

Migration from EDE to ARC-AMPE Assessment, Authorization, and Monitoring (CA) Controls

CMS requirements for Direct Enrollment Entities

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Purpose

This white paper provides a guide for Direct Enrollment Entities (DEEs) to upgrade their Enhanced Direct Enrollment (EDE) System Security and Privacy Plans (SSPPs) to the Acceptable Risk Controls for ACA, Medicaid, and Provider Entities (ARC-AMPE).

Due to the substantial number of controls, and to facilitate ease of use, this white paper is one of a series of 20 which divides the ARC-AMPE by control family. This white paper addresses the Assessment, Authorization, and Monitoring controls.

ARC-AMPE Control Families		
Control Family	Number of Controls	
Access Control	46	
Awareness and Training	9	
Audit and Accountability	18	
Assessment, Authorization, and Monitoring (This document)	12	
Configuration Management	25	
Contingency Planning	16	
Identification and Authentication	21	
Incident Response	15	
Maintenance	12	
Media Protection	8	
Physical and Environmental Protection	9	
Planning	6	
Program Management	5	
Personnel Security	8	
Personally Identifiable Information Processing and Transparency	10	
Risk Assessment	8	
System and Services Acquisition	18	
System and Communications Protection	28	
System and Information Integrity	30	
Supply Chain Risk Management	4	

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Background

Affordable Care Act

The Affordable Care Act (ACA) revolutionized access to healthcare in the United States by establishing Health Insurance Marketplaces (HIMs). Enhanced Direct Enrollment (EDE) is an ACA innovation that allows third-party entities, such as insurers and web-brokers, to offer consumers a seamless application and enrollment experience directly through their platforms. This approach improves accessibility to the marketplace while maintaining compliance with federal regulations.

Enhanced Direct Enrollment

Direct Enrollment (DE) is a service that allows approved Qualified Health Plan (QHP) issuers and third-party web-brokers (online insurance sellers) to enroll consumers in Exchange coverage, with or without the assistance of an agent/broker, directly from their websites.

The Enhanced Direct Enrollment (EDE) user experience goes well beyond the plan shopping and enrollment experience that is available via Classic DE. EDE is a service that allows approved EDE entities (e.g., QHP issuers and web-brokers approved to participate in EDE) to provide a comprehensive consumer experience including the eligibility application, Exchange enrollment, and post-enrollment year-round customer service capabilities for consumers and agents/brokers working on behalf of consumers, directly on issuer and web-broker websites. Through EDE, approved EDE Entities build and host a version of the HealthCare.gov eligibility application directly on their websites that securely integrates with a back-end suite of Federally Facilitated Exchanges (FFEs) application programing interfaces (APIs) to support application, enrollment and more.

Source: cms.gov

CMS oversight

The Centers for Medicare & Medicaid Services (CMS) exercises oversight of DEEs, which are responsible for overseeing and managing marketplace operations to ensure compliance with federal regulations, safeguard consumer data, and maintain the integrity of the HIM. Key aspects of CMS's oversight include:

- Requiring DEEs to undergo rigorous audit processes, including demonstrating compliance with security and privacy control requirements.
- Enforcing strict data protection measures in the DE environment to ensure the confidentiality, integrity, and availability of consumer data and requiring entities to implement cybersecurity controls, conduct regular risk assessments, and submit independent security audits.
- Requiring DEEs to adhere to operational policies and procedures, such as providing accurate plan information, maintaining transparent consumer interactions, and facilitating HIM enrollment without bias.
- Requiring DEEs to report any data breaches or system incidents promptly and to take corrective actions as directed by CMS and the U.S. Department of Health and Human Services (HHS) Office for Civil Rights (OCR).
- Requiring DEEs to renew their Authority to Connect (ATC) annually, providing updated documentation and evidence of continued compliance with all requirements.

Through these oversight mechanisms, CMS ensures that DEEs in the healthcare.gov environment deliver secure, compliant, and user-friendly services, aligning with the ACA's mission to expand access to quality health coverage.

