FEDERALLY-FACILITATED MARKETPLACE 2020 OPEN ENROLLMENT

The Federally-facilitated Marketplace Open Enrollment Period runs from November 1, 2019 to December 15, 2019, for coverage starting on January 1, 2020. Similar to previous years, the Centers for Medicare & Medicaid Services (CMS) is taking a strategic and cost-effective approach to inform individuals about Open Enrollment, deliver a smooth enrollment experience, and use consumer feedback to drive ongoing improvements across the Marketplace platform.

For key updates and enhancements to HealthCare.gov for the 2020 Open Enrollment period, refer to this fact sheet.

The 2020 Issuer Participation County Map is available here.

MARKETPLACE OPEN ENROLLMENT SNAPSHOT: WEEK 4

Week 4, Nov 17-23, 2019

In week four of the 2020 Open Enrollment, 703,556 people selected plans using the HealthCare.gov platform. As in past years, enrollment weeks are measured Sunday through Saturday. Consequently, the cumulative totals reported in this snapshot reflect one fewer day than last year.

Every week during Open Enrollment, the Centers for Medicare & Medicaid Services (CMS) will release enrollment snapshots for the HealthCare.gov platform, which is used by the Federally-facilitated Exchange and some State-based Exchanges. These snapshots provide point-in-time estimates of weekly plan selections, call center activity, and visits to HealthCare.gov or CuidadoDeSalud.gov.

The final number of plan selections associated with enrollment activity during a reporting period may change due to plan modifications or cancellations. In addition, the weekly snapshot only reports new plan selections and active plan renewals and does not report the number of consumers who have paid premiums to effectuate their enrollment.

Definitions and details on the data are included in the glossary. Please find the full story here: Week 4 Snapshot
MARKETPLACE CALL CENTER LINE FOR ASSISTERS

Similar to the previous Open Enrollment Periods, there will be a designated call center line for Assisters. We strongly encourage assisters to use the assister line when working with consumers not only to receive more efficient service, but also in order to enable the Call Center to better monitor and meet assisters’ needs.

Please note there are two different Assister lines, one for Navigators and one for certified application counselors (CACs) (state-funded assisters should use the CAC line):

- **Assister Line for Navigators:** 1-855-868-4678
- **Assister Line for CACs:** 1-855-879-2683

The line has several features designed to help better streamline the call process. When calling the Assister line, please be ready to enter your access code.

- For CACs, your access code will be the main phone number for your Certified Designated Organization (CDO) listed on your application that was approved during the recent CDO refresh process.
- For Navigators, your access code will be your organization’s primary point of contact telephone number.
- For state funded assisters in SBM-FPs, use the same code your organization was assigned in previous years.

You will be prompted to select the reason for the call:

- Request assistance with a HealthCare.gov account Password Reset
- Request an SEP not granted through the Marketplace Application
- Request Enrollment Assistance

Please note, utilizing the Assister line will only allow expedited service if assisters need help with password resets or accessing certain call center-initiated SEPs. This enhancement is designed to help minimize the time assisters have to spend on the phone trying to resolve certain consumer issues. For all other issues, the wait time will be the same as the regular call center line.

Contact your Navigator Project Officer (for Navigators) or your CDO leadership (for CACs and state-funded assisters) for more information on how to utilize the Assister Line. If Navigators on the Federally Facilitated Marketplace have any difficulty accessing the Assister line, please reach out to your project officer. If CACs have any difficulty, please email the inbox at CACQuestions@cms.hhs.gov. CCIIO will verify that the code you are utilizing matches our records.

NEW RESOURCES ABOUT HEALTH REIMBURSEMENT ARRANGEMENTS (HRA)

The October 4, 2019 Assister Webinar featured a presentation on individual coverage health reimbursement arrangements (HRAs), sometimes referred to as “ICHRA (Individual Coverage Health Reimbursement Arrangements),” which employers may begin offering as of January 1, 2020. The slides from this webinar are available here: HRA slides.
If the individual coverage HRA is affordable, consumers won’t be eligible for the premium tax credit for their Marketplace coverage (and possibly their household members’ coverage), even if they opt out of the individual coverage HRA.

If the individual coverage HRA isn’t affordable, consumers must opt out of the individual coverage HRA to qualify for the premium tax credit if they’re otherwise eligible.

For 2020, an individual coverage HRA isn’t considered affordable for an employee if the monthly premium for the lowest-cost Silver plan for self-only coverage in the employee’s area, minus the monthly amount made available to the employee under the individual coverage HRA, is more than 9.78% or 1/12 of the employee’s household income for the tax year.

The Individual Coverage Health Reimbursement Arrangement (HRA) Worksheet is a tool to help determine if the individual coverage HRA is considered affordable. HRA Worksheet

**In Case You Missed It**

**THE 2019 CMS ENROLLMENT ASSISTER BULLETIN HAS BEEN POSTED**

In preparation for the Open Enrollment Period beginning November 1, 2019 for the 2020 plan year in the individual market, the Centers for Medicare & Medicaid Services (CMS) has updated the training curriculum for Navigators and CACs in the Federally-facilitated Marketplaces (FFMs). This bulletin provides guidance on the training and certification requirements and procedures for Navigators, CACs, and CDOs in the FFMs. Please select the link to the bulletin for more information.

