

# The Transitional Reinsurance Program: Reinsurance Contributions Submission Process 101

## November 3, 2014

Payment Policy & Financial Management Group,  
Division of Reinsurance Operations

# Session Guidelines

- This is a 90-minute webinar session
- For questions regarding content, please submit inquiries to REGTAP at <https://www.regtap.info/> and mention this webinar or Reinsurance-Contributions
- For questions regarding logistics and registration, please contact the Registrar at: (800) 257-9520

# Purpose & Objectives

- Provide a general overview of the reinsurance contributions submission process, including:
  - Who is a Contributing Entity?
  - The steps to complete the reinsurance contribution filing through Pay.gov
  - How to update reinsurance contribution filing due to errors

# Overview of the Transitional Reinsurance Program

- A transitional program established by Section 1341 of the Affordable Care Act (ACA) to help stabilize premiums in the individual market
- Contributions are required for the 2014, 2015 and 2016 Benefit Years
- Funded by contributions collected from health insurance issuers and certain self-insured group health plans to cover costs for high-cost individuals enrolled in non-grandfathered reinsurance-eligible individual market plans

# Who Makes Contributions?

- Contributing Entities are required to make contributions to fund the Transitional Reinsurance Program – Contributing Entities generally include:
  - A health insurance issuer;
  - A self-insured group health plan;
  - Group health plans with a self-insured coverage option and an insured coverage option;
  - Multiple group health plans, including an insured plan, that are maintained by the same plan sponsor, that collectively provide major medical coverage for the same covered lives simultaneously; and
  - Multiple group health plans, **NOT** including an insured plan, that are maintained by the same plan sponsor, that collectively provide major medical coverage for the same covered lives simultaneously.

# Contributions Are Required For...

- Major medical coverage that is part of a commercial book of business
- For the purpose of reinsurance contributions, 'major medical coverage' is defined in 45 CFR 153.20 as:
  - A catastrophic plan, an individual or a small group market plan subject to the actuarial value requirements under 45 CFR 156.140; or
    - <https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/av-calculator-final.xlsm>
  - Health coverage for a broad range of services and treatments provided in various settings that provides minimum value as defined in 45 CFR 156.145
    - <https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/mv-calculator-final-4-11-2013.xlsm>

# 2014 Contribution Rate

- Section 1341 of the Affordable Care Act specifies the collection of reinsurance contributions for the 2014 Benefit Year as \$10 billion for the reinsurance payment pool, \$2 billion for the General Fund of the U.S. Treasury, as well as permits the collection of additional amounts for reinsurance administrative expenses
  - As finalized in the 2014 Payment Notice [78 FR 15410], the amount to be collected for reinsurance administrative expenses for 2014 is \$20.3 million
- The reinsurance contribution rate was finalized in the 2014 Payment Notice at \$63.00 per covered life for the 2014 Benefit Year

