

Exit >

Welcome to the
**SMALL BUSINESS HEALTH
OPTIONS PROGRAM**
Module

DELI

Health Insurance Marketplace®
Plan Year 2021

Job Aids Help Glossary Pause Mute Transcript

Text Description of Image
or Animation

Page Text

Welcome to the Small Business Health Options Program module.

Long Description

Animated introduction screen containing the following text at the top and left of the screen: Welcome to the Small Business Health Options Program Module. On the right side of the screen are three images from the module representing module-specific concepts. Beneath this text on the left is the logo for the Department of Health & Human Services (HHS), which is made up of the profiles of people, stacked on top of each other, resulting in the profile of an eagle. The words "Department of Health & Human Services USA" form a circle that extends out and to the left from the profiles. To the right of the logo are the words "Health Insurance Marketplace®." On the right side of the screen are three images; two representing small business owners and one image of an agent or broker. The health caduceus symbol is behind these images.

Small Business Health Options Program

Disclaimer

The information in this training was current at the time it was published or uploaded onto the Web. Eligibility policies and Marketplace* requirements may change so links to the source documents have been provided within the document for your reference. This training is not intended to grant rights or impose obligations. It may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage learners to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of the requirements.

This communication was printed, published, or produced and disseminated at U.S. taxpayer expense.

*The term "Health Insurance Marketplace®" is a registered trademark of the U.S. Department of Health & Human Services. When used in this document, the term "Health Insurance Marketplace®," "The Small Business Health Options Program (SHOP)," or "Marketplace" refers to Federally-facilitated Marketplaces (FFM), including FFMs where states perform plan management functions, and also refers to State-based Marketplaces on the Federal Platform (SBM-FP).



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Alt Text

A page of text with horizontal lines across it; a red horizontal box containing the word "Disclaimer" within it

Small Business Health Options Program

Introduction

In this module, you will learn about the characteristics of the Small Business Health Options Program (SHOP) and how you, as an agent or broker, can help employers understand and complete the initial enrollment requirements and the process to renew each year. The contents of this module are limited to the SHOPS run by the federal government and SHOPS using the federal platform.



Health Insurance Marketplace [®]
Plan Year 2021

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Alt Text

A male small business owner standing behind a counter and in front of a wall of produce and groceries.

Small Business Health Options Program

Objectives

Upon completion of this module, you should be able to:

- Define the employer eligibility requirements for purchasing a SHOP plan and the benefits of purchasing a SHOP plan
- Understand how an employer may appeal a SHOP eligibility determination
- Understand the Small Business Health Care Tax Credit and who may be eligible for it
- Understand the SHOP employer options for health and dental plan offerings
- Describe how to use tools on HealthCare.gov to help clients decide if they want to enroll in a SHOP plan
- Understand how you can help your clients enroll in a SHOP plan directly with an issuer
- Understand how a qualified employee may file a complaint if a SHOP issuer does not honor a special enrollment period (SEP) request
- Identify where agents, brokers, employers, and employees can go for more information and updates on the SHOP



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- Identify where agents, brokers, employers, and employees can go for more information and updates on the SHOP

Alt Text

A young woman is leaning against the door frame of a store front with her arms folded across her chest.

Small Business Health Options Program

SHOP Advantages for Small Employers

Select each small employer to reveal the advantages of the Patient Protection and Affordable Care Act.

The SHOP, created under the Patient Protection and Affordable Care Act, gives eligible small employers (sometimes referred to as qualified employers) a variety of options when offering their employees health and/or dental insurance.



Health Insurance Marketplace
Plan Year 2021



Job Aids



Help



Glossary



Pause

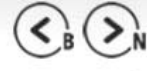


Mute



Transcript

[Text Description of Image
or Animation](#)



Long Description

Interactive graphic representing small employers and the advantages to them of the Patient Protection and Affordable Care Act. There is prompt text at the top of the page. Below the prompt text are the heads of three people representing small employers. As each head is selected, a pop-up box appears and displays text and the image of the small employer. When the pop-up box is closed, the blue banner at the bottom of each image turns green and a checkmark appears to indicate the action is completed.

Prompt Text: Select each small employer to reveal the advantages of the Patient Protection and Affordable Care Act.

Page Text: The SHOP, created under the Patient Protection and Affordable Care Act, gives eligible small employers (sometimes referred to as qualified employers) a variety of options when offering their employees health and/or dental insurance.

Pop Up Text

Small Employer 1: HealthCare.gov provides tools for small employers who are looking for health and/or dental insurance for their employees. The agents and brokers who are helping these small employers can also use these tools, which include the [Eligibility Determination Form](#), the [Small Business Health Care Tax Credit Tool](#), the [Minimum Participation Rate \(MPR\) Calculator](#), the [Full-Time Equivalent \(FTE\) Employee Calculator](#), and the [See Plans and Prices Tool](#).



Small Employer 2: A full-time employee is one who is employed for, on average, 30 hours or more per week. An FTE employee is a combination of multiple part-time employees whose combined hours total 120 hours per month.

Small Employer 3: Woman with long blonde hair - Qualified employers may be eligible for the Small Business Health Care Tax Credit if they offer a SHOP plan and have qualified employees enrolled in SHOP coverage, provided certain criteria are met.

