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Table of Contents

1	Introduction	1
2	HIOS System Access	2
2.1	Existing HIOS Users	2
2.2	2 New Users Registration	9
3	Register an Organization	14
3.1	Company	15
3.2	2 Issuer	18
4	Role Request	20
4.1	Module Description Chart	21
4.2	2 View Existing Roles	22
4.3	8 Requesting a Role	23
5	Trouble shooting and FAQ	25
5.1	FAQ's	25
5.2	2 Support	25

List of Figures

Figure 1: CMS Enterprise Portal Main Screen	2
Figure 2 - CMS Enterprise Portal Main Screen- Login	3
Figure 3 - Terms and Conditions Page	3
Figure 4 - CMS Enterprise Portal Login Page	4
Figure 5 – EIDM ID Proofing Screens	4
Figure 6 – Your Information Page	5
Figure 7 - Identity Verification Screen -1	6
Figure 8 - Identity Verification Screens -2	6
Figure 9 – CMS Enterprise Portal Page- Login with EIDM Credentials	7
Figure 10 - HIOS Landing Page- Authorized User	7
Figure 11 - Access HIOS, Plan Management Landing Page	8
Figure 12 - HIOS Home Page	8
Figure 13 - CMS Enterprise Portal Page- New User Registration	9
Figure 14 - Confirmation Screen	9
Figure 15 - My Access Page -1	10
Figure 16 – Request New Application Access screen	10
Figure 17: Request New Application Access	11
Figure 18 - HIOS Registration Form	11
Figure 19 - New HIOS User-Enter Authorization Code screen	12
Figure 20 - Request Acknowledgement Screen	12
Figure 21: HIOS Tab	13
Figure 22: HIOS Portal Home Page	13
Figure 23: Register Organization	14
Figure 24: Register an Organization	15
Figure 25: Organization Registration page - No company found	15
Figure 26: Register New Company	16
Figure 27: Review Company Information	16
Figure 28: New Company Confirmation	17
Figure 29: Organization Registration	18
Figure 30: Register New Issuer page	19
Figure 31: Role Request	20

Figure 32: Module Description chart	21
Figure 33: View Existing Roles	22
Figure 34: Request a Role	23
Figure 35: Request Role Confirmation page	24

1 Introduction

The Center for Consumer Information and Insurance Oversight (CCIIO), a division of the Department of Health and Human Services (HHS), is charged with helping implement many provisions of the Affordable Care Act. CCIIO oversees the implementation of the provisions related to private health insurance including providing oversight for the issuer-based data exchanges that populate <u>http://www.healthcare.gov</u>.

These technical instructions explain how the HIOS application works within any compatible Internet browser application such as:

- 1. Internet Explorer (version 7 or higher)
- 2. Mozilla Firefox (version 5 or higher)
- 3. Chrome (version 9.0 or higher)

<u>**CMS Enterprise Portal</u>**: CMS Enterprise web portal will be used for accessing CMS systems. Various CMS systems will be integrated with the portal in the coming months. HIOS will be integrated with the Enterprise Portal and will only be accessible through the portal on March 28^{th} .</u>

Enterprise Identity Management System (EIDM): Enterprise Identity and Access Management System. EIDM provides Authentication and Authorization capabilities and is tightly integrated with the CMS portal. Users will need to register for an EIDM account and obtain a CMS Enterprise Portal User ID and Password to access the CMS Enterprise Portal.

Pre-Requisites for HIOS Access:

- All users will be required to complete the Enterprise Portal registration process, which includes Identity Verification (ID Proofing).
- ID Proofing verifies that the individual referenced in the account is the same person creating the account.
- Additional information collected includes the following Personally Identifiable Information (PII) for purposes of the ID Proofing Process: Social Security Number, Date of Birth, Home Address and Primary Phone Number

2 HIOS System Access

Starting March 28th, 2013, users will be able to access HIOS by navigating to the CMS Enterprise Portal Site at: <u>https://portal.cms.gov/</u>. Users will be required to enter their CMS Enterprise Portal credentials and then access HIOS.

Figure 1: CMS Enterprise Portal Main Screen



Existing HIOS users will be pre-registered into the CMS Enterprise Portal but will be required to provide some additional information specific to identity verification. New HIOS users will be able to access the system but will be required to register for a CMS Enterprise Portal account, register for a HIOS account and then tie the two accounts together.

2.1 Existing HIOS Users

All existing HIOS users will automatically receive a CMS Enterprise Portal account to log into the CMS Enterprise Portal. Emails with the new CMS Portal credentials were sent to all registered HIOS users. If you are an existing HIOS user who did not receive the CMS Portal credentials, please contact the Exchange Operations Support Center at 1-855-CMS-1515 or email them at CMS_FEPS@CMS.HHS.gov.

Upon logging into the Enterprise Portal, HIOS users will be required to provide additional information that is not currently in HIOS to complete the registration process. Once registration is complete, users will be able to access HIOS. Here is the sequence of screens below.

Figure 2 - CMS Enterprise Portal Main Screen- Login

CMS.gOV Enterprise Portal Centers for Medicaré & Medicard Services	Hame About CMS Newsanoo	n Aschere 🕢 Help & FAQa 😔 Emai, 🛶 Pinnt Bearch CMS gav
CMS Portal > Welcome to CMS Portal		
Welcome to CMS Enterprise Portal The CMS Enterprise Portal is a gateway being offered to allow the public to access a number of systems related to Medicare Advantage, Prescription Drug, and other CMS programs.	CM To age reprint your of your of	S Secure Portal arbs the CVIS Portal a CMS user account is even. are unable to log into the CMS Portal using CVIS user account, please contact the CMS even at a doc social. COSI of CMS Secure Portal
CHILLINgene Porter Medical CHIP Medical Shired Series Program CMS Provides Health Coverage for 100 Million People	Information for people with Medicare. Medicare com encolment, and benefits.	Forget User ID2 Forget Password2 Inve User Registration
through Medicare, Medicaid, and the Children's Health Insurance Program. And with health insurance reforms and health care exchanges, we are improving health care and	information for children up to the age of 19 in need of heath care Sti coverage. Br	ates Moving Forward to Implement Health storm

- 1. Navigate to the CMS Enterprise Portal URL included in the CMS Enterprise Portal Account email or go directly to <u>https://portal.cms.gov/</u>.
- 2. Select the *Login to CMS Secure Portal* button.