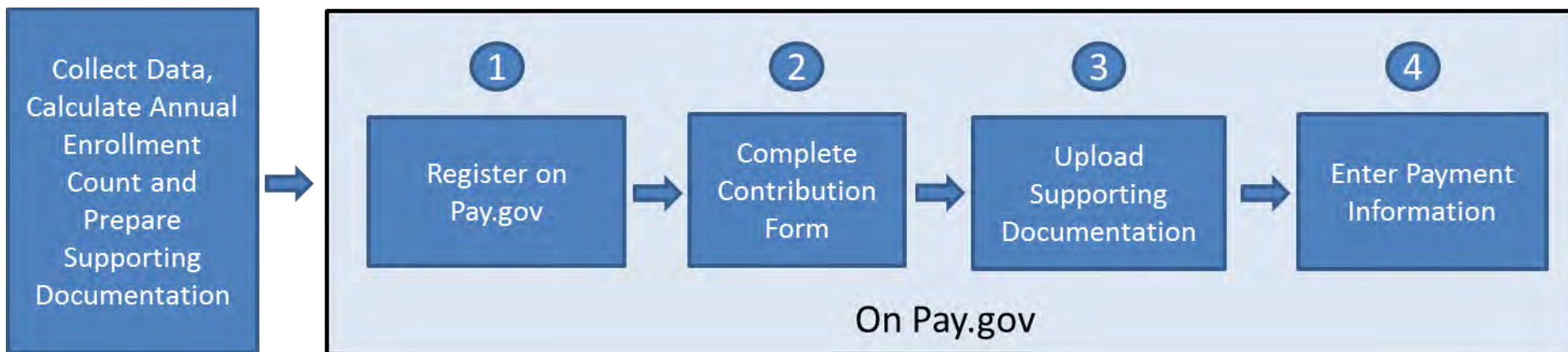
# Contribution Submission Process

- HHS is implementing a streamlined approach through Pay.gov for the contribution submission process
- Pay.gov offers a simplified method for Contributing Entities to register, submit their Annual Enrollment Count, be notified of the contribution amount owed and make contributions
  - Pay.gov is a secure, web-based application owned by the Federal Government
  - Pay.gov allows external parties to submit forms online and make online payments to government agencies
- If your organization is already registered on Pay.gov, you do not need to create a new account – you may use the existing Pay.gov account to carry out the reinsurance contribution submission process



# Contribution Submission Process Overview

- A Reporting Entity completes all of the following steps:



# Step 1 – Register on Pay.gov

- HHS is implementing a streamlined approach to complete the reinsurance contribution submission process through Pay.gov
- If you do not have a Pay.gov account, you will need to create a Pay.gov account to complete the reinsurance contribution submission process
- Registration information is used to create a user profile containing both user data and the user's company data – some of this data is used to pre-populate the Form
  - **Contact 1 for Submission:** User's name, e-mail and phone number within the Pay.gov profile will pre-populate the Form as 'Contact 1 for Submission'
  - **Legal Business Name (LBN):** The company name within the Pay.gov profile will pre-populate the Form as 'Legal Business Name (LBN)' associated with the organization's Federal Tax Identification Number (TIN)
  - **Billing Address:** The company address within the Pay.gov profile will pre-populate the Form as 'Billing Address'

# Notifications Regarding ACH Payments

- Scroll to the bottom of the 'Profile Information' page on Pay.gov and check the box – Save the update

.....

\* Secret Answer  
.....

\* Confirm Secret Answer  
.....

The shared challenge question and answer below will allow Customer Service to verify your identity. Only letters, numbers, and spaces are allowed.

\* Shared Challenge Question  
In what city were you born? ▾

\* Shared Challenge Answer  
.....

\* Confirm Shared Challenge Answer  
.....

.....

I want to update the email address for all deferred or recurring ACH transactions made through a Pay.gov form, and associated with this profile, to match the email address above.

I want to receive email notifications related to ACH payments I submit using a Pay.gov form.

[Cancel](#) [Change Password](#) [Delete My Account](#)

**Company Name**  
Great Farms Insurance

**Company Address**  
8270 Corporate Road

**Company Address 2**  
Ste. 200

**Company City**  
Valspar

**Company Country**  
United States ▾

**Company State/Province**  
Virginia ▾

**Company ZIP/Postal Code**  
23841

# Step 2 – Complete Contribution Form

- The Form:
  - Requires entry of demographic and contact information for the Reporting Entity
  - Requires selection of ‘Type of Payment’
  - Requires entry of the Gross Annual Enrollment Count
  - Provides auto-calculation of contribution amount

# Step 2 – Complete Contribution Form (continued)

- The options for Type of Payment are:
  - First Collection
  - Second Collection
  - Combined Collection
  - Invoice
  - Resubmission
- Select the ‘Type of Payment’ based on how you prefer to submit your reinsurance contribution, keeping in mind:
  - First Collection deadline is January 15, 2015
  - Second Collection deadline is November 15, 2015
  - Combined Collection deadline is January 15, 2015

# Step 3 – Supporting Documentation

- All Form submissions require the submission of Supporting Documentation
- The Supporting Documentation contains information on the Contributing Entities for whom a Reporting Entity is submitting enrollment counts
  - What is a Reporting Entity?
    - An organization carrying out the steps for the reinsurance contribution submission process
    - This can be: (a) a Contributing Entity or (b) a TPA or ASO contractor on behalf of a Contributing Entity
  - What is a contributing entity?
    - Defined under 45 CFR 153.20 as generally including a health insurance issuer or a self-insured group health plan
    - A Contributing Entity may also be a Reporting Entity