Small Business Health Options Program

Coverage Options Available Through the SHOP

Small businesses have three options available when offering SHOP plans to their qualified employees and, if applicable, their employees' dependents:

1. Only health coverage
2. Only dental coverage
3. Both health and dental coverage



Page Text

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Alt Text

An older man is standing in front of a lumber warehouse smiling and with his hands on his hips.

Small Business Health Options Program

SHOP Coverage and Employer Size



The SHOP coverage must be offered to all full-time employees (full-time employees are those employed for an average of 30 hours or more per week). Employers may offer SHOP coverage in Federally-facilitated SHOP states and State-based SHOP Marketplace states, including State-based SHOP Marketplaces not using the federal platform. As noted earlier in this training, the contents of this module are limited to the SHOPS run by the federal government and SHOPS using the federal platform.

The employer's principal business address or the eligible employee's primary worksite must be located in the SHOP service area or areas (i.e., state or states) where the employer is applying for and offering coverage.

To be eligible for the SHOP, employers generally must be "small employers" and have at least one employee on the first day of the plan year. Estimating employer size can be complex and agents and brokers should refer to official Department of Health & Human Services and Internal Revenue Service (IRS) guidance on this topic before advising employers regarding their size.

Page Text

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Alt Text

Woman on the phone in her shop taking notes from a customer.

Small Business Health Options Program

Who is Eligible for the SHOP?

Select each icon to learn more about employer size.



Generally, an employer is a "small employer" if it employed one to 50 full-time and FTE employees (one to 100 in some states) on average on business days during the preceding calendar year and employs at least one employee on the first day of the plan year.

Health Insurance Marketplace
Plan Year 2021

Job Aids Help Glossary Pause Mute Transcript

[Text Description of Image or Animation](#)

Long Description

Interactive Image. There are three icons in the lower left side of the page. When each icon is selected, content appears.

Prompt Text: Select each icon to learn more about employer size.

Page Text: Generally, an employer is a "small employer" if it employed one to 50 full-time and FTE employees (one to 100 in some states) on average on business days during the preceding calendar year and employs at least one employee on the first day of the plan year.

Three Figure Head Icon: When counting FTE and full-time employees, do not include the following: Sole proprietors, Partners in a partnership, 2% S corporation shareholders, 5% C corporation shareholders, Spouse or family member of the owner

Clock Icon: A full-time employee is one who is employed for, on average, 30 hours or more per week. An FTE employee is a combination of multiple part-time employees whose combined hours total 120 hours per month.

Calendar Icon: If an employer was not in existence throughout the preceding calendar year, the count of full-time and FTE employees is based on the average number of employees that it is reasonably expected the employer will employ on business days in the current calendar year.

Small Business Health Options Program

Additional Employer Requirements

As an agent or broker, you may receive additional questions from employers regarding their SHOP eligibility. Employers that are part of the same controlled group must count all employees of the combined entities in the controlled group when determining employer size.

Certain affiliated employers with common ownership or employers that are part of a controlled group are considered part of an aggregated group. In this case, you should advise your small business clients to aggregate, or combine, their employees to determine their workforce size. Learn more from the IRS on the page for [Determining if an Employer is an Applicable Large Employer](#).



Page Text

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Alt Text

A woman business owner is standing in her store holding a clipboard and talking on the phone.

Small Business Health Options Program

Filing an Eligibility Determination Appeal

Small employers may appeal eligibility determinations made by the SHOP. Specifically, an employer may appeal:

- Its SHOP eligibility determination; and
- The failure of the SHOP to provide a timely eligibility determination or a timely notice of the determination.

If an employer wishes to appeal its SHOP eligibility determination, the employer must complete and submit a [SHOP Employer Eligibility Appeal Request](#) and any other additional pertinent documentation to the SHOP Appeals address on the form within 90 calendar days from the date of the notice of its SHOP eligibility determination.

You can find more information on how to help your small business clients appeal a SHOP eligibility determination at HealthCare.gov.



Health Insurance Marketplace Plan Year 2021

Job Aids Help Glossary Pause Mute Transcript

Navigation icons: Back, Forward, Home, Search

Page Text

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Alt Text

Image of "Instructions to help you complete the SHOP Employer Eligibility Appeal Request" form

Small Business Health Options Program

Minimum Participation Rate Requirement

A certain percentage of a small employer's employees must be enrolled in coverage for an employer group to be enrolled in SHOP coverage, unless the group's enrollment occurs between November 15 and December 15 of the year. This requirement is known as the minimum participation rate (MPR). In most states, during the months when the MPR applies, at least 70% of the business' or group's full-time employees must accept the qualified employer's offer of SHOP coverage or be enrolled in certain other coverage before the group can enroll. A few states with SHOP have set a different MPR, which can be found on [HealthCare.gov](https://www.healthcare.gov) (scroll to the question "How do I know my state's minimum participation rate?").

