

Compensation: Tips for Making Sure You Get Paid

Centers for Medicare & Medicaid Services (CMS)
Center for Consumer Information & Insurance Oversight (CCIIO)

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The information provided in this presentation is intended only as a general, informal summary of technical legal standards. It is not intended to take the place of the statutes, regulations, and formal policy guidance that it is based upon. This presentation summarizes current policy and operations as of the date it was presented. Links to certain source documents have been provided for your reference. We encourage audience members to refer to the applicable statutes, regulations, and other interpretive materials for complete and current information about the requirements that apply to them. The contents of this document do not have the force and effect of law and are not meant to bind the public in any way, unless specifically incorporated into a contract. This document is intended only to provide clarity to the public regarding existing requirements under the law.

This document generally is not intended for use in the State-based Marketplaces (SBMs) that do not use HealthCare.gov for eligibility and enrollment. Please review the guidance on our Agent and Broker Resources webpage (<http://go.cms.gov/CCIIOAB>) and Marketplace.CMS.gov to learn more.

Unless indicated otherwise, the general references to “Marketplace” in the presentation only include Federally-facilitated Marketplaces (FFMs) and State-based Marketplaces on the Federal Platform (SBM-FPs).

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Maintaining Compliance: Key Reminders



- » Agents and brokers who participate in the Marketplace **must complete all steps of the Marketplace training and registration process prior to assisting consumers** with selecting and enrolling in qualified health plans (QHPs).
- » Agents and brokers must also:
 - Provide correct information to both consumers and the Marketplace;
 - Provide correct consumer information (e.g., consumer name, date of birth, address, email address) to the Marketplace for verifying consumer identity;
 - Refrain from marketing or conduct that is misleading;
 - Obtain consent from each client you work with prior to assisting them with Marketplace coverage, including prior to searching for a current application using an approved Classic Direct Enrollment (DE)/Enhanced Direct Enrollment (EDE) website;
 - Protect consumers' personally identifiable information (PII);
 - Identify and report suspicious activity or potentially fraudulent behavior you observe in relation to the Marketplace; and
 - Comply with applicable federal and state law, including licensing requirements, system access terms and conditions, and conflict of interest and confidentiality provisions.

Maintaining Compliance: Key Reminders



- » You must enter a correct National Producer Number (NPN) in your Marketplace Learning Management System (MLMS) profile and should verify it is correct to receive credit for completing training.
- » Entering an inaccurate NPN could result in denial of compensation/credit by an issuer.
- » The NPN is **NOT** the same as your state license number. You should be sure to use your NPN, not a state license number.
- » If your NPN is on a Marketplace application and subsequent enrollment, we recommend that you create a record of the date, time, and person from whom you received consent in case of future disputes.

To update or confirm the NPN associated with an MLMS profile, select the "MLMS Training" hyperlink on the Marketplace Training – Agent/Broker tab of the CMS Enterprise Portal. Selecting the link will open your MLMS profile and, from there, you can update or confirm the NPN listed.



Compensation for Marketplace Enrollments



- » The Federally-facilitated Marketplace (FFM) **does not** set compensation levels or pay commissions to agents or brokers.
- » Agents and brokers who participate in the FFM receive compensation directly from affiliated QHP issuers in accordance with their agreements with those issuers and any applicable state-specific requirements.
- » Unlike the CMS Medicare Advantage program, the FFM does not set the compensation levels that QHP issuers pay to agents and brokers.
- » Compensation includes commissions, fees, or other incentives as established in the relevant contract between an issuer and the agent or broker.

- » Commissions are a contractual matter **between you and the issuer.**
- » The FFM does not play a role in making appointments between issuers and agents and brokers and is not a party to the contract between the QHP issuer and the agent or broker.
- » To become appointed with a particular QHP issuer, you should:
 - Contact the QHP issuer directly or work with a general agency who has an appointment with a QHP issuer, and
 - Work with your affiliated issuers to determine how commissions will be paid based on the NPN included on the FFM enrollment transaction (known as the “834”).

Agent and broker contact information for many QHP issuers may be found using the [Issuer and Direct Enrollment Partner Directory](#).