# Step 3 – Upload Supporting Documentation

- The Supporting Documentation must be a Comma Separated Value (CSV) file
  - Also known as a “flat file” or “comma delimited file”
  - Each line represents one entry or record and a comma separates each data element within a record
- A CSV file contains information in the following format:  
data,data,data,data,data,data,data,data,data,data,data,data,data,data  
data,data,data,data,data,data,,data,data,data,data,data,data,data
  - The top row includes fourteen data items
  - The bottom row includes thirteen data items with two commas next to each other because optional data is not included
- Each data element in the file is limited to a certain field length based on the requirements of the database

# Step 3 – Upload Supporting Documentation (continued)

- The Supporting Documentation must not exceed 2MB
- The Supporting Documentation must not contain the following Special Characters:

|   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|
| * | < | > | \ | / | % | ^ | , | + | ? | " |
| ` | { | } | [ | ] | ! | ~ | & | = | # |   |

- It should contain one row for each Contributing Entity
  - Each row will also contain Reporting Entity information
- The total of all Annual Enrollment Counts in the file must not exceed 1,587,301.58 covered lives if remitting a Combined Collection or 1,904,761.90 covered lives if remitting a two-part collection



# Supporting Documentation Fields

| Field Name   | Description and Constraints   |
|--|---|
| Reporting Entity Legal Business Name (LBN)               | Legal business name associated with the reporting entity's tax identification number must match the corresponding form. This requirement is the same for each contributing entity listed in this attachment.  |
| Reporting Entity Federal Tax Identification Number (TIN) | Federal TIN associated with the reporting entity's LBN must match the corresponding form. This requirement is the for each contributing entity listed in this file.   |
| Contributing Entity Legal Business Name                  | Legal business name associated with the contributing entity's tax identification number   |
| Contributing Entity Federal Tax Identification Number    | Federal TIN associated with the contributing entity's LBN   |
| Contributing Entity Organization Type                    | Organization status associated with the contributing entity's Federal TIN:<br>Value must be: For Profit or Nonprofit  |
| Contributing Entity Billing Address – Line 1             | Billing street address  |
| Contributing Entity Billing Address – Line 2             | Billing street address <i>Optional</i>  |
| Contributing Entity Billing Address City                 | City name   |
| Contributing Entity Billing Address State                | State   |
| Contributing Entity Billing Address Zip Code plus 4      | 5-digit zip code plus 4; if available   |
| Contributing Entity Domiciliary State                    | State where contributing entity is incorporated   |
| Benefit Year   | Benefit year applicable to the annual enrollment reported. Value must be 2014, 2015 or 2016.  |
| Annual Enrollment Count                                  | Number of covered lives for this Contributing Entity.   |
| Type of Contributing Entity                              | Type of Contributing Entity for whom you submitting enrollment. Value must be:<br>HII for Health Insurance Issuer<br>SI for Self-Insured<br>SISA for Self Insured/Self-Administered<br>MGHPS for Multiple Group Health Plan (single plan treatment)<br>MGHPM for Multiple Group Health Plan (multiple plan treatment)<br>OTHER for Any Other type |

# Step 4 – Enter Payment Information

- After attaching the Supporting Documentation, you will go to the last page to complete the payment information
- The payment amount auto-populates based on the 'Type of Payment' selection and the calculated reinsurance contribution amount on the Form
- On this page you will:
  - Select the 'Payment Date'
  - Enter the Account Holder Name
  - Select 'Checking or Savings Account Type'
  - Enter and Verify Bank Routing Number
  - Enter and Verify Bank Account Number
- We prefer that you schedule your payment at least 30 days after the date of Form submission, but prior to the applicable deadline(s)

# When Should I Schedule My Reinsurance Contribution Payment?

- We request that you schedule your contribution payment(s) at least 30 days after the day you submit the Form, but before the applicable regulatory deadline(s)
  - This will allow for validation and correction if necessary
- Here is an example for a combined collection:

| November 2014 |    |    |    |    |    |    | December 2014 |    |    |    |    |    |    | January 2015 |    |    |    |    |    |    |
|---------------|----|----|----|----|----|----|---------------|----|----|----|----|----|----|--------------|----|----|----|----|----|----|
| S             | M  | T  | W  | T  | F  | S  | S             | M  | T  | W  | T  | F  | S  | S            | M  | T  | W  | T  | F  | S  |
|               |    |    |    |    |    | 1  |               | 1  | 2  | 3  | 4  | 5  | 6  |              |    |    |    | 1  | 2  | 3  |
| 2             | 3  | 4  | 5  | 6  | 7  | 8  | 7             | 8  | 9  | 10 | 11 | 12 | 13 | 4            | 5  | 6  | 7  | 8  | 9  | 10 |
| 9             | 10 | 11 | 12 | 13 | 14 | 15 | 14            | 15 | 16 | 17 | 18 | 19 | 20 | 11           | 12 | 13 | 14 | 15 | 16 | 17 |
| 16            | 17 | 18 | 19 | 20 | 21 | 22 | 21            | 22 | 23 | 24 | 25 | 26 | 27 | 18           | 19 | 20 | 21 | 22 | 23 | 24 |
| 23            | 24 | 25 | 26 | 27 | 28 | 29 | 28            | 29 | 30 | 31 |    |    |    | 25           | 26 | 27 | 28 | 29 | 30 | 31 |
| 30            |    |    |    |    |    |    |               |    |    |    |    |    |    |              |    |    |    |    |    |    |

- = selected Form submission date
- △ = selected payment date
- = regulatory deadline(s)

# What is an ACH Debit Block?

- Automatic debits to your business account may be blocked by the bank
  - This security feature is called an ACH Debit Block, ACH Positive Pay or ACH Fraud Prevention Filter
- ACH Debit Block works by having an allowed list of ACH company IDs
  - The list enables allowable automatic debits
- When working with the US Government these company IDs are referred to as the Agency Location Code or the ALC+2 value
- **You must contact your bank to have the ALC+2 value added**
- For the Reinsurance Contribution process the ALC+2 is **7505008015**

# Multiple Forms and Supporting Documentation

- It is possible that a Reporting Entity may need to submit more than one Form and potentially, more than one Supporting Documentation
- Potential scenarios include if the Reporting Entity:
  1. Wants to follow the two-payment schedule (not a Combined Collection)
  2. Has more enrollees than would be permitted for a single transaction on Pay.gov
  3. Wants to use more than one bank account
  4. Has a business reason for wanting to complete multiple Forms

# Tools for Creating the Supporting Documentation

- The Transitional Reinsurance Program Job Aid is posted in the REGTAP Library to support Reporting Entities in the creation of the Supporting Documentation
  - The Job Aid is an MS Excel workbook that allows users to enter, validate and convert Contributing Entity information into a CSV file format
  - The Job Aid provides Reporting Entities the ability to paste data from another source or type information directly into the worksheet
  - After entering data and reviewing it for accuracy, Reporting Entities can run an error check and create the CSV file that must be uploaded with the Form

# Updating Transitional Reinsurance Contribution Filings

# Updating Transitional Reinsurance Contribution Filings Due To Errors Overview

- It is possible that an error is identified by the Reporting Entity or CMS after filing the Form
- Such errors, include:
  - Gross Annual Enrollment Count on the Form is incorrect
  - Supporting Documentation CSV file is incorrect
  - Gross Annual Enrollment Count on the Form and the sum of the Annual Enrollment Counts in the Supporting Documentation do not match
  - ACH bank account information changes between the time of Form filing and scheduled contribution payment date



# Updating Transitional Reinsurance Contribution Filings Due To Errors Overview (continued)

- There are several methods for resolving errors that occur when completing the reinsurance contribution submission process, these include:
  - Refiling the Form
  - Filing a Resubmission for an existing Form
  - Paying an Invoice
- The error resolution method will depend on the type of error and whether the scheduled payment date has passed
- We will share specific scenarios and step-by-step guidance on how to update contribution filings under certain scenarios

# Form Refiling Overview

- To correct errors following Form submission, but **BEFORE** the scheduled payment date, the Form would need to be refiled
- CMS will send the Reporting Entity an email specifying the type(s) of error(s) we have identified
  - The email will be sent to the Contacts, Authorizing Official and Billing Official listed on the Form
- A Reporting Entity may also identify errors following Form filing
  - The Reporting Entity does not need to contact CMS
  - The Reporting Entity should follow the appropriate steps for refileing to resolve the error (as discussed in the upcoming slides)