The MPR is calculated at the group level and is determined by first adding the number of full-time employees accepting coverage offered by a qualified employer to the number of full-time employees who, at the time the qualified employer submits the SHOP group enrollment, are enrolled in other qualified coverage. This other coverage may be another group health plan, government-sponsored coverage (such as Medicare, Medicaid, or TRICARE), individual market coverage, or other minimum essential coverage. This number is then divided by the number of full-time employees offered coverage to calculate the participation rate.

If an employer group is unable to meet the MPR, the group's ability to complete an initial group enrollment or renewal through the SHOP may be restricted to a limited enrollment period when the MPR may not be enforced by issuers (November 15 – December 15). Mid-year fluctuations in a group's participation rate do not affect a qualified employer's ability to maintain coverage through SHOP.



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Small Business Health Options Program

Calculating Premiums in the Small Group Market

Under the Patient Protection and Affordable Care Act, premiums in the small group market are calculated differently than they have been in the past in many states. Under the Patient Protection and Affordable Care Act:

- Qualified employee premiums reflect age and employer geographic location.
- In some states, qualified employee premiums also reflect tobacco use.
- The family premium is generally the sum of premiums attributable to each family member (taking into account no more than the three oldest covered dependent children under age 21).
- Group premiums are generally built up from members of the group, and each group's rates are based on the individual rates of its members.
- Rating based on average characteristics of the group, such as claims history or gender makeup, is no longer permitted.
- In some states, premiums may be calculated using composite rating.



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Alt Text

Image of a man and woman in business suits; The man is standing in front and the woman is standing behind him.

Small Business Health Options Program

Knowledge Check

True or False:

Under the Patient Protection and Affordable Care Act, group rates generally are based on the individual rates of the group's members.

Select the **best answer** and then click **Check Your Answer**.

- A. True
- B. False

 Check Your Answer

Reset

Prompt

Select the **best answer** and then click **Check Your Answer**.

Question

True or False: Under the Patient Protection and Affordable Care Act, group rates generally are based on the individual rates of the group's members.

Options

- A. True
- B. False

Correct Answer

A

Positive Feedback

Correct! In general, under the Patient Protection and Affordable Care Act, group rates are based on the individual rates of the group's members.



Negative Feedback

Incorrect. The statement is true. In general, under the Patient Protection and Affordable Care Act, group rates are based on the individual rates of the group's members.

Small Business Health Options Program

Health Plans Available in a SHOP

As noted earlier, small employers may choose to offer both health and dental coverage, only health coverage, or only dental coverage through the SHOP. All SHOP health plans must be qualified health plans (QHPs). Employers can be confident in the health insurance coverage options they have to offer their qualified employees because all QHPs in the SHOP must:

- Be certified by the SHOP
- Provide [essential health benefits \(EHB\)](#)
- Meet one of the [four plan categories of actuarial value \(AV\), a measure of plan coverage](#)



Page Text

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- Be certified by the SHOP
- Provide [essential health benefits \(EHB\)](#)
- Meet one of the [four plan categories of actuarial value \(AV\), a measure of plan coverage](#)

Pop Up Text

Essential Health Benefits

All SHOP health plans must provide a set of essential health benefits (EHB). They are also prohibited from excluding coverage based on pre-existing conditions and must cover certain preventive services without cost sharing.

Plan Categories and Choice

The QHP plan categories correspond to different levels of AV based on how enrollees and the plan can expect to share the costs for health care.

The category a qualified employer chooses affects, on average, how much qualified enrollees pay for things like premiums, deductibles, and copayments, and the total amount they have to spend out-of-pocket for the year if they need a lot of care.

- **Bronze.** The health plan covers about 60% of the total costs of care on average. An average enrollee can expect to pay about 40%.
- **Silver.** The health plan covers about 70% of the total costs of care on average. An average enrollee can expect to pay about 30%.
- **Gold.** The health plan covers about 80% of the total costs of care on average. An average enrollee can expect to pay about 20%.
- **Platinum.** The health plan covers about 90% of the total costs of care on average. An average enrollee can expect to pay about 10%.



Alt Text

Image of two sets of hands. The one set of hands is that of a doctor holding another set of hands, the patient's.

Small Business Health Options Program

Employer Health and Dental Plan Choices

Qualified employers decide which QHPs and/or stand-alone dental plans to make available to their qualified employees.

- **Single Plan.** The qualified employer may use the traditional method of offering employees a single SHOP QHP and/or stand-alone dental plan. When choosing this option, the employer should carefully examine the details of each QHP and stand-alone dental plan to choose the one that best meets both the employer's budget and the employees' needs.
- **Employee Choice.** Alternatively, a qualified employer may offer its qualified employees a choice of all SHOP QHPs at a specific plan category and/or all stand-alone dental plans. In many states, qualified employers may alternatively offer a choice of all plans across all available plan categories and/or all stand-alone dental plans from a single issuer. A list of states giving qualified employers the ability to offer plans across all available plan categories from a single issuer is available at www.cms.gov. Providing qualified employees with a choice of plans simplifies the qualified employer's choice (because the employer only has to select the plan category or a single issuer), and allows qualified employees to choose a plan that best fits their individual or family needs. Qualified employers offering qualified employees a choice of plans would need to choose the plans, either across a plan category or by issuer, to offer to their qualified employees. Once the qualified employees choose the plans they want to enroll in, the qualified employer is responsible for paying premiums to each applicable company whose plan a qualified employee enrolled in. Remember, a qualified employer's MPR is determined at the group level. If a qualified employer offers its qualified employees a choice of plans and the group meets the applicable MPR for its state, or if the enrollment occurs between November 15 and December 15, the issuers must accept the qualified employee's enrollment, even if only one qualified employee is enrolling with a particular issuer.



