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CENTERS FOR MEDICARE & MEDICARD SERVICES
CENTER FOR CONSUMER INFORMATION
& INSURANCE OVERSIGHT

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Center for Consumer Information and Insurance Oversight
7501 Wisconsin Avenue
Bethesda. MD 20814

State-based Marketplace Annual Reporting Tool (SMART)

Introduction

The Affordable Care Act (ACA) established State-based Exchanges (SBEs) to provide individuals and small business employees with access to health insurance coverage beginning January 1, 2014. The ACA provides states with flexibility in the design and operation of their Exchanges to best meet the unique needs of their residents and insurance markets.

The Centers for Medicare & Medicaid Services (CMS) is responsible for the oversight and monitoring of SBEs pursuant to 45 CFR § 155.1200 (general program integrity and oversight responsibilities) and 45 CFR § 155.1210 (maintenance of records). Under these provisions, SBEs are required to conduct a defined set of oversight activities to track and monitor how they are meeting ACA program integrity standards. In addition, SBEs are required to comply with Exchange-related policy and operational requirements set forth in statute, regulations, and guidance.

The State-based Marketplace Annual Reporting Tool (SMART) was developed to assist CMS in the collection of SBE reporting and auditing requirements, and, in coordination with other CMS oversight activities, to monitor and evaluate SBE compliance with applicable regulations and guidance. SBEs must submit the SMART on an annual basis to CMS. Submission of the SMART does not preclude an SBE from meeting other CMS reporting requirements not addressed in the SMART.

SBEs must submit or attest to the submission of these requirements by completing the following SMART elements: Eligibility and Enrollment and Financial and Program Integrity. Directions for completing each attestation and/or document submission are contained in the element description.

Unless otherwise noted, SBEs should answer the SMART questions, as they relate to Exchange operations in place, on the last day of the previous open enrollment period.

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this collection is 0938-1244. The time required to complete this information collection is estimated to average .75 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Baltimore, Maryland 21244-1850.



SMART REPORTING ELEMENTS

Stat	State-based Marketplace Annual Reporting Tool (SMART)1		
	duction		
	Eligibility and Enrollment		
	Financial and Programmatic Audit		
	Program Integrity		
	Attestation of Completion		
	7 Moditation of Completion		



I. Eligibility and Enrollment

SBEs using the Federal Platform (SBE-FPs) for individual eligibility and enrollment, should skip this section.

Under 45 CFR § 155.1200(b)(2), Exchanges are required to report on eligibility and enrollment activities. Please attest to whether the Exchange is in compliance with the following Exchange-related eligibility and enrollment policy, operational regulations, and guidance, and submit the required information where noted. Answer the questions as they relate to Exchange operations in place as of the last day of the previous open enrollment period, unless otherwise noted.

A.	• Qualified Health Plan (QHP) Eligibility Verification: Social Security Number The Exchange verifies Social Security number with the Social Security Administration through the Federal Data Services Hub under 45 CFR § 155.315(b) unless otherwise authorized by CMS.		
	YES NO		
В.	QHP Eligibility Verification: Citizenship and Lawful Presence The Exchange verifies citizenship with the Social Security Administration through the Federal Data Services Hub under 45 CFR § 155.315(c) unless otherwise authorized by CMS.		
	YES NO		
	The Exchange verifies lawful presence with the Department of Homeland Security through the Federal Data Services Hub Verify Lawful Presence (VLP) Service Steps 1, 2, and 3 under 45 CFR § 155.315(c) or through an alternative process approved by CMS.		
	YES NO		
c.	QHP Eligibility Verification: State Residency The Exchange verifies state residency through attestation under 45 CFR § 155.315(d) unless otherwise authorized by CMS.		
	YES NO		
	The Exchange verifies state residency through a non-Federal Data Services Hub, private, and/or state-level data source for this eligibility verification procedure.		
	YES NO		
	If yes, please list data source(s):		
D.	QHP Eligibility Verification: Standards and Process for American Indian/Alaska Natives The Exchange verifies attestations of American Indian/Alaska Native status utilizing relevant documentation and/or an electronic data source as provided under 45 CFR § 155.350(c) unless otherwise authorized by CMS.		
	YES NO		
	If yes, please list documentation type and/or data source(s):		