3. Read the Terms and Conditions for using the CMS Enterprise Portals. Users must select "I Accept" to proceed into the portal.

Figure 4 - CMS Enterprise Portal Login Page

Home About CMS Newsroom Archive Portal Help & FAQS . Email .	Print
Welcome to CMS Enterprise Portal	
To log into the CMS Portal a CMS user account is required.	
If you are unable to log into the CMS Portal using your CMS user account, please contact the CMS helpdesk at 1-800-562-1963.	
User ID	
Password	
Log In Cancel	
Forgot Password?	
Forgot User ID2 Need an account? Click the link - <u>New user registration</u>	

- 4. Enter the *User ID* and *Password* credentials included in the email.
- 5. Select the *Log In* button.



	Welcome to EIDM
You are I	ogging into the system for the first time. The system needs to verify your identity in order to complete the registration process and grant access to the requested application. Select 'Next' to procee
	Next
Terms a	Ind Conditions
Consent	To Monitoring
By logging o U.S.C. Sec.	nto this website, you consent to be monitored. Unsuthorized attempts to upload information and/or change information on this web site are strictly prohibited and are subject to prosecution under the Computer Fraud and Abuse Act of 1986 and Title 1 1001 and 1030. We encourage you to read the <u>HHS Rules of Behavior</u> for more details.
Protectin	g Your Privacy
Protecting y	sur Privacy is a top priority at CMS. We are committed to ensuring the security and confidentiality of the user registering to EIDM. Flease read the CMS Privacy Act Statement which describes how we use the information you provide.
Collection	n Of Personal Identifiable Information (PII)
"Personal" in	formation is described as data that is unique to an individual, such as a name, address, telephone number, social security number and date of birth (DOB)
CMS is very service provi challenge qu	aware of the privacy concerns around PII data. In fact, we share your concerns. We will only collect personal information to verify your identity, when you set up an account. Your information will be disclosed to Experian, an external authentication for, to help us verify your identity. We will ahave your Social Security number with Experian only for the purposes of verifying your identity. Experian verifies the information you give us against their records. We may also use your answers to the setons and other [11] to later identity you in case you forget or misplace your User ID/Ressword.
I have read t disciplinary i and/or impri USC 2071, v	he HHS Rules of Behavior (HHS RoB), version 2010-0002,0015, dated August 26th 2010 and understand and agree to comply with its provisions. I understand that violations of the HHS RoB or information security policies and standards may lead to ction, up to and including termination of employment; removal or debarment from work on Federal contracts or projects; and/or revocation of access to Federal information, information systems, and/or facilities; and may also include command panabile onment. Lunderstand that exceptions to the HHS RoB must be authorized in advance in writing by the OPDIV Chief Information Officer or his/her designee. I also understand that violation of laws, such as the Privacy Act of 1974, copyright law, and 1 thich the HHS RoB draw upon, can result in montery lines and/or criminal charges that may result in imprisonment.
l understand Experian ha	that the identity proofing senices being requested are regulated by the Fair Credit Reporting Act and that my explicit consent is required to use these senices. I understand that any special procedures established by CMS for identity proofing using a been met and the senices requested by CAS to Expensa will be used solely to confirm the applicant's identity to avoid fraudulent transactions in the applicant's name.
l agree to	the terms and conditions

- 6. In the Welcome to EIDM window, select Next.
- 7. Click to place a checkmark in the "*I agree to the Terms and Conditions*" box then select *Next*.

Figure 6 – Your Information Page

Vour Information			
Tour mormation			
John	Middle Name:		
Last Name: Doe	Suffix:		
E-mail Address: john.doe@eidmtest.com			
* Social Security Number.			
* Date of Birth MM DD YYYY			
- Home Address Line 1:			
Home Address Line 2			
- City:	- State: - Zip Code: Zip Code E	xtension: Country: USA	
me Address Line 1: Main Terrace			
ne Address Line 2:			
y: - S nassas VA	State: - Zip Code: Zip Code Exte	nsion: Country: USA	
Primary Phone Number.			
3. 46.73. (\$32.75.			
	_		
overtooks inqui	TY		
ette			

8. Some information will be pre-populated for you. Complete any additional information requested.

Please note: The information will be verified against Experian's credit information. If any of your information has recently changed (i.e. change of name or address within 1-6 months), your information may still reflect your previous information. You may be directed to contact the credit agency for verify your identity.

Figure 7 - Identity Verification Screen -1

Your Information Verify Mentify Greate Challenge Questions and Answers Complete Registration
Verify Identity
fou may have opened an auto loan in or around September 2012. Please select the lender for this account. If you do not have such an auto loan, select NONE OF THE ABOVE/DOES NOT APPU TRANSMERICA MITAINSHIN MOTORS CARED OF AMERICA MITAINSHIN SUG MONIE OF THE ABOVECODES NOT APPLY
Nasse select the term of your auto loan (in months) from the following choices. If your auto loan or auto lease term is not one of the choices please select NONE OF THE ABOVE'. 34 46 46 50 50 50 50 50 50 50 50 50 50
fou may have opened a (BANK OF AMERICA) credit card. Please select the year in which your account was opened. © zoer © zoer © zoes © zoes © zoen © zoen © zoen © zoen
Tou currently or pervisously resided on one of the following streets. Please select the street name from the following choices. I SOUTH FORT ADDRETATION MOUTHAN M
Cancel

9. User information is submitted to Experian whereby four unique questions and answers are provided to each user to respond to for Identity Verification. Answer each question given as accurately as possible.