- » To get compensated for actively assisting a consumer with enrollment in an FFM QHP, you must:
 - Be licensed with an active health-related line of authority in the state(s) where the QHP is offered;
 - Be appointed with the QHP issuer in accordance with state law; and
 - Have completed FFM registration (including required training) for the applicable plan year at the time of enrollment.



- » Issuers use the publicly accessible Agent and Broker FFM Registration Completion List to confirm your registration status for the applicable plan year.
- » Only those who have completed FFM registration prior to active enrollment may be compensated for that enrollment.

» Issuers have discretion as to whether to compensate you if you do not have an appointment at the time you assisted with an enrollment, but you otherwise comply with applicable federal and state requirements.

» Compensation is solely at the discretion of QHP issuers; some issuers may not compensate you for assisting consumers with some or all enrollments in FFM QHPs.

- » CMS expects an issuer would pay commissions to an agent or broker who is compliant with state and federal standards, according to the terms of the compensation arrangement, if:
 - The agent's or broker's NPN is included on the 834, or
 - It is determined from the issuer's or agent's or broker's records that the agent or broker did in fact assist the consumer with an FFM enrollment, but the NPN was erroneously left off of the 834.
- » Such records may include a consent form from the consumer, an issuer's broker of record form, or similar documentation that demonstrates the consumer was the agent's or broker's client for the enrollment in question.

If you have reason to believe that your NPN (or agency/brokerage NPN) should have been included on a consumer's FFM enrollment transaction, but it was not, you should **contact the respective QHP issuer directly** to discuss the situation. +

QHP Issuer Marketing Practice Requirements: Equivalence



- » A QHP issuer must pay the same compensation for QHPs offered through the FFM as it does for similar health plans offered in the state, but outside the FFM (see [45 CFR § 156.200\(f\)](#)).
- » If you have evidence QHP issuers are not compensating agents and brokers inside and outside the FFM the same, send these concerns, along with supporting documentation, to the Agent/Broker Email Help Desk at FFMProducer-AssisterHelpDesk@cms.hhs.gov.

QHP Issuer Marketing Practice Requirements: Prohibition on Discriminatory Marketing Practices



- » QHP issuers are prohibited from adopting marketing practices that have the effect of discouraging enrollment of consumers with significant health needs (see [45 CFR § 147.104\(e\)](#) and [45 CFR § 156.225\(b\)](#)).
- » This prohibition extends to agent/broker compensation arrangements (e.g., paying lower commission for higher plan categories, like Platinum and Gold plans, that are associated with higher utilization).

- » If you have evidence an issuer's FFM compensation arrangement or marketing practices are discriminatory, contact CMS at marketconduct@cms.hhs.gov or your state Department of Insurance (DOI). Include documentation that describes the compensation structure or other practice in question.
- » **See [this resource](#)** for additional guidance on FFM compensation and marketing.

FAQ on Agent/Broker Compensation



- » Commission Schedules/Agreements that pay reduced (or no) commissions and other forms of compensation to agents and brokers who assist consumers with enrollment in individual market coverage during an SEP and pay higher amounts for OEP enrollments for the same benefit year violate the guaranteed availability provisions of the Affordable Care Act.
- » The guaranteed availability provisions in section 2702 of the Public Health Service Act (PHS Act), as added by the Affordable Care Act, generally require issuers to accept “every employer and individual in the State that applies for such coverage.”
- » An arrangement that reduces or eliminates the commission or other compensation an agent or broker receives for SEP enrollments compared to OEP enrollments in the same benefit year discourages agents and brokers from marketing to and enrolling individuals eligible for an SEP, and as such, are not permissible.
- » Learn more here: <https://www.cms.gov/newsroom/news-alert/cms-releases-faqs-agent-and-broker-compensation-special-enrollment-periods>

Instructing Consumers to Insert Your NPN on FFM Applications



Creating or Updating an Application on HealthCare.gov (Marketplace Pathway)

- » The consumer logs directly into the HealthCare.gov site, using their own HealthCare.gov user account.
- » After the consumer logs in, you will work with the consumer to assist with completion of the eligibility application and plan selection.
- » In the eligibility portion of the application, the consumer is prompted to enter your name and NPN on the application to indicate that you assisted them.
- » You should provide this information to the consumer and help ensure that the consumer correctly fills the information in.
- » This is important for receiving your compensation from issuers with whom you have a contractual relationship, if applicable.

