

CMS Issuer Technical Work Group

- ***Housekeeping***
 - ✓ ***Webinar Schedule***
 - ✓ ***Post Cloud Migration Updates***
 - ✓ ***IC834 Processing Post Cloud Migration Update***
 - ✓ ***Enrollment Pre-Audit & Reconciliation-***
- ***ER&R***
- ***New Resources for EDE Partners on zONE***
- ***Compliance Updates***
- ***DE Updates***

Q&A

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



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)

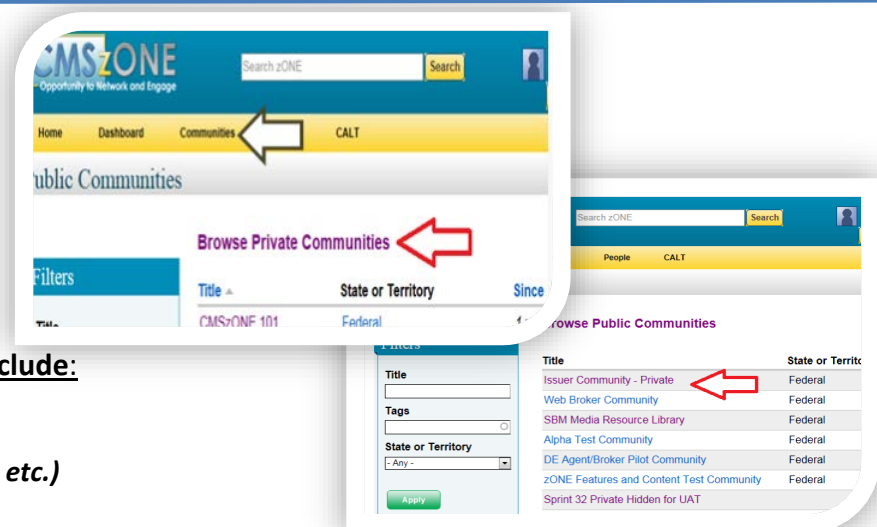
EIDM Registration Process: (Pre-requisite to CMSzONE Access)

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.)



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

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. At the top, there are icons for 'Participants' and 'Chat'. Below these, the 'Participants' list shows 'Ama Emanuel (me)' and 'Philip Desc...'. To the right of the list, there are icons for a raised hand and a video camera. A large blue arrow points from the text box above to the raised hand icon. Below the participants list, there is a 'Chat' window with a 'Connected' status. To the right, a 'File Transfer' dialog is open, showing a table with file information. A large blue arrow points from the text box above to the 'File Transfer' dialog. Another large blue arrow points from the text box above to the 'Download' button in the 'File Transfer' dialog.

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

To download a file, either select it and then click Download, or right-click ...

ited, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in

16 ZED BY LAW: This inform
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prosecution to the full extent of the law.

Housekeeping: IC834 Processing Post Cloud Migration Update

- As reported in CMS Issuer Communications daily blast emails beginning March 22, IC834 processing experienced a hold beginning March 20 at 9am until cloud migration concluded on March 25. Issuers were encouraged to continue to send transactions to the FFE during this outage, but no functional acknowledgements or BAAs would be sent to issuers until the hold was lifted.
- While CMS expected IC834 processing to resume at 12:00pm on March 25, impediments to bringing the system back online prevented this deadline from being met. However, EDI X12 translation resumed this morning and we anticipate all held files to complete processing by the FFE by this evening.
- Issuers will begin to receive functional acknowledgements (TA1, 999) as well as applicable BAAs for submissions made after the morning of March 20.
- There is a possibility that issuers may notice a higher number of undefined transactions (indicated by a hyphen) in this week's PO reports due to the added processing delay, but this is not certain and CMS will inform issuers of the status of PO reports tomorrow, March 27.
- Please send any questions to Inbound834@bah.com

Housekeeping: Enrollment Pre-Audit and Reconciliation

*Housekeeping: Enrollment
Pre-Audit & Reconciliation*

March 26, 2019

Housekeeping: Pre-Audit & Reconciliation

- **Prior Plan Years (2014-2018)**
 - The next set of 1095-A Consumer-Initiated Dispute Update (1095Ax) Files is scheduled for distribution on Wednesday, April 3rd
- **Plan Year 2016**
 - Next month's 2016 FFM extract will be taken on Monday, April 15th at 6PM EDT
 - Incremental Pre-Audit (ISIPA6) Files based upon that extract are scheduled for delivery to Issuers on Friday, April 19th
- **Plan Year 2017**
 - Next month's 2017 FFM extract will be taken on Monday, April 15th at 6PM EDT
 - Comprehensive Enrollment Pre-Audit (AUD7) Files based upon that extract are scheduled for delivery to Issuers on Thursday, April 18th