Figure 8 - Identity Verification Screens -2

	ise Portal		Home About CMS Newsroom Archive	🕗 Help & FAQs 😔 Email 🔤 Pr
nters for Medicare & Medicaid Services			Learn about your healthcare options	Search CMS.go
Ith Care Quality Improvement System Provid	er Resources			
S Portal > Registration				
or one - registration				
Your Information. Verify Identity. Choose User ID and Pa	sword Complete Regul	nifoti		
Choose User ID and Password				
- User ID johndoe@jahoo.com				
- Password				
Curles Determined				
Contain Password				
Your challenge questions and answers will be req Question:1	uired for password an	d account management functions. Answer:1		
What is your favorite radio station?		pop		
		Answer 2		
Question 2		Answer 2 beach		
Question:2 What is your deam destination?		Answer 2 beach		
Question 2 What is your deam detrination?	×	Answer 2 beach Answer 3		
Question 2 (What is your deam destination? Question 3 (Who was your favorite elementary school teacher?		Answer 2 beach Answer 3 bob		
Question 2 (What is your drawn destination?) Question 3 (Who was your favorite elementary school teacher?	•	Answer 2 beach Answer 3 bob		
Ouestion 2 Inhat is your deam sectionsion? Question 3 (The was your feronte elementary school teacher? Question 4		Answer 2 beach Answer 3 boo Answer 4 untrode		
Outston 2 That is purificant sectoration? Outston 3 Design of the sector of the sector of the sector? Outstion 4 That is the first rank of your statest nexe?	•	Answer 2 bach Answer 3 bob Answer 4 victoria		
Question 2 (Partial year deam settington)* Question 3 (Partial year deam settington assert* Question 4 (Partial year free refers of your obser meet?	•	Answer2 jeach Answer3 job Answer4 victoria Covel Net		
Question 2 (That a your deam settington") Outstand 3 (Those as your facets eithermans roboot teamer" Question 4 (That is the first reame of your object mean"	•	Answer2 jeach Answer3 bob Answer4 victoria Concel Next		
Question 2 (That is your deam seemsteps?) Question 3 (This was your foreins elementary solect autor?) Question 4 (That is the first memory allyour obtain meas?)	•	Answer2 bach Answer3 bob Answer4 victoria Convert Next		
Question 2 (Potra a year deam settination?) Ourstand 3 (Pho case your function extrementary colored teacher? Ourstand A Destination 4 (Potra from the case of your object mode?)	•	Answer 2 jeach Answer 3 job Answer 4 victoria Caucel text		

- 10. Once successfully verified, users must reset their password and setup challenge questions to assist with future password resets and identity verification.
- 11. After customizing the selected security questions and entering answers, select Next.

Your Information Verify Identity Cruste Challenge Guestions and Answers Complete Registration	
Registration Complete	
You have now successfully completed your verification process. Please log out and login again in order for your profile update to take effect.	

12. Once the EIDM registration is complete, existing users will need to log out of the system for their profile updates to take effect.



Figure 9 – CMS Enterprise Portal Page- Login with EIDM Credentials

13. Log into the CMS Enterprise Portal using the credentials just created. Figure 10 - HIOS Landing Page- Authorized User



14. Users that have registered in the CMS Enterprise Portal, registered in HIOS and acquired access to HIOS in the portal will be directed to the *My Portal* landing page. Select the *HIOS* tab.