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ARC-AMPE

CMS published the ARC-AMPE for Direct Enrollment Entities (DEEs) Version 1.0 dated July 7th, 2025. This framework replaces the EDE security and privacy guidelines:

- ARC-AMPE Volume 1 contains high-level guidance, and Volume 2 has the minimum-level security and privacy controls
- ARC-AMPE Volume 2 is the new format for the SSPP for DEEs.
- The compliance date for DEEs is June 2026.

The minimum control baseline for ARC-AMPE DEE compliance consists of 308 controls which have been derived from the National Institute of Standards and Technology (NIST) Special Publication (SP) 800-53 Revision 5, "Security and Privacy Controls for Information Systems and Organizations."

The number of controls required for the mandatory baseline represents a significant increase from the EDE baseline (295 controls), and DEEs should be prepared for an increased level of effort for developing the SSPP and submitting more artifacts during audits.

Another major change is the format of the SSPP template. EDE used a Microsoft Word format whereas ARC-AMPE is an Excel spreadsheet.

Control mapping

The mapping of the controls found in the EDE audit baseline (based on NIST SP 800-53 Revision 4) to their new locations in ARC-AMPE (based on NIST SP 800-53 Revision 5) are included in the table below. The table lists the EDE control directly compared with the ARC-AMPE equivalent control name, as applicable. The table also documents any new ARC-AMPE controls that do not have EDE equivalents, as well as those controls that have been combined or withdrawn for ARC-AMPE.

Note also that all references to NIST SP 800-53 Revision 5 included below are based on version 5.1.1, which was issued on November 7, 2023.

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Assessment, Authorization, and Monitoring (CA)

The set of controls in this family focus on how the Exchange shall: (1) periodically assess the security controls in Exchange IT systems to determine if the controls are effective in their application; (2) develop and implement plans of action designed to correct deficiencies and reduce or eliminate vulnerabilities in Exchange IT systems; (3) authorize the operation of Exchange IT systems and any associated IT system connections; and (4) monitor IT system security controls on an ongoing basis to ensure the continued effectiveness of the controls

EDE		ARC-AMPE		
	urity Assessment and Authorization cies and Procedures	Control	Policies and Procedures	
CA-1: Security As Procedures The organization: a. Develop applicab 1. 2. b. Reviews 1.	ssessment and Authorization Policies and	 CA-01: Policies and Procedures a. Develop, document, and disseminate to organization-defined personnel and roles: 1. Organization-level assessment, authorization, and monitoring policy that: (a) Addresses purpose, scope, roles, responsibility management commitment, coordination among organizational entities, and compliance; and (b) Is consistent with applicable laws, Executive Orders, directives, regulations, policies, standards and guidelines; and 2. Procedures to facilitate the implementation of the assessment, authorization, and monitoring policy the associated assessment, authorization, and monitoring controls; b. Designate an organization-defined official to manage development, documentation, and dissemination of the assessment, authorization, and monitoring policy and procedures; and c. Review and update the current assessment, authorization, and monitoring: 1. Policy at least every one (1) year and following 		
Control Se	curity Assessments	Control	Control Assessments	
describes 1. 2. 3. b. Assesses informatic every through the extern	s a security and privacy assessment plan that is the scope of the assessment including: Security and privacy controls and control enhancements under assessment; Assessment procedures to be used to determine control effectiveness; and Assessment environment, assessment team, and assessment roles and responsibilities; is the security and privacy controls in the on system and its environment of operation ee hundred sixty-five (365) days to determine int to which the controls are implemented, operating as intended, and producing the	a. Select the ty b. Deve scop 1. (a) 2. // 3. // c. Ensu approrepre d. Assecopera	Introl Assessments Introl Assessments Introl Assessment assessor or assessment team for type of assessment to be conducted; alop a control assessment plan that describes the ele of the assessment, including: Controls and control enhancements under assessment; Assessment procedures to be used to determine control effectiveness; and Assessment environment, assessment team, and assessment roles and responsibilities; are the control assessment plan is reviewed and by the Authorizing Official or designated assentative prior to conducting the assessment; assess the controls in the system and its environment of ation as specified in the supplemental control irrements & guidance to determine the extent to	

