

Enhanced Direct Enrollment (EDE) Business Audit Instructions and Report Template

1.0 Instructions for Completion of the EDE Business Requirements Audit Report Template and Toolkits

The Auditor conducting the business requirements audit must complete the Business Requirements Audit Report Template (Business Report) provided in Section 2.0 of this document, as well as the applicable toolkits provided by the Centers for Medicare & Medicaid Services (CMS). The completed Business Report and toolkits will make up the final business requirements audit package that the Direct Enrollment (DE) Entity will submit to CMS to participate in EDE.

CMS will not begin its review of a prospective EDE Entity's business requirements audit until the EDE Entity has submitted a fully completed Business Report and applicable toolkits, including any supplemental documentation required by the toolkits.

For more information, please refer to the *Third-party Auditor Operational Readiness Reviews for the Enhanced Direct Enrollment Pathway and Related Oversight Requirements* (Guidelines) (The Guidelines for Year 6 will be located here: <https://zone.cms.gov/document/general-edeguidance-and-information> and here: <https://www.cms.gov/programs-and-initiatives/health-insurance-marketplaces/direct-enrollment-and-enhanced-direct-enrollment>)

Steps to Start the Business Audit

- 1) Read this document thoroughly.
- 2) Review the Auditor User Guide tab in each available toolkit.

1.1 How to Complete the Business Report Template in Section 2.0

The Auditor conducting the business requirements audit must use the Business Report template to document a prospective EDE Entity's compliance with each business requirement review category, including those review categories that the Auditor has reviewed using CMS-provided toolkits.

Using the Business Report template provided in Section 2.0, the Auditor will complete a table and two fields for each review category listed. See Exhibit 5 in Appendix A for descriptions of each business requirement and the Auditor review standard. The Business Report template provides spaces for the Auditor to supply the following information for each review category:

- Risk Identified,

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- Risk Level,
- Risk Mitigation Strategies,
- Estimated Resolution Date,
- Notes, and
- Compliance Determination.

See the following subsections for more detailed instructions.

1.1.1 Risk Identified, Risk Level, Risk Mitigation Strategies, and Resolution

The Auditor will use a table display like the one shown as Exhibit 1 to fully document any risks and mitigation strategies specific to the review category.

Exhibit 1: Risk and Mitigation Strategy Display

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date

When the Auditor identifies risks and mitigation strategies within a toolkit, it should refer CMS to the toolkit. *Note that the Auditor does not need to repeat each risk and each mitigation strategy in the Business Report if these risks and mitigation strategies have been documented within the toolkit.* If, while completing the toolkit, the Auditor identifies any risks that are not related to a specific toolkit requirement or that are a general risk applicable to an entire toolkit or review requirement, the Auditor should document the risks and mitigation strategies in the Business Report (Section 2.0).

Risk Identified

The Auditor must list all risks not already identified in the toolkits (if applicable), which includes:

- **Unresolved risks:** These are outstanding risks that have a mitigation strategy and future estimated resolution date. Please note that low-risk issues must be documented, but do not require a mitigation strategy and future estimated resolution date. All high-risk issues require these items.
- **Resolved risks:** These are any risks that the Auditor identified that were resolved by the prospective EDE Entity prior to its submission of the Business Report to CMS. The Auditor *must* document the mitigation strategy and resolution date.

If the Auditor has not identified any risks specific to the review category, it should indicate “N/A” in the first row of Exhibit 1. If the Auditor explained all risks specific to the review category in the toolkit, it should write “Please see associated toolkit” in the first row of Exhibit 1.

Risk Level

The Auditor must assign a risk level of “low” or “high” to each risk it identifies.¹ The Auditor must base the risk level determination on the severity and scope of the risk. CMS will take the risk level assigned by the Auditor into consideration when reviewing the audit but may adjust it if necessary.

- **High-risk issues** may impact a consumer’s eligibility determination, enrollment disposition or status, or legal attestation. High-risk issues may also greatly hinder the consumer experience or impact data collection (e.g., skipping a question that is required for an EDE Entity to ask, but optional for the consumer to answer).
- **Low-risk issues** are unlikely to affect a consumer’s eligibility determination, enrollment disposition or status, legal attestation, experience (i.e., in a negative or confusing way), or data collection.

Note: These risk determinations are applicable for the business audit only and not the privacy and security audit.

Risk Mitigation Strategy

Auditors must explain how a resolved risk(s) was mitigated. If high-risk findings have been identified and not yet resolved, Auditors must indicate how these risks can be closed or mitigated. A prospective EDE Entity *must* resolve all high-risk findings prior to receiving final approval to use the EDE pathway. The Auditor and prospective EDE Entity can determine whether the low-risk issues must be resolved or not (i.e., the Auditor may list but is not required to list a mitigation strategy for unresolved low-risk findings).

Estimated Resolution Date

For unresolved high-risk findings, the Auditor must also indicate the date by which it reasonably expects the prospective EDE Entity to fully resolve the risk in the “Estimated Resolution Date” column if the issue cannot be resolved prior to audit submission to CMS. CMS recommends Auditors work with the prospective EDE Entity to provide a realistic timeframe of when a risk will be closed or mitigated, given other dependencies and their expertise.

Note: In some cases, the toolkit does not cover the full requirement (i.e., compliance with toolkit rows alone does not address the requirement) so please review each review category requirement in full (see Appendix A) when completing the Business Report template.

1.1.2 Notes

The Auditor may also explain any findings that it would like to share with CMS that would not be considered risks. If desired, the Auditor may also explain the rationale for characterizing a specific risk as low risk or high risk in this section. If the Auditor does not have any notes for the review category, it should indicate “N/A” in this space.

¹ These risk determinations are applicable for the business audit *only* and *not* for the privacy and security audit.

1.1.3 Compliance Determination

The Auditor must provide a conclusive and affirmative statement of the prospective EDE Entity's compliance with all requirements set forth in the review category. The Auditor must provide this statement for each review category, regardless of what the Auditor documented in the toolkit.

The Auditor will base its determination on the outcome of the audit conducted in accordance with the review standard identified in Appendix A. Some of the requirements set forth in the review standards and in toolkit instructions are subject to interpretation. In such cases, the Auditor should use its reasonable judgment in interpreting the standard.

The Auditor should carefully read the review standard for the review category prior to completing the Business Report and corresponding toolkit (if applicable) to ensure that it has recorded a determination for each requirement set forth in the review standard. The Auditor will complete its review of the various requirements set forth in the review standard through the completion of a corresponding toolkit (if applicable) and/or through other methods described in the review standard.

1.2 How to Use and Complete the CMS-Provided Business Requirement Toolkits

The Auditor conducting the business requirements audit must utilize and complete the following CMS-provided toolkits: (1) API Functional Integration Testing, (2) Eligibility Results,² (3) Application User Interface (UI), and (4) Communications. Each toolkit provides information (e.g., testing scenarios, application questions) that the Auditor will use to verify the prospective EDE Entity's compliance with one or more business requirement review categories. The baseline toolkits are available in a zip file on CMS zONE at: <https://zone.cms.gov/document/business-audit>. The Auditor User Guide tab in each toolkit contains comprehensive instructions for completing that toolkit. The Auditor User Guide describes the contents of the toolkit and how the Auditor should review those requirements and/or scenarios.

Auditor Compliance Findings

Within each toolkit, certain fields are designated for the Auditor to complete; these are the auditor compliance findings fields. In the identified tabs, the Auditor must scroll to the right to complete the last six columns whose column headings are shaded in yellow, as shown in Exhibit 2. These columns are where the Auditor must indicate the prospective EDE Entity's compliance, risks identified, risk level (high or low), risk mitigation strategies, estimated resolution dates, and limited Auditor comments (e.g., screenshot file names that are evidence of compliance with the requirement). The Auditor User Guide tab in each toolkit contains further instructions for completing these fields.