Figure 11 - Access HIOS, Plan Management Landing Page

🕐 Portal Help & FAQs 🛛 😸 Print		🛃 Log Out 🛛 We	elcome J Buren
			Wy Profile
.gov			My Access
HIOS MyPortal		×	My Actions
CMS Portal > HIOS			
Page Title			
Page Title			
Page Title Welcome			
Page Title Welcome Loren Ipsum dotor st amet, isque commune perfi postutant sea. Erudit ponderum democrtum vis e	ieto ei usu Val integre saectan ad. Est graece eusenod sa siturum autori sententiae ei. Vin te aegue volener repudure. Bee 4 te modo graeco accusata vis. uvaret copona expetendis id cum, dolor erpud vitupentia kus eu, dicam periodis repudure har	: ea desique intellegebat. In mea sint ci m ea. Vm in fugit labitur recusabo, eos	ilfa everti. An dicant pri i cu visi feugait assueve
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Page Title Welcome Loren psan dskor st anet. Issue commune perf postuant sea. Ewata porderum denocritum vis e Health Insurance Oversight	ecto es usu. Vel integre sanctus ad. Est graece eusmod ea, sit unum autem sententiae el. Vim te aeque viderer repudiare. Itec , le modo graeco accusata vis. uvariet corpora expetendo al cum, doior enput vituperata kas eu, dicam periculis repudiare har System (HIOS) ecto es usu. Vel integre sanctus ad. Est graece eusmod ea, sit unum autom sententae el. Vim te aeque viderer repudiare. Tec	: ea desique intellegebat, in mea sint ci ne a. Vin in fugit abitur necusabo, eos : ea desique intellegebat.	ilta everti. An dicant pri cu visi feugat assueve
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Page Title Welcome Loren psum debr st anet, isque commune pert postuant isa. Endit porderum democritum sis e Health Insurance Oversight Coren page and the state of the state of the Access 1893	ecto es usu. Vei integre sanctus ad Est graece eusenod ea, sit unum autem sententiae ei. Vin te aeque viderer repudiare her , te modo graeco accusata vs. unaret corpora expetendis id cum, dolor erpud vitupenza kos eu, dicam pericutis repudiare nar System (HIOS) letto es usu. Vei integre sanctus ad Est graece eusenod ea, sit unum autem sententiae ei. Vin te aeque viderer repudiare. Ince cet Wide Functions	ea desigue intellegebat. In mea sint ci m ea. Vm in fugit labitur recusabo, eos : ea desigue intellegebat.	illa everli. An dicant pri cu visi fougait assueve
Page Title Welcome Loren pean dier st anet. Isque commune perf portant lea. Endit portenum democritum vie Health Insurance Oversight terret performance perf. Isque commune perf Access 1903	ecto es usu. Vel integre sanctus ad . Est graece exisencid ea. sit unum autem sententiae el. Ven te aegue viderer repudare tere, t, le modo graece accuata vel. uvanet corpora expetendis id cum, dolor ergud vitupenza tus eu, dicam penculis repudare nar System (HIOS) letto es usu. Vel integre sanctus ad . Est graece exismod ea, sit unum autom sententiae el. Ven te aeque viderer repudare. Ince tet Wide Functions letto es usu. Vel integre sanctus ad . Est graece exismod ea, sit unum autom sententiae el. Ven te aeque viderer repudare. Ince tet Wide Functions	en dengue intellegebat in mea sint ci m ea. Vm in logit ablur recusabo, eos ea donique intellegebat. ea donique intellegebat.	illa everti. An dicant pri cu visi feugat assueve
Page Title Welcome Loom poet dar at anet. Sigue commune perf postuant sea. Erudit ponderum denocritum vie e Health Insurance Oversight visitet porter i trend, seque commune perf Access 1803 Loren posund dor at amet. Sigue commune perf Access Pin Management & Market Vose Function	ecto es usu: Vel integre saacchus ad. Est graece eusernod ea, sit unum autem sententiae ei. Ven to aleque viderer repudiare. Iter s, te modo graece accusata vs. usvaret corpora expetenda id cum, dotor erpudi vitupenzia kui eu, dicam periculis repudiare har System (HIOS) letto es usu: Vel integre sanctus ad. Est graece eusernod ea, sit unum autem sententae ei. Ven te aleque viderer repudiare. Iter tect Wilde Functions letto es usu: Vel integre sanctus ad. Est graece eusernod ea, sit unum autem sententae ei. Ven te aleque viderer repudiare. Iter tect os usus: Vel integre sanctus ad. Est graece eusernod ea, sit unum autem sententiae ei. Ven te aleque viderer repudiare. Iter as	es desque intellegebat in mes sint ci m es. Vm in higt softer recusabo, eos es desique intellegebat. es desique intellegebat.	illa evetli. An dicant pri cu visi fleggaf assueve

15. On the HIOS tab, select the *Access HIOS* link to navigate to the **HIOS Home Page**. No additional authentication will be needed.



Figure 12 - HIOS Home Page

2.2 New Users Registration

New users to CMS Enterprise Portal and HIOS will be required to complete three parts to set up their account:

- Register within CMS Enterprise Portal for an account.
- Register within HIOS.
- Associate the two accounts to enable single sign-on from the Enterprise Portal directly into HIOS.

Figure 13 - CMS Enterprise Portal Page- New User Registration



- 1. New users will navigate to the Enterprise Portal at <u>https://portal.cms.gov/</u>.
- 2. Complete steps 7-13 in the previous section 2.1 Existing HIOS Users to complete the registration form and identity verification.
- 3. When the user receives a **Registration Complete** confirmation screen, select the *OK* button.



Care Quality Improvement System Provider Resources		
Portal > Registration		
The later way many frequencies of the Family Cardina	Regard Marine	
Registration Complete		
fou have now successfully completed your registration to CMS successful registration to EICM and the E-mail will include your	Enterprise identity Management (EIDM) You will receive an E-mail to the E-mail address on file acknowledging your EIDM User ID.	
ou can now log on to EIDM using your User ID and Password	Selecting the 'OIC button will deect you to the CMS Portal Landing page	
You may contact the EIOM Helpdesk at 1-888-888-8000 if you d	bit's receive the continuation: E-mail or have trouble logging in:	

4. Users will receive an email acknowledging successful registration and the email will include the CMS Enterprise Portal User ID.

Enterprise	Portal		
* [
rtal > My Access			
Access	View And Manage My	/ Access	
est New Application	Select Add a Role or Remove a Role to m	nanage your access for an application.	
28 28	Application Please request access to an application.	Take An Action	

Figure 15 - My Access Page -1

5. For users who do not have a HIOS account, one the **My Portal** page, select the *Request New Application Access* link in the **My Access** navigation panel.

GOV Enterprise Port	al			
Portal				
MS Portal > My Access				
My Access Request New Application Access View and Manage My	Request New Ap	plication Acces	S	
Access	- Application Description:	HIQS - HIQS Application		
	⇒ rRole:	Select the Role Select the Role HOS beck	-	Access to HIOS, Plan Management, or Market Wide Systems

Figure 16 – Request New Application Access screen

- 6. In the Application Description field, select *HIOS HIOS Application*.
- 7. In the Role field, select *HIOS Issuer*.