# Form Refiling: Additional Considerations

- The steps for refiling would be similar for any of the following errors as long as the error is corrected **BEFORE** the scheduled payment date:
  - Gross Annual Enrollment Count on the Form is incorrect
  - Supporting Documentation CSV file is incorrect
  - Gross Annual Enrollment Count on the Form and the sum of the Annual Enrollment Counts in the Supporting Documentation do not match
  - ACH bank account information changes between Form filing and contribution payment
- Changes to the steps for refiling are dependent on where the error is identified (Form, Supporting Documentation, ACH bank account information)
- CMS will monitor cancelations and subsequent refilings
  - **You must ensure the accurate entry of your original Pay.gov Tracking ID when refiling**

# Resubmission Overview

- It is possible that an error with the Supporting Documentation is identified **AFTER** payment has been made
- If an error with the Supporting Documentation is discovered **AFTER** payment is made
  - CMS will send the Reporting Entity an email specifying the type(s) of error(s) we have identified in the Supporting Documentation
  - A Reporting Entity may also independently identify errors in Supporting Documentation and must contact CMS
  - Unlike a refiling, if the Reporting Entity discovers the error, it must contact CMS via email
- If the issue is only related to the Supporting Documentation and the Gross Annual Enrollment Count submitted on the Form is **correct**, Reporting Entities will follow the resubmission process steps

# Resubmission Overview (continued)

- The selection of 'Resubmission' is only related to the resubmission of the Supporting Documentation
- No payments can be made when selecting 'Resubmission' as the Type of Payment and the Gross Annual Enrollment Count cannot be updated
- No Form cancelations are required since the Gross Annual Enrollment Count, and therefore the payment amount on the Form, are correct

# Invoices Overview

- It is possible that an error is identified **AFTER** payment has been made, which cannot be resolved through resubmission
- If an error is discovered **AFTER** payment is made
  - CMS will send the Reporting Entity an email specifying the type(s) of error(s) we have identified
  - A Reporting Entity may also independently identify errors and contact CMS
- CMS will work with the Reporting Entity to determine the error and if an invoice should be issued
  - CMS will provide guidance to the Reporting Entity on the necessary steps to resolve errors based on the specific situation

# Invoices Overview (continued)

- Invoices will only be sent if an error is found after payment is made, for example:
  - The Form reflects a lower Gross Annual Enrollment Count than the Supporting Documentation and the Annual Enrollment Count on the Supporting Documentation is correct
  - CMS will issue an invoice for the outstanding amount
- The only method for payment of invoices **is ACH debit on Pay.gov**
- To avoid situations where an invoice is generated, CMS advises Reporting Entities to schedule payments at least 30 days after the date of Form filing, but prior to the applicable payment deadlines
  - This will allow errors to be corrected via refiling
- **Invoices will be sent to Contributing Entities by US mail**

# Who can be invoiced?

- Invoices can only be issued to the entity that is responsible for the reinsurance contribution under Section 1341 of the Affordable Care Act
- Therefore, in situations where an invoice is necessary, the Contributing Entity, **NOT** the Reporting Entity, will receive the invoice
  - If a Reporting Entity filed the Form on behalf of multiple Contributing Entities, CMS will contact the Reporting Entity to determine which Contributing Entity to invoice
  - **We reiterate that the Reporting Entity and Contributing Entity can be the same**
- The invoice submission process can still be completed by the Reporting Entity, however this is a business decision between the Contributing Entity and Reporting Entity



# Payment Failure

- A Reporting Entity should update its Pay.gov profile to indicate that it wants to receive email notifications about payments made using forms on Pay.gov
  - This selection means that the Reporting Entity will receive a reminder notice that an ACH payment is going to be withdrawn for the scheduled payment date
- CMS recommends that the Account Owner monitor its bank account after it receives the reminder email to ensure that the payment goes through successfully
- If a bank account has insufficient funds, three attempts will be made to obtain the funds
  - If Account Owner receives an insufficient funds notice, it should deposit money into the account immediately
- If an Account Owner does not see the payment go through within 5 business days of its scheduled payment date, it should contact Pay.gov for assistance