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EDE			ARC-AMPE
desired outcome with respect to meeting e security requirements; c. Produces an assessment report that docur results of the assessment; and d. Provides the results of the security and privassessment within thirty (30) days after its in writing, to the organizational official who responsible for reviewing the assessment documentation and updating system secur documentation where necessary to reflect changes to the system. Implementation Standards 1. An independent assessment of all security controls must be conducted before the organization official issues the authority to all newly implemented, or significantly char systems. 2. Information system security and privacy as should be conducted annually. These assess can be conducted by independent assessor performance of self-assessments against the information system. 3. The annual security and privacy assessments.	e. vacy control completion, is ity any and privacy anization's operate for nged, sessments assments are or by the he	which the controls are implemented correctly, operatin as intended, and producing the desired outcome with respect to meeting established security and privacy requirements; e. Produce a control assessment report that documents results of the assessment; and	
requirement requires all security and privace attributable to a system to be assessed.	cy controls		
Control Independent Assessors	Cont	rol	Independent Assessors
CA-2 (1): Independent Assessors The organization employs assessors or assessment teams with NIST-defined level of independence to conduct security and privacy control assessments of the organization's information system.		CA-02(01): Independent Assessors Employ independent assessors or assessment teams to conduct control assessments.	
Control System Interconnections	Cont	rol	Information Exchange
 CA-3: System Interconnections The organization: a. Authorizes connections from the organization information system to other information system to other information system to other information system to other information security agreements (ISA); b. Documents, for each interconnection, the incharacteristics, security requirements, and of the information communicated; and c. Reviews and updates the interconnection a on an ongoing basis to verify enforcement requirements; and; d. Establishes system-to-system connections through the CMS ISA process. e. Only activates a system interconnection (in 	a. on's stems Interface the nature b. agreements of security with CMS c.	between the system and other systems using interconnection security agreements (ISA), informa exchange security agreements, memoranda of understanding or agreement (MOU/MOA), service agreements (SLA), user agreements, nondisclosur agreements (NDA), or other exchange agreements. b. Document, as part of each exchange agreement, the interface characteristics, security and privacy requirements, controls, and responsibilities for each system, and the impact level of the information communicated; and	
testing) when a signed ISA is in place. Implementation Standards			

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EDE ARC-AMPE				ARC-AMPE	
1.	Reco	rd each system interconnection in the security	ARG-AMPE		
		for the system that is connected to the remote			
2.	the sy	SA is updated following significant changes to ystem, organization, or the nature of the ronic sharing of information that could impact the ty of the agreement.			
3.	any ir taking	SA must be fully signed and executed prior to nterconnection outside of the system boundary g place for any purpose (within the constraints of ontrol).			
Control		Restrictions on External System Connections	Control	N/A	
The organized security defined in transmit	anization plan a informa Persoi	rictions on External System Connections on employs, and documents, in the applicable "deny all, permit-by-exception" policy for allowing ation systems that receive, process, store, or nally Identifiable Information (PII) to connect to ation systems.	Withdrawn Control: Moved to SC-7(5).		
Control		Plan of Action and Milestones	Control	Plan of Action and Milestones	
b. Impleme	Deve for the final r test (of test) if action during reduce syste Upda findin secur analy entation ates vu 15) cale r days, d Lows	lops a plan of action and milestones (POA&M) e information system within thirty (30) days of the results for every internal/external audit/review or e.g., security controls assessment, penetration to document the organization's planned remedial as to correct weaknesses or deficiencies noted g the assessment of the security controls and to be or eliminate known vulnerabilities in the m; tes the existing POA&M monthly until all the gs are resolved based on the findings from rity controls assessments, security impact uses, and continuous monitoring activities. For Standard continuous monitoring activities and are days, High severity within thirty (30) Moderate severity within ninety (90) calendar severity within three hundred and sixty-five (365)	CA-05: Plan of Action and Milestones a. Develop a plan of action and milestones (POA&M) for the system to document the planned remediation actions of the organization to correct weaknesses or deficiencies noted during the assessment of the controls and to reduce or eliminate known vulnerabilities in the system; and b. Update existing POA&M in accordance with the frequency documented in the organization's Information Security Continuous Monitoring (ISCM) strategy based on the findings from control assessments, independent audits or reviews, and continuous monitoring activities.		
Control		Security Authorization	Control	Authorization	
The organized a. En au	anizationsures Insures uthoriz ommer Updates	y Authorization on: s that the organizational authorizing official tes the information system for processing before incing operations; and s the security authorization: Within every three (3) years;	CA-06: Authorization a. Assign a senior official as the Authorizing Official (AO) for the system; b. Assign a senior official as the AO for common controls available for inheritance by organizational systems; c. Ensure that, before commencing operations, the AO for the system:		