Entering Your NPN in the HealthCare.gov Application

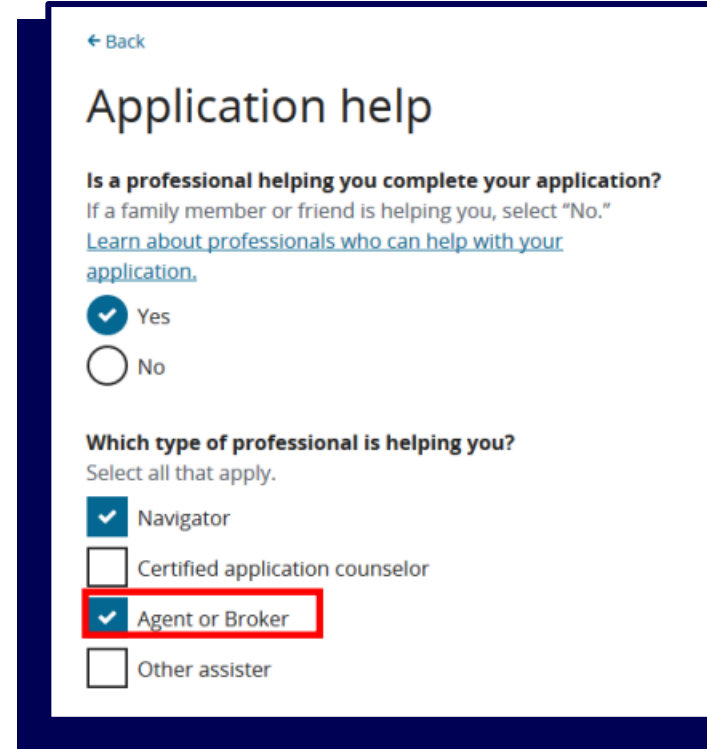


- » Through the HealthCare.gov application screens, consumers will be able to indicate if a professional, such as an agent or broker, Navigator, certified application counselor, or other assister, has helped them complete the application.
- » When you assist consumers, the HealthCare.gov "Application Help" section is where the consumer will enter your name and NPN.

Note: You or your client **must** enter your NPN when completing the Application Help page of the application. If the eligibility portion of the application has not been completed, you or the consumer should be able to navigate backwards in the application to get back to the section where you or the consumer can enter your NPN. +

Navigating and Completing the HealthCare.gov Application Help Screen

- » The HealthCare.gov “Application Help” screen gives consumers the ability to list multiple entities or individuals who provided assistance (e.g., an agent or broker and a Navigator).
- » Make sure your client checks the “Agent or Broker” box on this screen.



← Back

Application help

Is a professional helping you complete your application?
If a family member or friend is helping you, select “No.”
[Learn about professionals who can help with your application.](#)

Yes
 No

Which type of professional is helping you?
Select all that apply.

Navigator
 Certified application counselor
 Agent or Broker
 Other assister

HealthCare.gov Application Screen



- » This will produce a new set of fields, including one labeled “National Producer Number,” which is where your client should enter your NPN to indicate that you assisted them with this application.
- » If a non-agent or non-broker has previously helped a consumer and the application allows more than one entry point, do not remove the non-agent’s or non-broker’s information without the consumer’s consent. Only agent and broker information is sent to issuers.
- » While consumers can indicate if multiple professionals assisted them, they can only identify one agent or broker.

Tell us about the navigator

First name

Middle initial
Optional

Last name

Suffix
Optional

Organization name
Optional

ID number
Optional

Save & continue

Tell us about the Agent or Broker

First name

Middle initial
Optional

Last name

Suffix
Optional

National Producer Number (NPN)

Save & continue

- » If the consumer is re-enrolling and entered a different agent's or broker's NPN for the prior plan year, the screen will be prepopulated with that agent's or broker's NPN.
- » The consumer should update all information that is pre-populated (such as the agent's or broker's name and NPN) as appropriate.
- » Only consumers should remove or update information on their HealthCare.gov applications.

