

MARKETPLACE ASSISTER TOOLKIT

*Standard Operating Procedures Manual for Assisters in the Individual Federally-facilitated Marketplaces **SOP 12— Update Account Profile***





Table of Contents

SOP 12— UPDATE ACCOUNT PROFILE.....1

- A. Introduction 1
- B. Procedures 1
- C. Next Steps 3
- Appendix A: Frequently Asked Questions (FAQs) 4
- Appendix B: Acronyms & Definitions 5
- Appendix C: Support Resources 9



List of Exhibits

Exhibit 1—Communication Preferences Screenshot	2
Exhibit 2—Frequently Used Acronyms.....	5
Exhibit 3—External Resources.....	9



SOP 12— Update Account Profile

A. Introduction

Consumers can update their Marketplace account information through the “My Profile” tab. In general, the Marketplace uses the consumer’s contact information and preferences to send Marketplace communications such as notices. However, the consumer’s plan only receives consumer information that is provided on the application either initially at enrollment or through a reported life change. Some changes, such as those made to communication preferences or a consumer’s account password will have no effect on a consumer’s eligibility determination. Other updates to application information (which can be made using the “Report a life change” function), such as updating a state of residence or a change in income, may affect a consumer’s eligibility to obtain coverage through the Marketplace or for help paying for coverage. Standard Operating Procedure (SOP) 12 provides guidance on how to assist consumers in updating their account profiles.

B. Procedures

1. Update Account Profile

Consumers updating their account profiles should complete the following steps:

Step 1. Consumers can log in to their accounts on [HealthCare.gov](https://www.healthcare.gov) and select the My Profile tab.

Step 2. The following information can be changed on the My Profile tab:

- a. Password;
- b. E-mail address;
- c. Phone number;
- d. Address;*
- e. State in which the consumer lives;* and
- f. Security questions.

Things You Should Know

- Consumers can find this information on the My Profile screen or by viewing current applications on the Current Applications & Coverage screen.

**To update addresses to a new ZIP code, county, or state, consumers must report a life change. This address change may affect consumers’ eligibility.*

2. Update Communication Preferences

Consumers updating their communication preferences should complete the following steps:

Step 1. Consumers can log in to their accounts on [Healthcare.gov](https://www.healthcare.gov) and select the “My Applications & Coverage” tab. Consumers then select the application to update.

Step 2. Consumers should select the “Communication Preferences” tab, as shown in Exhibit 1.



Exhibit 1—Communication Preferences Screenshot

Step 3. The following information can be changed on the “Communication Preferences” tab:

- a. Email address;
- b. Phone number;
- c. Second phone number;
- d. Notifications (i.e., prefer to receive via text message or email);
- e. Notices (i.e., prefer to receive electronic or paper notices*);
- f. Preferred spoken language; and
- g. Preferred written language.

*Consumers may also edit the address to which they would like paper notices sent. To update addresses to a new ZIP code, county, or state, consumers must report a life change. Changes to consumers’ home addresses may affect their eligibility.



C. Next Steps

1. When life changes happen, consumers should return to the Marketplace and update their account information as soon as possible. If consumers want to update their applications because of new life events (e.g., birth of a child, income increase), proceed to SOP-13 Report Life Changes.
2. For more help answering consumers' specific questions, see Appendix A for [Frequently Asked Questions \(FAQs\) related to SOP-12 Update Account Profile](#).



Appendix A: Frequently Asked Questions (FAQs)

The FAQs below are designed to help assisters answer consumers' specific questions on updating their online accounts through the Individual Marketplace. For more information on this topic, see SOP-12 Update Account Profile.

- FAQ 1. What account changes/updates will affect my eligibility to participate in the Marketplace or to get help paying for coverage?
- Answer: Certain life changes, like gaining citizenship, marriage, or the birth of a child, may affect eligibility. However, account maintenance updates, like changing your password or email, will not affect your eligibility.
- FAQ 2. How do I change my account details (e.g., password, email)?
- Answer: You may log in to your account, select the "My Profile" tab, and follow the system instructions to complete any account changes.
- FAQ 3. If I've already mailed in my paper eligibility application, can I update my information later online?
- Answer: If you have submitted a paper application to the Marketplace, you can make changes to your application information online. You will need to create an account online, answer questions to prove your identity, and then use the "Find Application" function to associate the application with the account. You will need your application ID number to retrieve your application. If you're not sure of your application ID number, you can contact the Marketplace Call Center.



Appendix B: Acronyms & Definitions

The proceeding sections describe the commonly used acronyms and terms that appear throughout the Manual.