Page Text

Qualified employers decide which QHPs and/or stand-alone dental plans to make available to their qualified employees.

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the applicable MPR for its state, or if the enrollment occurs between November 15 and December 15, the issuers must accept the qualified employee's enrollment, even if only one qualified employee is enrolling with a particular issuer.

Alt Text

A grocery store owner with a thought bubble in front of him with the text "Which QHPs should I make available to my qualified employees?"

Small Business Health Options Program

Knowledge Check

If a qualified employer chooses to offer its qualified employees a choice of Silver plans, which of the following is true?

Select **the best answer** and then click **Check Your Answer**.

- A.** Each of its qualified employees may choose a Silver plan that best fits his or her individual or family needs.
- B.** The qualified employer cannot also offer dental coverage to its qualified employees.
- C.** The qualified employees must enroll in the Silver plan that the qualified employer has chosen as the preferred plan.
- D.** The qualified employees may enroll in any plan category.

 **Check Your Answer**

Reset

Prompt

Select **the best answer** and then click **Check Your Answer**.

Question

If a qualified employer chooses to offer its qualified employees a choice of Silver plans, which of the following is true?

Options

- A.** Each of its qualified employees may choose a Silver plan that best fits his or her individual or family needs.
- B.** The qualified employer cannot also offer dental coverage to its qualified employees.
- C.** The qualified employees must enroll in the Silver plan that the qualified employer has chosen as the preferred plan.
- D.** The qualified employees may enroll in any plan category.

Correct Answer

A



Positive Feedback

Correct! If a qualified employer offers its employees a choice of all plans in the Silver plan category, each qualified employee may choose the Silver plan that best fits his or her individual or family needs.

Negative Feedback

Incorrect. The correct answer is A. If a qualified employer offers its employees a choice of all plans in the Silver plan category, each qualified employee may choose the Silver plan that best fits his or her individual or family needs.

Small Business Health Options Program

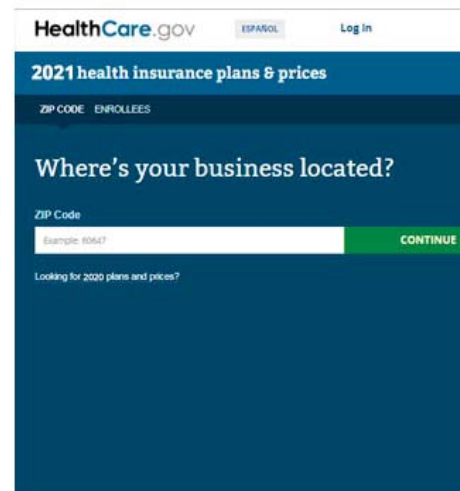
Plan Selection

Agents, brokers, and small businesses can get a look at price estimates for all the SHOP QHPs and stand-alone dental plans offered in their area by using the [See Plans and Prices tool](#) available at HealthCare.gov.

Users answer a few quick questions, such as whether they are looking for health benefits or dental benefits, and select the state or states where the small business' principal business address or qualified employee worksites are located.

The price estimates are generally based on the ages of enrollees and where the business is located (which is determined based on the group policyholder's principal business address, which can be based on qualified employee locations, depending on the circumstances). Estimates reflect prices for people who do not use tobacco. Issuers are allowed to charge higher premiums for tobacco users under certain circumstances.

Once a qualified employer finds a plan or plans in which it would like to enroll, agents and brokers can assist the employer in contacting an issuer or issuers directly to enroll in a SHOP plan.



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Alt Text

Screenshot of the See Plans and Prices tool from HealthCare.gov <https://www.healthcare.gov/see-plans/small-business/>

Small Business Health Options Program

Small Business Health Care Tax Credit

Small employers may be eligible for the Small Business Health Care Tax Credit to assist with the cost of health coverage. To qualify, employers must meet all of the following criteria:

- Generally, must have qualified employees enrolled in SHOP QHPs or stand-alone dental plans
- Have fewer than 25 FTE employees for the taxable year (based on a 40-hour work week and excluding workers, such as seasonal workers, independent contractors, and certain owners of the business and their family members)
- Have employees with average annual wages of less than \$50,000 per FTE employee (as adjusted annually for inflation—for tax year 2019, the inflation-adjusted amount is \$55,000) (The [IRS has released guidance](#) detailing how qualified employers in areas with no SHOP plans may still be able to claim the tax credit.)
- Contribute a uniform percentage (at least 50%) of the premium cost of employee-only insurance coverage on behalf of each qualified employee who enrolls in a SHOP QHP or stand-alone dental plan
- File for the Small Business Health Care Tax Credit with the IRS



The tax credit is generally available only for qualified employers who offer and have employees enrolled in SHOP coverage. The [Small Business Health Care Tax Credit Estimator](#) is available on HealthCare.gov to help agents and brokers assist small employers in assessing if they might be eligible for the credit and [estimating how much the credit might be worth](#).