Housekeeping: Pre-Audit & Reconciliation

- **Plan Year 2018**

- Next month's 2018 FFM extract will be taken on Monday, April 15th at 6PM EDT
- Comprehensive Enrollment Pre-Audit (AUD8) Files based upon that extract are scheduled for delivery to Issuers on Wednesday, April 17th
- As a reminder, the Outbound Reconciliation (RCNO8) Files from the final scheduled recon cycle for 2018 were delivered last Thursday, March 21st

Housekeeping: Pre-Audit & Reconciliation

- **Plan Year 2019**

- The RCNI9 submission deadline for March's Run 4 was last Thursday, March 21st at 3PM EDT
 - Once again, we received files from **100%** of 2019 Issuers for Run 4 by the deadline – ***Thank you!***
 - RCNO9 Files for Run 4 are being distributed to Issuers today, Tuesday, March 26th
 - Please note that CMS will only apply effectuations (with appropriate date changes) and cancellations based upon the results of Run 4; full field-level updates along with effectuations and cancellations will return in Run 5 and should be expected each month moving forward until 2020 reconciliation begins
- Next month's 2019 FFM extract will be taken on Monday, April 15th at 6PM EDT
- Comprehensive Enrollment Pre-Audit (AUD9) Files based upon that extract are scheduled for delivery to Issuers on Wednesday, April 17th
 - Date of Birth Cleanup (MISC9) Files will also be distributed to impacted Issuers on Wednesday, April 17th

ER&R

✓ *ER&R Topics*

- ✓ Update: 2018 Reinstatements After BAR
- ✓ Reminder: AM Approval for Prior Year Disputes
- ✓ Refresher: Avoiding FR10 Disposition Codes

✓ *Q&A*

March 26, 2019

Update: 2018 Reinstatements After BAR

- CMS has identified additional consumers whose 2018 health plan enrollments were reinstated through Reconciliation or disputes after BAR ended but who are not enrolled in a 2019 health plan.
 - CMS is tagging the consumer's Marketplace account with an SEP to allow them to enroll in 2019 coverage. Enrollees who want to access the SEP must contact the FFM Call Center.
 - Issuers with enrollees who enroll under the SEP will get an 834 transaction with a prospective date (and potentially a HICS case to make it retroactive to January 1, 2019, at enrollee's option).
 - ER&R sent the final EFT files to impacted issuers on **Monday, March 25**, along with an email communication including the filename.
 - The EFT file will include policies reinstated both through Reconciliation and disputes.
 - The EFT file will be transmitted using the IOUTRC function code.
 - Issuers are encouraged to complete outreach and notify the consumers that they may contact the FFM Call Center to enroll in a 2019 plan.

Update: 2018 Reinstatements After BAR (Cont.)

- CMS recommends including the following messaging in any issuer outreach:
 - Due to a processing error, the Health Insurance Marketplace does not have a complete application record for your 2019 healthcare plan.
 - You **MUST** complete a new 2019 Marketplace application to get 2019 coverage.
 - Call the Marketplace **by May 25** to complete a new 2019 application. You are eligible to enroll through a Special Enrollment Period, but you can only access this Special Enrollment Period by calling the Health Insurance Marketplace at **1-800-318-2596**.
 - If you want to stay in your 2018 plan, select <insert plan name and plan ID>. You can select a coverage start date in the future or a start date retroactive to January 1.
 - To complete your 2019 application quicker and easier, gather income information for everyone in your household before you call. The Marketplace needs this information to make sure you get the right eligibility and cost information.
 - For more information on applying, visit www.healthcare.gov/apply-and-enroll/get-ready-to-apply/.
- Consumers who are already enrolled in a 2019 plan will not be included in this process.
- ER&R will deliver the EFT files to issuers using the IOUTrC function code and format. Issuers can locate file specifications for the IOUTrC format on zONE at <https://zone.cms.gov/document/ioutrc-file-layout>.
- This is the final file listing the qualifying 2018 reinstatements processed via Reconciliation and disputes.

