



Date: April 13, 2017

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Title: Insurance Standards Bulletin Series -- INFORMATION

Subject: Bulletin: Revised Timing of Submission and Posting of Rate Filing Justifications for the 2017 Filing Year for Single Risk Pool Coverage; Revised Timing of Submission for Qualified Health Plan Certification Application

I. Purpose

On December 16, 2016, the Centers for Medicare & Medicaid Services (CMS) issued a final Unified Rate Review Bulletin: Timing of Submission and Posting of Rate Filing Justifications for the 2017 Filing Year for Single Risk Pool Coverage¹, as well as the final 2018 Letter to Issuers.² On February 17, 2017, CMS released a draft bulletin for comment on the proposed revised uniform timeline for submission and public release of information about rate filings for single risk pool coverage^{3, 4}, consistent with 45 CFR Part 154. CMS separately released an Addendum to the final 2018 Letter to Issuers, which revised the timeline for the submission of Qualified Health Plan (QHP) applications for certification in the Federally-facilitated Exchanges for Plan Year 2018.^{5, 6}

The deadlines in this bulletin supersede and replace the dates issued in the December 16, 2016 bulletin. The timelines specified below apply to the rate filings issuers will submit in 2017 (2017 filing year) for single risk pool coverage (including both QHPs and non-QHPs) with plan or policy years beginning on or after January 1, 2018.

¹ The December 16, 2016 bulletin is available at: <https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/RR-timeline-bulletin-final-12-16-16.pdf>

² The *2018 Letter to Issuers in the Federally-facilitated Marketplaces* (December 16, 2016), available at: <https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Final-2018-Letter-to-Issuers-in-the-Federally-facilitated-Marketplaces.pdf>

³ The February 17, 2017 bulletin is available at: <https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Revised-2017-filing-timeline-bulletin-2-17-17.pdf>

⁴ The term “single riskpoolcoverage” is used to describenon-grandfathered healthinsurancecoverage in the individualor small group (or merged) market that is subject to thesingle riskpoolprovisions at 45 CFR 156.80 and is required to file rate information usingthe Unified Rate Review Template.

⁵ The Addendumto 2018Letter to Issuers is available at: <https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Final-2018-Letter-to-Issuers-in-the-Federally-facilitated-Marketplaces-and-February-17-Addendum.pdf>

⁶ Includes QHPs in Federally-facilitated Exchanges where States performplan management functions.

Rate Filing - Submissions

This bulletin provides revised guidance for purposes of establishing the uniform deadline under 45 CFR 154.220(b) for health insurance issuers to submit Rate Filing Justifications for proposed rates for single risk pool coverage in the individual and small group markets.

Rate Filing – Public Release of Information

This bulletin provides revised guidance on the uniform posting deadline for a State with an Effective Rate Review Program⁷ to provide public access to information regarding single risk pool coverage proposed rate increases that are subject to review and for CMS to provide public access to information on all proposed rate filings for single risk pool coverage. It also identifies the revised uniform deadline for a State with an Effective Rate Review Program to post final rate increases (including those not subject to review) for single risk pool coverage and for CMS to post information on all final rate filings for single risk pool coverage. Finally, it provides the CMS web address to be used by States with an Effective Rate Review Program that elect to provide public access from their website through a link to the CMS website.

In addition, 45 CFR 154.301(b)(3) requires that States with an Effective Rate Review Program post the required information on proposed rate increases subject to review and final rate increases (including those not subject to review) at a uniform time. This requirement applies to rate increase information for all single risk pool coverage (including both QHP and non-QHPs) offered inside and outside of Exchanges. The revised timelines below reflect this policy.

II. Revised Uniform Rate Review Timelines for the 2017 filing year for single risk pool coverage effective on or after January 1, 2018

Revised uniform submission deadline

The revised uniform submission deadlines for a health insurance issuer to submit a Rate Filing Justification to CMS and the applicable State for single risk pool coverage are listed below.⁸ Pursuant to 45 CFR 154.215, in addition to rate increases, these deadlines also apply to single risk pool coverage that experiences no rate changes, rate decreases, and rates for new single risk pool coverage.

- Issuers in a State **without an Effective Rate Review Program** are required to submit proposed rate filings for single risk pool coverage (both QHPs and non-QHPs) by a date set by the State, as long as the date is not later than June 1, 2017.
- Issuers in a State **with an Effective Rate Review Program** are required to submit proposed rate filings for single risk pool coverage (both QHPs and non-QHPs) by a date set by the State, as long as the date is not later than July 17, 2017.

⁷ See 45 CFR 154.301 for the list of criteria CMS considers when evaluating whether a State has an Effective Rate Review program.

⁸ 45 CFR 154.220(b) requires issuers to submit rate information for single risk pool coverage by the earlier of: (a) the State's deadline or (b) the date specified by HHS in guidance.

We recommend that States with Effective Rate Review Programs that are served by the HealthCare.gov platform set a date no later than the deadline of June 21, 2017, to align with the revised Federally-facilitated Exchange QHP filing deadlines; however, we understand some States may face challenges in doing so, and they will not be bound by this recommendation.

