

MARKETPLACE ASSISTER TOOLKIT

*Standard Operating Procedures Manual for Assisters in the Individual Federally-facilitated Marketplaces **SOP 4—Verify Identity***



Version 5.0 November 2016. 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.



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SOP 4—Verify Identity

A. Introduction

As an assister, you can help consumers verify their identities so that they are able to complete eligibility and enrollment activities such as submitting a Marketplace application or selecting a Qualified Health Plan (QHP). Standard Operating Procedure (SOP) 4 provides guidance on how to assist consumers with identity verification.

B. Procedures

1. Verify Identity

Step 1. If consumers would like to complete an application on the Marketplace, they will log in and select “Start a new application or update an existing one.” Consumers will then select their state and click “Start my application.” To start the application, consumers will need to complete their identity verification, shown in Exhibit 1. The identity verification will be auto-populated with information the consumers entered when they first created their Marketplace account.

Exhibit 1—Verify Your Identity Message Screenshot

Verify your identity & contact information

Tell us about yourself. Use your complete name as it appears on your legal documents (like your driver's license or Social Security card). Why do I need to verify my identity?

Step 2. Assist consumers with entering the following additional information, as shown in Exhibit 2:

- a. First name (no nicknames)
- b. Middle name
- c. Last name
- d. Phone number
- e. Date of birth (required to process an eligibility application)
- f. Address (required to process an eligibility application)
 - i. Street
 - ii. Apartment number (if applicable)
 - iii. City
 - iv. State
 - v. ZIP code
- g. Social Security Number (SSN)



Note: Although providing a SSN for the application filer can help expedite the identity proofing process, not all application filers are required to provide one to the Marketplace. Examples of individuals who are not required to provide a SSN include:

- i. Application filers who are not applying for coverage for themselves
- ii. All individuals who do not have an SSN

As a reminder, later in the application process it will be important and strongly encouraged for non-applicants listed on the application to include a SSN if they have one, as this can help the Marketplace match applicants' information with trusted data sources to verify identity and avoid having to provide more information later.

Exhibit 2—Marketplace Verify Your Identity and Contact Information Screenshot

HealthCare.gov Individuals & Families Small Businesses John | Log out

Apply Get Results Get Coverage

Verify your identity & contact information

Tell us about yourself. Use your complete name as it appears on your legal documents (like your driver's license or Social Security card). Why do I need to verify my identity?

John	Middle	Carson	Suffix
Phone number XXX-XXX-XXXX	Home	Date of birth MM/DD/YYYY	
Street address	Apt./Ste. #		
City	Alabama	ZIP code	
Social Security Number (SSN)	XXX-XX-XXXX		

CONTINUE

Note: Consumers will be asked questions about their identity based on information in their consumer report maintained by Experian, a consumer reporting agency. Some of these questions may be based on a consumer's personal and financial history, so it may be helpful to prepare consumers to expect questions about their loans and other finances. Consumers must select the correct answer from a list of possible choices. Their answers will be compared with the information in their consumer report. Once consumers answer enough questions correctly, they will be able to proceed with their Marketplace application.



Step 3. Assist consumers with answering identity questions. Examples of the question and answer formats are shown in Exhibit 3. Once consumers click “Continue” on the **Verify Your Identity and Contact Information** page, a set of four questions will display. Consumers must answer these questions to verify their identity and help protect their PII.

Note: Because identity proofing is based, in part, on a consumer’s financial history, consumers may see an “inquiry” on their credit report. This will not affect their credit score.

Exhibit 3—Marketplace Verify Your Identity Questions Screenshot

Answer these questions so we can verify your identity

Based on your information, we've put together a few questions that only you'll be able to answer. Why do I need to verify my identity?

You may have opened a mortgage loan in or around June 2015. Please select the lender to whom you currently make your mortgage payments. If you do not have a mortgage, select 'NONE OF THE ABOVE/DOES NOT APPLY'.

- GMAC MORTGAGE
- CITICORP MORT
- EQUICREDIT
- INDEPENDENCE ONE
- NONE OF THE ABOVE/DOES NOT APPLY

You may have opened an auto loan in or around January 2016. Please select the lender for this account. If you do not have such an auto loan, select 'NONE OF THE ABOVE/DOES NOT APPLY'.