Portal Help & FAQs	🖶 Print	📑 Log Out	Welcome Cheryl Carter 👻
	ortal		
.gov			
MyPortal			
CMS Portal > My Access			
· ·			
My Access	Peruat New Application Access		
Request New Application	Request New Application Access		
Access View and Manage My	Select an application and then a role to request access.		
Access	Application Description:		
	A Coess to HIOS, Plan Management, or Market Wide Systems		
	Enter validation data		
	Please enter a valid Authorization Code (i.e. HDS Issuer D or Company FEIII) to continue with the role request if you are an existing HDS user and do not have access to a valid Authorization Code, please contact the Exchange Operations Support Centers		
	Phone: 855-267-1515 Email: CMS_FEPS@CMS.HHS.GOV Hours of Operation, Dave Series		
	you are not an existing HIOS user, please select the hyperlink below to register for the HIOS:		
	https://www.insuranceoversight.hhs.gov/HIOS/RequestHIOSAccount.aspx		
	- Authorization Code		
I	Lanon Subma		

8. The screen will add an "Enter Validation Data" section to the page. Select the <u>https://www.insuranceoversight.hhs.gov/HIOS/RequestHIOSAccount.aspx</u> link on the screen.

Figure 18 - HIOS Registration Form

Health Insu	irance Overs	ight System
Thursday, February 21,	2013	SIGN-IN
Request HIOS	Account	
Please note that you ar you have any questions Email: insuranceoversig	e applying for access to the , please contact the HIOS . <u>ht@hhs.gov</u> .	e Health Insurance Oversight System (HIOS). If Helpdesk at Phone: 1-877-343-6507 or
(*) Indicates a required	l field	
Title (Name):	•	
*First Name:		
Middle Name:		
*Last Name:		
Suffix:		
*Job Title:		
*Organization Name:		
*Email Address:		
Phone Type:		
*Phone: (Format:		
123-456-7890)		
Phone Ext:		
Address Type:	↓	_
Address Line 1:		
Address Line 2:		
City:		
State:	└─── ─	
ZIP code:		
Reset		Submit
Acc	essibility Rules of Behavior	Web Policies File Formats and Plug-Ins
U.S. Department of Heal	th & Human Services · 200 In	dependence Avenue, S.W. · Washington, D.C. 20201

9. Users will need to complete the **Request HIOS Account** form and submit for approval.

10. Once approved, users will receive an email with their HIOS account information and an Authorization Code to request access to HIOS within the Enterprise Portal.

Figure 19 - New HIC	S User-Enter	Authorization	Code screen
---------------------	--------------	---------------	-------------

OV Enterprise F	Portal	
Portal > My Access		
ly Access	Request New Ap	pplication Access
equest New Application ccess	Select an application and then a	a role to request access.
ew and Manage My ccess	Application Description:	HI05 - HI05 Application
	🤋 - Role:	Access to HIOS, Plan Management, or Market Wide Systems
	Enter validation data	
		Please enter a valid Authorization Code (i.e. HIDS Issuer ID or Company FEBI) to continue with the role request. If you are an existing HIDS user and do not have access to a valid Authorization Code, please contact the Kischaneg Operational Support Center:
		Phone: 855-267-1315 Email: CMS_FEPSGCMS.HellS.GOV Hours of Operation. Sen-dym
		ダ you are not an existing HLOS user, please select the hyperlink below to register for access to HLOS: https://www.insurancewersinht.htm.on/HLOS/ReputedHLOSAccount.acm
	- Authorization Code	
		Caver Edmit
	•	

- 11. Navigate back to the My Access section of My Portal within the CMS Enterprise Portal.
- 12. Select the Request New Application Access link.
- 13. In the Application Description field, select HIOS HIOS Application.
- 14. In the Role field, select *HIOS Issuer*.
- 15. Enter the Authorization Code provided within the HIOS Account Request Approved email received.
- 16. Select the Submit button.

Figure 20 ·	Request	Acknowledgement Screen
-------------	---------	------------------------

AS Portal > My Access		
My Access Request New Application Access	Request Acknowledgement You will now be able to access the information Please select CiK to continue.	
View and Manage My Access		

- 17. Select OK on the Request Acknowledgement screen.
- 18. Logout of the CMS Enterprise Portal.
- 19. Wait approximately 2 minutes and log back in.
- 20. Users must log into the Enterprise Portal to request access to HIOS.

Figure 21: HIOS Tab

CMS Exterprise Portal - HOS - Mobile Fieldox Fieldox Fieldox - Hostory - Boolemania - Toria - Hele		5	0 8	12
CMS Enterprise Portal - H005 X K Health Insurence Oversight S., X +				
🗲 🌶 🔒 https://partal?.zmscmatest/wpu/mypantal/cmspantal/hiostm/lus/ph1/bl/5pQ0Mjuot_JwesTQBCPjeng0.001MMA00MMIGpO180CDayA80AMLAB_d5N05pNT8NQQqCA5qMAA81ABRCHtyM_J1UU_Jh_ 🖒 🖤 🖉 🔀 - Go	sogle		Q,	Ĥ
🗌 Home - RBS M Go to your email 🗌 RedCirpet - Login 🗋 Welcome 🗋 VouDecide 👼 Most Visited				
🕐 Portal Help & FAQs 😸 Print 💽 1	Log Out	Welcome J Buren		
CMS		My Profile		
-gov Enterprise Pondi		My Access		
HIOS MyPortal		My Actions		
		-		
Page Title				
Welcome				
Lorem (psum dolor sit amet, lisque commune perfecto ex usu. Vel integre sanctus ad. Est graece euismod ea, sit unum autem sententiae ei. Vim te aeque viderer repudiare. Nec ea denique intellege postulant sea. Erudit ponderum democritum vis ei, te modo graeco accusata vis. Iuvaret corpora expetendis id cum, dolor enput vituperata ius eu, dicam pencuis repudiare nam ea. Vim in fugit labit	bat. In mea sint lur recusabo, e	t clita everti. An dicant p os cu wisi feugait assue	vrimis verit.	
Health Insurance Oversight System (HIOS)				
Lorem ipsum dolor sit amet, iisque commune perfecto ex usu. Vei integre sanctus ad. Est graece eusmod ea, sit unum autem sententiae ei. Vim te aeque viderer repudiare. Nec ea denique intellege	bat			
Access HOS				
Plan Management and Market Wide Functions				
Lorem ipsum dolor sit amet, lisque commune perfecto ex usu. Vel integre sanctus ad. Est graece euismod ea, sit unum autem sententiae el. Vim te aeque viderer repudiare. Nec ea denique intellegel	bat.			
Access Plan Management & Market Wide Functions				
	_			1
CMS Emergelse CMS cross Enclosed to Decide A federal government website managed by the Centers for Medicare & Medicard Services				
Portal Home CMD.GOV Line prise r Ortor 7007 Security Sodewide, Baltmore, NO 21244			şç.	
			-301	-