Frequently Used Acronyms

Exhibit 2—Frequently Used Acronyms

Acronyms	Descriptions
APTC	Advance payments of the premium tax credit
CAP	Consumer Assistance Program
CCIIO	Center for Consumer Information & Insurance Oversight
COBRA	Consolidated Omnibus Budget Reconciliation Act
CFR	Code of Federal Regulations
CHIP	Children's Health Insurance Program
CMS	Centers for Medicare & Medicaid Services
CSR	Cost-sharing Reduction
DHS	Department of Homeland Security
DMI	Data-matching Issue
EHB	Essential Health Benefits
FAQ	Frequently Asked Questions
FFM	Federally-facilitated Marketplace
FPL	Federal Poverty Level
HDHP	High Deductible Health Plan
HHS	Department of Health & Human Services
HMO	Health Maintenance Organization
HSA	Health Savings Account
ID	Identification
IHS	Indian Health Service
IRS	Internal Revenue Service
MAGI	Modified Adjusted Gross Income
MEC	Minimum Essential Coverage
PII	Personally Identifiable Information
QHP	Qualified Health Plan
SBC	Summary of Benefits and Coverage
SEP	Special Enrollment Period
SHIP	State Health Insurance Assistance Program

This information is intended only for the use of entities and individuals that are certified to serve as Navigators, certified application counselors, or non-Navigator assistance personnel in a Federally-facilitated Marketplace. The terms "Federally-facilitated Marketplace" and "FFM," as used in this document, include FFMs where the state performs plan management functions and State Partnership Marketplaces. Some information contained in this manual may also be of interest to individuals helping consumers in State-based Marketplaces and Federally-supported State-based Marketplaces.



Acronyms	Descriptions
SHOP	Small Business Health Options Program
SOP	Standard Operating Procedure
SSI	Supplemental Security Income
SSN	Social Security Number
VA	Veterans Affairs
VHA	Veterans Health Administration

Definitions

The following is a list of terms from HealthCare.gov, CCIIO, and the Affordable Care Act explained in plain language that you may reference to assist consumers.

List of Vocabulary in SOP:

Affordable Care Act: The comprehensive health care reform law enacted in March 2010. Congress passed the law in two parts. The President signed the Patient Protection and Affordable Care Act into law on March 23, 2010, which was amended by the Health Care and Education Reconciliation Act of 2010 on March 30, 2010. The name “Affordable Care Act” refers to the amended version of the law. (Reference: HealthCare.gov/glossary/affordable-care-act)

Agent: When registered with a Marketplace, an individual or entity that helps individuals and businesses apply for and enroll in QHPs through the Marketplace and may assist in applying for advance payments of the premium tax credit and cost-sharing reductions. States grant licenses to agents to sell insurance in their respective jurisdictions. They may receive compensation from insurance companies with whom they have a contractual relationship to enroll consumers in a QHP or non-QHP. (Reference: Affordable Care Act §1312(e) and 45 CFR §155.20)

Broker: When registered with a Marketplace, an individual or entity that helps individuals and businesses apply for and enroll in a QHP through the Marketplace and may assist in applying for advance payments of the premium tax credit and cost-sharing reductions. States grant licenses to brokers to sell insurance in their respective jurisdictions. They may receive compensation from an insurance company with whom they have a contractual relationship to enroll consumers into a QHP or non-QHP. (Reference: Affordable Care Act § 1312(e) and 45 CFR §155.20)

Center for Consumer Information & Insurance Oversight (CCIIO): A part of the Department of Health & Human Services that helps to implement many provisions of the Affordable Care Act, the historic health reform bill that became law in March 2010. CCIIO oversees the implementation of the provisions related to private health insurance. (Reference: CMS.gov/CCIIO)

This information is intended only for the use of entities and individuals that are certified to serve as Navigators, certified application counselors, or non-Navigator assistance personnel in a Federally-facilitated Marketplace. The terms “Federally-facilitated Marketplace” and “FFM,” as used in this document, include FFMs where the state performs plan management functions and State Partnership Marketplaces. Some information contained in this manual may also be of interest to individuals helping consumers in State-based Marketplaces and Federally-supported State-based Marketplaces.