² There are three versions of the "Eligibility Results Toolkit," and each one corresponds to one of the three EDE phases. The Auditor must read the instructions in all three toolkits as phases 2 and 3 require the Auditor to use more than one Eligibility Results Toolkit.

Exhibit 2. Sample Yellow-shaded Columns for COMPLETION

K	L	M	N	O	P
Auditor Compliance Conclusion**	Risks Identified**	Risk Level**	Risk Mitigation Strategy**	Estimated Resolution Date**	Auditor Comments**

In the Application UI Toolkit *only*, essential fields are indicated with blue shading in the column heading. They are also indicated (along with the auditor compliance findings fields) with a double asterisk (**). This will help the Auditor distinguish fields that DE Entities will use in building the eligibility application and the fields that are essential to the audit. The Auditor must review the essential fields, as shown in Exhibit 3.

Exhibit 3: Sample Blue-shaded Essential Field Columns in the Application UI Toolkit for REVIEW

Question** * indicates features of this question may be updated in future documentation	Question Help**	Answer Options and Format** Bolded Answer = EDE Eligible	Applies to which members on the application**
1 How many tax dependents, like your children, will you claim on your [coverage year] tax return? Include all of your dependents on your [coverage year] tax return, even those not applying for coverage. Don't include yourself.	Question Assistance: If you haven't filed taxes in the past, it's okay to estimate how many dependents you might have if you plan to file a return next year. If you don't plan to file taxes next year, don't answer this question — click here to continue your application (link redirects to classic application UI). Learn more about tax returns. (Links to "Your [Coverage Year] tax returns on HC.gov") Additional Application Assistance: Dependents: Your child, stepchild, foster child, or sibling (if younger) is likely to be your dependent if he or she lives with you, doesn't provide more than half of his or her own financial support for the year, and is younger than 19 or a full-time student younger than 24. Learn more about dependents. Coverage year tax return: Which tax return? The tax return for [coverage year] means the tax return on which you report your	[Drop-down, single-selection] Display 0-20	Application tier
3			

1.3 How to Submit the Completed Business Report and Toolkits

The prospective EDE Entity must submit the completed Business Report (as a PDF) and toolkits in a zip file through its DE/EDE PME site.

Some toolkits may require submission of supplemental documentation, such as screenshots, raw Extensible Markup Language (XML), raw JavaScript Object Notations (JSONs), and eligibility determination notices (EDNs). In such cases, the prospective EDE Entity should upload the supplemental documentation to the appropriate toolkit folder. Please note the following documentation will not be accepted:

- Supplemental documentation not requested by CMS (i.e., any documentation that does not directly link to a requirement that needs evidence, as specified in the toolkit, will not be reviewed)

An example of the structure of the zip file and the naming conventions of the folders and files within the zip file is shown below (folders are listed in **bold** font and documents are listed in *italics*). Please put your prospective EDE Entity's name in each file name.

- Zip file name: Business Audit Package_[insert prospective EDE entity name]
 - *Completed Business Requirements Audit Report Template (PDF)*
 - **Eligibility Results Toolkit**

- *Completed Eligibility Results Toolkit(s)*³
- **Supplemental Documentation:** Folders for each Test Case containing documentation described in the toolkit labeled as:
 - TestCase [Insert Phase #][Insert Test Case Letter] (e.g., TestCase1A)
 - Each test case screenshot within the folders should be labeled with the test case number and letter followed by the number of the screenshot (e.g., 1A_1.png, TestCase1A_2.png). Similarly, the Auditor should name the raw JSON or XML files to clearly identify them as belonging to a specific test case (e.g., TestCase1A-JSON). The EDN should be labeled in the same manner (e.g., TestCase1A_EDN.pdf). No test case screenshot should have the same file name across all test cases.
 - CMS strongly recommends that Auditors sequentially aggregate the screenshots in a single document for each test case (e.g., a Microsoft Word, PowerPoint, or PDF document with each image labelled “TestCase1-A”) instead of submitting each screenshot as an individually saved image (e.g., TestCase1A-1.jpg, TestCase1A-2.jpg). This may help expedite CMS’s audit review.
- *Completed Application UI Toolkit (just the spreadsheet, CMS does not review screenshot evidence for this toolkit)*
 - For Auditors reviewing a prospective EDE Entity’s Spanish-language version of the application UI, the Auditor can document its audit findings for the Spanish-language version of the application UI by adding columns for the auditor compliance findings fields (yellow-shaded columns) to the Application UI Toolkit required tabs (please refer to the Auditor User Guide information for detailed instructions on the required tabs) or by completing a second copy of the Application UI Toolkit.⁴
- **API Functional Integration Toolkit**
 - *Completed API Functional Integration Toolkit*
 - **Supplemental Documentation:** Folders for each Test Case containing documentation described in the toolkit labeled as:
 - TestCase[Insert Phase #] (e.g., TestCaseF001)
 - The required evidence files should be named sequentially, and the file name should clearly identify them as belonging to a specific test case. For example, the Auditor should use this naming structure: TestCaseF00#_Step#_Item

³ The Auditor will complete one or more of three phase testing scenarios toolkits. The Auditor User Guide tab within each toolkit specifies which of the three testing scenario toolkits to complete.

⁴ *FAQs Regarding Spanish Translation and Audit Requirements for Enhanced Direct Enrollment (EDE) Entities Serving Consumers in States with FFEs* (June 20, 2018) are available here: <https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Downloads/FAQ-EDE-Spanish-Translation-and-Audit-Requirements.PDF>

#_Document#_ElementName.png, which would appear as “F001_5_1_1_person search API.png” in the file submission. In the Test Cases tab, the information to populate “TestCaseF00#” can be found in column A, “Step#” can be found in column D, and “Item #” can be found in column H. Auditors should use “Document#” to indicate the sequential order of the documents in the audit submission and “ElementName” to describe the content within the document.

○ **Communications Toolkit**

- *Completed Communications Toolkit*⁵
- For Auditors reviewing a prospective EDE Entity’s Spanish-language version of critical communications, the Auditor can document its audit findings for the Spanish-language version of the Communications Toolkit by adding columns for the auditor compliance findings fields (yellow-shaded columns) to the Communications Toolkit required tabs (please refer to the Auditor User Guide information for detailed instructions on the required tabs) or by completing a second copy of the Communications Toolkit.
- **Supplemental Documentation:** Folders for each requirement that needs screenshots or video files for evidence of compliance (as noted in the toolkit). Each folder should be labeled with the requirement row number (e.g., Requirement 2).
- Each screenshot or video file within the requirement folders should be clearly labeled. The Auditor has discretion for these naming conventions, but CMS recommends descriptive file names (e.g., DMI_Citizenship, SVI_Marriage, Education_1).
- Please note that CMS will require Spanish-language screenshots for those Communications toolkit rows requiring evidence, if applicable. The Spanish Communications toolkit and screenshots may be submitted at the time of audit submission if the prospective EDE Entity is pursuing use the EDE pathway in Texas; however, CMS will request updated Spanish-language screenshots *after* the English Communications requirements are approved.

1.4 Resubmissions After CMS Review

Once CMS determines an audit is complete, it will review the audit submission for compliance. During CMS’s compliance review of the audit submission, CMS may request revisions and resubmissions to address non-compliant requirements. Below are CMS expectations related to these resubmissions:

⁵ See FAQs referenced in footnote 4

- The prospective EDE may be required to continue engaging its Auditor after audit submission.
 - If the resubmission requires another audit of the requirement(s) in a template or a toolkit, the prospective EDE Entity is expected to engage its Auditor to confirm that the resubmitted requirement(s) is compliant.
 - The Auditor may be expected to engage in a phone call with CMS to discuss its compliance determinations and applicable entity mitigation strategies.
- Prospective EDE Entities and their Auditors must submit all requested re-audited documentation, when requested by CMS (i.e., resubmit the entire Business Audit Package). This ensures that CMS has the full submission of updated documents in one complete package.