- AMSOUTH BK
- TD AUTO FINANCE
- BANK AMERICA
- SOVEREIGN BANK
- NONE OF THE ABOVE/DOES NOT APPLY

Which of the following businesses have you been associated with? If there is not a matched business name, please select 'NONE OF THE ABOVE'.

- D M EXTERIOR INC
- HONEYWELL
- EASTMAN KODAK
- LIFE HEALTH BENEFITS AGENCY
- NONE OF THE ABOVE/DOES NOT APPLY

You currently or previously resided on one of the following streets. Please select the street name from the following choices.

- RUBLE
- COUNTY LINE
- HERITAGE
- PINESTEAD
- NONE OF THE ABOVE/DOES NOT APPLY

VERIFY MY IDENTITY

Step 4. Once consumers are finished answering the questions, they need to click the “Verify My Identity” button. If they pass the identity proofing process, they will be taken to the “Your Identity has been Verified” page. You can see an example of what this page looks like in Exhibit 4.



Exhibit 4—Your Identity Has Been Verified Screenshot

The screenshot shows the HealthCare.gov website interface. At the top, there are navigation tabs for 'Individuals & Families' and 'Small Businesses', along with a user profile 'John' and a 'Log out' link. Below the navigation, there are three buttons: 'Apply' (highlighted), 'Get Results', and 'Get Coverage'. The main content area has a dark blue background and contains the following sections:

- Your identity has been verified**
You can now fill out your application for health coverage through the Marketplace.
- Important Marketplace emails**
If the Marketplace has your email address, we'll automatically send you important information, updates, and reminders about Marketplace enrollment. You can opt out of these communications at any time. To do this, click on the "unsubscribe" link in the footer of any Marketplace email.
- Privacy & the use of your information**
We'll keep your information private as required by law. Your answers on this form will only be used to determine eligibility for health coverage or help paying for coverage. We'll check your answers using the information in our databases and the databases of other federal agencies. If the information doesn't match, we may ask you to send us proof. We won't ask any questions about your medical history. Household members who don't want coverage won't be asked questions about citizenship or immigration status.

As part of the application process, we may need to retrieve your information from the Internal Revenue Service (IRS), Social Security, the Department of Homeland Security (DHS), and/or a consumer reporting agency. We need this information to check your eligibility for coverage and help paying for coverage if you want it and to give you the best service possible. We may also check your information at a later time to make sure your information is up to date. We'll notify you if we find something has changed.

[Learn more about your data](#), or view the [Privacy Act Statement](#).
- Two checkboxes for consent:
 - I agree to have my information used and retrieved from data sources for this application. I have consent for all people I'll list on the application for their information to be retrieved and used from data sources.
 - I understand that I'm required to provide true answers and that I may be asked to provide additional information, including proof of my eligibility for a Special Enrollment Period, if I qualify. If I don't, I may face penalties, including the risk of losing my eligibility for coverage.
- A green button labeled **TAKE ME TO THE APPLICATION**.

Note: The Privacy & Use of Your Information page lets consumers know how the information they entered will be used, and that data from other sources will be accessed to verify their information. Integrated systems will check applicants' eligibility by retrieving information from other federal agencies, including the Social Security Administration (SSA) and the Department of Homeland Security (DHS). If consumers applied for help paying for coverage through insurance affordability programs, these integrated systems will also retrieve information from additional agencies, including the



Internal Revenue Service (IRS), state Medicaid and Children's Health Insurance Program (CHIP) agencies, and other trusted data sources.

- Step 5.** Consumers need to check the boxes to indicate they agree to have their information used and retrieved from the trusted data sources to verify the information provided on their applications. Then, they need to click the "Take Me to the Application" button.
- Step 6.** If online identity verification is successful, proceed to [SOP-5 Apply for Health Coverage](#) to assist consumers with beginning the application process. If online identity verification is unsuccessful, continue with Step 7.
- Step 7.** Consumers will receive a code, or reference number, on the response screen from their online application indicating that their identity verification attempt was unsuccessful. Refer consumers to the Experian Help Desk for assistance with identity proofing. The consumer will need to write down the code on the screen and give it to Experian. If a consumer only makes one attempt to identity proof, he or she may not receive the code or reference number until the consumer makes a second attempt. If the reference number was generated, but the consumer did not write it down and cannot remember it when calling the Experian Help Desk, he or she can log back into the account and pull up the code or reference number again. Inform consumers that they must verify their identity before they can submit an application online and receive a final eligibility determination. Direct a consumer to contact the Experian Help Desk, as shown in Exhibit 5, if the consumer's identity was not verified.