E.	QHP Eligibility Verification: Incarceration Status
	The Exchange verifies incarceration status through the Federal Data Services Hub or attestation under 45 CFR § 155.315(e) unless otherwise authorized by CMS.
	YES NO
	The Exchange uses a non-Federal Data Services Hub, private, and/or state level data source in addition to or as a contingency for the Federal Data Services Hub for this eligibility verification procedure.
	YES NO
	If yes, please list data source(s):
F.	Affordability Program Eligibility Verification: Household Income and Size The Exchange verifies household income and family/household size through the Federal Data Services Hub under 45 CFR § 155.320(c) unless otherwise authorized by CMS.
	YES NO
	The Exchange uses a non-Hub, private, and/or state level data source in addition to or as a contingency for the Federal Data Services Hub for this eligibility verification procedure.
	YES NO
	If yes, please list data source(s):
G.	Affordability Program Eligibility Verification: Employer-sponsored Plan The Exchange verifies eligibility related to enrollment in an eligible employer-sponsored plan and eligibility for qualifying coverage in an eligible employer-sponsored plan through the Federal Data Services Hub Office of Personnel Management Service under 45 CFR § 155.320(d) unless otherwise authorized by CMS.
	YES NO
	The Exchange uses a non-Hub, private, and/or state-level data source, and/or employs an alternative verification process (including a statistically significant random sample) for this eligibility verification procedure.
	YES NO
	If yes, please list data source(s) and/or alternative process:
Н.	Affordability Program Eligibility Verification: Medicaid, Children's Health Insurance Program (CHIP) and Basic Health Program (BHP) The Exchange verifies eligibility related to enrollment in Medicaid, CHIP, and BHP (if applicable) through a state-level data source under 45 CFR § 155.320(b)(1)(ii).
	YES NO

otherwise deemed in



	eligil	ole en	nployer-sp	ries eligibility related to enrollment in minimum essential coverage, other than through an consored plan, Medicaid, CHIP, and BHP (if applicable), through the Federal Data r 45 CFR § 155.320(b)(1)(i).
		YES		NO
				s a non-Hub, private, and/or state-level data source in addition to or as a contingency for ervices Hub for this eligibility verification procedure.
		YES		NO
	If ye	s, plea	ase list da	ata source(s):
J. Inconsistency Resolution In cases where the Exchange cannot verify information required to determine eligibility for enrollment in QHP through the Exchange, advance premium tax credits (APTCs), and cost-sharing reductions (CSRs Exchange has a process in place to identify, notify consumers of, and resolve inconsistencies in accord with 45 CFR § 155.315(f) relating to the following eligibility factors:		Exchange cannot verify information required to determine eligibility for enrollment in a xchange, advance premium tax credits (APTCs), and cost-sharing reductions (CSRs), the ocess in place to identify, notify consumers of, and resolve inconsistencies in accordance		
	Υ	N	Partial	
				Annual Income
				Citizenship/Immigration Status
				Incarceration Status
				American Indian/Alaskan Native Status
				Minimum Essential Coverage: Non- Employer Sponsored Coverage Minimum Essential Coverage: Employer Sponsored Coverage
	If an	swere	ed partial.	please explain:
K.	Ben The	efit \ Excha	Year Eli ange cond	gibility Redetermination and Verification ducts eligibility redeterminations and verifies reported changes during the benefit year in CFR § 155.330.
		ILS		
L.	The	Excha	ange cond	latching ducts periodic data matching during the benefit year in accordance with 45 CFR § fy updated information for applicable enrollees in regard to the following eligibility factors.
	Υ	N		
		-	Death	
			Enrollmer	nt in Medicare
				nt in Medicaid, BHP (if
				e and/or if not