- 21. Select the *HIOS* tab.
- 22. Select the Access HIOS link.

Figure 22: HIOS Portal Home Page

Health Insur	ance Oversight System		
Thursday, February 21, 201	3 HOME FAQ CONTACT US SIGN OUT		
	Welcome Jessica Rabbit		
HIOS Portal Hom	ne Page		
Manage Account	Announcements		
Register an	The Center for Consumer Information and Insurance Oversight (CCIIO) has launched the Form Filing sub-module within the Document Collection module of the Health Insurance Oversight System (HIOS).		
Organization	If you have been notified by CCIIO that the requirement to submit form filings applies to you, please access the User Registration Form from CCIIO's website <u>here.</u>		
Role	A completed User Registration Form must be submitted to the HIOS help desk at insuranceoversight@hhs.gov.		
Management	For general questions, please send an email to <u>formfiling@cms.hhs.gov.</u> For questions related to HIOS or technical issues, please send an email to <u>insuranceoversight@hhs.gov.</u>		

New accounts will not have any organizational associations or role permissions. Those requests must be made separately.

3 Register an Organization

Register an Organization module allows the user to verify a company existence in HIOS or create a new company or issuer within HIOS. The organization must be actively registered in HIOS in order for a user to request access to the account or role permissions to the account.

Most of the modules within and controlled by HIOS will require the user to be cross-referenced (or associated to) at least one organization, company, issuer, or state (for state modules only) before a user can even have access to the module. The user will not have the module's access button until the user has an approved role request to an existing or approved new organization.



Figure 23: Register Organization

3.1 Company

Before creating a new company, the user must perform a Federal EIN Search to ensure the company is not already registered within HIOS. If any of the details of the company are incorrect, please contact the Help Desk to submit corrections.





The user must complete the steps below to register a company.

- 1. Select *Register an Organization* link on the HIOS Portal Home Page.
- 2. Key in the company's *Federal EIN*.
- 3. Select the *Search* button.



Organization Registration
Please enter your company's 9 digit Federal EIN below and select 'Search' to determine if your company currently exists in HIOS.
Federal EIN: 000113333 Search
Company
No Company Found
You may register your company in HIOS by selecting the 'Create Company' button below to enter your company's information.
Create Company

- 4. If the company is found in the search results, the user may proceed to Section 4.2 to set up a new Issuer, if needed.
- 5. If the company is not found, select the *Create Company* button.

Figure 26: Register New Company

Health Ins	urance Overs	ight Sy	sten	1	
Thursday, February 21,	2013	ном	E FAQ	CONTACT US	SIGN OUT
Register New Please fill in the form be Note: (*) Indicates a r *Company Legal Name: *Incorporated State: Federal EIN: NAIC Company Code: NAIC Group Code: Group Name: AM Best Number: Not For Profit:	Company low with your Company's inform equired field. Any Insurance Company DC 0000112222 Any Insurance Company	nation.		Welcome	Jessica Raddit
Co-Op:					
Domiciliary Address *Address Line 1:	123 Main Street				
Address Line 2:					
*City:	Anytown				
*State:	MD 💌				
*ZIP code:	21200				
ZIP Plus 4:					
ZIP Plus 4:	Review/	Continue			

- 6. Enter in the details of the company. Be sure to complete required fields, which are marked with an asterisk (*).
- 7. Select the *Review/Continue* button.

Figure 27: Review	Company	Information
-------------------	---------	-------------

Company Legal Name	Registered State	d Federal EIN	NAIC Company Code	AM Best Number	Not For Profit	Co- Op	Address Line 1	Address Line 2	City	State	ZIP Code	ZII Plu 4
Any Insurance C ompany	DC	00011222 2			No	No	123 Main Str eet		Anyto wn	MD	2120 0	
	~											
NAIC Group Code	Group Na	me										

8. Confirm the accuracy of the information provided. Select *Back* to correct any information or *Submit* to complete the request.

Figure 28: New Company Confirmation

Healtl	h Ins	urar	nce	Ove	rsi	gh	t Syst	tem	-	1	2	2
Thursday, Fe	bruary 21,	2013					HOME	FAQ C	ONTACT	US	SIGN	OUT
New Co Your request t receive a notif Company	mpan to register fication em	y Con the Comp ail.	ofirma bany below	ation w has bee	en subi	mitte	d for approva	al. Once ap	pproved	, you	shall	1
Company Legal Name	Registered State	Federal EIN	NAIC Company Code	AM Best Number	For Profit	Co- Op	Address Line 1	Address Line 2	City	State	ZIP Code	ZIP Plus 4
Any Insurance Company	DC	0001122 22			No	No	123 Main Str eet		Anyt own	MD	2120 0	
Company	Group											

9. Select the *Continue* button to return to the HIOS Portal Home Page.

The requests will be submitted for approval. The requesting user will receive an email once the new company has been approved.

