item #4)
 - Phases 2 and 3: The conditional display logic based on API responses clarifies that the relationship between applicants only needs to be asked if relationship is not already collected or derived and both applicants are preliminarily eligible for QHP, according to the API response (Item #23)
 - Phases 2 and 3: A line item was added to describe the conditional display logic based on API responses for displaying a re-try question for a naturalized citizenship document number when not verified by the trusted data sources (Item #37)
- Please note all updates are not listed in the PowerPoint slides and partners are encouraged to refer to the updated UI Question Companion Guide to view all changes

Direct Enrollment (DE) Updates: Enrollment Team



*Center for Consumer
Information and Insurance
Oversight (CCIIO)*

April 9, 2019

Update for EDE and Classic DE Partners: Fetch Eligibility Response Defect

- EDE and Classic DE Partners, please be aware that we've identified a defect, where in some instances we are incorrectly returning an InsuranceApplicationMultipleTaxHouseholdIndicator of "False" in the Fetch Eligibility Response
 - The applicable path is InsuranceApplication/InsuranceApplicationMultipleTaxHouseholdIndicator
 - We currently believe this defect is isolated to scenarios where a primary applicant indicates a tax filing status of married filing separate, and the primary applicant also includes their spouse on the application, but indicates the spouse does not file taxes and that the spouse is not a dependent on their tax return
 - This defect may result in unnecessary Submit Enrollment failures, since the InsuranceApplicationMultipleTaxHouseholdIndicator of "False" would potentially result in DE Partners attempting to enroll a household that is ineligible to enroll due to being a multi-tax household
 - **Update:** A fix for this issue was deployed to UAT0 on 4/5, and the fix is expected to be deployed to production on 5/3

Update for EDE Partners: Submit Enrollment Defect – EDE Non-SEP CICs Failing

- EDE Partners, please be aware that we've identified a defect, where when a non-SEP CIC application is submitted via EDE, the corresponding Submit Enrollment Request will fail
 - This defect does not impact non-SEP CICs submitted via healthcare.gov or the Classic DE flow
 - **Update:** A fix for this issue is expected to be deployed to UAT0 on 5/24, and to production on 6/14

EDE and Classic DE Partners: Tobacco Rating Defect

- EDE and Classic DE Partners, please be aware that we have a defect that is incorrectly resulting in tobacco statuses being updated in some SEP CIC and non-SEP CIC scenarios
 - This defect results in applicants incorrectly being updated from a tobacco user to a non-tobacco user in some instances, for purposes of premium rating
 - We are seeing incorrect tobacco rerating in the following scenarios:
 - » Tobacco status is incorrectly being updated, when it otherwise shouldn't be, in scenarios where the Submit Enrollment Request includes a TobaccoLastUsageDate that is greater than 6 months in the past
 - » Tobacco status is incorrectly being updated, when it otherwise shouldn't be, in scenarios where the Submit Enrollment Request includes a TobaccoUseIndicator of False
 - » Tobacco status is incorrectly being updated, when it otherwise shouldn't be, in scenarios where the Submit Enrollment Request does not include a TobaccoUseIndicator tag
 - This defect may result in erroneous IncorrectPremiumAmount errors, where DE Partners are correctly rating for tobacco usage
 - A fix for this defect has not yet been prioritized, however an update will be provided when one is available

EDE and Classic DE Partners: Tobacco Rating Guidance Added to DE API Specs

- EDE and Classic DE Partners, please be aware that we have added tobacco rating guidance to Section 7.3.2.7 in the DE API Specs
 - The DE API Specs are available on zONE at <https://zone.cms.gov/document/direct-enrollment-de-documents-and-materials>
 - As a reminder, there are a number of considerations that need to be made when determining an applicant's tobacco status, for purposes of calculating premium
 - The added logic accounts for these considerations
 - » Note, if you are receiving IncorrectPremiumAmount errors in Submit Enrollment Responses, you may want to ensure that your tobacco rating logic accounts for all of these considerations
 - The updated logic includes the following:
 1. Is there an existing policy in the InsurancePolicy section of the Fetch Eligibility Response?
 - a) If no, all applicants should be rated based on their current tobacco use. As a reminder, DE Partners must collect tobacco status for each consumer, prior to sending a Submit Enrollment Request. The relevant Submit Enrollment paths are PolicyCreationActivity/EnrollmentGroup/InsuranceApplicant/TobaccoUseIndicator and PolicyCreationActivity/EnrollmentGroup/InsuranceApplicant/TobaccoLastUsageDate/ Date. Note also, DE Partners can use the Business Rules Public Use File (PUF) to determine the number of months a consumer has to be tobacco-free in order to qualify for the non-tobacco insurance rate.
 - b) If yes, proceed to #2.
 2. If there is an existing policy in the InsurancePolicy section of the Fetch Eligibility Response, is the SpecialEnrollmentVerificationPendingIndicator (InsuranceApplication/ InsuranceApplicant/ SpecialEnrollmentPeriodEligibility/ SpecialEnrollmentVerificationPendingIndicator) in the Fetch Eligibility Response "True"?
 - a) If yes, tobacco rating should be as described in 1a.
 - b) If no, proceed to #3.

