

Four Quick Steps for Inclusion on the Essential Community Provider List¹

STEP 1: Determine if your Indian health care facility *wants* to be included on the HHS Essential Community Provider (ECP) List. Inclusion on the HHS ECP list means that:

- You want insurance companies operating on the Federally-facilitated Marketplace (FFM) to offer you a contract in good faith to participate in health plans as an "in-network" provider.
- Except in limited emergency circumstances, you are not required to provide health care to non-Indians at your facility if you accept a contract with an FFM issuer.
- You can change your mind and remove your facility from the ECP list if you wish to discontinue your provider participation on the Marketplace at a later time.

STEP 2: Determine if your provider facility *qualifies* for inclusion on the HHS ECP list. An Indian health care provider qualifies to be included on the ECP list if your provider facility:

- Accepts patients regardless of coverage source (e.g., Medicare, Medicaid, CHIP, private health insurance);
- Employs at least one practitioner holding one of the following licenses: MD, DO, PA, NP, DMD, or DDS;
- Submits an Essential Community Provider petition for inclusion on the HHS ECP List.

<u>STEP 3</u>: Complete the online Essential Community Provider petition, which can be found at the following link: https://data.healthcare.gov/cciio/ecp_petition. Detailed instructions are available within the "i" icon that appears next to each question within the petition. FAQs are available within the "Need Help" button at the bottom of the ECP petition by clicking on the hyperlinked word "here" in the pop-up window.

- CCIIO anticipates that it will publish the draft plan year (PY) 2018 ECP list for a 45-day public comment period in late August 2016 (comment period lasting from late August through early October).
- If you already submitted an ECP petition this past year and your facility appears on the draft PY 2018 ECP list, you do not need to submit another petition for inclusion on the final PY 2018 ECP list.
- If your facilty does *not* appear on the draft PY 2018 ECP list, complete the online ECP petition by early October 2016 for inclusion on the final PY 2018 ECP list (the precise deadline in early October will be announced with the release of the draft PY 2018 ECP list in late August 2016).
- How do you know if your facility appears on the draft PY 2018 ECP list?
 - Once the draft PY 2018 ECP list is published within the ECP petition in late August, check to see if your facility is included by visiting the petition website (https://data.healthcare.gov/cciio/ecp petition).
 - Go to question 6 and click on the button labeled "Check to see if your are on the list" to search for your facility on the list.
 - o If you are already on the list and need to update your data, select "change" in the drop-down menu under question 6. Find your row number on the list and enter your row number in question 7 of the petition. The petition will then auto-fill your data from your previous ECP petition submission. You can then update your information and submit your petition updates.
 - o If you do not yet appear on the list, select "add" in the drop-down menu under question 6 and complete the petition.
- You will need the following information to complete the ECP petition: your facility's National Provider Identifier, facility type, facility address and contact information, the number of full-time-equivalent (FTE) practitioners at your facility or hospital bed counts if you are an inpatient hospital facility.

STEP 4: Contact us with any questions at **EssentialCommunityProviders@cms.hhs.gov**.

¹ In accordance with section 1311(c)(1)(C) of the Affordable Care Act (ACA), Qualified Health Plans (QHPs), including Stand-alone Dental Plan (SADP) issuers, are required to include within their network essential community providers (ECPs), where available, that serve predominantly low-income, medically-underserved individuals. To satisfy this ECP requirement, QHP and SADP issuers must submit an ECP template as part of their QHP application, in which they must list the ECPs with whom they have contracted to provide health care services to low-income, medically underserved individuals in their service areas. HHS has compiled a list of available ECPs and updates this ECP list annually to assist issuers with identifying providers that qualify for inclusion in an issuer's plan network toward satisfaction of the ECP standard under 45 CFR 156.235.