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The tax credit is generally available only for qualified employers who offer and have employees enrolled in SHOP coverage. [The Small Business Health Care Tax Credit Estimator](#) is available on HealthCare.gov to help agents and brokers assist small employers in assessing if they might be eligible for the credit and [estimating how much the credit might be worth](#).



Pop Up Text

Small Business Health Care Tax Credit

For tax years beginning in 2014 and beyond, the Small Business Health Care Tax Credit may be worth up to 50% of the qualified employer's contribution toward premium costs (up to 35% for tax-exempt employers) for two consecutive taxable years. The credit is decreased for eligible small employers if the number of FTE employees exceeds 10, or if the average annual wages for FTE employees exceeds \$25,000 (as adjusted for inflation). For a qualified employer with both more than 10 FTE employees and average annual FTE employee wages exceeding \$25,000, the credit is reduced based on the sum of the two reductions. This may reduce the credit to zero even for some qualified employers with fewer than 25 FTE employees and average annual FTE employee wages less than \$55,000 in 2019 (as adjusted for inflation).

Alt Text

A woman is sitting at a desk using a calculator.

Small Business Health Options Program

Knowledge Check

True or False:

Maria had four full-time employees, on average, on business days during the preceding calendar year and will continue to have four full-time employees on the first day of her business' SHOP plan year. She will offer a SHOP health plan to all four employees. Her flower shop is her only business location or employee work site and is located in the service area of the SHOP where she is applying for and offering coverage. Maria qualifies to purchase a SHOP plan.

Select the best answer and then click **Check Your Answer**.

- A. True
- B. False

Check Your Answer

Reset

Prompt

Select the best answer and then click **Check Your Answer**.

Question

True or False: Maria had four full-time employees, on average, on business days during the preceding calendar year and will continue to have four full-time employees on the first day of her business' SHOP plan year. She will offer a SHOP health plan to all four employees. Her flower shop is her only business location or employee work site and is located in the service area of the SHOP where she is applying for and offering coverage. Maria qualifies to purchase a SHOP plan.

Options

- A. True
- B. False

Correct Answer

A



Positive Feedback

Correct! Maria does qualify to purchase a SHOP plan because she is a small employer, she offers SHOP coverage to all full-time employees, and her flower shop is located in the service area of the SHOP where she is applying for participation and offering coverage.

Negative Feedback

Incorrect. The statement is true. Maria does qualify to purchase a SHOP plan because she is a small employer, she offers SHOP coverage to all full-time employees, and her flower shop is located in the service area of the SHOP where she is applying for participation and offering coverage.


Small Business Health Options Program

Knowledge Check

To qualify for the Small Business Health Care Tax Credit, small employers must...

Select **all that apply** and then click **Check Your Answer**.

- A.** Cover the cost of all premiums
- B.** Have average annual employee wages below \$40,000
- C.** Have fewer than 25 FTE employees
- D.** Contribute a uniform percentage (at least 50%) of the premium cost of employee-only insurance coverage on behalf of each employee enrolled in a SHOP QHP

 **Check Your Answer**

Reset

Prompt

Select **all that apply** and then click **Check Your Answer**.

Question

To qualify for the Small Business Health Care Tax Credit, small employers must...

Options

- A.** Cover the cost of all premiums
- B.** Have average annual employee wages below \$40,000
- C.** Have fewer than 25 FTE employees



- D. Contribute a uniform percentage (at least 50%) of the premium cost of employee-only insurance coverage on behalf of each employee enrolled in a SHOP QHP

Correct Answer(s)

C, D

Positive Feedback

Correct! To qualify for the Small Business Health Care Tax Credit, small employers must have fewer than 25 FTE employees (based on a 40-hour work week), and must contribute a uniform percentage (at least 50%) of the premium cost of employee-only insurance coverage on behalf of each employee enrolled in a SHOP QHP. In addition, qualifying small employers must have employees with average annual wages of less than \$55,000 in 2019 per FTE employee (as adjusted annually for inflation). The tax credit is generally available only for employers who offer and have employees enrolled in a SHOP plan.

Negative Feedback

Incorrect. The correct answers are C and D. To qualify for the Small Business Health Care Tax Credit, small employers must have fewer than 25 FTE employees (based on a 40-hour work week), and contribute a uniform percentage (at least 50%) of the premium cost of employee-only insurance coverage on behalf of each employee enrolled in a SHOP QHP. In addition, qualifying small employers must have employees with average annual wages of less than \$55,000 in 2019 per FTE employee (as adjusted annually for inflation). The tax credit is generally available only for employers who offer and have employees enrolled in a SHOP plan.

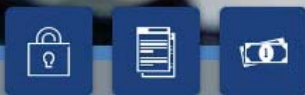
Small Business Health Options Program

21 / 32 | Exit >

Plan Year 2021 Application and Enrollment for Employers

Select the icons below to review what you need to know to assist employers with enrollments.

You, as an agent or broker registered with the SHOP, may help employers through the SHOP application and enrollment process, so it is important to understand each step in the correct order and the information needed for each step.