Exhibit 5—Consumer Directed to Contact Experian to Verify Identity Screenshot

The screenshot shows the HealthCare.gov website interface. At the top, there are navigation links for "Individuals & Families" and "Small Businesses", along with a user profile for "John" and a "Logout" button. A dark blue header bar contains the user's name "John Carson" and a "HELP" button. The main content area features a sidebar with "VERIFY YOUR IDENTITY" and a progress indicator showing "2 Identity questions". The central focus is a yellow-bordered box with the heading "Your identity wasn't verified." Below this, it instructs the user to call the Experian help desk at (866) 578-5409 and provides the code "T7N-1E8-K5N-1A9-D2G". It also includes instructions on what to do if the identity is verified or not verified over the phone, and a prominent green "RESUBMIT" button. A link to "return to My Profile" is provided at the bottom of the message box.

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- a. If identity verification with Experian over the phone is successful (see Exhibit 6), the consumer can click the “Resubmit” button, then submit updated contact information, and click “Continue.” Proceed to [SOP-5 Apply for Health Coverage](#) to help consumers begin the application process.

Exhibit 6—Consumer Resubmission Contact Information for Verification Screenshot

The screenshot shows the HealthCare.gov website interface. At the top, there are navigation links for 'Individuals & Families' and 'Small Businesses', along with a user profile for 'John' and a 'Logout' button. A dark blue header bar contains a back arrow, the user name 'John Carson', and a 'HELP' button. On the left side, a sidebar menu is titled 'VERIFY YOUR IDENTITY' and includes a checked item 'Contact information' and an item '2 Identity questions'. The main content area is titled 'Contact information' and features a light blue informational box stating: 'You may need to change information on this page based on your phone call with Experian. Make any necessary changes then click the "Continue" button.' Below this is a heading: 'Tell us about yourself. Use your complete name, as it appears on legal documents (like your Social Security card).' A note below the heading reads: 'All fields are required unless they're marked optional. Don't enter any letters with special characters, like accents, tildes, etc.' The form fields are as follows: First name (John), Middle (optional, empty), Last name (Carson), Suffix (optional, dropdown menu showing 'Select...'), Date of birth (empty, MM/DD/YYYY), Social Security number (optional, empty, XXX-XX-XXXX), Email address (PCIA-3@yopmail.com), Street address (824 Deborah St), Apt./Ste #. (optional, empty), City (Jackson), State (Mississippi), ZIP code (39208-XXXX-XXXX), Phone number (6015551234), Ext. (optional, empty), and Phone type (Select one.) (optional, dropdown menu showing 'Select...').

- b. If identity verification over the phone is unsuccessful, the consumers will also need to click the “Resubmit” button and then enter in their his or her contact information again, (see Exhibit 7).

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Exhibit 7—Consumer Resubmission of Contact Information does not Verify Identity Screenshot

HealthCare.gov Individuals & Families Small Businesses John | Logout Español

< John Carson HELP

VERIFY YOUR IDENTITY

- Contact information
- 2 Identity questions

Contact information

Important: Your attempt to verify your identity was unsuccessful. Review your information, and try again.

Tell us about yourself. Use your complete name, as it appears on legal documents (like your Social Security card).

All fields are required unless they're marked optional. Don't enter any letters with special characters, like accents, tildes, etc.