1.5 Audit Submission Package

In addition to the Business Report, toolkits, and supplemental documentation (the Business Audit Package) outlined in Section 1.3, the EDE Entity and its Auditor must submit additional documents. For more information, see Section VI, Business Audit Requirements and Scope, of the Guidelines.

1.6 Completeness Requirements

CMS will review each business requirements audit submission for completeness. CMS will not accept incomplete audits. A complete business requirements audit submission meets the criteria described in Exhibit 4, at a minimum. CMS strongly encourages entities to review these requirements thoroughly to avoid having their audits rejected during the audit submission window.

Exhibit 4: Business Requirements Audit Submission Requirements for a Complete Audit

Toolkit & Template	Minimum Requirements for a Complete Audit
All Toolkits	<ul style="list-style-type: none"> ▪ Provide complete Auditor documentation (i.e., required columns indicated for Auditor results contain details regarding the Auditor's evaluation of the requirement, including compliance status, risks, and mitigation strategies (if applicable)). The Auditor's evaluation must contain no ambiguous language about potential unmitigated risks (e.g., stating that the Auditor has identified risks, or the prospective EDE Entity has mitigated the risks without a description of the risks or mitigation strategies). ▪ Complete screenshots that demonstrate all reviewed content without missing, obscured, or cut-off elements that are required to evaluate compliance with the requirements represented by the screenshot. ▪ All required rows, across all required tabs, of each toolkit are completed. Auditors should refer to the Auditor User Guide tab of each Toolkit to identify required tabs, columns, and rows. ▪ Risks identified during the course of the audit must be documented and explained, even if the EDE Entity has subsequently mitigated the risks (i.e., a history of initial risk identification and attempted mitigation through any and all subsequent reviews and mitigation attempts should be documented to enable CMS to understand the original and subsequent risks identified and how all risks were mitigated). ▪ The prospective EDE Entity may be required to continue engaging its Auditor after audit submission. <ul style="list-style-type: none"> – If the resubmission requires another audit of the requirement(s) in a template or a toolkit, the prospective EDE Entity is expected to engage its Auditor to confirm that the resubmitted requirement(s) is compliant.

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Toolkit & Template	Minimum Requirements for a Complete Audit
<p>All Toolkits (continued)</p>	<ul style="list-style-type: none"> – <i>The Auditor may be expected to engage in a phone call with CMS to discuss its compliance determinations and applicable entity mitigation strategies.</i> <ul style="list-style-type: none"> ▪ <i>Prospective EDE Entities and their Auditors must submit all requested re-audited documentation, when requested by CMS (i.e., resubmit the entire Business Audit Package). This ensures that CMS has the full submission of updated documents in one complete package.</i> ▪ <i>Note: For any issues or risks identified during the completeness review that are attributable to CMS-confirmed Exchange defects, CMS will not hold prospective EDE Entities responsible for such defects; however, the prospective EDE Entity must confirm the defect exists with CMS help desk teams⁶ and document that the issue exists in the applicable Toolkit or Business Audit Report. CMS may require the prospective EDE Entity demonstrate the required functionality once CMS has resolved the CMS-confirmed Exchange defect. For example, if a prospective EDE Entity is unable to complete an API Functional Integration Toolkit test case due to a CMS-confirmed Exchange defect, CMS may require the EDE Entity to submit the test case in full once CMS has resolved the defect.</i>
<p>Communications Toolkit</p>	<ul style="list-style-type: none"> ▪ <i>Complete screenshots that demonstrate compliance when the applicable requirements require screenshots to be provided as evidence under the Requirements tab in the toolkit.</i> ▪ <i>EDE Entities of all phases must submit screenshots to support document upload requirements for all DMIs and SVIs⁷. There are no phase-specific exceptions for the account management and document upload requirements.</i> <i>For any Communications Toolkit screenshots that involve multiple webpages or screens, EDE Entities must provide screenshots of all relevant webpages or screens (e.g., if the EDE Entity is providing a link to the consumer FAQs from the Communications Toolkit requirements, provide the screenshots of the link origin and destination).</i>
<p>Application User Interface (UI) Toolkit</p>	<ul style="list-style-type: none"> ▪ <i>The Application UI Toolkit must be reviewed in full and documented appropriately (see the “All Toolkits” minimum requirements above) for the applicable phase, which includes all UI elements included in that phase (e.g., an audit of a phase 3 application would include application questions that are also applicable to phases 1 and 2, as well as application questions specific to phase 3 only). Note: The test cases in the Eligibility Results Toolkits do not cover all questions or requirements in the Application UI Toolkit. As a result, Auditors must develop a methodology to ensure each element of the Toolkit is evaluated. Prospective EDE Entities have the option to test a variety of functionalities in their UIs using additional, optional, EDE Partner Test Cases⁸.</i>
<p>Eligibility Results Toolkit(s)</p>	<ul style="list-style-type: none"> ▪ <i>Each phase has its own Eligibility Results Toolkit. Phase 1 EDE Entities must complete all phase 1 test cases. Phase 2 EDE Entities must complete all phase 2 test cases and some of the phase 1 test cases. Phase 3 EDE Entities must complete all phase 3 test cases and some of the phase 1 and phase 2 test cases. Please refer to the User Guide tab in the Eligibility Results Toolkits for more specific test case instructions. Please note, depending upon an Entity’s planned service areas, it may need to request modifications to test cases, as described in the User Guide tab in the Eligibility Results Toolkits.</i> ▪ <i>Screenshots of the entire application flow are provided for each test case from either the coverage year and coverage state questions (items #1 and #2 in the Application UI Toolkit) or the privacy notice disclaimer (item #3 in the Application UI Toolkit), whichever comes first in the Entity’s environment, through the entire application including the eligibility results page.</i>
<p>Eligibility Results Toolkit(s)</p>	<ul style="list-style-type: none"> – <i>Note: The screenshots described above are required for the toolkit associated with the entity’s target application phase, but not for lower phase toolkits. For example, a prospective phase 2 EDE Entity would submit screenshots for the phase 2</i>

⁶ Please refer to Section XII.A, Help Desk, of the EDE Auditor Guidelines for more information on submitting tickets to the appropriate CMS help desk.

⁷ As a result of the 2023 Notice of Benefits and Payment Parameters Final Rule, CMS only requires evidence for the SVI type, "Losing Qualifying Health Coverage". The Auditor is not required to provide screenshots for any other SVI types.

⁸ Please refer to the EDE Partner Test Cases and EDE Partner Test Cases User Guide, available on CMS zONE at the following link: <https://zone.cms.gov/document/eligibility-information>.