# Updating Form Contacts & Billing Information

- If any of the contacts listed on the Form (billing contact, submitter contacts or Authorizing Official) or the billing information changes after the Form is submitted, the Reporting Entity can contact CMS via email to inform us of the change
  - Changes to the contacts do not require refiling, but CMS must be informed so that it can contact the appropriate individuals if necessary

# Ways to Avoid Errors

- Make sure that the Gross Annual Enrollment Count on the Form matches the sum of the enrollment counts on the Supporting Documentation
- Ensure the account information provided to Pay.gov is correct and sufficient funds are available for the contribution amount
- Schedule payments 30 days after the Form is filed, but prior to the applicable deadline(s), so that errors can be corrected before the payment is made

# Compliance Standards

- **Acknowledgment:** On Pay.gov, each Contributing Entity (or TPA or ASO contractor on their behalf) will acknowledge that the information submitted on the ACA Transitional Reinsurance Program Annual Enrollment and Contributions Submission Form is accurate and complete
- **Maintenance of records:** A Contributing Entity must maintain and make available documents and records, whether paper, electronic, or in other media, sufficient to substantiate the enrollment count submitted pursuant to this section for a period of at least 10 years (See 45 CFR 153.405(h))
- **Audits:** HHS may audit a Contributing Entity to assess its compliance with the requirements of the Transitional Reinsurance Program (See 45 CFR 153.405(i))

# Key Deadlines for the 2014 Benefit Year

| Date                               | Activity                            | Contribution Amount      |
|------------------------------------|-------------------------------------|--------------------------|
| No later than<br>November 15, 2014 | Submit Annual Enrollment<br>Count   |                          |
| No later than<br>January 15, 2015  | Remit first Contribution<br>Amount  | \$52.50 per covered life |
| No later than<br>November 15, 2015 | Remit second<br>Contribution Amount | \$10.50 per covered life |
|                                    | Total                               | \$63.00 per covered life |

# What can you do now...

- Register on Pay.gov
- Compete the ‘ACA Transitional Reinsurance Program Annual Enrollment Contributions Submission Form’
  - Use the Job Aid and Job Aid Manual available in the REGTAP Library to create your Supporting Documentation
- Contact your bank to have the ALC+2 value (7505008015) added to allow for automatic debits (if applicable)
- Review prior webinar slides, guidance documents and public FAQs available in REGTAP in the Library and FAQ sections, filter by Reinsurance-Contributions
- Monitor the Reinsurance Contributions specific CCIO webpage: <http://www.cms.gov/CCIO/Programs-and-Initiatives/Premium-Stabilization-Programs/The-Transitional-Reinsurance-Program/Reinsurance-Contributions.html>
- Submit questions via [reinsurancecontributions@cms.hhs.gov](mailto:reinsurancecontributions@cms.hhs.gov)

# Questions?

To submit questions by phone:

- dial '14' on your phone's keypad
- dial '13' to exit the phone queue

To submit questions by webinar:

- type your question in the text box under the 'QA' tab

# Resources



# Regulatory References

This list of regulatory references offers additional information and details on the Transitional Reinsurance Program.

- Standards Related to Reinsurance, Risk Corridors and Risk Adjustment (77 FR 17220) provided a regulatory framework
  - <http://www.gpo.gov/fdsys/pkg/FR-2012-03-23/pdf/2012-6594.pdf>
- HHS Notice of Benefit and Payment Parameters for 2014 (78 FR 15410)
  - <http://www.gpo.gov/fdsys/pkg/FR-2013-03-11/pdf/2013-04902.pdf>
- Program Integrity: Exchange, Premium Stabilization Programs, and Market Standards (78 FR 65046) established oversight standards
  - <http://www.gpo.gov/fdsys/pkg/FR-2013-10-30/pdf/2013-25326.pdf>
- HHS Notice of Benefit and Payment Parameters for 2015 (78 FR 13744) provided a split collection process
  - <http://www.gpo.gov/fdsys/pkg/FR-2014-03-11/pdf/2014-05052.pdf>
- Exchange and Insurance Market Standards for 2015 and Beyond (79 FR 30240)
  - <http://www.gpo.gov/fdsys/pkg/FR-2014-05-27/pdf/2014-11657.pdf>