Note: Do not forget to ask your clients to include your NPN. This is a critical step in completing the application in order for you to receive compensation for the enrollment.



Classic DE and EDE Pathways

- » If you are assisting consumers via the Classic DE or EDE Pathways, you should always enter your name and NPN in the assister section of the application.
- » After the application is submitted and enrollment occurs on the Classic DE or EDE Entity's website, the Classic DE or EDE Entity will submit your name and NPN as part of the enrollment transaction to the Marketplace, unless you have agreed to some other compensation structure with the Classic DE or EDE Entity.
- » The Marketplace will send the name and NPN submitted by the Classic DE or EDE Entity to the QHP issuer in the enrollment file.

The application and enrollment process may vary depending on the EDE website you use, however, unlike the Classic DE Pathway, you will not be redirected to HealthCare.gov.



Classic DE and EDE Pathways



- » If you are affiliated with QHP issuers or web-brokers that utilize the Classic DE Pathway, you may use that pathway to connect to an agent/broker landing page at HealthCare.gov through the QHP issuer's or web-broker's website to help your clients update their eligibility information and actively select, or re-enroll in, a health plan.
- » You must use the Agent/Broker Application Search Tool, available from the agent/broker landing page at HealthCare.gov, to search for and access your client's pre-populated application for the applicable plan year. Your client's pre-populated application will automatically include your NPN if it was included on the previous year's version of the application.
- » Once you locate the right application, select the **Report a Life Change** option to update the client's eligibility information and plan selection for the following year (even if the client is planning to re-enroll in the same plan).

Get Credit for Assisting with Re-enrollments

CENTERS FOR MEDICARE & MEDICAID SERVICES

- » Having your NPN on your clients' FFM re-enrollment applications will ensure issuers can identify you as assisting consumers with re-enrollments in order to pay commissions.
- » The following slides review the instructions for ensuring your NPN is included on the re-enrollment transaction for various enrollment scenarios, including:
 - Active re-enrollment via the Marketplace Pathway (HealthCare.gov)
 - Active re-enrollment via a Direct Enrollment Pathway (Classic or Enhanced)

Active Re-enrollment via the Marketplace Pathway: Ensure Your NPN is on the Client's Application



- » Your client should log in to their existing HealthCare.gov account to access the pre-populated application for the applicable plan year.
- » Your client should then select the **Report a Life Change** option to update the client's eligibility information and plan selection.
- » When prompted, the client should enter or update your name and NPN on the eligibility application.
- » This action will ensure your information will persist on the enrollment transaction.
- » **Remind your clients to make sure your name and NPN stays on their re-enrollment application if they access it through HealthCare.gov on their own. If your NPN is not entered, you may not receive credit for the re-enrollment.**

- My plans & programs
- My plan profile
- Eligibility & appeals
- Applications details
- **Report a life change**
- Communication preferences
- Exemptions
- Tax forms

APPLICATION STATUS

Your application is incomplete

You haven't finished your application for health coverage. You must complete and submit your application to find out if you're eligible for coverage and to enroll in a plan.

CONTINUE APPLICATION

Need to remove your application?

Only remove your application as a last resort. If you're having problems with your application, log out and try again later.

Important: If you enrolled in coverage with this application, we don't recommend you remove it. Removing your application won't terminate your coverage, and means you won't be able to get an electronic 1095-A tax form. [Learn more before removing this application.](#)

Active Re-enrollment via a Direct Enrollment Pathway (Classic or Enhanced)



- » If you are affiliated with a QHP issuer or web-broker that offers a DE Pathway, your name and NPN are typically automatically transmitted electronically to the issuer when the consumer's re-enrollment is submitted in accordance with how the DE account was set up by the respective issuer or web-broker.
- » After you log in to the pathway, use the Agent/Broker Application Search Tool to search for and help your client access their prepopulated application for the applicable plan year.
- » Once your client's pre-populated application is located, assist the client in selecting the **Report a Life Change** option to update their eligibility information and plan selection for the upcoming year.

Active Re-enrollment via a Direct Enrollment Pathway (Classic or Enhanced)



- » You can use a DE Pathway to assist a client in reenrolling if that person used the Marketplace Pathway (HealthCare.gov) to enroll in a previous plan year.
- » As a best practice, you should enter or update your name and NPN on your clients' re-enrollment applications when prompted.