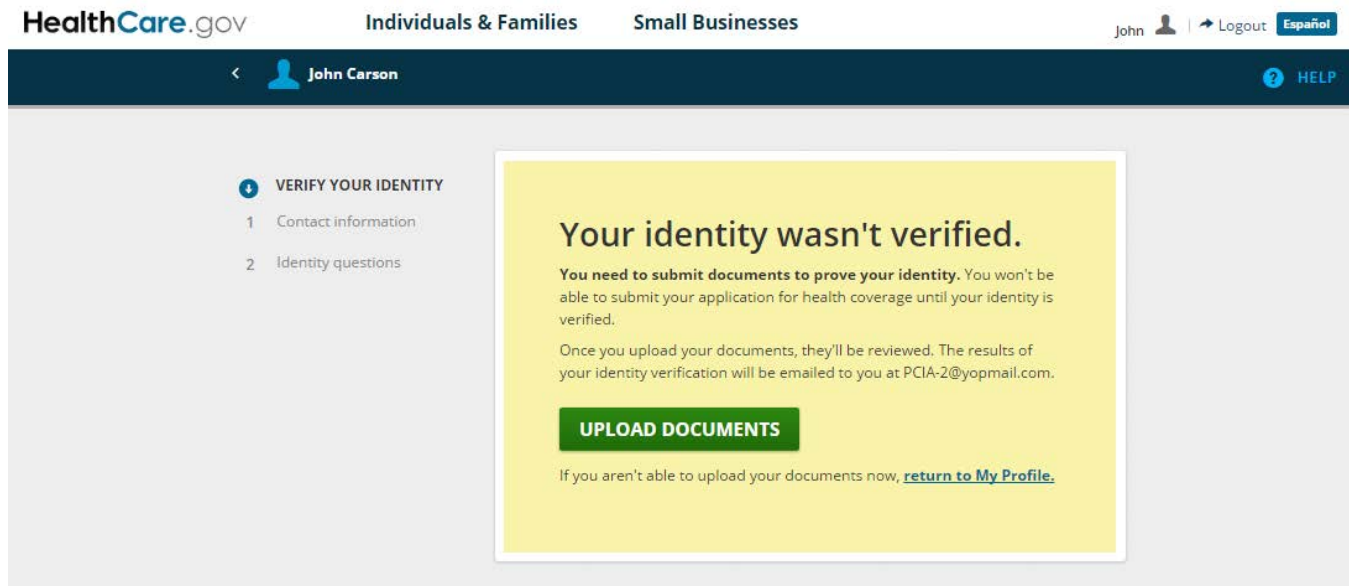
First name	Middle <i>optional</i>	
<input type="text" value="John"/>	<input type="text"/>	
Last name	Suffix <i>optional</i>	
<input type="text" value="Carson"/>	<input type="text" value="Select..."/>	
Date of birth	Social Security number <i>optional</i>	
<input type="text" value="MM/DD/YYYY"/>	<input type="text" value="XXX-XX-XXXX"/>	
Email address <input type="text" value="PCIA-3@yopmail.com"/>		
Street address	Apt./Ste #, <i>optional</i>	
<input type="text" value="824 Deborah St"/>	<input type="text"/>	
City	State	ZIP code
<input type="text" value="Jackson"/>	<input type="text" value="Mississippi"/>	<input type="text" value="39208-XXXX-XXXX"/>
Phone number	Ext. <i>optional</i>	Phone type (Select one.)
<input type="text" value="6015551234"/>	<input type="text"/>	<input type="text" value="optional"/>

- If the identity proofing process is unsuccessful after two additional attempts, HealthCare.gov will display a screen for consumers to upload documents for manual verification of their identity.
- Please proceed to the Submit Supporting Documentation section in this SOP 5—Apply for Health Coverage to learn more about submitting additional information to the Marketplace, Exhibit 8. While the vast majority of consumers who create an account on HealthCare.gov successfully complete identity proofing online, there is a small percentage who need to submit documents to complete identity proofing. Consumers who are unable to complete identity proofing on HealthCare.gov can contact the Experian Call Center to complete the process, but if consumer responses indicate the Experian Call Center will not be able to help, new enhancements in the



Federally-facilitated Marketplace (FFM) software will route the consumer around the call center and directly to the document upload step.

Exhibit 8—Consumer Directed to Upload Documents Manually to Verify Identity Screenshot



- e. If for some reason the “Upload” button does not appear or is not working (see Exhibit 9), the consumer should mail the documentation and contact the Marketplace Call Center to report the issue. If consumers were unable to verify their identity over the phone, inform them they must upload supporting documentation to HealthCare.gov or mail copies of supporting documentation to complete the identity verification process.¹ Consumers will be asked to submit a document with a picture ID from a list of documents that can be found in the [HealthCare.gov “Identity” section](#), and are also listed below.

Consumers can submit one of the following:

- i. Driver’s license issued by a state or territory;
- ii. School identification card;
- iii. Voter registration card;
- iv. U.S. military card or draft record;
- v. Any identification card issued by the federal, state, or local government;
- vi. U.S. passport or U.S. passport card;

¹ Consumers should mail all copies (not originals) of supporting documentation to: Health Insurance Marketplace, 465 Industrial Blvd., London, KY 40750-0001. Consumers should be sure to follow the steps outlined in the Submitting Supporting Documentation section of [SOP-5. Apply for Health Coverage](#).