As outlined in Table 1 of the April 13, 2017 Key Dates for Calendar Year 2017⁹, issuers submitting QHP applications to participate in Exchanges served by the HealthCare.gov platform will be required to submit their QHP Rates Table Templates by June 21, 2017, even if their Unified Rate Review Template (URRT) is not due until a later date. The QHP Rates Table Template is required in order to comply with certification deadlines included in the 2018 Letter to Issuers as amended. We note that there will be opportunities during the QHP certification process for the issuer to update, correct or change the QHP Rates Table Template (as may be necessary).

Revised uniform posting deadlines

Proposed Rate Increases Subject to Review – Posting by States

August 1, 2017 is the revised uniform posting deadline for a State with an Effective Rate Review Program to post on the State's website the information contained in Parts I, II, and III of the Rate Filing Justification available on CMS's website (or provide CMS's web address for such information) for proposed rate increases that are subject to review for single risk pool coverage (including both QHPs and non-QHPs). Information on proposed rate increases subject to review must be made available to the public at a uniform time for the relevant market segment¹⁰, including publishing proposed rate increases on a State's website, in SERFF (System for Electronic Rate and Form Filing), and/or through press release. We encourage States with an Effective Rate Review Program to post at an earlier date if possible, to allow for robust public comments on proposed rate increases subject to review.

Proposed Rate Filings – Posting by CMS

CMS will post all applicable parts of the Rate Filing Justification for all single risk pool coverage (including both QHPs and non-QHPs), regardless of whether the product includes a plan with a rate increase that is subject to review under 45 CFR 154.210.¹¹ CMS will conduct a data refresh prior to posting, in order to capture the most recent rate filing information, and then will post proposed rate information for all issuers at one time. The data will not be refreshed again until the final rate posting timeframe.

- Issuers are required to complete all changes to proposed rate filings in the Health Insurance Oversight System Unified Rate Review (HIOS URR) module by 3:00 p.m. EST on July 25, 2017.

⁹ The April 13, 2017 Key Dates: Qualified Health Plan Certification in the Federally-facilitated Exchanges; Rate Review; Risk Adjustment, Reinsurance and Risk Corridors is available at: <https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Final-Revised-Key-Dates-for-Calendar-Year-2017-4-13-17.pdf>

¹⁰ 45 CFR 154.301(b)(3).

¹¹ CMS will not post information that is a trade secret or confidential commercial or financial information consistent with HHS' Freedom of Information Act regulations at 45 CFR 5.31(d).

- CMS intends to post information on proposed rate filings for consumers to review on <https://ratereview.healthcare.gov> on August 1, 2017.

Final Rate Increases – Posting by States

A State with an Effective Rate Review Program is required to post the information contained in Parts I, II, and III of the Rate Filing Justification that CMS makes available on its website (or provide CMS’s web address for such information) for all single risk pool coverage final rate increases (including those not subject to review) no later than November 1, 2017.¹² Final rate increases for single risk pool coverage (including both QHPs and non-QHPs) for the relevant market segment must be posted at a uniform time¹³, including publication on a State’s website, in SERFF (System for Electronic Rate and Form Filing), and/or issued through press release. The requirement to uniformly post final rate increases (including those not subject to review) does not prevent a State from reviewing and finalizing rates for single risk pool coverage before the prescribed deadline, but States cannot post that information until all final rate increases can be posted uniformly for the entire single risk pool.

Final Rate Filings – Posting by CMS

For all single risk pool coverage (including both QHP and non-QHPs), CMS will post all applicable parts of the Rate Filing Justification for all final rate filings, regardless of whether the product includes a plan with a rate increase that is subject to review under 45 CFR 154.210¹⁴. CMS will conduct a data refresh prior to posting, in order to capture the most recent rate filing information, and then will post final rate filing information for all issuers at one time.

- Issuers are required to finalize all rate filings that contain QHPs in the URR module of HIOS by 3:00 p.m. EST by August 16, 2017.
- Issuers are required to finalize all rate filings that only contain non-QHPs in the URR module of HIOS by 3:00 p.m. EST by October 6, 2017.
- CMS will post final rate information for single risk pool coverage (including both QHPs and non-QHPs) on November 1, 2017.

CMS Web Address:

States with an Effective Rate Review Program that elect to provide public access via a link to the rate information made available on the CMS web site should use:

<https://ratereview.healthcare.gov>.

Notification to CMS:

Earlier Deadlines

Pursuant to 45 CFR 154.301(b)(2), if a State intends to release information about proposed rate increases subject to review or final rate increases (including those not subject to review) on a timeframe earlier than proposed in this bulletin, the State must notify CMS in writing at least 30

¹² 45 CFR 154.301(b)(1)(ii).

¹³ 45 CFR 154.301(b)(3).

¹⁴ CMS will not post information that is a trade secret or confidential commercial or financial information consistent with HHS’ Freedom of Information Act regulations at 45 CFR 5.31(d).

days prior to making the information public. The State should notify CMS by sending an email to RateReview@cms.hhs.gov. The e-mail must indicate the date that the State intends to make the information public.

IV. Where to get more information and submit questions

If you have questions about this bulletin please contact CCIIO at RateReview@cms.hhs.gov.