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EDE ARC-AMPE 2. When significant changes are made to the 1. Accepts the use of common controls inherited by the system: and Authorizes the system to operate; 3. When changes in requirements result in the need d. Ensure that the AO for common controls authorizes the to process data of a higher sensitivity; use of those controls for inheritance by organizational When changes occur to authorizing legislation or systems; and federal requirements; Update the authorizations consistent with the frequency After the occurrence of a serious security identified in the supplemental control requirements and violation which raises questions about the validity quidance. of an earlier security authorization; and 6. Prior to expiration of a previous security authorization. **c.** If the organization maintains a system-to-system connection with CMS through an executed ISA, the CMS-granted request to connect is updated: Every year or three hundred sixty-five days; 2. When significant changes are made to the system; 3. When changes in requirements result in the need to process data of a higher sensitivity; **4.** When changes occur to authorizing legislation or federal requirements; After the occurrence of a serious security violation which raises questions about the validity of an earlier security authorization; and Prior to expiration of a previous security authorization. Control Control **Continuous Monitoring Continuous Monitoring CA-7: Continuous Monitoring CA-07: Continuous Monitoring**

The organization develops a continuous monitoring strategy and implements a continuous monitoring program that

- Establishment of organizationally defined metrics (defined in the applicable security plan) to be monitored annually and in accordance with the basic requirements set forth in the Non-Exchange Entity Information Security and Privacy Continuous Monitoring Strategy Guide consistent with the NIST SP 800-137, and
- Establishment of defined frequencies (defined in the applicable security plan) for monitoring and defined frequencies (defined in the applicable security plan) for assessments supporting such monitoring;
- Ongoing security control assessments in accordance with the organizational continuous monitoring strategy;
- Ongoing security status monitoring of organizationally defined metrics in accordance with the organizational continuous monitoring strategy;
- Correlation and analysis of security-related information generated by assessments and
- Response actions to address results of the analysis of security-related information;

Develop a system-level continuous monitoring strategy and implement continuous monitoring in accordance with the organization-level continuous monitoring strategy that includes:

- Establishing the following system-level metrics to be monitored based on the organization security and privacy goals and in accordance with organization's Information Security Continuous Monitoring (ISCM) strategy;
- Establishing at least once a month scans for operating system, databases, and web applications for monitoring and no less than at least every one (1) year for assessment of control effectiveness;
- c. Ongoing control assessments in accordance with the continuous monitoring strategy;
- Ongoing monitoring of system and organization-defined metrics in accordance with the continuous monitoring strategy;
- Correlation and analysis of information generated by control assessments and monitoring;
- Response actions to address results of the analysis of control assessment and monitoring information; and
- Reporting the security and privacy status of the system to organization-defined personnel or roles consistent with the frequency in the applicable System Security and Privacy Plan (SSPP) but no less than at least every thirty (30) days (monthly).