# Resources

| Resource  | Link/Contact Information  |
|---|---|
| U.S. Department of Health & Human Services                                  | <a href="http://www.hhs.gov/">http://www.hhs.gov/</a>   |
| Centers for Medicare & Medicaid Services (CMS)                              | <a href="http://www.cms.gov/">http://www.cms.gov/</a>   |
| The Center for Consumer Information & Insurance Oversight (CCIIO) web page  | <a href="http://www.cms.gov/cciiio">http://www.cms.gov/cciiio</a>   |
| Registration for Technical Assistance Portal (REGTAP) - presentations, FAQs | <a href="https://www.REGTAP.info">https://www.REGTAP.info</a>   |
| Pay.gov   | <a href="https://pay.gov/paygov/">https://pay.gov/paygov/</a>   |
| The Transitional Reinsurance Program – Reinsurance Contributions Webpage    | <a href="http://www.cms.gov/CCIIO/Programs-and-Initiatives/Premium-Stabilization-Programs/The-Transitional-Reinsurance-Program/Reinsurance-Contributions.html">http://www.cms.gov/CCIIO/Programs-and-Initiatives/Premium-Stabilization-Programs/The-Transitional-Reinsurance-Program/Reinsurance-Contributions.html</a> |

# Inquiry Tracking and Management System (ITMS)

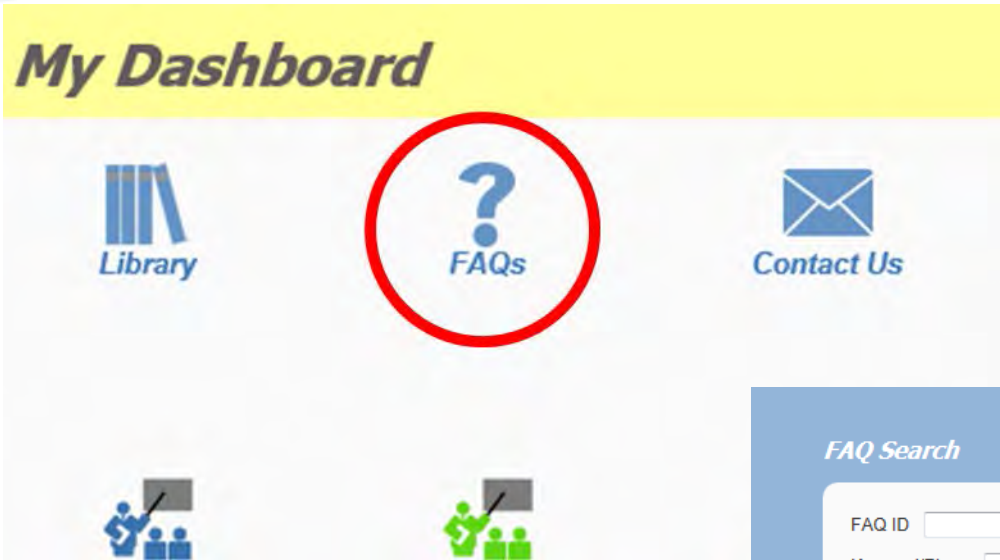
ITMS is available at <https://www.regtap.info/>

Users can submit questions after the User Group by selecting “Submit an Inquiry” from My Dashboard.

The screenshot displays the REGTAP My Dashboard. The top navigation bar includes links for Registration, Technical Assistance Portal, My Dashboard, Training Events, Inquiry Tracking, Library, FAQs, Contact Us, About REGTAP, and Log Out. The user is logged in as user2@regtap.info. The dashboard features a 'Submit an Inquiry' button highlighted with a red box. Other visible elements include a 'Library' icon, 'FAQs', 'Contact Us', 'Suggestion Box', 'Update Password', 'Training Events', 'My Events', 'My Proxy Events', and 'My Inquiries'. The left sidebar contains announcements such as a reminder for a July 15, 2014 deadline and information about casework FAQs. The footer includes copyright information for ARDX and links for Contact Us, Privacy Policy, and Terms of Use.

