



How Assisters Can Help Consumers Apply for Coverage through the Marketplace Call Center









Agenda

- Basics about the Marketplace Call Center
- When to report changes to the Marketplace or other entities



4 Ways to Get Marketplace Coverage

Over the phone

Call the Marketplace Call Center at 1-800-318-2596. TTY users should call 1-855-889-4325. A customer service representative can help you apply and enroll over the phone.



Online

Visit **HealthCare**.gov to apply and enroll on the web.



In-person help

Get help from people in your community trained and certified to help you apply and enroll in the Marketplace. Visit Localhelp.HealthCare.gov, or call the Marketplace Call Center.



Paper application

If you don't have a computer or time to apply and enroll over the phone, you can fill out a paper application. Call the Marketplace Call Center to get an application or download a copy from HealthCare.gov.





Health Insurance Mariestalace

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Call Center Basics

- 1-800-318-2596 / TTY: 1-855-889-4325
- Available 24 hours a day, 7 days a week
- Closed Thanksgiving,
 Christmas, Memorial Day, July
 4th, and Labor Day





Consumers Use the Call Center to

- Apply for and enroll in coverage
- Compare plans
- Report changes to the Marketplace
- Access Special Enrollment Periods
- Terminate a stand-alone dental plan
- Access translation services
- Designate a third-party representative



Information Call Center Representatives Can Access

 If a consumer applied online or through the Call Center, representatives will have access to the information in the application and that shows up in My Account.



Tips for Assisters Helping Consumers Apply and Enroll through the Marketplace Call Center

- Help gather everything they need to apply online or through the Marketplace Call Center.
 - https://marketplace.cms.gov/outreach-andeducation/apply-for-or-renew-coverage.pdf
- Encourage consumers to apply and report changes online if they have a Marketplace Account.
- Use "See Plans and Prices," to help the consumer compare their plan options.
 - https://www.healthcare.gov/see-plans/



Reportable Changes to the Marketplace

The following changes should be reported by consumers throughout the year by updating their applications either online at HealthCare.gov or by calling the Marketplace Call Center.

Type of Life Change/Change in Circumstance

Gain a dependent (e.g., birth, marriage, adoption, placement for adoption, foster care, or due to a court order)

Lose a dependent (e.g., divorce, death)

Relocate to a new zip code or county

Gain access to other coverage (e.g., employer coverage, Medicaid, CHIP, or Medicare)

Lose access to other coverage (e.g., employer coverage, Medicaid, or CHIP)

Experience a change in citizenship or immigration status

Become Pregnant (note: you will be assessed for Pregnancy Medicaid coverage)

Become incarcerated (note: you will need to end your Marketplace coverage)

Are released from incarceration

Experience a change in household income

Experience a change in tax filing status/tax household composition

Experience a change in status as an American Indian/Alaska Native

Experience a change in disability status

Need to correct name, date of birth (DOB), or Social Security number (SSN)

Want to change communication preferences (e.g., email address, phone number, language preference, add or remove phone text alert, mailing of paper notices)

Some of these changes may qualify a consumer for a Special Enrollment Period (SEP).



SEPs through the Marketplace Call Center

- Special Enrollment Periods (SEPs) allow consumers to enroll in or change plans outside of Open Enrollment.
- Consumers who experience certain changes in circumstance or other qualifying life events may qualify for an SEP. While many qualifying life events can be reported either online at HealthCare.gov or by calling the Marketplace Call Center, some events can currently only be reported to the Marketplace Call Center and may need to be handled by a CMS Caseworker.
- These changes in circumstance or qualifying events include:
 - Gaining a dependent due to a child support or other court order
 - Consumers in non-Medicaid expansion states who were in the coverage gap and become newly eligible for APTC
- Consumers should be sure to tell the Call Center Representative if they think they
 qualify for an SEP.
- Learn more about SEPs here: https://www.healthcare.gov/sep-list/



Resolving Data Matching Issues

- Consumers should review their notices and submit requested documentation to resolve data matching issues either by uploading or mailing information.
- After submitting documentation, consumers can call the Marketplace Call Center to see if their data matching issue is resolved or whether additional documentation may be required.
- The Call Center Representative will ask the caller to provide information about themselves, like name, date of birth, and/or application ID for verification purposes.