EDE and Classic DE Partners: Tobacco Rating Guidance Added to DE API Specs

3. If there is an existing policy in the InsurancePolicy section of the Fetch Eligibility Response and the SpecialEnrollmentVerificationPendingIndicator is “False,” is the InsurancePolicyEffectiveDate (InsurancePolicy/ InsurancePolicyEffectiveDate/ Date) prior to both the IEP and SEP EarliestQHPEffectiveDate?
 - a) If no, tobacco rating should be as described in 1a.
 - b) If yes, proceed to #4.
4. If there is an existing policy in the InsurancePolicy section of the Fetch Eligibility Response, the SpecialEnrollmentVerificationPendingIndicator is “False,” and the InsurancePolicyEffectiveDate is prior to both the IEP and SEP EarliestQHPEffectiveDate, is the InsurancePolicyExpirationDate (InsurancePolicy/ InsurancePolicyExpirationDate/ Date) prior to both the IEP and SEP EarliestQHPEffectiveDate?
 - a) If yes, proceed to #5.
 - b) If no, proceed to #6.
5. If the InsurancePolicyExpirationDate is prior to both the IEP and SEP EarliestQHPEffectiveDate, is there a gap in coverage? For example, if the InsurancePolicyExpirationDate is 1/31/2019 and the EarliestQHPEffectiveDate is 2/1/2019, there is no gap in coverage.
 - a) If yes, tobacco rating should be as described in 1a.
 - b) If no, proceed to #6.
6. Is the enrollment group enrolling in a new plan? In other words, will the InsurancePlanStandardComponentIdentification in the Submit Enrollment Request (PolicyCreationActivity/ EnrollmentGroup/ SelectedInsurancePlan/ InsurancePlanStandardComponentIdentification / IdentificationId) be different than the InsurancePlanStandardComponentIdentification in the Fetch Eligibility Response (InsurancePolicy/ InsurancePlan/ InsurancePlanStandardComponentIdentification/ IdentificationId)?
 - a) If yes, tobacco rating should be as described in 1a.
 - b) If no, proceed to #7.

EDE and Classic DE Partners: Tobacco Rating Guidance Added to DE API Specs

7. Is the subscriber for the enrollment group changing? In other words, will the subscriber in the Submit Enrollment Request (PolicyCreationActivity/EnrollmentGroup/InsuranceApplicant/ProposedSubscriberIndicator) be different than the subscriber in the Fetch Eligibility Response (InsurancePolicy/ InsuranceMember/ InsuranceMemberSubscriberAssociation/ InsuranceSubscriberReference)? Note, subscriber logic can be found in Appendix E.
 - a) If yes, tobacco rating should be as described in 1a.
 - b) If no, proceed to #8.
8. Are the applicants in the InsurancePolicy/ InsuranceMember section of the Fetch Eligibility Response the same as the applicants that are included in the InsuranceApplication/ InsuranceApplicant section of the Fetch Eligibility Response?
 - a) If yes, the applicants should be rated based on their tobacco status in the Fetch Eligibility Response (InsurancePolicy/ InsuranceMember/ TobaccoUseIndicator and InsurancePolicy/ InsuranceMember/ TobaccoLastUsageDate/ Date). Note, if the TobaccoUseIndicator is true, the TobaccoLastUsageDate would be compared to the InsurancePolicyEffectiveDate (InsurancePolicy/ InsurancePolicyEffectiveDate/ Date) when determining the number of months a consumer has been tobacco-free for purposes of eligibility for the non-tobacco insurance rate.
 - b) If no: 1) currently enrolled applicants should be rated as described in 8a, and 2) new applicants (i.e. those not in the InsurancePolicy/ InsuranceMember section of the Fetch Eligibility Response) should be rated as described in 1a.