	Υ	N	
			compliance by CMS)
If yes, please specify for each eligibility factor, how often the Exchange obtains this updated informati during the benefit year:			
M.	The 45 C	Excha FR §	Eligibility Redeterminations and Verification ange performs annual eligibility redeterminations and verifies reported changes in accordance with 155.335. Submit the procedures for redeterminations for the next open enrollment period per 45 5.335(2). UPLOAD Uploaded procedures include the following components:
	Υ	N	
			Description of the automatic re-enrollment populations and noticing timelines
			Overview of planned usage of the Federal Data Services Hub for verifications, including any significant changes from previous years
			Dates for conducting batch annual redetermination verifications through the Federal
			Data Services Hub Description of redetermination procedures for identifying, and denying eligibility to, tax
			filers who received APTC on their behalf but failed to file an income tax form and reconcile their APTC for that year.
			Description of any operational or policy changes from previous years to the
			redetermination process
N.	The	Excha	gibility Process: Employer Notices ange notifies an employer that an employee has been determined eligible for APTCs and CSRs and in a QHP through the Exchange within a reasonable timeframe under 45 CFR 155.310(h).
		YES	NO
0.	The Thro Reco	Excha ough the oncile wing	gibility Standards: Income Tax Return Filing Requirement ange conducts eligibility determinations for APTC in accordance with 45 CFR § 155.305(f)(4). nese eligibility determination procedures the Exchange: 1) receives and processes Failure to (FTR) data from IRS through the Federal Data Services Hub to verify eligibility for new and enrollees and 2) denies or discontinues APTC for new or renewing tax filers who are identified as TC paid on their behalf but who did not file a tax return or reconcile APTC for that year.
		YES	NO PARTIAL
	If an	swere	ed partial, please explain:

The Exchange includes the notice of the right to appeal and instructions regarding how to file an appeal in any

eligibility determination notice issued to the applicant in accordance with 45 CFR § 155.355.

P. Eligibility Determinations: Right to Appeal



YES NO
Q. Administration of Advance Payments of the Premium Tax Credit: CMS Reporting The Exchange is compliant with applicable requirements regarding submission of Policy-level data to CMS for plan year 2018 and prior plan years to support the administration and reconciliation of payments of APTCs and CSRs to issuers under 45 CFR § 155.340(a) and 45 CFR § 155.400(b). YES NO PARTIAL
K. Administration of Advance Payments of the Premium Tax Credit: IRS and Taxpayer Reporting The Exchange is in compliance with applicable requirements regarding reporting to the IRS and to taxpayers in accordance with 45 CFR § 155.340(c).
YES NO PARTIAL
R. Monthly Reconciliation of Enrollment Information with QHP issuers The Exchange reconciles their enrollment information, including historical dates of coverage, with QHP issuers no less than on a monthly basis in accordance with 45 CFR § 155.400(d).
YES NO
If yes, submit the internal and external procedures for reconciliation with issuers per 45 CFR § 155.400(d) only if not previously provided or if it has undergone significant changes.
Procedures previously submitted and have not undergone significant changes.
S. Self-Reporting: Eligibility and Enrollment Opportunity for Comments If applicable, please use this section to provide any additional information or clarification on eligibility and enrollment that was not captured in the previous attestations.



II. Financial and Programmatic Audit

Under 45 CFR § 155.1200, Exchanges are required to report to CMS on financial and program integrity, and engage an independent qualified auditing entity or entities to conduct a financial and a programmatic audit. Please attest to having completed the applicable activities and submit any requested documentation.

A.	. Accurate Accounting The Exchange keeps accurate accounting of all activities, receipts, and expenditures in accordance with generally accepted accounting principles (GAAP), as required under 45 CFR § 155.1200(a)(1).		
	YES NO		
B.	Financial Independent External Audit An independent, qualified auditing entity that follows generally accepted governmental auditing standards (GAGAS) has performed an annual independent external financial audit of the Exchange, as required under 45 CFR § 155.1200(c), and submitted the results to CMS. If yes and if not already provided, upload results of the annual financial independent external audit.		
	YES NO		
c.	Accurate Accounting and Financial Statement: Independent External Auditor Attestation The Exchange has prepared an annual financial statement in accordance with GAAP, as required under 45 CFR § 155.1200(b)(1), and provided the financial statement to CMS. If yes and if not already provided, upload results of the annual financial statement.		
	YES NO		
	An independent, external auditor attests that the Exchange has demonstrated to CMS accurate accounting of all activities, receipts, and expenditures and has prepared an accurate annual financial statement in accordance with GAAP. If yes, upload the auditor attestation confirming the Exchange has demonstrated accurate accounting and prepared an accurate annual financial statement. If yes and if not already provided, upload auditor attestation. UPLOAD		
	YES NO		
D.	Programmatic Independent External Audit An independent, qualified auditing entity that follows GAGAS has performed an annual independent external programmatic audit of the Exchange, as required under 45 CFR § 155.1200(c), and in compliance with the standards in 45 CFR Subpart M, § 155.1200(d). If yes, upload results of the annual programmatic independent external audit.		
	YES NO		