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Toolkit & Template	Minimum Requirements for a Complete Audit
(continued)	<p><i>Eligibility Results Toolkit test cases, but not phase 1 test cases. The EDN and JSON requirements described below apply to all required test cases across all required toolkits. For example, a prospective phase 2 EDE Entity would submit EDNs and raw JSONs from the Get App API Response for both phase 1 and phase 2 Eligibility Results Toolkit test cases. A screenshot depicting the eligibility results page with correct eligibility results and EDN are provided for each test case. The eligibility results must not differ between the eligibility results page and the EDN, and every element of the eligibility results should be correctly represented.</i></p> <ul style="list-style-type: none"> ▪ A copy of the raw JSON from a Get App API Response for the application version depicted in the screenshots for each test case. ▪ CMS will review the eligibility results page and the EDN for the correct results for each applicant based on the Toolkits and consistent results between the eligibility results page and the EDN for the following elements: <ul style="list-style-type: none"> – Exchange OEP or SEP eligibility (QHP); – Advance payments of the premium tax credit (exact amount, if applicable); – CSRs; – Medicaid eligibility; – CHIP eligibility; – SVIs; and ▪ Non-MAGI Medicaid Referral.
API Functional Integration Toolkit	<ul style="list-style-type: none"> ▪ Correct results and successful completion of each test case is documented. <ul style="list-style-type: none"> – If an EDE Entity will pursue approval to use both the Consumer pathway and the Agent and Broker pathway, the submission must include documentation reflecting the expected results for each pathway. In other words, the EDE Entity must complete the full test case in both the Agent/Broker and Consumer pathways and submit the required documentation for each pathway. The EDE Entity may not use evidence from one pathway to satisfy the evidence for the other pathway (e.g., using screenshots or API calls from the Consumer pathway application to satisfy the requirement for the Agent/Broker pathway), if the EDE Entity must provide evidence for both pathways. ▪ Successful completion of the DMI and SVI test cases consistent with the Toolkit's instructions. ▪ Complete submission of all required evidence outlined in the "Required Evidence" column, Column H, on the "Test Cases" tab within the API Functional Integration Toolkit, including the complete header and body for each required API request and response. <ul style="list-style-type: none"> – JSONs and XML files submitted as required evidence for a Test Case must be raw and unmodified by the EDE Entity.
EDE Business Audit Report Template	<ul style="list-style-type: none"> ▪ Complete descriptions of each requirement; Auditors must not exclude required review criteria from their review and description of each requirement (e.g., the Requirement and Review Standard criteria for each business requirement).
PY 2023 DE Entity Documentation Package	<ul style="list-style-type: none"> ▪ CMS requires that the prospective EDE Entity submit a complete PY 2023 DE Entity Documentation Package. While the prospective EDE Entity may need to re-submit documentation during EDE Agreement Renewal or prior to approval, CMS requires a complete PY 2023 DE Entity Documentation Package at audit submission to review the documentation for compliance.

An incomplete business requirements audit is an audit that does not meet the criteria described above. The Auditor must take the appropriate actions to complete the incomplete audit and the prospective EDE Entity must resubmit it, as applicable. Please review Section X.B, Audit Submission, of the Guidelines, for more information.

CMS will conduct an initial high-level review of all audit submissions in the order they are received and based on available resources. If a prospective EDE Entity submits an incomplete audit, CMS will communicate the missing elements to the Entity based on the initial high-level review and the audit will be removed from the audit review queue. The Entity may receive

multiple rounds of feedback from CMS on its business requirement audit. It may take several weeks to resolve all missing elements prior to CMS accepting an Entity’s audit submission. Consistent with the deadlines in Section X.B, Audit Submission, of the Guidelines, CMS will require that missing elements of incomplete audits be resubmitted by the EDE Entity or its Auditor, when an Auditor’s re-evaluation is specifically required by CMS and CMS will prioritize its review of these resubmitted audits based on the date the complete audit is submitted.

Audits should not include comments that describe the Auditor’s process for verifying the requirement unless there is a specific issue or concern with respect to the requirement that warrants raising the concern to CMS.

2.0 Business Requirements Audit Report Template (to be completed by Auditor)

The review categories for the business operational readiness review are listed below, along with the corresponding toolkit that should be reviewed. In some cases, the toolkit does not cover the full requirement, so the Auditor must review each review category requirement in full (see Appendix A). Auditors must ensure the prospective EDE Entity is compliant with the specific requirements for each review category in Appendix A.

Please note, for those approved EDE Entities requesting Phase Change Requests, the Auditor must audit a CMS-defined subset of requirements. Please refer to Section XI.A.ii, EDE Entity-initiated EDE Phase Change Requests, of the Guidelines for more information on changing phases.

Please fill in the information requested below:

- EDE Entity Point of Contact (POC) and Email: [insert prospective EDE Entity POC and Email]
- Auditor Name: [insert Auditor Company Name]
- Auditor POC and Email: [insert Auditor POC and email]

2.1 Review Category #1: Consumer Identity Proofing Implementation

1. List all identified risks and mitigation strategies associated with this review category, and not already explained in the toolkit, in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
[insert Risk]	[insert Risk Level (low /high)]	[insert Mitigation Strategy]	[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert Notes]

3. Compliance Determination: [insert Compliance Determination]

2.2 Review Category #2: Agent and Broker Identity Proofing Verification

1. List identified risks and mitigation strategies associated with this review category, and not already explained in the toolkit, in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
	[insert Risk Level (low /high)]		[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert notes]

3. Compliance Determination: [insert Compliance Determination]

2.3 Review Category #3: Phase-dependent Screener Questions (EDE Phase 1 and 2 EDE Entities Only) (Corresponding Toolkit: Application UI)

1. List all identified risks and mitigation strategies associated with this review category, and not already explained in the toolkit, in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
	[insert Risk Level (low /high)]		[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert notes]

3. Compliance Determination: [insert Compliance Determination]

2.4 Review Category #4: Accurate and Streamlined Eligibility Application User Interface (UI) (Corresponding Toolkit: Application UI)

1. List all identified risks and mitigation strategies associated with this review category, and not already explained in the toolkit, in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
	[insert Risk Level (low /high)]		[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert notes]

3. Compliance Determination: [insert Compliance Determination]

2.5 Review Category #5: Post-Eligibility Application Communications (Corresponding Toolkit: Communications)

1. List all identified risks and mitigation strategies associated with this review category, and not already explained in the toolkit, in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
	[insert Risk Level (low /high)]		[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert Notes]

3. Compliance Determination: [insert Compliance Determination]

2.6 Review Category #6: Accurate Information about the Exchange and Consumer Communications (Corresponding Toolkit: Communications)

1. List all identified risks and mitigation strategies associated with this review category, and not already explained in the toolkit, in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
	[insert Risk Level (low /high)]		[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert notes]

3. Compliance Determination: [insert Compliance Determination]

2.7 Review Category #7: Documentation of Interactions with Consumer Applications or the Exchange

1. List all identified risks and mitigation strategies associated with this review category, and not already explained in the toolkit, in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
	[insert Risk Level (low /high)]		[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert notes]

3. Compliance Determination: [insert Compliance Determination]

2.8 Review Category #8: Eligibility Results Testing and SES Testing (Corresponding Toolkit: Eligibility Results)

1. List all identified risks and mitigation strategies associated with this review category in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
	[insert Risk Level (low/high)]		[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert notes]

3. Compliance Determination: [insert Compliance Determination]

2.9 Review Category #9: API Functional Integration Requirements (Corresponding Toolkit: API Functional Integration)

1. List all identified risks and mitigation strategies associated with this review category in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
	[insert Risk Level (low/high)]		[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert notes]

3. Compliance Determination: [insert Compliance Determination]

2.10 Review Category #10: Application UI Validation (Corresponding Toolkit: Application UI)

1. List all identified risks and mitigation strategies associated with this review category in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
	[insert Risk Level (low/high)]		[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert Notes]

3. Compliance Determination: [insert Compliance Determination]

2.11 Review Category #11: Section 508-compliant UI

1. List identified risks and mitigation strategies associated with this review category, and not already explained in the toolkit, in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
	[insert Risk Level (low/high)]		[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert Notes]

3. Compliance Determination: [insert Compliance Determination]

2.12 Review Category #12: Non-English-language Version of the Application UI and Communication Materials (Corresponding Toolkits: Communications and Application UI)

1. List identified risks and mitigation strategies associated with this review category, and not already explained in the toolkit, in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
	[insert Risk Level (low /high)]		[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert Notes]

3. Compliance Determination: [insert Compliance Determination]

2.13 Review Category #13: EDE Change Management Process

1. List identified risks and mitigation strategies associated with this review category, and not already explained in the toolkit, in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
	[insert Risk Level (low /high)]		[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert Notes]

3. Compliance Determination: [insert Compliance Determination]

2.14 Review Category #14: Health Reimbursement Arrangement (HRA) Offer Required UI Messaging (if applicable)

1. List identified risks and mitigation strategies associated with this review category, and not already explained in the toolkit, in the table below.