Centers for Medicare & Medicaid Services (CMS): The federal agency that runs the Medicare, Medicaid, and Children's Health Insurance Programs, as well as the Federally-facilitated Marketplaces. For more information, visit [CMS.gov](https://www.cms.gov). (Reference: [HealthCare.gov/glossary/centers-for-medicare-and-medicare-services](https://www.healthcare.gov/glossary/centers-for-medicare-and-medicare-services))

Certified Application Counselor (CAC): In an FFM, an individual (affiliated with an organization designated by CMS, as operator of the FFMs) who is trained and able to help consumers as they look for health coverage options through the Marketplace, including helping them complete eligibility and enrollment forms. Their services are free to consumers. (Reference: [HealthCare.gov/glossary/certified-applicant-counselor](https://www.healthcare.gov/glossary/certified-applicant-counselor))

Certified Application Counselor Designated Organization (CDO): In an FFM, an organization designated by CMS, as operator of the FFMs, to certify staff members or volunteers to act as certified application counselors. (Reference: 45 CFR §155.225)

Individual Marketplace: The Marketplace for individuals to purchase health insurance plans for themselves or their families other than through an employer-sponsored group health plan. (Reference: Affordable Care Act §1304(a)(2))

Marketplace: A marketplace for health insurance, also known as an "Exchange," operated by a governmental agency or non-profit entity that meets applicable government standards. A Marketplace makes QHPs available to qualified individuals and/or qualified employers. Generally, in CMS documents, this term is often used to refer both to Marketplaces serving the individual market for qualified individuals and to Small Business Health Options Program (SHOP) Marketplaces serving the small group market for qualified employers, and is often used regardless of whether a Marketplace is established and operated by a State or by HHS. However, in this document, the term Marketplace generally is used to refer only to the Federally-facilitated Marketplaces (FFMs), and frequently is used to refer only to the FFMs for the individual market. (Reference: 45 CFR §155.20)

Navigator: An individual or organization that receives a grant from the Marketplace and that is trained and able to help consumers, including small employers and their employees, as they look for health coverage options through the Marketplace, including helping them complete the eligibility and enrollment process. These individuals and organizations are required to be unbiased. Their services are free to consumers. (Reference: [HealthCare.gov/glossary/navigator](https://www.healthcare.gov/glossary/navigator))

Non-Navigator Assistance Personnel: Individuals or organizations that are trained and able to provide help to consumers, including small employers and their employees, as they look for health coverage options through a Marketplace, including helping them complete the eligibility and enrollment process. These individuals and organizations are required to be unbiased. Their services are free to consumers. Also referred to as "in-person assisters." (Reference: [HealthCare.gov/glossary/in-person-assistance-personnel-program](https://www.healthcare.gov/glossary/in-person-assistance-personnel-program))

Open Enrollment Period: The period of time during which individuals who are eligible to enroll in a QHP can enroll in a plan through the Marketplace. For coverage starting in 2017, the individual market Open Enrollment period is November 1, 2016 – January 31, 2017. Individuals may also qualify for special enrollment periods if they experience certain qualifying events. Consumers can apply for Medicaid or CHIP at any time of the year. (Reference: [HealthCare.gov/glossary/open-enrollment-period](https://www.healthcare.gov/glossary/open-enrollment-period))

This information is intended only for the use of entities and individuals that are certified to serve as Navigators, certified application counselors, or non-Navigator assistance personnel in a Federally-facilitated Marketplace. The terms "Federally-facilitated Marketplace" and "FFM," as used in this document, include FFMs where the state performs plan management functions and State Partnership Marketplaces. Some information contained in this manual may also be of interest to individuals helping consumers in State-based Marketplaces and Federally-supported State-based Marketplaces.



Premium: The amount that consumers or employers pay for a health insurance or job-based coverage. Premiums are paid by the consumer or employers on a monthly, quarterly, or yearly basis. (Reference: [HealthCare.gov/glossary/premium](https://www.healthcare.gov/glossary/premium))

Qualified Health Plan (QHP): Under the Affordable Care Act, an insurance plan that is certified by a Health Insurance MarketplaceSM, provides essential health benefits, follows established limits on cost-sharing (like deductibles, copayments, and out-of-pocket maximum amounts), and meets other requirements. Each QHP is certified by the Marketplace through which the plan is offered. (Reference: [HealthCare.gov/glossary/qualified-health-plan](https://www.healthcare.gov/glossary/qualified-health-plan))



Appendix C: Support Resources

If consumers require assistance that is outside of assister activities, refer consumers to other organizations and resources as appropriate. Exhibit 3 provides a list of external resources.

Exhibit 3—External Resources

Resource	Contact Information	What does this resource do?	How should consumers use this resource?
Marketplace Call Center	1-800-318-2596 TTY: 1-855-889-4325 (all languages available)	The Marketplace Call Center provides assistance to consumers who need information or want to enroll in health coverage through an FFM.	To get answers to questions while applying for health coverage using the online or paper application. To apply for health coverage over the phone.
HealthCare.gov	http://www.HealthCare.gov	This website allows consumers to access information about the Affordable Care Act and to enroll in health coverage through an FFM.	To find out about health coverage options available through an FFM. To apply for health coverage online. To get real-time answers to questions using the online chat function.