Health Insurance Marketplace
Plan Year 2021



Job Aids



Help



Glossary



Pause

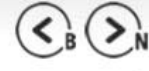


Mute



Transcript

[Text Description of Image
or Animation](#)



Long Description

Interactive graphic of horizontal icons. When each icon is selected, a pop-up appears containing related text. When the pop-up is closed, the icon changes color from blue to green, and a checkmark appears in the upper left-hand corner to indicate the action has been completed. The background image to the prompt text is a person writing in a notebook. From left to right the following text appears as each icon is selected.

Prompt Text: Select the icons below to review what you need to know to assist employers with enrollments.

Page Text: You, as an agent or broker registered with the SHOP, may help employers through the SHOP application and enrollment process, so it is important to understand each step in the correct order and the information needed for each step.

Pop Up Text

- **Image: a padlock.** Text: Privacy. SHOP privacy and security requirements
- **Image: a document with horizontal lines.** Text: Application. How to help an employer apply for and offer SHOP coverage
- **Image: a dollar bill.** Text: Payment. Paying for SHOP coverage

Small Business Health Options Program

SHOP Privacy and Security Requirements

Agents and brokers providing assistance with SHOP plans to clients through the FF-SHOP or State-based Marketplace on the Federal Platform (SBM-FP-SHOPs) must maintain a valid state license for the state(s) in which SHOP plans are being purchased and must complete the applicable Marketplace registration requirements for agents and brokers. They may have access to personally identifiable information (PII), and must follow privacy and security standards to safeguard PII, including preventing unauthorized or inappropriate access, use, or disclosure.

As a condition of registering with the FFM to participate in an FF-SHOP or SBM-FP-SHOP, agents and brokers must complete identity proofing and execute the "Agreement Between Agent or Broker and the Centers for Medicare & Medicaid Services (CMS) for the Small Business Health Options Programs of the Federally-facilitated Exchanges and State-based Exchanges on the Federal Platform" (SHOP Privacy and Security Agreement). This Agreement includes, but is not limited to, the requirement that agents and brokers provide employers and employees with a Privacy Notice Statement regarding use and disclosure of PII. This Privacy Notice Statement must be presented to employers and employees prior to collecting PII or assisting them with SHOP enrollments. You need to review this Agreement for more details about the Privacy Notice Statement, and when it is necessary to obtain affirmative, informed consent, as well as to learn about the other privacy and security standards.



Agents and brokers must complete identity proofing and execute the annual SHOP Privacy and Security Agreement prior to assisting clients with enrolling in SHOP plans.

Health Insurance Marketplace • Plan Year 2021

Job Aids Help Glossary Pause Mute Transcript

< B > N

Page Text

Agents and brokers providing assistance with SHOP plans to clients through the FF-SHOP or State-based Marketplace on the Federal Platform (SBM-FP-SHOPs) must maintain a valid state license for the state(s) in which SHOP plans are being purchased and must complete the applicable Marketplace registration requirements for agents and brokers. They may have access to personally identifiable information (PII), and must follow privacy and security standards to safeguard PII, including preventing unauthorized or inappropriate access, use, or disclosure.

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Agents and brokers must complete identity proofing and execute the annual SHOP Privacy and Security Agreement prior to assisting clients with enrolling in SHOP plans.



Alt Text

Graphic of a blue keyhole in the foreground is a running stream of random 0s and 1s repeated across the entire graphic



Small Business Health Options Program

How to Help an Employer Apply for and Offer SHOP Coverage

SHOP-registered agents and brokers can help their small group clients enroll in a SHOP plan directly with an issuer instead of completing an enrollment through HealthCare.gov. Small employers seeking to purchase a SHOP plan still visit HealthCare.gov to receive a SHOP eligibility determination.

An employer can visit the [See Plans and Prices Tool](#) on HealthCare.gov to get a listing of and price estimate for all the SHOP QHPs and stand-alone dental plans available in the employer's area. The SHOP-registered agent or broker with whom the employer has elected to work can help the employer compare coverage options.

Agents and brokers can assist their small employer clients enroll in SHOP coverage directly through an issuer, utilizing the issuer's usual enrollment channels. Qualified employers generally pay their initial and monthly premiums directly to the issuer(s) with which their group enrolls. Agents, brokers, and small employers will also contact the SHOP issuer directly (not the SHOP Call Center) with any enrollment, billing, or payment questions.

Health Insurance Marketplace [®]
Plan Year 2021

Job Aids Help Glossary Pause Mute Transcript

Page Text

SHOP-registered agents and brokers can help their small group clients enroll in a SHOP plan directly with an issuer instead of completing an enrollment through HealthCare.gov. Small employers seeking to purchase a SHOP plan still visit HealthCare.gov to receive a SHOP eligibility determination.

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Agents and brokers can assist their small employer clients enroll in SHOP coverage directly through an issuer, utilizing the issuer's usual enrollment channels. Qualified employers generally pay their initial and monthly premiums directly to the issuer(s) with which their group enrolls. Agents, brokers, and small employers will also contact the SHOP issuer directly (not the SHOP Call Center) with any enrollment, billing, or payment questions.