Risks Identified	Risk Level	Risk Mitigation Strategy	Estimated Resolution Date
	[insert Risk Level (low /high)]		[insert estimated date that prospective EDE Entity will resolve risk]

2. Notes: [insert Notes]

3. Compliance Determination: [insert Compliance Determination]

Appendix A - Auditor Review Standards

The specific requirements for each review category are summarized in Exhibit 5.

Exhibit 5. EDE Business Requirements Table

Review Category	Requirement and Audit Standard
Consumer Identity Proofing Implementation	<ul style="list-style-type: none"> ▪ <i>Requirement:</i> The EDE Entity must conduct identity proofing (ID proofing) for Consumers entering the EDE pathway for enrollments through both Consumer and in-person Agent and Broker pathways.⁶⁴ The EDE Entity must conduct ID proofing prior to submitting a Consumer’s application to the Exchange. If an EDE Entity is unable to complete ID proofing of the Consumer, the EDE Entity may either direct the Consumer to the classic DE (i.e., double-redirect) pathway or direct the Consumer to the Exchange (HealthCare.gov or the Exchange Call Center at 1-800-318-2596 [TTY: 1-855-889-4325]). <ul style="list-style-type: none"> – <u>Remote ID Proofing/Fraud Solutions Archive Reporting Services (RIDP/FARS) or Third-Party ID Proofing Service:</u> CMS will make the Exchange RIDP and FARS services available for the EDE Entity to use when remote ID proofing consumers for the Consumer pathway (i.e., when a consumer is interacting directly with the EDE environment without the assistance of an individual agent or broker). If an EDE Entity uses the Exchange RIDP service, it must use the RIDP service only after confirming the Consumer is seeking coverage in a state supported by the Exchange/Federal Platform, and only after confirming the consumer is eligible for the EDE Entity’s chosen phase. However, CMS does not require that EDE Entities use the Exchange RIDP and FARS services, specifically, to complete ID proofing. An EDE Entity may instead opt to use a third-party <u>ID proofing service</u> for ID proofing in the consumer pathway. If an EDE Entity uses a third-party identity proofing service, the service must be Federal Identity, Credential, and Access Management (FICAM) Trust Framework Solutions (TFS)-approved, and the EDE Entity must be able to produce documentary evidence that each Applicant has been successfully <u>ID proofed</u>. Documentation related to a third-party service could be requested in an audit or investigation by CMS (or its designee), pursuant to the EDE Business Agreement. Applicants do not need to be ID proofed on subsequent interactions with the EDE Entity if the Applicant creates an account (i.e., username and password) on the EDE Entity’s website, and the EDE Entity tracks that ID proofing has occurred when the Applicant’s account was created. – <u>Manual ID Proofing in the In-Person Agent and Broker Pathway:</u> EDE Entities may also offer a manual ID proofing process. Consumers being ID proofed in the in-person Agent and Broker pathway (i.e., when an Agent or Broker is working with a consumer and conducting ID proofing in-person, rather than remotely) must be ID proofed following the guidelines outlined in the document “Acceptable Documentation for Identity Proofing” available on CMS zONE (https://zone.cms.gov/document/api-information). – For the Consumer pathway, the EDE Entity must provide the User ID of the requester in the header for each EDE API call. For the Consumer pathway, the User ID should be the User ID for the Consumer’s account on the EDE Entity’s site, or some other distinct identifier the EDE Entity assigns to the Consumer. – Additionally, if an EDE Entity is using the Fetch Eligibility API, the same User ID requirements apply. However, instead of sending the User ID via the header, the User ID will be provided in the request body via the following path: ExchangeUser/ExchangeUserIdentification/IdentificationID. ▪ <i>Review Standard:</i> <ul style="list-style-type: none"> – If an EDE Entity uses the Exchange RIDP service, the Auditor must verify that the EDE Entity has successfully passed testing with the Hub.⁶⁵ – If an EDE Entity uses a third-party ID proofing service, the Auditor must evaluate and certify the following: <ul style="list-style-type: none"> ○ The ID proofing service is FICAM TFS-approved, and ○ The EDE Entity has implemented the service correctly. – If an EDE Entity offers a Manual ID proofing option for an in-person Agent and Broker pathway, the Auditor must verify that the EDE Entity requires Agents and Brokers to ID proof consumers as described in the “Acceptable Documentation for Identity Proofing” document. – EDE Entity’s inclusion of the appropriate Consumer User ID fields in the EDE and Fetch Eligibility API calls.

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Review Category	Requirement and Audit Standard
Agent and Broker Identity Proofing Verification	<ul style="list-style-type: none"> ▪ <i>Requirement:</i> If an EDE Entity is implementing an Agent and Broker pathway for its EDE environment, the EDE Entity must implement Agent and Broker ID proofing verification procedures that consist of the following requirements: <ul style="list-style-type: none"> – EDE Entity must integrate with IDM-Okta[®] and provide the User ID of the requester and IDM-Okta token in the header for each EDE API call. For Agents and Brokers, the User ID must exactly match the Exchange User ID (i.e. the Agent's or Broker's portal.cms.gov User ID) for the Agent or Broker, or the request will fail Exchange User ID validation. <ul style="list-style-type: none"> ○ The same User ID requirements apply to the Fetch Eligibility and Submit Enrollment APIs. However, instead of sending the User ID via the header, the User ID will be provided in the request body via the following path: ExchangeUser/ExchangeUserIdentification/IdentificationID. – EDE Entity must ID proof all Agents and Brokers prior to allowing the Agents and Brokers to use its EDE environment. EDE Entity may conduct ID proofing in one of the following ways: <ul style="list-style-type: none"> ○ Use the Exchange-provided RIDP/FARS APIs to remotely ID proof Agents and Brokers; OR ○ Manually ID proof Agents and Brokers following the guidelines outlined in the document “Acceptable Documentation for Identity Proofing” available on CMS zONE EDE webpage (https://zone.cms.gov/document/api-information). ○ EDE Entities are permitted to use manual ID proofing as an alternative for Agents and Brokers that cannot be ID proofed via the RIDP/FARS services. – EDE Entity must validate an Agent's or Broker's National Producer Number (NPN) using the National Insurance Producer Registry (https://www.nipr.com) prior to allowing the Agent or Broker to use its EDE environment. – EDE Entity must systematically provide an Agent and Broker ID proofing process—that meets all of the requirements defined here—that applies to all downstream Agents and Brokers of the primary EDE Entity. – Additionally, all Agent and Broker users of an upstream EDE Entity's EDE website (hosted by a primary EDE Entity) must be ID proofed consistent with these requirements. The primary EDE Entity may provide one centralized ID proofing approach for any Agents and Brokers that will use the primary EDE Entity's EDE environment (including when utilized by upstream EDE Entities and their downstream Agents and Brokers). <ul style="list-style-type: none"> ○ Alternatively, the upstream EDE Entity may conduct its own ID proofing process of its downstream Agents and Brokers consistent with these requirements. The upstream EDE Entity must provide the information for Agents and Brokers that have passed and failed ID proofing to the primary EDE Entity using a secure data transfer. If an upstream EDE Entity wants to pursue this flexibility, its ID proofing process must be audited by an Auditor consistent with these standards and the arrangement will be considered a hybrid arrangement. – Note: If a primary EDE Entity does not provide a centralized process for ID proofing an upstream EDE Entity's downstream Agent and Broker and if the primary EDE Entity intends to provide the EDE environment to upstream EDE Entities, the upstream EDE Entities will be required to provide documentation of an Auditor's evaluation of its ID proofing approach consistent with these standards. This process must be categorized as an EDE Entity-initiated Change Request (Section XI.A, EDE Entity-initiated Change Requests) if it occurs after the primary EDE Entity's initial audit submission and the arrangement with the upstream EDE Entity will be considered a hybrid arrangement. – All Agents and Brokers that will use EDE must be ID proofed consistent with these standards. This includes downstream Agents and Brokers of primary EDE Entities and upstream EDE Entities. The Auditor must evaluate the primary EDE Entity's centralized implementation for ID proofing (if applicable) or the upstream EDE Entity's implementation for ID proofing (if applicable).