3.2 Issuer

Before creating a new issuer within HIOS, an associated company must be registered and approved in the system. The user must perform a Federal EIN Search to ensure the company is already registered within HIOS. If any of the details of the company are incorrect, please contact the Help Desk to submit corrections

Figure	29.	Organization	Registration
rigure	47.	Organization	Registi atton

Health Insurance Oversight System									
Thursday, Februa	ary 21, 2013				HOME	FAQ C	ONTAC	T US	
Organization Registration Please enter your company's 9 digit Federal EIN below and select 'Search' to determine if your company currently exists in HIOS. Federal EIN: 000112222 Search Company									
Company Legal Name	Registered State	Federal EIN	NAIC Code	Address Line 1	Address Line 2	City	State	ZIP Code	ZIP Plus 4
Any Insurance Company	DC	000112222		123 Main Street		Anytown	MD	21200	
Any Insurance Company DC 000112222 123 Main Street Anytown MD 21200 Issuers Issuers currently registered in HIOS for your company Back Add Issuer Accessibility Rules of Behavior Web Policies File Formats and Plug-Ins									

To search for an FEIN, complete the following steps:

- 1. Select *Register an Organization* link from the HIOS Portal Home Page.
- 2. Key in the company's *Federal EIN*.
- 3. Select the *Search* button.
- 4. If the company is not found, the user must create the company first. See Section 4.1 to set up a new company.
- 5. If the company is found in the search results, check the existing list of *Issuers* associated to the company to ensure the issuer does not already exist.
- 6. If the issuer does not already exist, select the *Add Issuer* button.

Figure 30: Register New Issuer page

Health Ins	urance	Ove	ersigl	nt Sy	/ste	m		1	2	1
Thursday, February 21	L, 2013			ном	E FAG		ONTAC	TUS	SIG	NOUT
							we	lcome	Jessi	ca Rabbit
Register New	Issuer									
Please fill in the form be	low with your Issue	r's infor	nation.							
Note: (*) Indicates a	required field.									
Issuer Legal Name:	Any Insurance	Compa	ny .							
*Registered State:	•									
Federal EIN:	000112222									
NAIC Company Code:										
NAIC Group Code:										
*Market Coverage:	•									
Domiciliary Address										
*Address Line 1:										
Address Line 2:										
*City:										
*State:	-									
*ZIP code:										
ZIP Plus 4:										
Back Below are the Issuers t	hat you have reque	sted to a	create. To r	emove an	i Issuer fi	ave an rom tř	id Add	Anoth	er lasu u may	er: select
the Delete link on that	row.									
Issuer Legel Registerer Nome State	d Pederel EIN Company Code	NAIC Group Code	Market Coverage	Address Line 1	Address Line 2	City	State	ZIP Code	ZIP Plus 4	Actions
Any Insurance VA Company VA	000112222		seth	123 Main Street		Anyt	MD	2120		Delete
		SL	ibmit							
	Accessibility Bullet	of Schevi	er I web P	dielea I r	Nie Permete	and Pl	ue-les			
U.S. Departme	ent of Health & Human S	services -	200 Independ	ence Avenu	e, S.W 1	Washin	gton, D	.C. 20	201	

- 7. Complete the fields and confirm you have selected the Registered State of the new issuer. All required fields are marked with an asterisk (*).
- 8. When complete, select the Save and Add Another Issuer button.
- 9. When all new issuer requests are completed, confirm the accuracy of the issuer details in the summary table at the bottom of the page, and then select the *Submit* button.

The requests will be submitted for approval. The requesting user will receive an email once the new issuer has been approved.

4 **Role Request**

All modular access and role requests are to be completed in the Role Request functionality. The user will be able to submit module access permission request and cross-reference request to registered companies, issuers, and state (for state users only) all in one location. Users will also be able to view their existing roles and access status.

	Figure 31: Rol	e Request
Health II	nsurance Over	rsight System
Thursday, Februa	ry 21, 2013	HOME FAQ CONTACT US SIGN OUT
View Existing Roles	Request Role	Welcome Jessica Kabbit
Please select a Mode description of each o Module:	ule from the drop-down list below module, select <u>Module Description</u> Select Module	and follow the prompts to submit a role request. For a
	Accessibility Rules of Behavior	Web Policies File Formats and Plug-Ins

ure	31:	Role	Request	

4.1 Module Description Chart

Before requesting a role or access to a module, it is important to review the Module Description chart to ensure the user only requests access to the modules needed. Select the *Module Description* link to view the chart.

<u>Acronym</u>	Module Name	<u>Module Purpose</u>	<u>Role Functionality</u>
HIOS- PF	Plan Finder Product Data Collection	Plan Finder collects State, Issuer, and Product information regarding the private health insurance industry. For State users, Plan Finder collects data regarding the insurance companies within that state and the products sold to individual and small group markets to compare to the data filings of those issuers. Issuer Submission users can download a pre-populated template, update product information, then upload the file on the "Upload Finalized Data Template" tab.	 <u>State Users</u>: The state representative can view all the issuer organizations assigned to that state. <u>Issuer Users</u>: <u>Submitter user</u> is a representative of an organization who can submit and view issuer data. <i>Primary Submitter contact</i>: The primary submitter is the primary contact for the submission issues. <i>Backup Submitter contact</i>: The backup submitter is the backup contact for the submission issues. Validator user is a representative of an organization who can validate the data submitted by the issuer. <i>Primary Validation contact</i>: The primary Validator is the primary contact for validation issues. <i>Backup Validation contact</i>: The primary Validator is the primary contact for the validation issues. <i>Backup Validation contact</i>: The backup Validator is the backup contact for the validation issues. <i>Backup Validation contact</i>: The backup Validator is the backup contact for the validation issues. <i>Attestation User</i>: An official within an organization usually CEO or CFO who attests the data submitted. Administrator User: An official within CCIIO who can access and view all issuer submitted data and state data.
HIOS-CAP	Consumer Assistance Program	The Consumer Assistance Program (CAP) is used by states and its case workers to provide beneficiaries and consumers insurance related guidance and assistance. Provide state users with the capability to collect, manage and submit information about the various	Install CAP System (Installer) has the ability – System setup for user authorized ability Data Collection Upload Process (Submitter) – Reported Data