Small Business Health Options Program

Paying For SHOP Coverage

Qualified employers enrolling in a SHOP QHP or stand-alone dental plan receive a bill from each issuer with whom qualified employees are enrolled and pay their monthly premium directly to each issuer. Payments are not made to the SHOP.



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Plan Year 2021

Job Aids Help Glossary Pause Mute Transcript

Page Text

Qualified employers enrolling in a SHOP QHP or stand-alone dental plan receive a bill from each issuer with whom qualified employees are enrolled and pay their monthly premium directly to each issuer. Payments are not made to the SHOP.

Alt Text

A young woman is looking down and writing a check in her checkbook.

Small Business Health Options Program

Making Changes After the Initial Enrollment in the SHOP

If a qualified employer hires a new employee, has an employee quit mid-plan year, a qualified employee moves and has a change of address, or experiences other changes to the employee roster, the qualified employer, qualified employee, or a SHOP-registered agent or broker will need to contact the issuer directly to update the employee roster information.



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Plan Year 2021

Job Aids Help Glossary Pause Mute Transcript

Page Text

If a qualified employer hires a new employee, has an employee quit mid-plan year, a qualified employee moves and has a change of address, or experiences other changes to the employee roster, the qualified employer, qualified employee, or a SHOP-registered agent or broker will need to contact the issuer directly to update the employee roster information.

Alt Text

Two mechanical wheels are interlocked. The top wheel displays "Make A" and the bottom wheel displays "Change."

Small Business Health Options Program

Knowledge Check

Before agents and brokers can begin assisting small employers in the SHOP, they must...

Select **all that apply** and then click **Check Your Answer**.

- A. Successfully complete training
- B. Complete identity proofing
- C. Execute the SHOP Privacy and Security Agreement, which includes privacy and security standards
- D. Have the employer's authorization to work on its behalf

 **Check Your Answer**

Reset

Prompt

Select **all that apply** and then click **Check Your Answer**.

Question

Before agents and brokers can begin assisting small employers in the SHOP, they must...

Options

- A. Successfully complete training
- B. Complete identity proofing
- C. Execute the SHOP Privacy and Security Agreement, which includes privacy and security standards
- D. Have the employer's authorization to work on its behalf

Correct Answer(s)

B, C, D



Positive Feedback

Correct! Before agents and brokers can begin assisting small employers in the SHOP, they must execute the SHOP Privacy and Security Agreement (which includes privacy and security standards), complete identity proofing, and obtain the employer's authorization to work on its behalf. Agents and brokers assisting employers to apply for and enroll in SHOP coverage are encouraged, but not required, to take the Affordable Care Act and Marketplace Basics, Privacy and Security Standards, and SHOP courses and the corresponding exams.

Negative Feedback

Incorrect. The correct answers are B, C, and D. Before agents and brokers can begin assisting small employers in the SHOP, they must execute the SHOP Privacy and Security Agreement (which includes privacy and security standards), complete identity proofing, and obtain the employer's authorization to work on its behalf. Agents and brokers assisting employers to apply for and enroll in SHOP coverage are encouraged, but not required, to take the Affordable Care Act and Marketplace Basics, Privacy and Security Standards, and SHOP courses and the corresponding exams.

Small Business Health Options Program

Knowledge Check

True or False:

If a qualified employee's or dependent's eligibility status changes mid-plan year, the agent, broker, or small employer would inform the applicable issuer directly.

Select the **best answer** and then click **Check Your Answer**.

- A. True
- B. False

 Check Your Answer

Reset

Prompt

Select the **best answer** and then click **Check Your Answer**.

Question

True or False: If a qualified employee's or dependent's eligibility status changes mid-plan year, the agent, broker, or small employer would inform the applicable issuer directly.

Options

- A. True
- B. False

Correct Answer

A

Positive Feedback

Correct! The statement is true. If a qualified employee's or dependent's eligibility status changes mid-plan year, the agent, broker, or small employer would inform the applicable issuer directly.



Negative Feedback

Incorrect. The statement is true. If a qualified employee's or dependent's eligibility status changes mid-plan year, the agent, broker, or small employer would inform the applicable issuer directly.

Small Business Health Options Program

Annual Renewal Process

Employers that are no longer small employers can continue to purchase SHOP QHPs if the employer:

1. Received a determination of eligibility to purchase SHOP coverage from HealthCare.gov and has continued purchasing SHOP coverage since that time;
2. Was a small employer when it initially enrolled in a SHOP QHP, but has since ceased to be a small employer solely by reason of an increase in the number of employees; and
3. Continues to meet all other requirements for purchasing a SHOP QHP.

Qualified employers renewing coverage must renew their SHOP coverage directly through their preferred issuer (or issuers) offering SHOP-certified plans.



Page Text

Employers that are no longer small employers can continue to purchase SHOP QHPs if the employer:

1. Received a determination of eligibility to purchase SHOP coverage from HealthCare.gov and has continued purchasing SHOP coverage since that time;
2. Was a small employer when it initially enrolled in a SHOP QHP, but has since ceased to be a small employer solely by reason of an increase in the number of employees; and
3. Continues to meet all other requirements for purchasing a SHOP QHP.