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Review Category	Requirement and Audit Standard
Agent and Broker Identity Proofing Verification (continued)	<ul style="list-style-type: none"> – EDE Entity is strongly encouraged to implement multi-factor authentication for Agents and Brokers that is consistent with NIST SP 800-63-3. ▪ <i>Review Standard:</i> The Auditor must verify and certify the following: <ul style="list-style-type: none"> – EDE Entity’s inclusion of the appropriate Agent and Broker User ID and IDM-Okta token fields in the EDE and Fetch Eligibility and Submit Enrollment API calls. – EDE Entity’s process for ID proofing an Agent or Broker prior to allowing an Agent or Broker to use its EDE environment. – EDE Entity’s process for validating an Agent’s or Broker’s NPN using the National Insurance Producer Registry prior to allowing an Agent or Broker to use its EDE environment. – EDE Entity’s process for systematically providing an Agent and Broker ID proofing approach for all downstream Agents and Brokers of the EDE Entity and, if applicable, any upstream EDE Entities. <ul style="list-style-type: none"> ○ If the primary EDE Entity has not provided a centralized ID proofing approach to an upstream EDE Entity, primary EDE Entity’s process for verifying that an upstream EDE Entity has conducted appropriate ID proofing, consistent with this requirement, for all of the upstream EDE Entity’s downstream Agents and Brokers prior to those Agents and Brokers being able to use the primary EDE Entity’s EDE environment.
Phase-dependent Screener Questions (EDE Phase 1 and 2 EDE Entities Only)	<ul style="list-style-type: none"> ▪ Requirement: An EDE Entity that implements either EDE Phase 1 or Phase 2 must implement screening questions to identify Consumers whose eligibility circumstances the EDE Entity is unable to support consistent with the eligibility scenarios supported by the EDE Entity’s selected EDE phase. These phase-dependent screener questions must be located at the beginning of the EDE application, but may follow the QHP plan compare experience. For those Consumers who won’t be able to apply through scenarios covered by the EDE phase that the EDE Entity implements, the EDE Entity must either route the Consumer to the classic DE double-redirect pathway or direct the Consumer to the Exchange by providing the following options: HealthCare.gov or the Exchange Call Center at 1-800-318-2596 [TTY: 1-855-889-4325]. ▪ <i>Review Standard:</i> The Auditor must verify the following: <ul style="list-style-type: none"> – The EDE Entity has implemented screening questions—consistent with the requirements in the Exchange Application UI Principles document and Application UI Toolkit—to identify Consumers with eligibility scenarios not supported by the EDE Entity’s EDE environment and selected EDE phase. – The EDE Entity’s EDE environment facilitates moving Consumers to one of the alternative enrollment pathways described immediately above.
Accurate and Streamlined Eligibility Application User Interface (UI)	<ul style="list-style-type: none"> ▪ <i>Requirement:</i> EDE Entities using the EDE pathway must support all application scenarios outlined in EDE Entity’s selected EDE phase. The EDE Entity must adhere to the guidelines set forth in the FFE Application UI Principles document when implementing the application. EDE Entities can access the FFE Application UI Principles document on CMS zONE (https://zone.cms.gov/document/eligibility-information). Auditors will need to access the FFE Application UI Principles document to conduct the audit. <ul style="list-style-type: none"> – As explained in the FFE Application UI Principles document, the EDE Entity must implement the application in accordance with the Exchange requirements. For each supported eligibility scenario, the EDE Entity must display all appropriate eligibility questions and answers, including all questions designated as optional. (Note: These questions are optional for the Consumer to answer, but are not optional for EDE Entities to implement.) The FFE Application UI Principles document and Application UI Toolkit define appropriate flexibility EDE Entities may implement with respect to question wording, question order or structure, format of answer choices (e.g., drop-down lists, radio buttons), and integrated help information (e.g., tool tips, URLs, help boxes). In most cases, answer choices, question logic (e.g., connections between related questions), and disclaimers (e.g., APTC attestation) must be identical to those of the Exchange.

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Review Category	Requirement and Audit Standard
<p>Accurate and Streamlined Eligibility Application User Interface (UI) (continued)</p>	<ul style="list-style-type: none"> ○ Note: The phrase “supported eligibility scenario” does not refer to the Eligibility Results Toolkit scenarios. Auditors must verify that EDE Entities can support all scenarios supported by the EDE Entity’s selected phase and this exceeds the scope of the test cases in the Eligibility Results Toolkits. – EDE Entities will also need to plan their application’s back-end data structure to ensure that attestations can be successfully submitted to Standalone Eligibility Service (SES) APIs at appropriate intervals within the application process and that the EDE Entity can process responses from SES and integrate them into the UI question flow logic, which is dynamic for an individual Consumer based on his or her responses. The EDE Entity will need to ensure that sufficient, non-contradictory information is collected and stored such that accurate eligibility results will be reached without any validation errors. – Review <i>Standard</i>: The Auditor must review and certify the following: – The FFE Application UI has been implemented in EDE Entity’s environment in accordance with the Exchange Application UI Principles document. – The FFE Application UI displays all appropriate eligibility questions and answers from the Application UI Toolkit, including any questions designated as optional. – The Auditor will review the application for each supported eligibility scenario under the phase the EDE Entity has implemented to confirm that the application has been implemented in accordance with the FFE Application UI Principles document and Application UI Toolkit. The Auditor will document this compliance in the Application UI Toolkit. – Note: The phrase “supported eligibility scenario” does not refer to the Eligibility Results Toolkit scenarios. Auditors must verify that EDE Entities can support all scenarios supported by the EDE Entity’s selected phase and this exceeds the scope of the test cases in the Eligibility Results Toolkits. – If EDE Entity has implemented Phase 1 or Phase 2, the Auditor will confirm that the UI includes a disclaimer stating that the environment does not support all application scenarios, and identifying which scenarios are and are not supported. The disclaimer should direct the Consumer to alternative pathways, such as the classic DE double-redirect pathway or direct the Consumer to the Exchange (HealthCare.gov or the Exchange Call Center at 1-800-318-2596 (TTY: 1-855-889-4325)). This requirement is included in the Communications Toolkit.
<p>Post-eligibility Application Communications</p>	<ul style="list-style-type: none"> ▪ Requirement: The EDE environment must display high-level eligibility results, next steps for enrollment, and information about each Applicant’s insurance affordability program eligibility (e.g., APTC, CSR, Medicaid, and/or CHIP eligibility), Data Matching Issues (DMIs), special enrollment periods (SEPs), SEP Verification Issues (SVIs), and enrollment steps in a clear, comprehensive and Consumer-friendly way. Generally, CMS’s Communications Toolkit constitutes the minimum post-eligibility application communications requirements that an EDE Entity must provide to users of the EDE environment; CMS does not intend for the Communications Toolkit requirements to imply that EDE Entities are prohibited from providing additional communications or functionality, consistent with applicable requirements. <ul style="list-style-type: none"> – EDE Entity must provide Consumers with required UI messaging tied to API functionality and responses as provided in the EDE API Companion Guide67. – EDE Entity must provide Consumers with the CMS-provided Eligibility Determination Notices (EDNs) generated by the Exchange any time it submits or updates an application pursuant to requirements provided by CMS in the Communications Toolkit. – EDE Entity must provide the EDN in a downloadable format at the time the Consumer’s application is submitted or updated and must have a process for providing access to the Consumer’s most recent EDN via the API as well as providing access to the Consumer’s historical notices—accessed via the Notice Retrieval API by the EDE Entity’s EDE environment—within the UI. The UI requirements related to accessibility of a Consumer’s EDN are set forth in the Communications Toolkit.