Reminder: AM Approval for Prior Year Disputes

Starting on May 1, 2019, if an issuer has disputes for prior years, the issuer will need to contact their Account Manager (AM) for approval to submit the disputes to ER&R:

- The issuer can contact the AM via phone or email.
- 2018 disputes are considered prior year starting April 1, 2019.
- Disputes submitted before May 1, 2019, that are still being processed do not require approval.
- This will not be required for HICS Direct Disputes or prior year disputes that contain supporting HICS cases.
- This change impacts both Payment and Enrollment Disputes.
- There are no changes to the Issuer Dispute process for current year disputes.

Refresher: Avoiding FR10 Disposition Codes

- Issuers receive disposition code FR10 when ER&R is unable to locate the disputed record within the HIOS using the primary identifier provided by the issuer.
 - Rule Description: FFM Inventory Number or Policy ID Not Found
 - Issuer Verbiage: *ER&R is unable to process this request. When attempting to find the record using the information the Issuer provided, the record was not found for HIOS [@@Dispute.HIOS_ID]. If the FFM Internal Inventory Number was the primary identifier provided on the Dispute Form, it was not found for the HIOS provided. If the FFM Exchange Assigned Policy ID was the primary identifier provided on the Dispute Form, it was not found for the FFM Benefit Start Date, FFM Benefit End Date, and HIOS provided. When using the FFM Exchange Assigned Policy ID as the primary identifier, please ensure the FFM Benefit End Date and FFM Benefit Start Date supplied on the Dispute Form correspond to the most recent RCNO data for the record in dispute.*
- To prevent most instances of these errors, issuers should ensure that they are always filling out the Enrollment Dispute Form with values from the RCNO file, NOT the Pre-Audit file. This includes RCNO values for:
 - FFM Inventory Number from the FFM_INTERNAL_INVENTORY_RECORD column
 - Policy number from the FFM_PLAN_EXCHG_ASG_PLCY_NUM column
 - FFM Benefit Start Date from the FFM_PLAN_BNFT_STRT_DT column
 - FFM Benefit End Date from the FFM_PLAN_BNFT_END_DT column

New Resources for EDE Partners on zONE

Four new resources (listed below) have been posted to CMS zONE to the following URL: Here is the link: <https://zone.cms.gov/document/enhanced-direct-enrollment-edo-documents-and-materials>

1. **UI Flexibility Consult one pager and submission form** – outlines how to submit a consult request and the types of submissions that CMS reviews, and a new standardized form that will be used for submission
2. **Template for Submitting Credentials for EDE UI Eligibility TA template** – a new standardized form, with instructions, for partners to submit their credentials for the EDE UI Eligibility TA testing
3. **How to use the UI Question Companion Guide (UI Q CG) slide deck** – high-level overview of how to use the UI Q CG and how it can be a resource for partners during UI development
4. **How to use the UI Q CG document** – a user guide for partners that goes into further detail than the slide deck

Compliance Team Reminders and Announcements



Tuesday, March 26, 2019

INFORMATION NOT RELEASABLE TO THE PUBLIC UNLESS AUTHORIZED BY LAW:
This information has not been publicly disclosed and may be privileged and 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.

Announcement Auditor Training Modules & Planned Publish Dates (Update)

- Auditor Training Modules:** CMS is preparing the following computer-based training (CBT) modules:

Topic	Purpose	Planned Publication Date	Required for Business Requirements Auditor	Required for Privacy and Security Auditor	Required Year 2 (PY 2020) Modules if Entities/Auditors Completed Year 1 Modules (PY 2019) (see bullet below)*
A. Enhanced Direct Enrollment (EDE) Privacy/Security Standards	To review the required EDE entity privacy and security standards for EDE.	March 8, 2019	Not Required	Required	Year 2 Version Required
B. Enhanced Direct Enrollment (EDE) Regulatory/Compliance Standards	To review the CMS policy guidance regarding EDE.	Early April 2019	Required	Required	Year 2 Version Required
C. Enhanced Direct Enrollment (EDE) The Operational Readiness Review (ORR) and CMS Reporting Requirements	To review the ORR and related CMS Reporting Requirements that will assist in completing the ORR.	Mid-March 2019	Required	Not Required	Year 2 Version Strongly Encouraged
D. Enhanced Direct Enrollment (EDE) Application User Interface (UI) Overview	To review all aspects and features of the Application User Interface (UI) for EDE enrollments available for plan year 2020.	Late March 2019	Required	Not Required	Year 2 Version Strongly Encouraged
E. Enhanced Direct Enrollment (EDE) Non-Eligibility API Services	To review all User Interface (UI) services offered by CMS.	Late March 2019	Required	Not Required	Year 2 Version Strongly Encouraged