E. Material Weaknesses

The programmatic independent external audit identified a material weakness or significant deficiency.



	If yes, the Exchange has informed CMS of any material weakness or significant deficiency and any intended corrective action identified by the independent external audit, as required under 45 CFR § 155.1200(c)(2).
	YES NO
	If yes, upload a corrective action plan (CAP) addressing the material weakness or significant deficiency identified by the external audit. UPLOAD
F.	Summary of Audit Results Available to Public The Exchange has made a summary of the results from the independent financial and programmatic external audits available to the public, as required under 45 CFR § 155.1200(c).
	YES NO
	If yes, include a link to where the independent external audit results are located:
III.	Program Integrity
A.	Maintenance of Records The Exchange adheres to the maintenance of records requirements as required under 45 CFR § 155.1210(a)-(c).
	YES NO
В.	Enrollment Indicator Metrics The Exchange has submitted individual and/or SHOP enrollment indicator metric reports in accordance with CMS timelines and templates, as required under 45 CFR § 155.1200(a)(3) and the Paperwork Reduction Act.
	YES NO N/A
C.	Oversight and Monitoring, including Fraud, Waste, and Abuse Policies and Procedures The Exchange has a comprehensive, documented oversight and monitoring program to ensure program integrity, which include policies and procedures to identify incidents of fraud, waste, and abuse, as required under section 1313(a)(5) of the ACA.
	YES NO
	If yes, upload the oversight and monitoring plan and fraud, waste, and abuse policies and procedures only if not previously provided or if it has undergone significant changes. UPLOAD
	Policies and procedures previously submitted and have not undergone significant changes.



D.	Non-Discrimination Policies and Standards The Exchange has policies and clear enforcement standards to safeguard against discrimination in health insurance determinations and practices including notices, complaint processes, and training of Exchange personnel in accordance with Section 1557 of the Affordable Care Act.				
	YES NO				
	If yes, upload the Exchange's non-discrimination policies and standards <u>only</u> if not previously provided or if it has undergone significant changes. UPLOAD				
	Policies and standards previously submitted and have not undergone significant changes.				
E.	Consumer Assistance Tools The Exchange has policies and procedures in place to provide all consumers with information and assistance that is timely and accessible in accordance with 45 CFR § 155.205. For SBE-FPs, the Exchange has, at a minimum, an informational website and toll-free hotline that directs consumers to the Federal platform for eligibility and enrollment.				
	YES NO				
F.	Financial Information The Exchange publishes on its website average licensing costs, regulatory fees, administrative costs, and an other additional fees required by the Exchange, along with any monies lost to waste, fraud, and abuse, in accordance with 45 CFR § 155.205(b)(2).				
	YES NO				
	If yes, include a link to where the information is posted:				
G.	Self-Reporting: Financial and Program Integrity Opportunity for Comments If applicable, please use this section to provide any additional information or clarification on financial and program integrity that was not captured in the previous attestations.				



IV.	Attestation	of Com	pletion
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	interestation of completion				
Reporting Tool (SMART	t the statements and information contained in this State-based Exchange Annual) and the documents submitted in conjunction with this report accurately represent the he regulatory requirements.				
YES NO					
STATE:	<enter name="" of="" state=""></enter>				
ELECTRONIC SIGNATURE:	<enter chief="" director="" electronic="" executive="" of="" officer="" or="" signature=""></enter>				
DATE:	<enter dd="" mm="" yyyy=""></enter>				
PRINT NAME:					