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EDE		ARC-AMPE		
info	porting the security status of organization and the rmation system to defined personnel or roles fined in the applicable security plan) monthly; and			
h. Rep sys app free	porting the security status of organizational tems to defined personnel or roles (defined in the discable security plan) at organizational-defined quency, and reporting to CMS as specified in the dementation standard.			
Implementat	ion Standards			
insi mai	en subject to a legal investigation (e.g., of an der threat), continuous monitoring records must be ntained until released by the investigating nority.			
	nitor systems, appliances, devices, and lications (including databases).			
3. Ider	ntify specific review requirements for the following:			
	a. Plan of Action and Milestones (POA&M) b. Reporting of significant changes to the			
	 Reporting of significant changes to the organizational information system environment 			
Control	Independent Assessment	Control	Independent Assessment	
The organizar a defined lever privacy control implementation assessment a	tion employs assessment teams with el of independence to monitor the security and ols in the information system on an ongoing basis. ion Standard on of independent security and privacy and the Security Assessment Report (SAR) follows	CA-07(01): Independent Assessment Employ independent assessors or assessment teams to monitor the controls in the system on an ongoing basis.		
CMS specific				
Control	N/A	Control	Risk Monitoring	
New NIST SP 800-53 Rev.5 Control and applicable to ARC-AMPE		CA-07(04): Risk Monitoring Ensure risk monitoring is an integral part of the continuous monitoring strategy that includes the following: a. Effectiveness monitoring; b. Compliance monitoring; and c. Change monitoring.		
Control	Penetration Testing	Control	Penetration Testing	
The organizar penetration to days, on defin (defined in the there has been minimum, per a. He pa b. The to c. Ad	tion Testing tion conducts both internal and external esting, within every three hundred sixty-five (365) ned information systems or system components e applicable system security plan), or whenever en a significant change to the system. At a netration testing must be conducted to determine: ow well the system tolerates real world-style attack atterns; ne likely level of sophistication an attacker needs successfully compromise the system; dditional countermeasures that could mitigate reats against the system; and	CA-08: Penetration Testing Conduct penetration testing at least every one (1) year on organization-defined systems or system components as agreed with the penetration testers in the Rules of Engagement.		

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	EDE		ARC-AMPE
1. (2. 1.	Defenders' ability to detect attacks and respond appropriately. Ition Standards Conduct internal and external penetration testing as needed but no less often than once every three nundred sixty-five (365) days. Penetration tests are performed when new risks and hreats potentially affecting the system/applications are identified and reported or upon request from CMS. Penetration testing on a production system must be conducted in a manner that minimized risk of information corruption or service outage.		
Control	Independent Penetration Agent or Team	Control	Independent Penetration Testing Agent or Team
The organize penetration information information. Implementa The indepen	dependent Penetration Agent or Team ation employs an independent penetration agent or team to perform penetration testing on the system or system components. Ation Standard Ident penetration agent or penetration team must be tion CISO approved independent penetration test	perform penetration testing on the system or system components.	
Control	Internal System Connections	Control	Internal System Connections
The organization of the control of t	Authorizes connections of defined internal information system components or classes of components (defined in the applicable security plan) to the information system; and Documents, for each internal connection, the interface characteristics, security and privacy requirements, and the nature of the information communicated. Documentation must also address authorization and responsibilities of the receiving information system for protecting any PII. Intion Standard I plan will identify the types of personally owned that may be internally connected with organizational	 CA-09: Internal System Connections a. Authorize internal connections of organization-defined system components or classes of components to the system; b. Document, for each internal connection, the interface characteristics, security and privacy requirements, and the nature of the information communicated; c. Terminate internal system connections after issuance an order by the organization's Chief Information Office (CIO), Chief Information Security Officer (CISO), or senior privacy official and when such internal system connections no longer support the organization's missions or business functions; and d. Review at least every one (1) year the continued need each internal connection. 	

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References

NIST SP 800-53 Revision 5.1.1

NIST SP 800-53 Revision 4

CMS Standards

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Jessica joined Coalfire in 2024 with five prior years of cybersecurity consulting experience. She supports our clients as a Consultant for the GRC Healthcare team where she specializes in cybersecurity risk management, cybersecurity program advisory, and compliance for the healthcare industry.

Her extensive experience in cybersecurity consulting allows her to provide customized solutions and guidance on industry best practices, greatly improving client security postures and ensuring compliance with regulatory standards. She is dedicated to ongoing improvement and to staying abreast of the latest cybersecurity trends and technologies to offer innovative solutions to her clients.

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About Coalfire

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