- Prospective EDE Entities and their Auditors may take the PY 2019 trainings that have existed on REGTAP prior to starting the audit instead of waiting for the updated PY 2020 trainings. Prospective EDE Entities and their Auditors who use this option need to take the updated PY 2020 trainings listed in the final column prior to submitting the audit. For required PY 2020 trainings, EDE Entities and their Auditors will be accountable for any updates in the PY 2020 training if they take this approach (i.e., they take the PY 2019 training first). This applies to existing EDE Entities and Entities with audits in CMS' review queue. CMS will clearly indicate when the modules have been updated.*

Clarification: Spanish Audit and Category 3 Phase 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 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
- The Auditor will use these toolkits to verify the DE 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: The baseline version of the Communications Toolkit is posted to CMS zONE (“Communications Toolkit_09062018.xlsx”). Please note: there have been no changes to this toolkit 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 DE Entities interested in implementing EDE in calendar year 2019 for PYs 2019 and 2020 is from **April 1, 2019 to June 30, 2019**. The notice of intent was due by February 28, 2019. Entities that submitted notices of intent should note the following:
 - DE Entities that are already live and intending to implement a new phase must also submit complete audits.
 - If a DE 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.*

Clarification: Instructions for Upstream Entities

- **Upstream Documentation Package:** Upstream 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 meet the requirements 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.

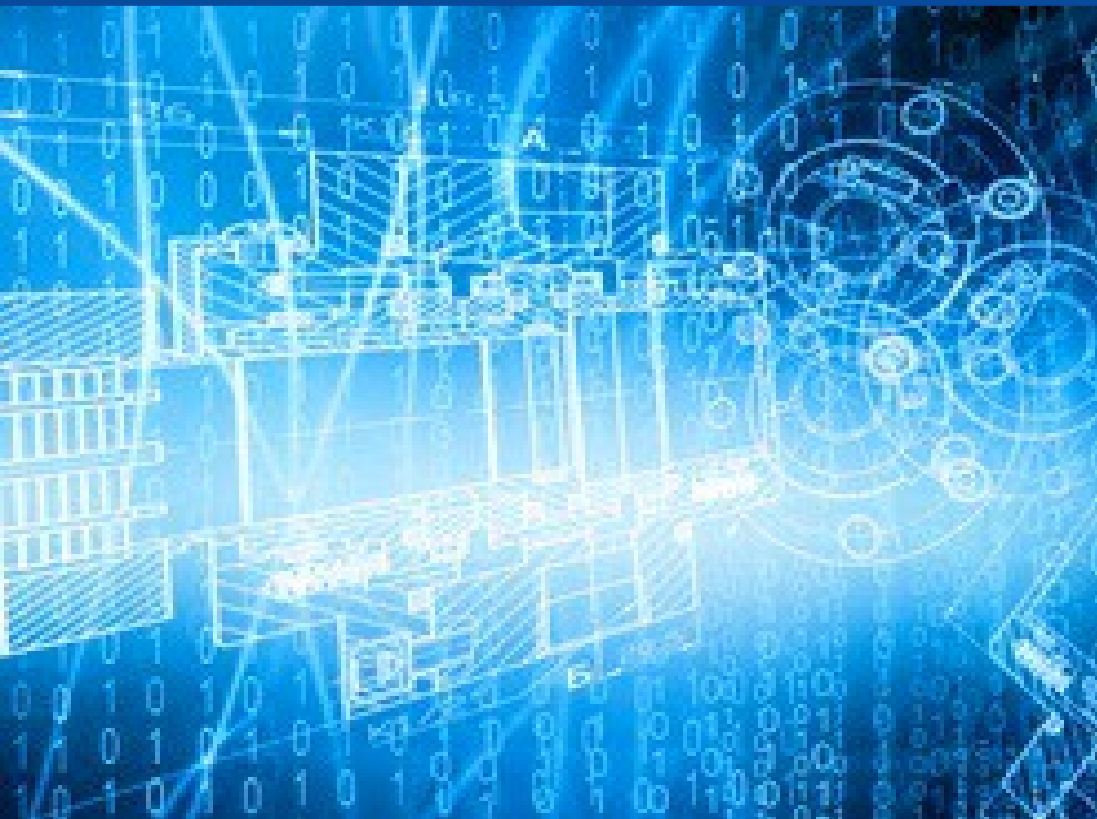
Reminder: EDE Audit Office Hours Now Available

- 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 DE Entity must maintain a testing environment that accurately represents the compliance of the DE 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.
 - DE Entities shall not submit actual PII to the FFE Testing Environments.
- Each DE Entity must provide CMS, via the DE Help Desk, with a set of credentials that CMS can use to access the testing environment.
 - Each DE 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.