Any questions about the requirements included in this bulletin should be directed as follows:

- **Certified Application Counselors**: Please send your questions via email to CACQuestions@cms.hhs.gov.

- **Navigators**: Please contact your CMS project officer.

**Resources**

**THE 2019 FEDERALLY-FACILITATED MARKETPLACE NAVIGATOR COOPERATIVE AGREEMENT AWARDS**

For a list of 2019 CMS Navigator grantees, please visit: Navigator grantees.

**NEW EPISODE OF CMS BEYOND THE POLICY IS AVAILABLE: EPISODE 7 "STATE RELIEF AND EMPOWERMENT WAIVERS"**

On September 30, 2019, the Centers for Medicare & Medicaid Services (CMS) is releasing the latest episode of our podcast, CMS: Beyond the Policy. Today’s edition is titled “Episode 7: State Relief and Empowerment Waivers”. In Episode 7, Tom Corry, Director of the Office of Communications, Administrator Seema Verma and Peter Nelson, Senior Advisor to the Administrator discuss the new
guidance on these waivers, which give states more flexibility to develop alternatives to certain ACA requirements.

Find the new episode on the CMS Podcast page [here](#).

The episode will soon be available on [Google Play](#) and [iTunes](#).

### Previous Webinars / Q&A

1. **Complex Case Scenario: Pregnancy, Prenatal Care, and Newborn Coverage Options** (August 9, 2019) [slides here](#)

2. **Assisting Victims of Domestic Violence Special Enrollment Periods** (August 9, 2019) [slides here](#)

3. **Complex Case on Helping Consumers Evaluate Employer-Sponsored Coverage** (August 23, 2019) [slides here](#)

4. **Coverage Options for Uninsured or Underinsured Consumers** (August 23, 2019) [slides here](#)

5. **Assister Conflict of Interest Requirements for Assisters in Federally-facilitated Marketplaces** (September 13, 2019) [slides here](#)

6. **Modified Adjusted Gross Income (MAGI), Advance Payments of the Premium Tax Credit (APTC) and Cost-sharing Reduction (CSR) Basics** (September 27, 2019) [slides here](#)

7. **Individual Coverage Health Reimbursement Arrangements (HRA): Pre-Open Enrollment Period Training** (October 4, 2019) [slides here](#)

8. **Obtaining Consumer Authorization and Handling Consumers’ Personally Identifiable Information (PII) in the Federally-facilitated Marketplace (FFM)**— (October 4, 2019) [slides here](#)

### Important Reminders / Tips

**Links to Helpful Resources**

- Marketplace Assister Training [Resources](#) and [Webinars](#)
- Technical Assistance Resources [here](#)
- CMS Marketplace [Applications, Forms, & Notices](#)
- CMS Outreach and Education [Resources](#)
- Marketplace.CMS.gov Page [here](#)
- CMSzONE Community Online Resource Library Pilot for Marketplace Assisters [here](#)
- Find Local Help [here](#)
Marketplace Call Center and SHOP Center Hours

Health Insurance Marketplace Call Center: 1-800-318-2596 (TTY: 1-855-889-4325). For customer service support, to start or finish an application, compare plans, enroll or ask a question. Available 24 hours a day, 7 days a week (except holidays). CACs and Navigators should call their dedicated phone lines so the Call Center can better track the needs of assisters. The Assister Line can also help with password resets and can help with access to non-application SEPs. Contact your Navigator Project Officer (for Navigators) or your CDO leadership (for CACs) for more information on the Assister Line.

- Navigator Marketplace Call Center line: 1-855-868-4678
- CAC Marketplace Call Center line: 1-855-879-2683
- General consumer Call Center line: 1-800-318-2596 (TTY: 1-855-889-4325).

SHOP Call Center: For SHOP related questions, you and employers or employees you interact with may contact the SHOP Call Center at 800-706-7893 or by using the TTY phone number (for hearing impaired) at 1-888-201-6445.

Stay in Touch

To sign up for the CMS Assister Newsletter, please send a request to the Assister Listserv inbox (ASSISTERLISTSERV@cms.hhs.gov) write “Add to listserv” in the subject line, please include the email address that you would like to add in the body of your email. For requests to be removed from the listserv, please forward a copy of a webinar invite or newsletter received and write “Remove” in the subject line.

If you have specific questions or issues that you would like to see us highlight in our webinar series or here in this newsletter please contact us.

For CMS Navigator grantees - please get in touch with your Navigator Project Officer.

For CAC Designated Organizations in FFM States - please send an email to CACQuestions@cms.hhs.gov.

We welcome questions, suggestions and comments, so please feel free to contact us!

Please note that the information presented in this Assister Newsletter is informal, technical assistance for assisters and is not intended as official CMS guidance.