Passive Re-enrollment via BAR



» If a consumer whom you assisted previously does not make an active plan selection prior to the December 15 deadline, CMS will automatically re-enroll that individual in either the same plan or an alternate plan selected by the FFM via the Batch Auto Re-enrollment (BAR) process.

» For all BARs, CMS transfers the NPN associated with the consumer's prior application to the issuer via the enrollment transaction.

» The issuer will check the NPN listed on the application and the **Agent and Broker FFM Registration Completion List** for the applicable plan year to verify registration with the FFM at the time of the prior enrollment.

Enrollment or Active Re-enrollment via the Marketplace Call Center



- » Certain complex consumer situations may require you and your client to seek support from the Marketplace Call Center to complete an enrollment or re-enrollment.
- » The following slides review the instructions for ensuring your NPN is included on enrollment or re-enrollment transactions involving the Marketplace Call Center, including by:
 - Conducting a three-way call with your client and the Marketplace Call Center
 - Having your client authorize you to work with Marketplace Call Center on their behalf
 - Having your client contact the Marketplace Call Center without you

Note: Marketplace Call Center Representatives will not provide you any information about a consumer's application if the consumer is not part of a three-way call or has not previously authorized you to work on their behalf.



Enrollment or Active Re-enrollment via the Marketplace Call Center: Three-Way Call



You may conduct a three-way toll-free call with your client and the Marketplace Call Center (1-800-318-2596 or TTY: 1-855-889-4325).



During this call, your client should instruct the Marketplace Call Center to include your full name and NPN on the enrollment or re-enrollment transaction.

Enrollment or Active Re-enrollment via the Marketplace Call Center: Consumer Authorization



- » Consumers can contact the Marketplace Call Center to authorize you to access their information and work with the Call Center's Customer Service Representatives on their behalf for up to 365 days.
- » This FFM authorization is not the same as ensuring your NPN is on the consumer's application for purposes of receiving compensation from affiliated QHP issuers.
- » Once authorized, you should instruct the Call Center Representative to include your full name and NPN on the enrollment transaction.

» **Consumers who want to provide you with this type of access should:**

- Provide the Marketplace Call Center with your full name and NPN
- Complete the authorization prior to the start of Open Enrollment (OE)
- Call the Marketplace Call Center every 365 days to reauthorize your access

Enrollment or Active Re-enrollment via the Marketplace Call Center: Consumer Only



- » If a client you are assisting calls the Marketplace Call Center without you to complete an enrollment, they should instruct the Call Center Representative to include your full name and NPN on the enrollment transaction.
- » When a client that you previously assisted uses the Marketplace Call Center to update their application during the year, your NPN stays with the application unless the consumer (or their legal representative) actively removes or changes it, or requests that the Call Center Representative change the agent or broker of record on the application.
- » Marketplace Call Center Representatives will not remove your NPN from an application unless requested by the consumer or their legal representative.

Note: Even if there is a previous authorization/NPN record, instruct your client to always provide your information if a Marketplace Call Center Representative asks if anyone helped them.

Key Points to Remember



- » The FFM does not set compensation levels or pay commissions to agents or brokers.
- » Agents and brokers who participate in the FFM receive compensation directly from affiliated QHP issuers in accordance with their agreements with those issuers and any applicable state-specific requirements.
- » To be eligible for an issuer to compensate you for actively assisting a consumer with enrollment in an FFM QHP, you must appear on the Registration Completion List.
- » During the eligibility portion of the HealthCare.gov application using the Marketplace Pathway, your clients should indicate that you have helped them complete the application by entering your name and NPN.
- » If you are using the Classic or Enhanced DE Pathways, your name and NPN are typically automatically transmitted electronically to the issuer when the consumer's enrollment or re-enrollment is submitted.
- » Your clients should always instruct the Marketplace Call Center to include your full name and NPN on any enrollment or re-enrollment transactions.