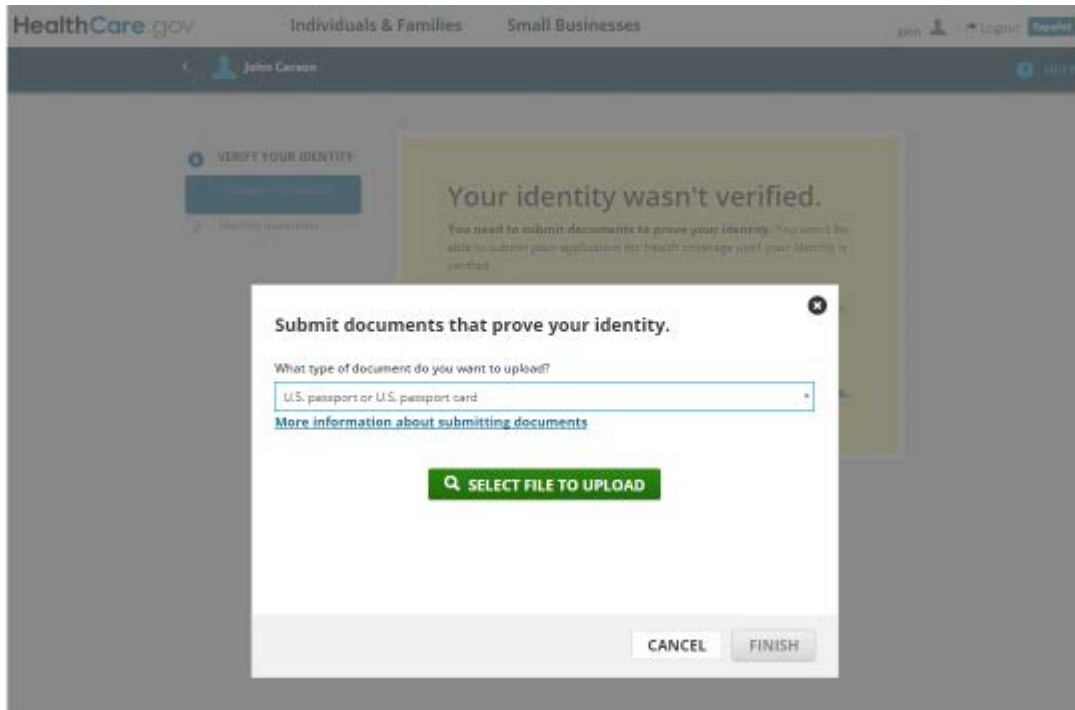
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- vii. Certificate of Naturalization (Form N-550 or N-570) or Certificate of Citizenship (Form N- 560 or N-561);
- viii. Permanent Resident Card or Alien Registration Receipt Card (Form I-551);
- ix. Employment Authorization Document that contains a photograph (Form I-766);
- x. Military dependent identification card;
- xi. American Indian Tribal document;
- xii. U.S. Coast Guard Merchant Mariner card; or
- xiii. Foreign passport, or identification card issued by a foreign embassy or consulate that contains a photograph.

If consumers cannot provide one document with a picture ID from the list above, then they must submit two documents from the list below:

- i. Birth certificate;
- ii. Social Security card;
- iii. Marriage certificate;
- iv. Divorce decree;
- v. Employer identification card;
- vi. High school or college diploma; or
- vii. Property deed or title.