Figure	32.	Module	Description	chart
riguie	54.	Mouule	Description	unaru

4.2 View Existing Roles

The user can view their existing roles and access permissions on the View Existing Roles tab as displayed below in Figure 19.

Figure	33:	View	Existing	Roles
--------	-----	------	----------	-------

Health Insurance Oversight System								
Thursday, February 21, 2013 HOME FAQ CONTACT US SIGN C								
View Existing Roles Request Role Request Role								
View Existing Roles Username: jessicarabbit.cgitest@yahoo.com Plan Finder Module (PF)								
Role	Association Type	Association		User Type	User Sub-Type			
Issuer	Issuer	85511 - ACME Insurance Company - DC		Individual Market Validator	Backup Contact			
Issuer	Issuer	85511 - ACME Insurance Company - DC		Small Group Market Submitter	Primary Contact			
Rate & Benefits Information System (RBIS)								
Role	Association Type	Association		User Type	User Sub-Type			
Issuer	Issuer	85511 - ACME Insurance Company - DC		Individual Market Validator	Backup Contact			
Issuer	Issuer	85511 - ACME Insurance Company - DC		Small Group Market Submitter	Primary Contact			
Accessibility Rules of Behavior Web Policies File Formats and Plug-Ins U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201								

To view existing roles, complete the following steps:

- 1. From the HIOS Portal Home Page, select the *Role Request* button.
- 2. Select the View Existing Roles tab.

4.3 Requesting a Role

To request an additional role or module access, a role request must be submitted. Be sure to review the Module Descriptions chart to ensure the user requests the correct module and role within the module.

Health Insurance Oversight System						
Friday, February 22,	2013		HOME FAQ	CONTACT US SIGN OUT		
View Existing Roles	Request Role			Welcome Jessica Rabb		
Request Rol	e					
Please select a Modu description of each m	le from the drop-down list b odule, select <u>Module Descrip</u>	elow and follow th otions	ne prompts to s	ubmit a role request. For a		
Module:	Rate & Benefits Informatio	n System (RBIS)	•			
Requested Role:	Issuer					
User Type:	Small Group Market Subm	itter 💌				
User Sub-Type:	Backup Contact	•				
Issuer Associati	on					
Please enter the HIO Issuer ID:	S Iss <u>uer ID below</u> 85511 Search					
Search Result:	85511 - ACME Insurar	nce Company - Do	С			
Review/Continue						
U.C. Description	Accessibility Rules of Behavior Web Policies File Formats and Plug-Ins					
u.s. Departmen	olo, Department of realth α numan services 1200 Independence Avenue, S.W. 1 Washington, D.C. 20201					

Figure 34: Request a Role

To request a role, complete the following steps:

- 1. From the HIOS Portal Home Page, select the *Role Request* button.
- 2. Select the *Request Role* tab.
- 3. Select the *Module* needed.
- 4. Select the *Requested Role*. The system will only display the specific roles that apply to the module selected.
- 5. If applicable for the module selected, select the *User Type* from the drop down menu.
- 6. If applicable for the module selected, selected the *User Sub-Type* from the drop down menu.
- 7. If the module requires a cross-reference to a company, issuer, or state, enter the information and select *Search*. If a Search Result is not displayed, the user must register the organization first or verify that the issuer or state reference provided is accurate.
- 8. Select the *Review/Continue* button.

Figure 35: Request Role Confirmation page

Health Insurance Oversight System							
Friday, February 22, 20	13	HOME FAQ CONTACT US SIGN OUT					
View Existing Roles	Request Role	Welcome Jessica Rabbit					
Request Role							
Please review your selections below, and select 'Submit' to submit the new role request for approval, or select 'Back' to make changes.							
Module:	Rate & Benefits Information	System (RBIS)					
Requested Role:	Issuer						
User Type:	Small Group Market Submitt	er					
User Sub-Type:	Backup Contact						
Selected Issuer:	85511 - ACME Insurance Co	mpany - DC					
Back Submit							

9. Select the *Submit* button. The *Back* button is also an option if the user needs to make changes to prior to this page.

5 Trouble shooting and FAQ

5.1 FAQ's

Question 1: I forgot my password. What do I do?

Answer: Select the Forgot Password link on the CMS Enterprise Portal

Question 2: I do not see the module access button for the application I would like access. What do I do?

Answer: Refer user to User Role Request.

Question 3: I received an error stating that I am locked out of my account. What should I do?

Answer: Contact the Exchange Operations Support Center (XOSC).

Question 4: I do not see the specific issuer or company information I am looking for within a specific module. What should I do?

Answer: Refer to User Role Request instructions.

5.2 Support

CMS Help Desk

For additional assistance, please call the Exchange Operations Support Center (XOSC) at 1-855-CMS-1515 or email them @ CMS_FEPS@CMS.HHS.gov.