Direct Enrollment (DE) Updates: Enrollment Team



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

March 26, 2019

Update for EDE Partners: New Event-Based Processing API Coming Soon

- EDE Partners, please be advised that a new Event-Based Processing API will be available soon
 - The API will enable EDE Partners to ingest business events that occur for consumers in near real time, making it possible for EDE Partners to take over messaging for a number of business events
 - The API will be optional, at least in the short-term (i.e. at least for the remainder of this coverage year)
 - The API will include four “buckets” of events in the initial implementation:
 - Verification Issues
 - Includes events indicating when an SVI or DMI has been created, resolved, expired, becomes obsolete, or when insufficient documentation has been provided by a consumer
 - Applications
 - Includes events indicating when applications have been created, submitted, or when permission has been revoked by a consumer
 - Enrollments
 - Includes events indicating when an enrollment has been successfully created
 - Consumer Information
 - Includes events indicating when a 1095 is available for a consumer
 - **Update:** The API is expected to be available in UAT0 on **4/12/2019**, and is expected to be available in production on 5/3/2019
 - The API Specs are available on the EDE page on zONE at <https://zone.cms.gov/document/enhanced-direct-enrollment-edo-documents-and-materials>
 - A somewhat more in-depth walkthrough was done on 2/26, and the corresponding slides can be found on zONE at: <https://zone.cms.gov/document/slides-cms-issuer-technical-workgroups-tuesdays>
 - Note, additional compliance requirements for using the API are expected to be provided in the near future

Update for EDE Partners: Upcoming SES Validation Change

- EDE Partners, please be aware that there will be an upcoming SES validation change related to I-94 numbers
 - Essentially, I-94 numbers are currently 11 numerical digits, made up of a 9 digit numerical sequence and a 2 digit numerical series, however the Department of Homeland Security (DHS) has identified that there are no remaining available series after the current series is exhausted
 - Therefore, DHS will be moving to alphanumeric I-94 numbers comprised of 11 alphanumeric digits, made up of a 9 digit numerical sequence and a 2 digit alphanumeric series
 - The current SES validations only allow for numeric characters for the i94Number, however we'll be updating our validations to allow for alphanumeric characters
 - This change will impact the Add Member, Update App, and Get App APIs
 - EDE Partners will need to make a corresponding validation change
 - **Update:** This change will be deployed to UAT0 on 4/12 and to production on 5/3

Update for EDE Partners: SES Defect

- EDE Partners, please be aware that we've identified a defect related to the `usedDocumentAnnualTaxIncomeAmountExplanationRequiredAmount`
 - This data element is returned in both the Update App and Get App Responses
 - This is expected to be returned as a number, however this is currently being returned as a boolean value (i.e. true/false value)
 - EDE Partners aren't likely using this value in any way, however the defect is still relevant since EDE Partners may be ingesting this value in their Update App and Get App Responses
- **Update:** A fix for this issue is expected to be deployed to UAT0 on 4/12 and to production on 5/3

EDE Partners: SES Defect

- EDE Partners, please be aware that we've identified a defect, where we are incorrectly failing Submit App Requests in some instances
 - Essentially, we are incorrectly failing Submit App Requests when Update App is called 4 or more times, and an SSN has been provided for a non-applicant
 - In this scenario, we are incorrectly setting the ssnStatusReason to 573_SSA_HUB_CALL_HELD_COUNTER for the non-applicant
 - » Normally, when the demographic information for a consumer changes, but the SSN remains the same, we will recall the Social Security Administration (SSA) for verification reasons
 - We however are currently incorrectly recalling the SSA, even when no demographic information changes for the non-applicant, which results in the retry limit being reached and the ssnStatusReason being incorrectly set to 573_SSA_HUB_CALL_HELD_COUNTER for the non-applicant
 - A fix for this issue is expected to be deployed to UAT0 on 4/12 and to production on 5/4

