



# Best Practices

*for The New CMS Requirements  
ACA Final Rule 2024*

## Best Practices

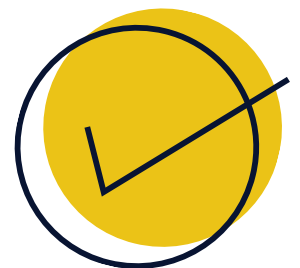
- The consent document must be obtained prior to starting the enrollment process.
- Eligibility confirmation must be obtained prior to submission of the application. You could print or attach the eligibility document from the application process as well as the additional information and save it for your records. The form could look something like:
  - I **Client Name** affirm that **Agent Name** has reviewed the attached eligibility letter with me and that my tax household qualifies for **dollar amount** subsidy monthly on **today's date**.

## 1. New Consumer Consent Requirements

**Agents are required to obtain and document consumer consent prior to assisting with or facilitating an enrollment** for coverage through Federally-Facilitated Exchanges and State-Based Exchanges on the Federal platform or assisting an individual with applying for advance premium tax credit or cost-sharing reduction.

This consumer consent requires the consumer or authorized representative to take action to produce a record like providing a signature or recording a verbal action to produce a record like providing a signature or recording a verbal confirmation, and it must contain, at a minimum, the following information:

- *A description of the scope, purpose, and duration of the consent provided by the consumer or their authorized representative.*
- *The date the consent was given.*
- *The name of the consumer or their authorized representative.*
- *The name of the agent being granted consent*
- *A process through which the consumer or authorized representative may rescind the consent.*



## 2. New Eligibility Application Confirmation Requirements

**Agents are required to obtain and document that eligibility application information that has been reviewed by and confirmed to be accurate by the consumer prior to application submission** for coverage through Federally Facilitated Exchanges and State-Based Exchanges on the Federal platform.

This consumer consent for application accuracy requires the consumer or authorized representative to take action to produce a record (e.g. providing a signature, or recording a verbal confirmation) that must include, at minimum, the following information:

- The date the application information was reviewed.
- The name of the consumer or their authorized representative.
- An explanation of the attestations at the end of the eligibility application.
- The name of the agent providing the assistance.

**Important: Documentation for both of these new requirements must be retained for a minimum of 10 years and made available upon request in response to monitoring, audit, and enforcement activities.**

These new requirements have been formed under the [Patient Protection and Affordable Care Act: HHS Notice of Benefit and Payment Parameters for 2024](#) and will assist with:

- Resolving consumer complaints related to incorrect information on their eligibility applications or unauthorized enrollments.
- Resolving disputed between agents and consumers, or between multiple enrolling entities.

**If you would like to learn more about the ACA Final Rule and other updates, contact Agent Pipeline at (800)962-4693 to discover how we can help your business.**