Qualified employers renewing coverage must renew their SHOP coverage directly through their preferred issuer (or issuers) offering SHOP-certified plans.

Alt Text

A woman in a business suit is seated next to a man and she is pointing to her tablet screen.

Small Business Health Options Program

Filing a Special Enrollment Period Complaint

A qualified employee may file a complaint with the SHOP when the issuer does not permit an employee to obtain SHOP coverage during a qualifying SEP. Note: A dependent of an employee is not eligible for an SEP if the employer does not extend the offer of coverage to dependents.

If a qualified employee wishes to file a complaint about a QHP issuer in the SHOP denying an SEP, the employee must submit a complaint with any other additional pertinent documentation to SHOP@cms.hhs.gov or leave a voicemail message at the SHOP Call Center at 1-800-706-7893. Note: A qualified employee should only use the mode of submittal if his or her PII is protected via email encryption.

A qualified employee must submit the complaint within 90 calendar days from the date of the notice of the SEP eligibility determination. Qualified employees with questions concerning the complaint process may call the SHOP Call Center at 1-800-706-7893 (TTY: 1-888-201-6445).



Page Text

A qualified employee may file a complaint with the SHOP when the issuer does not permit an employee to obtain SHOP coverage during a qualifying SEP. Note: A dependent of an employee is not eligible for an SEP if the employer does not extend the offer of coverage to dependents.

If a qualified employee wishes to file a complaint about a QHP issuer in the SHOP denying an SEP, the employee must submit a complaint with any other additional pertinent documentation to SHOP@cms.hhs.gov or leave a voicemail message at the SHOP Call Center at 1-800-706-7893. Note: A qualified employee should only use the mode of submittal if his or her PII is protected via email encryption.

A qualified employee must submit the complaint within 90 calendar days from the date of the notice of the SEP eligibility determination. Qualified employees with questions concerning the complaint process may call the SHOP Call Center at 1-800-706-7893 (TTY: 1-888-201-6445).

Alt Text

A person is sitting at a desk and putting a sheet of paper into an envelope.

Small Business Health Options Program

SHOP Resources

Agents, brokers, employers, and employees can obtain more information and updates on the SHOP from the following resources:

- [SHOP Resources](#)
- [How to Sell SHOP Insurance](#)
- [Agents and Brokers Resources webpage](#)
- SHOP Call Center 1-800-706-7893 (TTY: 1-888-201-6445) available 24 hours a day, seven days a week



Page Text

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Alt Text

Image of a person holding a computer tablet with their left hand; The index finger on the right hand is pressed down on the tablet screen.

Small Business Health Options Program

Module Summary

Select each button and review the key points of this lesson.

Agent and Broker Role

SHOP Eligibility

SHOP Employer Options

Health Insurance Marketplace
Plan Year 2021



Job Aids



Help



Glossary



Pause



Mute



Transcript

[Text Description of Image
or Animation](#)



Long Description

Interactive graphic: A collage of icons representing module-specific concepts is displayed; three equally sized rectangular buttons are shown from left to right across the bottom of the page. Each rectangular button has a label that corresponds to a key module topic or concept. When each button is selected a popup box appears and displays accompanying text.

Pop Up Text

Agent and Broker Role

- SHOP-registered agents and brokers can help an employer use HealthCare.gov to obtain an eligibility determination to purchase SHOP coverage and to compare coverage options. The qualified employer enrolls in a plan directly with an issuer, and its SHOP-registered agent or broker can assist with this process.
- Agents and brokers who help qualified employers and employees enroll in SHOP coverage must complete Marketplace registration and execute the SHOP Privacy and Security Agreement on an annual basis.
- Agents, brokers, and employers must contact the SHOP issuer directly with any enrollment, billing, or payment questions and to make updates to SHOP accounts or enrollments.



SHOP Eligibility

- Employers must meet specific eligibility requirements to purchase SHOP coverage, which include: 1) having a principal business address or eligible employee worksite in the SHOP service area where the employer is applying for and offering coverage, 2) being a small employer, as defined under federal and state law, and 3) offering SHOP coverage to all full-time employees.

Small Employer Options

- A small employer can purchase a SHOP plan any month throughout the year, but the group must meet any applicable MPR, except for enrollments occurring between November 15 and December 15.
- Small employers that offer SHOP coverage can offer health coverage only, dental coverage only, or both health and dental coverage.
- To qualify for the Small Business Health Care Tax Credit, small employers must have fewer than 25 FTE employees (based on a 40-hour work week), must contribute a uniform percentage (at least 50%) of the premium cost of employee-only insurance coverage on behalf of each employee who enrolls in a SHOP QHP, and must pay average annual employee wages of less than \$55,000 in 2019 per FTE employee (adjusted annually for inflation). The tax credit is generally available only for qualified employers who have purchased and have qualified employees enrolled in a SHOP plan.
- Qualified employers directly pay each issuer in which qualified employees are enrolled.

Small Business Health Options Program

Module Completion

Congratulations! You have completed the Small Business Health Options Program module.



Page Text

Congratulations! You have completed the Small Business Health Options Program module.

Alt Text

A person standing on a mountain peak with arms outstretched