Exhibit 9—Uploading Documents Screenshot

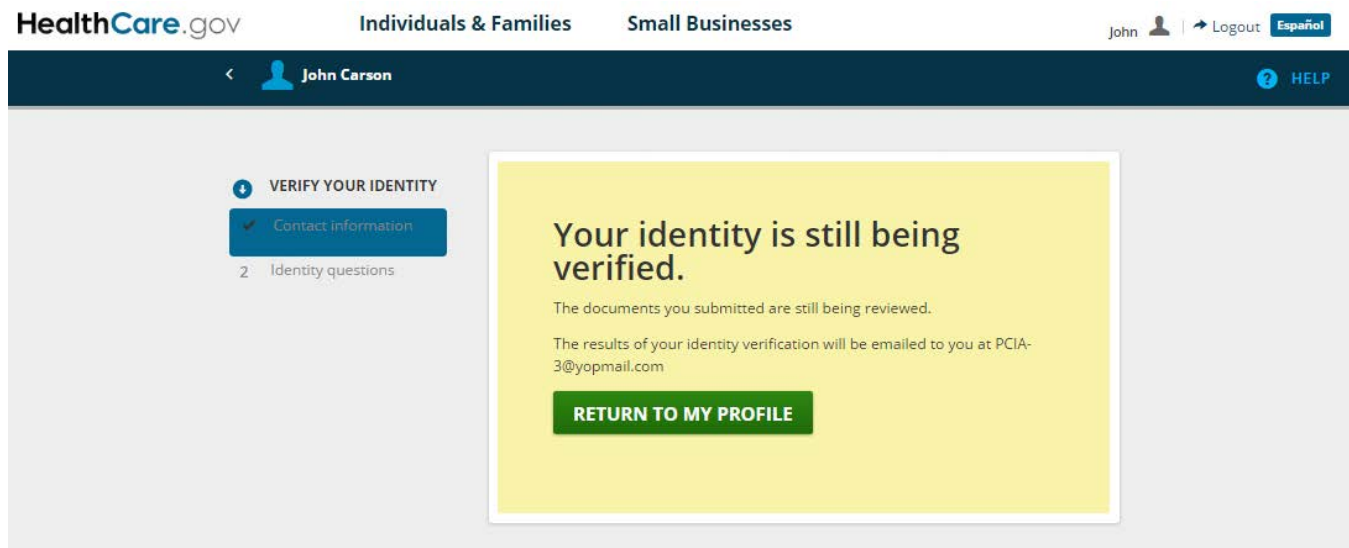




Consumers who have manually uploaded supporting documents required for identity proofing will be notified by the Marketplace via email or U.S. Postal Service about the results of their identity verification, Exhibit 10.

Note: If a consumer is unable to successfully verify his or her identity, this does not prevent the consumer from completing an application and enrolling in coverage. Consumers who have gone through the steps above and continue to have issues verifying their identity should call the Marketplace Call Center and complete the online application with a Call Center Representative.

Exhibit 10—Identity Still Being Verified Screenshot



For more information about submitting documents, see the presentation on [“Tips for Submitting Supporting Documents to the Health Insurance MarketplaceSM.”](#)

C. Next Steps

1. If consumers would like to begin the eligibility application process, proceed to SOP-5 Apply for Health Coverage.
2. For more help answering consumers' specific questions, see the [Frequently Asked Questions \(FAQs\) related to SOP-4 Verify Identity](#).



Appendix A: Frequently Asked Questions (FAQs)

The FAQs below are designed to help assisters answer consumers' specific questions on identity verification in the Individual Marketplace. For more information on this topic, see SOP-4 Verify Identity.

FAQ 1. Why do I need to verify my identity?

- Answer: To protect your personal information, you have to take a few steps to verify your identity before you can finish creating a Marketplace account and completing an application online. Without this process, an unauthorized person could create an account and apply for health coverage in your name without your knowledge.

FAQ 2. How does HealthCare.gov verify my identity?

- Answer: HealthCare.gov compares your responses to identity verification questions with information from your Experian consumer report.

FAQ 3. Why was my identity verification unsuccessful?

- Answer: Identity verification uses specific information contained in your Experian consumer report. Sometimes this information has not been recently updated or the information is inaccurate. For example, you may have recently paid off a loan that has not yet been reported to Experian. Other times, Experian may not have enough information about you in its systems to successfully verify your identity.

FAQ 4. Will identity verification affect my credit score?

- Answer: No. If you check your credit report, you may see an inquiry from Center for Medicare & Medicaid Services (CMS). CMS uses consumer reporting agencies like Experian to verify the information you use to create an account. Your credit score will not be affected by inquiries from CMS.

FAQ 5. If my identity verification is unsuccessful, will I be unable to enroll in a Marketplace plan?

- Answer: If you are unable to verify your identity successfully, you should call the Marketplace Call Center. They will be able to assist you with the identity verification process as well as with completing an application and submitting a plan selection.