Terminating Stand-Alone Dental Plans through Call Center

- Consumers enrolled in both a QHP and a qualified dental plan can terminate their dental coverage while keeping their QHP coverage, either by calling the Marketplace Call Center or by contacting their dental issuer directly.
 - Note that some dental issuers may request that consumers contact the Marketplace Call Center in order to terminate their dental coverage.
 Consumers should follow up with their dental carrier directly to confirm that the change was processed.
- Important: Consumers should not cancel their dental plan on HealthCare.gov if they want to keep their health plan. Selecting "Remove" in "My Plans and Programs" under their dental plan will cancel both their dental and health plans.
 - More info: https://www.healthcare.gov/coverage/dental-coverage/



Call Center Language Access Services

- Consumers can call the Marketplace Call Center for assistance in over 150 languages.
- Consumers will initially be given the language options of English or Spanish via automated prompt. Consumers who speak a language other than English or Spanish can request to connect to a representative for assistance at any time.
- The representative will first try to determine what language is being spoken by asking the consumer what language he or she speaks, or by seeking assistance from another member of the consumer's household.
- Once the representative identifies the consumer's language, the consumer will be connected to the language line for assistance from an interpreter. If the representative cannot determine which language the consumer is speaking, the language line operator will provide assistance.



Can a consumer designate someone to speak to the Call Center on their behalf?

- Yes, consumers can designate an assister as a third-party representative to communicate with the Marketplace Call Center on their behalf.
- To do so, consumers can call the Marketplace Call Center and give their verbal authorization to a Call Center Representative.
 - The authorized representative will still need to be able to answer consumer-specific questions before the Call Center Representative can provide any information.
- This authorization will last for up to one year unless the consumer calls back to end the authorization or requests a shorter timeframe for the authorization.



Can a consumer designate someone to speak to the Call Center on their behalf? (Cont'd)

- This verbal authorization allowing an assister to act as a thirdparty representative for Call Center purposes only is not the
 same as a formal designation of an authorized
 representative, which occurs when a consumer chooses
 someone to act, rather than only communicate, on his or her
 behalf during interactions with the Marketplace.
 - Note that acting as a third-party representative does not allow the assister to make decisions on behalf of the consumer, or to pick a plan for a consumer.



Call Center and Authorized Representative for Hearing Impaired

 Hearing impaired consumers who would like to designate an assister as an authorized representative who can speak on their behalf when working with the Call Center can contact the Call Center <u>using a TTY</u> to designate his or her assister as an authorized representative. Once this has been done, the consumer can have the designated assister contact the Call Center and speak to the Call Center Representative on behalf of the consumer.



Where to Report Issues: Marketplace or Issuer?

- Marketplace: For eligibility or plan selection issues, consumers can call the Marketplace Call Center.
 - E.g., password resets, walking consumers through applying and selecting a plan, or status of a data matching issue
 - Note: If consumers do not have the contact information for their insurance company, the Marketplace Call Center will be able to provide that information to them.
- <u>Issuer</u>: For **post-enrollment issues**, consumers should **call their insurance** company.
 - E.g., when premium payments are due and how to pay premiums, issues with claims or coverage, finding network providers or drug formularies
 - For additional help understanding coverage and how to use it, refer consumers to <u>CMS's resources on From Coverage to Care</u>



Where to Report Issues: Marketplace or Appeals?

- If consumers want to ask questions about the status of their eligibility appeal:
 - The Marketplace Call Center is limited, but can help by explaining how to request an appeal (1-800-318-2596 (TTY: 1-855-889-4325).
 - The Marketplace Appeals Center answers appellants' questions about their eligibility appeal (1-855-231-1751 (TTY: 1-855-739-2231).
- Note: Appeals must be filed using this form or by writing a letter to the Health Insurance Marketplace, 465 Industrial Blvd., London, KY 40750-0061.



Resources: Call Center Help Tip Sheet

 A supplemental tip sheet will be provided that includes a list of the topics and questions the Call Center is available to assist with.





Call Center Representatives

- Please remember that the Call Center Representatives are here to help.
- Sometimes there are HealthCare.gov issues and policy decisions that are beyond their control.
- Representatives are trained on the application and enrollment process and do not have expertise in Marketplace policy and regulations. Addressing policy with the representatives may prolong the call and disrupt the overall consumer caller experience.