Q&A



CMS Issuer Technical Workgroup Call Appendix

To view the full Appendix, please visit CMSzONE at the following url:

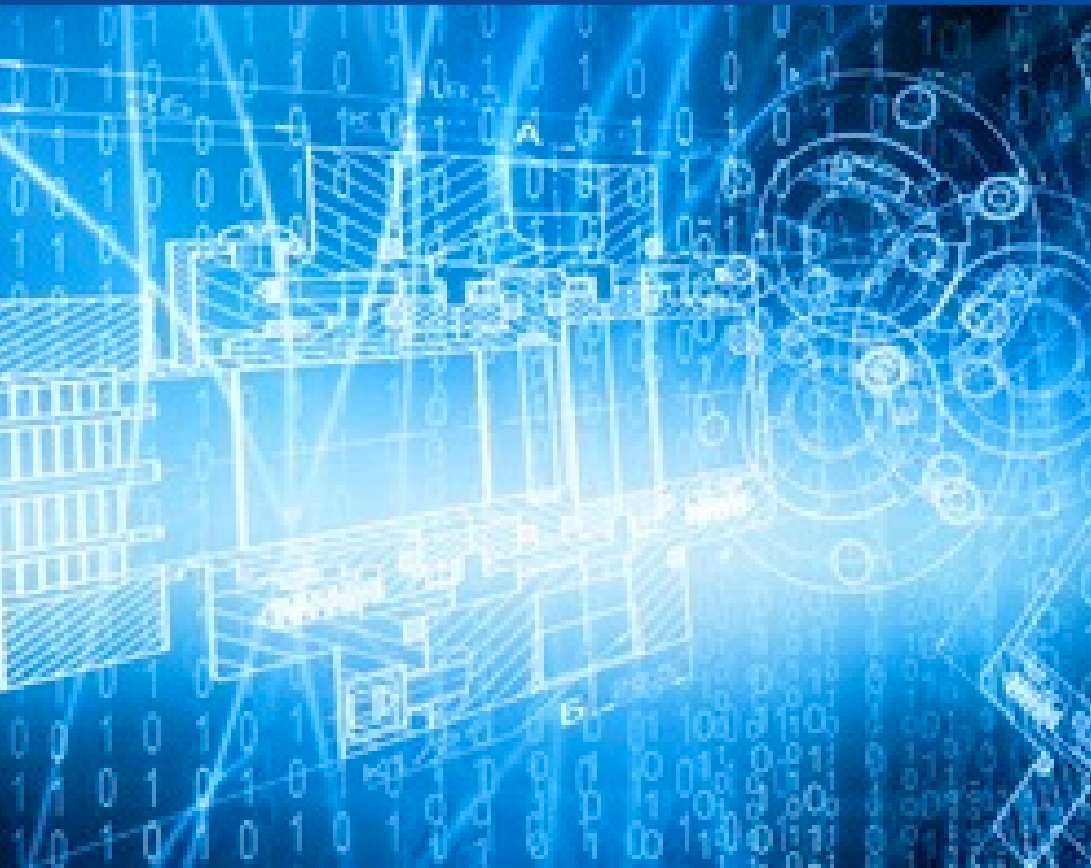
https://zone.cms.gov/system/files/documents/issuer_technical_slides_appendix_a_2018_3_20_v1.pdf

Updating Contact Information for the Marketplace

3/5/2019

confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.

Updating Contact Information for Marketplace Issuers

- 
- **Requesting Updates to the CMS Issuer Distribution List**
 - **Issuer Notifications: Updating IC834 Contacts**
 - **2018 Prep: Updated Recon Technical Contacts Needed**
 - **2018 Prep: Updated ER&R Contacts Needed**