**Note: Enter only one (1) question per submission.**

# FAQ Database on REGTAP



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

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

**FAQ Search**

FAQ ID

Keyword/Phrase

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

Primary Category

Secondary Category

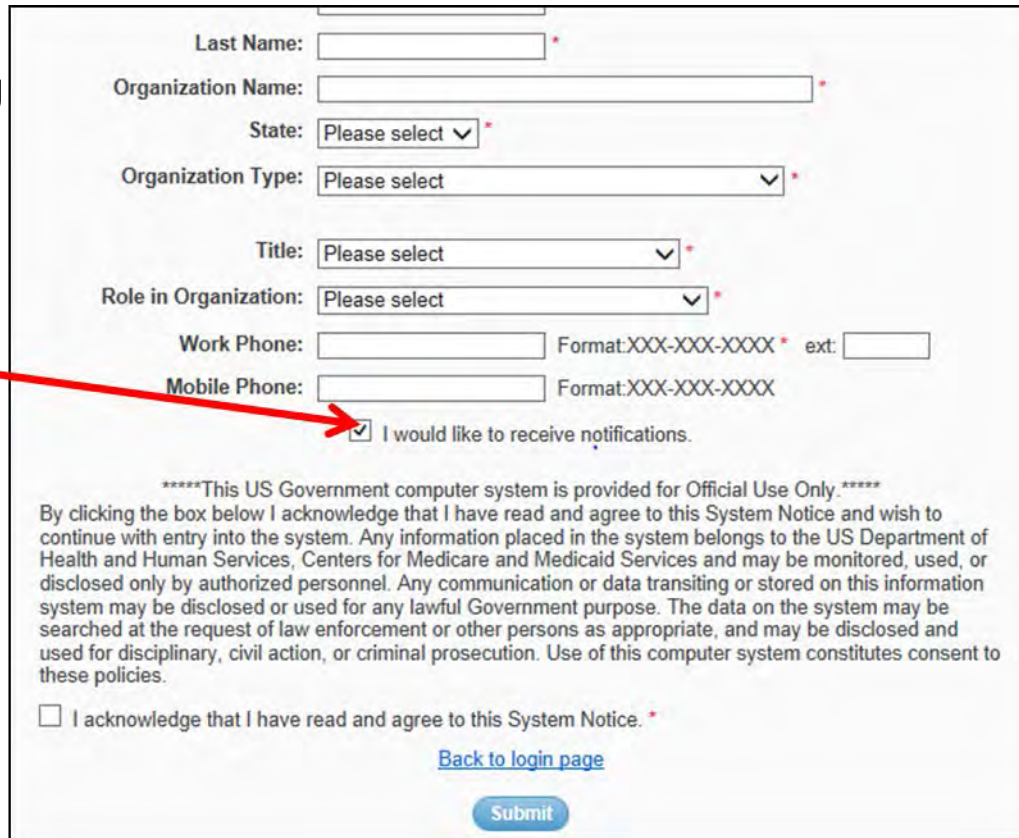
Publish Date  
Start Date  22 End Date  22

Primary and Secondary Category search available only when one (1) Program Area is selected.



# Notifications Opt In/Opt Out

Users have the option to opt in or opt out of receiving notifications when first registering in REGTAP by checking or unchecking the box for “I would like to receive notifications.”



The screenshot shows a registration form with the following fields:

- Last Name:  \*
- Organization Name:  \*
- State:  \*
- Organization Type:  \*
- Title:  \*
- Role in Organization:  \*
- Work Phone:  Format:XXX-XXX-XXXX \* ext:
- Mobile Phone:  Format:XXX-XXX-XXXX

Below the fields is a checkbox labeled  I would like to receive notifications. A red arrow points from the text on the left to this checkbox.

\*\*\*\*\*This US Government computer system is provided for Official Use Only.\*\*\*\*\*  
By clicking the box below I acknowledge that I have read and agree to this System Notice and wish to continue with entry into the system. Any information placed in the system belongs to the US Department of Health and Human Services, Centers for Medicare and Medicaid Services and may be monitored, used, or disclosed only by authorized personnel. Any communication or data transiting or stored on this information system may be disclosed or used for any lawful Government purpose. The data on the system may be searched at the request of law enforcement or other persons as appropriate, and may be disclosed and used for disciplinary, civil action, or criminal prosecution. Use of this computer system constitutes consent to these policies.

I acknowledge that I have read and agree to this System Notice. \*

[Back to login page](#)

After initial registration, contact the Registrar at [registrar@REGTAP.info](mailto:registrar@REGTAP.info), call (800) 257-9520, or submit an inquiry to <https://www.regtap.info/> to change notification preference.

# Closing Remarks