Marketplace Learning Management System Closes on July 15



- » Starting July 15 at 9:00 a.m. ET, the CMS Marketplace Learning Management System (MLMS) will close or “Go Dark” in preparation for the launch of the Marketplace Plan Year 2023 registration and training.
 - Returning agents and brokers are eligible to complete a shorter Marketplace training for Plan Year 2022. For more information about how to complete the Marketplace training for returning agents and brokers, watch [this video](#).
- » **Agents and brokers won’t be able to complete registration and training for Plan Year 2022 after July 15 at 9:00 a.m. ET.**
- » You can use the [Marketplace Registration Tracker](#) to track your previous progress by entering your ZIP Code and the National Producer Number listed in your agent/broker profile in the CMS Enterprise Portal. You can confirm that you have completed registration and training by checking the [Registration Completion List](#).
- » If you have questions, you can check out these [Frequently Asked Questions](#) about Registration and Training.

Consumers in Need of Marketplace Coverage When Public Health Emergency Ends



- » In March 2020, CMS temporarily waived certain Medicaid and Children’s Health Insurance Program (CHIP) requirements and conditions as part of the response to the COVID-19 Public Health Emergency (PHE). The easing of these rules helped prevent people with Medicaid and CHIP—in all 50 states, the District of Columbia, and the five U.S. territories—from losing their health coverage during the pandemic. **However, state Medicaid agencies will be required to restart Medicaid and CHIP eligibility reviews when the PHE ends.**
- » In an effort to minimize the number of people that lose Medicaid or CHIP coverage when the PHE ends, CMS is working with states and other stakeholders to inform people about renewing their coverage and exploring other available health insurance options, such as Marketplace coverage, if they no longer qualify for Medicaid or CHIP.
- » CMS plans to share additional information and resources with agents and brokers in the coming months so you can prepare to assist consumers in need of assistance with Marketplace coverage if they are no longer eligible for Medicaid.



Check out these technical assistance videos for Marketplace agents and brokers at the **Agent and Broker Video Learning Center (VLC)**! The VLC features a variety of topics to help you navigate the Marketplace, including videos such as:

- » [A New Agent and Broker Checklist for Success](#)
- » [Streamlined Marketplace Application Drilldown: Race and Ethnicity Questions](#)
- » [Streamlined Marketplace Application Walkthrough: Loss of Health Coverage SEP](#)

And more! View the entire playlist at <https://bit.ly/3hXLyru>

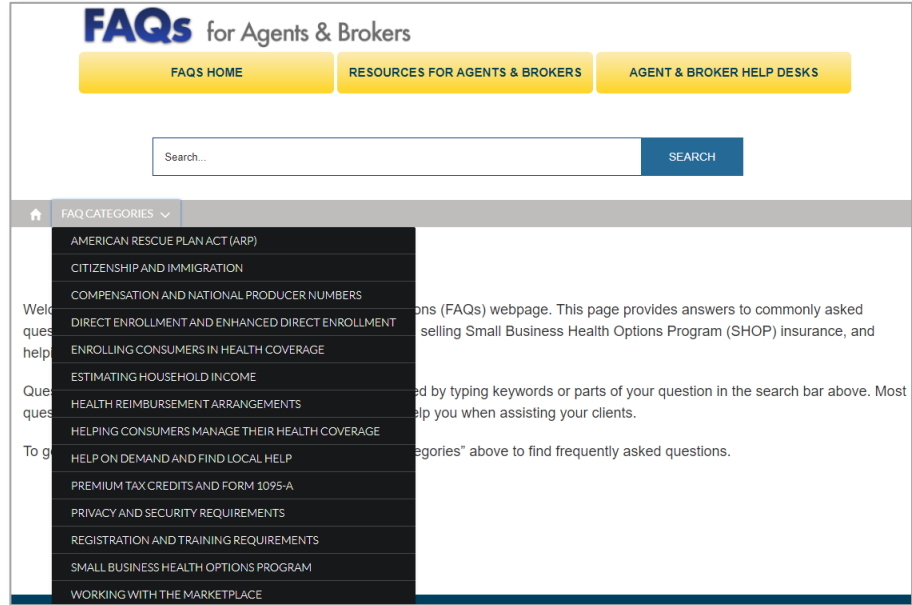


Frequently Asked Questions Database



The Agent and Broker Frequently Asked Questions (FAQs) website provides answers to commonly asked questions about working in the Marketplace and helping clients enroll in and maintain coverage.