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Review Category	Requirement and Audit Standard
Post-eligibility Application Communications (continued)	<ul style="list-style-type: none"> – EDE Entities are not required to store notices downloaded from the Exchange. EDE Entities must use the Metadata Search API and the Notice Retrieval API to generate the most recent Exchange notices when Consumers act to view/download notices consistent with the Communications Toolkit. EDE Entities must also provide access to view/download historical notices in their UIs. – EDE Entity must provide and communicate status updates and access to information for Consumers to manage their applications and coverage. These communications include, but are not limited to, status of DMIs and SVIs, enrollment periods (e.g., SEP eligibility and the OEP), providing and communicating about new notices generated by the Exchange, application and enrollment status, and supporting document upload for DMIs and SVIs. This requirement is detailed in the Communications Toolkit. – EDE Entity must provide application and enrollment management functions for the Consumer in a clear, accessible location in the UI (e.g., an account management hub for managing all application- and enrollment-related actions). – For any Consumers enrolled, including via the Agent and Broker pathway, the EDE Entity must provide critical communications to Consumers notifying them of the availability of Exchange-generated EDNs, critical communications that the Consumer will no longer receive from the Exchange (i.e., if the EDE Entity has implemented and been approved by CMS to assume responsibility for those communications), and any other critical communications that an EDE Entity is providing to the Consumer in relation to the Consumer’s application or enrollment status. – All EDE Entities, regardless of phase, must provide consumers with status updates and document upload capabilities for all DMIs and SVIs. Even if an EDE Entity’s chosen eligibility application phase does not support the questions necessary to reach a certain DMI or SVI, the post-application and post-enrollment functionality must support any consumer with any DMI or SVI; post-application and post-enrollment DMI and SVI management is not dependent on the EDE Entity’s chosen eligibility application phase. ▪ <i>Review Standard:</i> The Auditor must verify and certify the following: <ul style="list-style-type: none"> – The EDE Entity’s EDE environment is compliant with the requirements contained in the Communications Toolkit and API Companion Guide. – The EDE Entity’s EDE environment notifies Consumers of their eligibility results prior to QHP enrollment, including when submitting a CiC in the environment. For example, if a Consumer’s APTC or CSR eligibility changes, EDE Entity must notify the Consumer of the change and allow the Consumer to modify his or her QHP selection (if SEP-eligible) or APTC allocation accordingly. – EDE Entity must have a process for providing Consumers with a downloadable EDN in its EDE environment and for providing access to a current EDN via the API. EDE Entity must share required eligibility information that is specified by CMS in the Communications Toolkit. – The Auditor must verify that EDE Entity’s EDE environment is providing status updates and ongoing communications to Consumers according to CMS requirements in the Communications Toolkit as it relates to the status of their application, eligibility, enrollment, notices, and action items the Consumer needs to take. – The EDE Entity must provide application and enrollment management functions for the Consumer in a clear, accessible location in the UI. – The EDE Entity must have a means for providing critical communications to the Consumer consistent with the standards above. – The EDE Entity must support all DMIs and SVIs in its post-eligibility application and post-enrollment functionality.

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Review Category	Requirement and Audit Standard
Accurate Information about the Exchange and Consumer Communications	<ul style="list-style-type: none"> ▪ <i>Requirement:</i> EDE Entity must provide Consumers with CMS-provided language informing and educating the Consumers about the Exchanges and HealthCare.gov and Exchange-branded communications Consumers may receive with important action items. CMS defines these requirements in the Communications Toolkit. ▪ <i>Review Standard:</i> The Auditor must verify and certify that the EDE Entity's EDE environment includes all required language, content, and disclaimers provided by CMS in accordance with the standards stated in guidance and the Communications Toolkit.
Documentation of Interactions with Consumer Applications or the Exchange	<ul style="list-style-type: none"> ▪ <i>Requirement:</i> EDE Entity must implement and maintain tracking functionality on its EDE environment to track Agent, Broker, and Consumer interactions, as applicable, with Consumer applications using a unique identifier for each individual, as well as an individual's interactions with the Exchanges (e.g., application; enrollment; and handling of action items, such as uploading documents to resolve a DMI). This requirement also applies to any actions taken by a downstream Agent or Broker,⁶⁸ as well as the upstream EDE Entity users, of a primary EDE Entity's EDE environment. ▪ <i>Review Standard:</i> The Auditor must verify EDE Entity's process for determining and tracking when an upstream EDE Entity, downstream Agent or Broker, and Consumer has interacted with a Consumer application or taken actions utilizing the EDE environment or EDE APIs. The Auditor must verify and certify the following: <ul style="list-style-type: none"> – The EDE Entity's environment tracks, at a minimum, the interactions of upstream EDE Entities, downstream Agents or Brokers, and Consumers with a Consumer's account, records, application, or enrollment information utilizing the EDE environment or EDE APIs. – The EDE Entity's environment tracks when an upstream Entity, downstream Agent or Broker, or Consumer views a Consumer's record, enrollment information, or application information utilizing the EDE environment or EDE APIs. – The EDE Entity's environment uses unique identifiers to track and document activities by Consumers, downstream Agents and Brokers, and upstream EDE Entities using the EDE environment. – The EDE Entity's environment tracks interactions with the EDE suite of APIs by an upstream EDE Entity, a downstream Agent or Broker, or Consumer. – The EDE Entity's environment stores this information for 10 years.
Eligibility Results Testing and SES Testing	<ul style="list-style-type: none"> ▪ <i>Requirement:</i> EDE Entity must submit accurate applications through its EDE environment that result in accurate and consistent eligibility determinations for the supported eligibility scenarios covered by EDE Entity's chosen EDE phase. <ul style="list-style-type: none"> – The business requirements audit package must include testing results in the designated Exchange EDE testing environment. CMS has provided a set of Eligibility Results Toolkits with the eligibility testing scenarios on CMS zONE https://zone.cms.gov/document/business-audit. ▪ <i>Review Standard:</i> The Auditor must verify and certify the following: <ul style="list-style-type: none"> – The Auditor was able to successfully complete a series of test eligibility scenarios in the EDE Entity's EDE environment implementation using the Eligibility Results Toolkits. For example, these scenarios may include Medicaid and CHIP eligibility determinations, and different combinations of eligibility determinations for APTC and CSRs. Note: These scenarios do not test, and are not expected to test, every possible question in the Application UI flow for an EDE Entity's selected phase. In addition to reviewing the eligibility results test cases, the Auditor must review the Application UI for compliance as defined above. – The Auditor must test each scenario and verify that the eligibility results and the eligibility process were identical to the expected results and process. The Auditor must provide CMS confirmation that each relevant eligibility testing scenario was successful, that the expected results were received, and must submit the required proof, as defined in the Eligibility Results Toolkits. This will include screenshots, EDNs, and the raw JSON from the Get App API response for the application version used to complete the scenario. Note: EDNs and raw JSONs are required for all required toolkit scenarios; however, screenshots are only required for the highest phase an entity is submitting (for example, a prospective phase 3 EDE Entity must submit screenshots for the Phase 3 Eligibility Results Toolkit only, but must submit EDNs and raw JSONs for applicable Phase 1, Phase 2, and Phase 3 toolkit scenarios).