December 3, 2018

Issuer Notifications: Updating IC834 Contacts

Inbound834 (IC834) Contacts

- Issuer Organization and Clearinghouse members may be contacted through Inbound834@bah.com with notifications for high volume failure, low success rates, and summary reports based on weekly Inbound 834 submissions
- CMS encourages Issuers to identify key technical POCs to receive both outreach communications and performance reports so any errors received for failed transactions can be corrected and resubmitted for application in the Marketplace
- To update the contact list for your HIOS IDs (add or remove members), please follow one of the two options listed below:
 - Create and send an updated EDI onboarding form or;
 - Send an e-mail to Inbound834@bah.com with the new contact addresses

2019 Prep: Updated Recon Technical Contacts Needed

Enrollment Data Reconciliation Technical Contacts

- Reconciliation Technical Contacts for your organization will be contacted by CMS resources in regard to any technical issues identified in Issuer-submitted Inbound Reconciliation (RCNI) Files
- Please designate a primary and secondary contact or group e-mail address to ensure any issues can be addressed in a timely fashion
- To submit the Enrollment Data Reconciliation Technical Contacts to CMS:
 - Send an e-mail to the Help Desk (cms_feps@cms.hhs.gov) with the subject line “RECONCILIATION – TECHNICAL CONTACTS”
 - Please include the name, e-mail address, and business telephone number for each contact provided

2019 Prep: Updated ER&R Contacts Needed

Enrollment Resolution & Reconciliation (ER&R) Contacts

- Cognosante, the Marketplace Enrollment Resolution & Reconciliation (ER&R) contractor, will be responsible for conducting analysis to resolve discrepancies between data provided by Issuers and FFM data
- As direct contact with the Issuers may often prove to be the most reliable method of resolving issues, CMS is requesting that each Issuer provide a primary and secondary contact with whom the ER&R contractor can have direct communications
- If there are distinct contacts for different lines of business within the Issuer organization, please clearly identify which contacts are appropriate for each HIOS ID and/or QHP ID
- The requested contacts are to be individuals able to assist in resolving conflicts with member information; **these individuals are more likely to be business end-users rather than EDI or IT representatives**
- To submit the Enrollment Resolution & Reconciliation Contacts to CMS:
 - Send an e-mail to the Help Desk (cms_feps@cms.hhs.gov) with the subject line "RECONCILIATION – ERR CONTACTS"
 - Please include the name, e-mail address, and business telephone number for each contact provided

Register for QHP Certification Updates

CMS sends updates and information during the certification period in several ways:

REGTAP

- Register for the [REGTAP portal](#) to get CMS technical assistance related to Marketplace and Stabilization programs that are not a part of the Marketplace Plan Management Group (MPMG). Registered users can access the library training resources, webinars, and the inquiry tracking and management system.
- Registered REGTAP users who are affiliated with an issuer organization and elect to receive notifications will automatically be subscribed to *Issuer Insights*, a bi-weekly e-newsletter that highlights upcoming deadlines, new trainings and webinars, and updates on guidance.

Application Notices

- CMS will send information about your specific application and needed corrections directly to each issuer during the QHP certification period.

HIOS Blasts

- To get QHP Application and certification announcement blasts from HIOS, make sure your contact information in HIOS is current and accurate.

Source - <https://www.qhpcertification.cms.gov/s/Register%20for%20Updates>

Plan Management QHP Certification Updates

Contact Information in HIOS

Add New Contacts

- In order for a contact to receive these notices, they must be assigned to the role of QHPValidator, QHPAttester, or QHPSubmitter in HIOS. For instructions on adding these roles, see section 5 of the Plan Management QHP Modules HIOS Quick Reference Guide.

Remove Contacts

- To remove contacts from the distribution list or from your organization, contact the Marketplace Service Desk (MSD) Help Desk at CMS_FEPS@cms.hhs.gov and use the language specified below.
 - Remove contacts from notice distribution list: Use the subject line “HIOS User Roles” and the following language: “Please remove contact: [Full Name], [Email Address], from the roles of QHPValidator, QHPAttester, and QHPSubmitter for issuer ID [XXXXX].”
 - Remove contacts from issuer organization: Use the following language: “Please remove contact: [Full Name], [Email Address], from all HIOS user roles associated with issuer ID [XXXXX].”

For a list of QHP Application Notices sent during QHP Certification:

<https://www.qhpcertification.cms.gov/s/QHP%20Application%20Notices>

HIOS Quick Reference Guide:

<https://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/Downloads/HIOS-PF-QuickGuideProd-000100.pdf>

Source - <https://www.qhpcertification.cms.gov/s/Register%20for%20Updates>

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