- » This self-service resource is available online at your convenience.
- » Visit <https://www.agentbrokerfaq.cms.gov/s/> and search by question category, keyword, or part of your question. Most responses also include links to additional resources to help you when assisting your clients.



Upcoming Webinars & Other Resources



Upcoming Webinars

Complex Case Scenarios

Marketplace Registration & Training for NEW Agents and Brokers

Marketplace Registration & Training for RETURNING Agents and Brokers

Understanding Marketplace Compliance Rules & Regulations

Reaching Underserved Communities

Welcome to the Marketplace: A Guide for NEW Agents and Brokers

Additional Resources – Recently Posted Webinar Slides, Computer-Based Trainings (CBTs) and Transcripts

6/22/22 CBT: [Helping Consumers Resolve Data Matching Issues \(DMIs\)](#) and [Transcript](#)

6/16/22 Webinar Slides: [Immigration and the Marketplace](#)

6/2/22 Webinar Slides: [COBRA Coverage and the Marketplace](#)

5/18/22 Webinar Slides: [The Marketplace and Cybersecurity](#)

Agent/Broker Marketplace Help Desks and Call Centers



| Name | Phone # and/or Email Address | Types of Inquiries Handled | Hours (Closed Holidays) |
|---|--|---|---|
| Marketplace Service Desk | 1-855-CMS-1515 1-855-267-1515 | <ul style="list-style-type: none"> • CMS Enterprise Portal password resets and account lockouts • Other CMS Enterprise Portal account issues or error messages • General registration and training questions (not related to a specific training platform) • Login issues on the DE agent/broker landing page • Technical or system-specific issues related to the MLMS • User-specific questions about maneuvering in the MLMS site, or accessing training and exams | Monday-Friday 8:00 AM–8:00 PM ET October–November only: Saturday-Sunday 10:00 AM–3:00 PM ET |
| Agent/Broker Email Help Desk | FFMProducer-AssisterHelpDesk@cms.hhs.gov | <ul style="list-style-type: none"> • General enrollment and compensation questions • Manual identity proofing/Experian issues • Escalated general registration and training questions (not related to a specific training platform) • Agent/Broker RCL issues • Find Local Help listing issues • Help On Demand participation instructions or questions • Report concerns that a consumer or another agent or broker has engaged in fraud or abusive conduct | Monday-Friday 8:00 AM–6:00 PM ET |
| Marketplace Call Center Agent/Broker Partner Line | 1-855-788-6275 Note: Enter your NPN to access this line. TTY users 1-855-889-4325 | Specific consumer application questions related to: <ul style="list-style-type: none"> • Password reset for a consumer HealthCare.gov account, • SEP not available on the consumer application, or • Consumer specific eligibility and enrollment questions | Monday-Sunday 24 hours/day |
| CMS IT Service Desk | (410) 786-2580 or 1-800-562-1963 | <ul style="list-style-type: none"> • Reporting a security breach or incident | Monday-Friday 9:00 AM–5:00 PM ET |

Acronym Definitions



| Acronym | Definition |
|---------|---|
| BAR | Batch Auto Re-enrollment |
| CCIIO | Center for Consumer Information and Insurance Oversight |
| CMS | Centers for Medicare & Medicaid Services |
| CHIP | Children's Health Insurance Program |
| DE | Direct Enrollment |
| DHS | Department of Homeland Security |
| DOI | Department of Insurance |
| EDE | Enhanced Direct Enrollment |
| FFM | Federally-facilitated Marketplace |
| HHS | Department of Health & Human Services |
| NPN | National Producer Number |

| Acronym | Definition |
|---------|-------------------------------------|
| NRPM | Notice of Proposed Rulemaking |
| OE | Open Enrollment |
| OEP | Open Enrollment Period |
| OPM | Office of Personnel Management |
| PII | Personally Identifiable Information |
| QHP | Qualified Health Plans |
| RCL | Registration Completion List |
| SEP | Special Enrollment Period |



Agents and brokers are valued partners to all of us at CMS for the vital role you play in enrolling consumers in qualified health coverage.

We thank you for the trusted advice, support, and assistance you provide throughout the year and wish you continued success!