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Review Category	Requirement and Audit Standard
API Functional Integration Requirements	<ul style="list-style-type: none"> ▪ <i>Requirement:</i> EDE Entity must implement the EDE API suite and corresponding UI functionality in accordance with the API specifications and EDE API Companion Guide provided by CMS. The EDE API specifications and EDE API Companion Guide are available on CMS zONE (https://zone.cms.gov/document/api-information). ▪ <i>Review Standard:</i> The Auditor must complete the set of test scenarios as outlined in the API Functional Integration Toolkit to confirm that the EDE Entity’s API and corresponding UI integration performs the appropriate functions when completing the various EDE tasks. For example, the Auditor may have to complete a scenario to verify that a Consumer or Agent and Broker is able to view any SVIs or DMIs that may exist for a consumer, and confirm that the Consumer or Agent and Broker has the ability to upload documents to resolve any SVIs or DMIs. Some of the test cases require that the Auditor and EDE Entity request CMS to process adjudication actions; the Auditor cannot mark these particular test cases as compliant until evaluating whether the expected outcome occurred after CMS takes the requested action. The Auditor will also need to be aware of the following requirements related to the test scenarios: <ul style="list-style-type: none"> – Test scenarios in the API Functionality Integration Toolkit must be completed for both the Consumer pathway and the Agent and Broker pathway if an EDE Entity is pursuing approval to use both pathways. – The API Functional Integration Toolkit includes a “Required Evidence” column, Column H, on the “Test Cases” tab. Auditors will need to submit the applicable “Required Evidence,” including the complete header and body for each required API request and response, as part of the audit submission.
Application UI Validation	<ul style="list-style-type: none"> ▪ <i>Requirement:</i> EDE Entity must implement CMS-defined validation requirements within the application. The validation requirements prevent EDE Entity from submitting incorrect data to the Exchange. ▪ <i>Review Standard:</i> The Auditor must confirm that EDE Entity has implemented the appropriate application field-level validation requirements consistent with CMS requirements. These field-level validation requirements are documented in the FFE Application UI Principles document.
Section 508-compliant UI	<ul style="list-style-type: none"> ▪ <i>Requirement:</i> Pursuant to 45 C.F.R. § 155.220(c)(3)(ii)(D) (citing 45 C.F.R. §§ 155.230 and 155.260(b)) and 45 C.F.R. § 156.265(b)(3)(iii) (citing 45 C.F.R. §§ 155.230 and 155.260(b)), web-brokers and QHP issuers participating in DE, including all EDE Entities, must implement an eligibility application UI that is Section 508 compliant. A Section 508-compliant application must meet the requirements set forth under Section 508 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794(d)). ▪ <i>Review Standard:</i> The Auditor must confirm that EDE Entity’s application UI meets the requirements set forth under Section 508 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794(d)). The Auditor must verify and certify the following: <ul style="list-style-type: none"> – Within the Business Requirements Audit Report Template, the Auditor must confirm that the EDE Entity’s application UI is Section 508 compliant. No specific report or supplemental documentation is required. – The Auditor may review results produced by a 508 compliance testing tool. If an EDE Entity uses a 508 compliance testing tool to verify that its application UI is 508 compliant, its Auditor must, at a minimum, review the results produced by the testing tool and document any non-compliance, as well as any mitigation or remediation to address the non-compliance. It is not sufficient for an Auditor to state that an EDE Entity complies with this requirement by confirming that the EDE Entity utilized a 508 compliance testing tool.

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Review Category	Requirement and Audit Standard
Non-English-language Version of the Application UI and Communication Materials	<ul style="list-style-type: none"> ▪ <i>Requirement:</i> In accordance with 45 C.F.R. § 155.205(c)(2)(iv)(B) and (C), QHP issuers and web-brokers, including those that are EDE Entities, must translate applicable website content (e.g., the application UI) on Consumer-facing websites into any non-English language that is spoken by a limited English proficient (LEP) population that reaches ten (10) percent or more of the population of the relevant state, as determined in current guidance published by the Secretary of HHS.⁶⁹ EDE Entities must also translate communications informing Consumers of the availability of Exchange-generated EDNs; critical communications that the Consumer will no longer receive from the Exchange (i.e., if the EDE Entity has implemented and been approved by CMS to assume responsibility for those communications); and any other critical communications that an EDE Entity is providing to the Consumer in relation to the Consumer’s use of its EDE environment into any non-English language that is spoken by an LEP population that reaches ten (10) percent or more of the population of the relevant state, as determined in guidance published by the Secretary of HHS.⁷⁰ ▪ <i>Review Standard:</i> The Auditor must verify and certify the following: <ul style="list-style-type: none"> – The Auditor must confirm that the non-English-language version of the application UI and associated critical communications are compliant with the Exchange requirements, including the Application UI Toolkit and Communications Toolkit. – The Auditor must verify that the application UI has the same meaning as its English-language version. – The Auditor must also verify that EDE Entity has met all EDE communications translation requirements released by CMS in the Communications Toolkit. – The Auditor must document compliance with this requirement within the Business Requirements Audit Report Template, the Application UI Toolkit, and the Communications Toolkit. In the toolkits, the Auditor can add additional columns for the Auditor compliance findings fields (yellow-shaded columns) or complete the Spanish audit in a second copy of each of the two toolkits.
EDE Change Management Process	<ul style="list-style-type: none"> ▪ <i>Requirement:</i> EDE Entity must develop and consistently implement processes for managing changes to the EDE environment relevant to the business requirements audit requirements. This requirement does not replace the evaluation necessary for relevant privacy and security controls. At a minimum, the EDE Entity’s change management plan must include the following elements: <ul style="list-style-type: none"> – A process that incorporates all elements of the Change Notification SOP as referenced in Section XI.A.i, EDE Entity-initiated Change Request Process; – All application and business audit-related changes are thoroughly defined and evaluated prior to implementation, including the potential effect on other aspects of the EDE end-user experience; – A process for defining regression testing scope and developing or identifying applicable testing scenarios; – A process for conducting regression testing; – A process for identifying and correcting errors discovered through regression testing and re-testing the correction; – A process for maintaining separate testing environments and defining the purposes and releases for each environment; – The change management process must be maintained in writing and relevant individuals must be informed on the change management process and on any updates to the process; and – The change management process must include a process, if applicable, for an EDE Entity to update the non-English-language version of the application UI and communication materials for any changes to the application UI or communication materials in the English-language version of the EDE environment. ▪ <i>Review Standard:</i> The Auditor must evaluate the EDE Entity’s change management plan for compliance with the elements and criteria defined above.
Health Reimbursement Arrangement (HRA)	<ul style="list-style-type: none"> ▪ <i>Requirement:</i> Phase 3 EDE Entities, Phase 2 EDE Entities that optionally implement full HRA functionality, and EDE Entities that also offer a classic DE pathway, must implement required UI messaging for qualified individuals who have an HRA offer that is tailored to the type and affordability of the HRA offered to the qualified individuals consistent with CMS guidance. Required UI messaging

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Review Category	Requirement and Audit Standard
Offer Required UI Messaging	for various scenarios are detailed in the FFEs DE API for Web-brokers/Issuers Technical Specifications document. ⁷¹ <ul style="list-style-type: none"><li data-bbox="410 296 1430 390">▪ <i>Review Standard:</i> The Auditor must review the EDE Entity's HRA offer implementation to confirm that the required UI messaging content is displayed for each of the relevant scenarios detailed in the FFEs DE API for Web-brokers/Issuers Technical Specifications document.