EDE Partners: Phase 3 SES Defects

- Phase 3 EDE Partners, please be aware that we've recently identified the below two defects, that only impact Phase 3 applications
 - We've identified a defect, where when a household is not filing taxes, and an adult child is included on the application, then we may incorrectly include the adult child in the parentCaretakerChildList (i.e. Medicaid household), which can result in an incorrect Medicaid determination
 - We believe this is a small-population scenario
 - This defect does result in an incorrect outcome for scenario 3.H in the Eligibility Results Toolkit
 - A fix for this issue has not yet been prioritized, however an update will be provided when one is available
 - We've also identified a defect, where when the escEnrolledIndicator is set to false in the Update App Request, we are incorrectly mapping the escEnrolledIndicator to null, which results in an error in the Submit App Response (i.e. Submit App fails with a validation error)
 - This issue only occurs when the escEnrolledIndicator is set to false and the WaitingPeriodIndicator and PlanToEnrollIndicator are set to null in the Update App request
 - » As a workaround, EDE Partners can set the WaitingPeriodIndicator and PlanToEnrollIndicator to false when the escEnrolledIndicator needs to be set to false, and the escEnrolledIndicator of false will be correctly persisted without any negative impacts
 - A fix for this issue is expected to be deployed to UAT0 on 5/10 and to production on 6/14

EDE Partners: Submit Enrollment Defect – 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
 - A fix has not yet been prioritized for this defect, however an update will be provided when one is available

Q&A



CMS Issuer Technical Workgroup Call Appendix

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

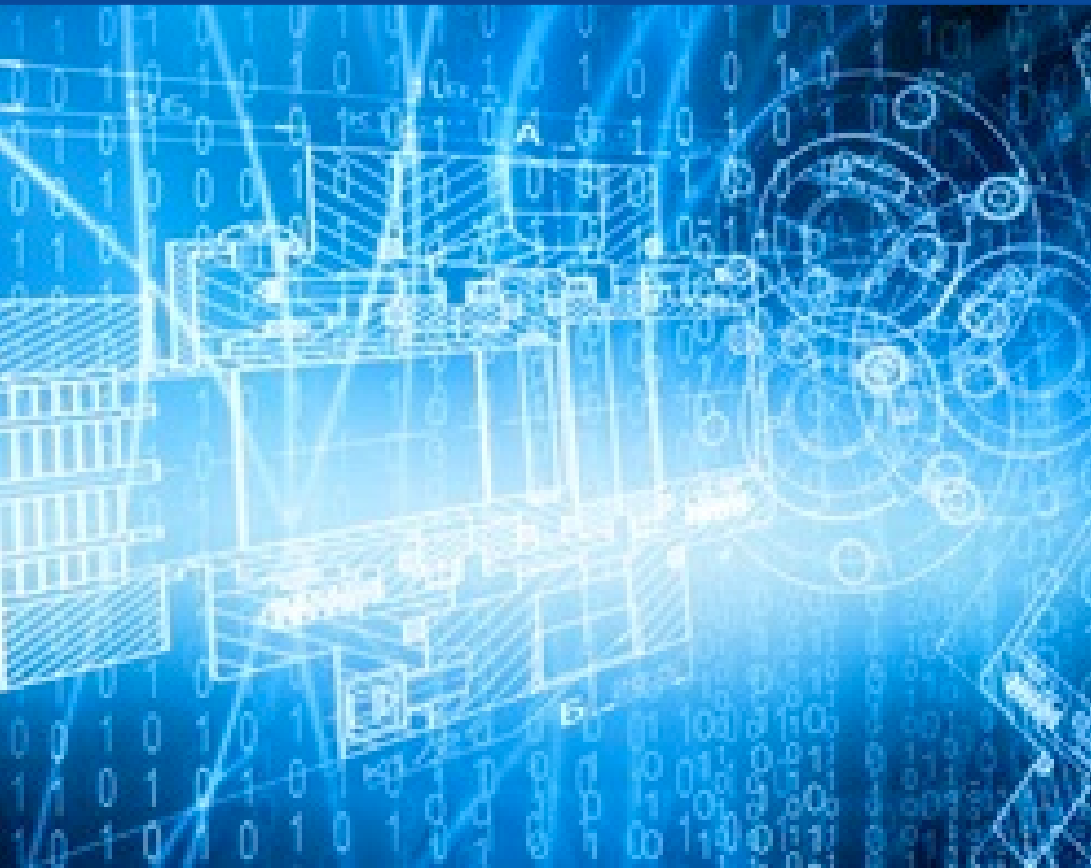
https://zone.cms.gov/system/files/documents/issuer_technical_slides_appendix_a_2018_3_20_v1.pdf

Updating Contact Information for the Marketplace

03/05/2019

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

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- **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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