Appendix B: Acronyms & Definitions

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

Frequently Used Acronyms

Exhibit 11—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
SHOP	Small Business Health Options Program
SOP	Standard Operating Procedure

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Acronyms	Descriptions
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)

Applicant: With respect to a Marketplace for the individual market, an applicant is an individual seeking eligibility for him or herself through an application submitted to the Marketplace (or transmitted to the Marketplace by the state Medicaid or CHIP agency) except individuals seeking eligibility for an exemption from the individual shared responsibility payment. Applicants must be seeking eligibility for at least one of the following: enrollment in a QHP through the Marketplace (with or without advance payments of the premium tax credit and/or cost-sharing reductions) and enrollment in Medicaid or CHIP. (Reference: 45 CFR §155.20 and 42 CFR §435.4)

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)

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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-medicaid-services](https://www.healthcare.gov/glossary/centers-for-medicare-and-medicaid-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)

Children's Health Insurance Program (CHIP): Program jointly funded by state governments and the federal government that provides health coverage to low-income children and, in some states, pregnant women in families who earn too much income to qualify for Medicaid but cannot afford to purchase private health insurance coverage. (Reference: [HealthCare.gov/glossary/childrens-health-insurance-program-chip](https://www.healthcare.gov/glossary/childrens-health-insurance-program-chip))

Health Coverage: Consumers' legal entitlement to payment or reimbursement for their health care costs for covered services or items generally under a contract with a health insurance company, a group health plan offered in connection with employment, or a government program like Medicare, Medicaid, or CHIP. (Reference: [HealthCare.gov/glossary/health-coverage](https://www.healthcare.gov/glossary/health-coverage))

Health Insurance: A contract that requires a consumer's health insurer to pay some or all of the consumer's health care costs in exchange for a premium. (Reference: [HealthCare.gov/glossary/health-insurance](https://www.healthcare.gov/glossary/health-insurance))

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))

Insurance Affordability Program: A program that is one of the following: a Medicaid program, a CHIP program, a program that makes available QHPs with advance payments of the premium tax credit or cost-sharing reductions, or a Basic Health Program, if available. (Reference: 45 CFR §155.300)

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)

Medicaid: A state-administered health insurance program for low-income families and children, pregnant women, the elderly, people with disabilities, and in some states, other adults. The federal government provides a portion of the funding for Medicaid and sets guidelines for the program. States also have choices in how they design their programs, in which Medicaid can vary state by state and may have a different name in your state. (Reference: [HealthCare.gov/glossary/medicaid](https://www.healthcare.gov/glossary/medicaid))

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.



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)

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)

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)

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)



Appendix C: Support Resources

If consumers require assistance that is outside of assister activities, refer consumers to other organizations and resources as appropriate. Exhibit 12 provides a list of external resources.

Exhibit 12—External Resources

Resource	Contact Information	What does this resource do?	How should consumers use this resource?
Experian Help Desk	1-866-578-5409	The Experian Help Desk assists consumers with verifying their identity over the phone so that they may proceed with eligibility and enrollment activities after creating an account on HealthCare.gov.	To verify their identity over the phone if they were unsuccessful in their attempt to verify their identity on HealthCare.gov. When necessary, consumers will receive a unique identity verification code and will be instructed to contact the Experian Help Desk.
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.
Internal Revenue Service (IRS)	http://www.IRS.gov	This federal agency collects taxes from individuals and businesses in the U.S.	To learn more about the effects of the Affordable Care Act on consumers' tax returns.

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SOP 4—Verify Identity

Resource	Contact Information	What does this resource do?	How should consumers use this resource?
Medicaid	http://www.Medicaid.XE \"Medicaid\".gov	This state-administered health insurance program is for low-income families and children, pregnant women, the elderly, people with disabilities, and in many states, other adults. The federal government provides a portion of the funding for Medicaid and sets guidelines for the program. States also have choices in how they design their program, so Medicaid varies state-by-state and may have a different name in your state.	To find answers to questions about health coverage through Medicaid or CHIP. To get further information about their state's Medicaid program and agency contact information.
Social Security Administration (SSA)	http://www.SSA.gov	This independent federal agency administers Social Security, A system that distributes financial benefits to retired or disabled people, their spouses, and their dependent children based on their reported earnings.	To learn more about available Social Security benefits for which consumers might be eligible. To apply for a Social Security number, which is necessary to apply for health coverage through the Marketplace (except for legal immigrants, who can provide a document number).