

DISTRIBUTED DATA COLLECTION (DDC) FOR RISK ADJUSTMENT (RA) INCLUDING HIGH COST RISK POOL (HCRP): EDGE SERVER OPERATIONS & MAINTANENCE MANUAL (O&MM) AND BASELINE REPORTING

October 1, 2019



**Health Insurance Marketplace Program
Training Series**



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[HTTPS://WWW.REGTAP.INFO/](https://www.regtap.info/)

Agenda

- Purpose
- Session Guidelines
- Intended Audience
- EDGE Server Operations and Maintenance Manual (O&MM) Overview
- EDGE Server Baseline Reporting Overview
- EDGE Server Baseline Reporting: Completing the Form
- Creating the CSV File Using the Job Aid
- Key Dates and Deadlines
- Review and Next Steps
- Q&A
- Resources
- Closing Remarks

Purpose

This External Data Gathering Environment (EDGE) server baseline reporting session will:

- Provide an overview of EDGE server baseline reporting
- Identify the data required to complete baseline reporting
- Prepare issuers for what is expected during the data reporting periods
- Detail the steps for reporting baselines
- Outline the steps for creating a CSV file using the job aid
- Provide key dates and deadlines

Session Guidelines

- This is a 90-minute webinar session.
- For questions regarding content, please submit inquiries to: raripaymentoperations@cms.hhs.gov.
 - Include EDGE Server Baseline and the Health Insurance Oversight System (HIOS) ID in the subject line.
- For questions regarding logistics and registration, please contact the Registrar at: (800) 257-9520.

Intended Audience

- Health Insurance Issuers
- Third Party Administrators (TPAs)

EDGE Server O&MM Overview

O&MM Overview

- CMS published the O&MM Version 7.0 in the Registration of Technical Assistance Portal (REGTAP) Library on October 1, 2019.
 - It is located on the DDC Homepage under the EDGE Core Resources section.
- The O&MM streamlines information for issuers by:
 - Consolidating documents containing information pertaining to the functional system design of the EDGE Server
 - Complementing the EDGE server Interface Control Document (ICD) and the EDGE Server Business Rules (ESBR)
 - Including topics such as registering EDGE servers, data maintenance procedures, functional system operations, command execution, and troubleshooting

O&MM Overview (continued)

- The Centers for Medicare & Medicaid Services (CMS) updates the O&MM on a quarterly basis.
- The ESBR is updated on a complementary schedule.
- It includes updated information based on issuer inquiries and information previously shared during the EDGE Server Webinar presentations.
- The O&MM does not contain new processes or policies that were not previously published.

O&MM Updates:

Section 1. Technical Assistance

Topic	Key Points	Location in O&MM
Technical Assistance	Added information on the Financial Management (FM) Community, which will streamline issuer reporting by creating a single dashboard to review/update various EDGE server reporting requirements, submit inquiries, and update contacts.	Section 1.3

O&MM Updates:

Section 4. Local Commands (continued)

Topic	Key Points	Location in O&MM
Local Commands	Updated truncation commands and descriptions based on enhancements in the EDGE 32.0 Maintenance Release  Issuers will only be allowed to truncate one file type at a time or all the data at a time. If two file types are requested during the same web form submission period, issuers must notify CMS when the first truncation is complete by replying to the truncation approval request for CMS to stage the second truncation.	Section 4.2.1, Table 4-1

O&MM Updates:

Section 4. Prod to Test Validation Copy

Topic	Key Points	Location in O&MM
Prod to Test and Prod to Validation Copy Command	Added queries to validate copy command in the Validation and Test Zones.  Please allow up to 15 minutes before running the <code>./edge</code> version command on your server to copy your data. After running the <code>./edge</code> version command, issuers can run the query listed in this section to confirm that the PROD to VAL or PROD to TEST command was executed on their EDGE Server.	Section 4.2.3

O&MM Updates:

Section 5. Truncation Requests

Topic	Key Points	Location in O&MM
Truncation Requests	All truncations requests must be completed in the EDGE Server Truncation Web form located within the FM Community. Previous links to the web form are no longer accessible.	Section 5.4
Truncation Request Approval	Issuers may access the updated EDGE Server Truncation Web form guide from this section.	Section 5.4.1

O&MM Updates:

Section 6. Global Reference Data

Topic	Key Points	Location in O&MM
Global Reference Data	Added information on global reference data. CMS may choose to delete codes in order to purge or retire them as necessary from the EDGE Server Common Schema. Issuers will not be able to see the change on their EDGE servers, however they will be able to see them on the monthly Global Reference files published on REGTAP.	Section 6.1

EDGE Server Baseline Reporting Overview

NEW for Benefit Year 2019

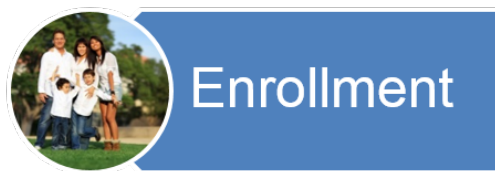
- Baseline Reporting Web Form can only be accessed through the FM Community
- Submitter must be an FM Community User
- Baseline reporting includes two additional fields
 - Number of Enrollees Expected to Have High Cost Risk Pool (HCRP) payment
 - Potential Estimated HCRP Payment by Market

Baseline Reporting Overview

- **What is Baseline Data Submission?**
 - Baseline data submission is the process in which issuers submit their baseline for enrollment, claims, and premium information on a quarterly basis to the Centers for Medicare & Medicaid Services (CMS).
- **Why is Baseline Data Submitted?**
 - All issuers must submit baseline data, which CMS uses to determine if an issuer meets quantity and quality requirements/thresholds.
- **How is Baseline Data Submitted?**
 - For the Benefit Year 2019, CMS is collecting baseline data through the FM Community.
- **When is Baseline Data Submitted?**
 - Baseline data is submitted three (3) times for the current benefit year. The first baseline data submission window is October 7, 2019 through October 18, 2019.

Baseline Reporting Purpose

- To ensure the completeness of an issuer's EDGE server data, issuers must establish baseline information with CMS.
- CMS compares issuer-reported baselines against the issuer's EDGE server data submissions to determine completeness (quantity) of Enrollment, Medical Claims, and Pharmacy Claims data elements.



Baseline Data

Baseline Reporting Process



FM User receives an email invitation of instructions for accessing the Baseline tab in FM Community.



Collect baselines for Enrollment, Medical Claims, Pharmacy Claims and Premiums.



Access FM Community to report baselines.



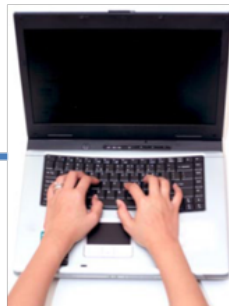
Validate submitter's access to HIOS ID(s).



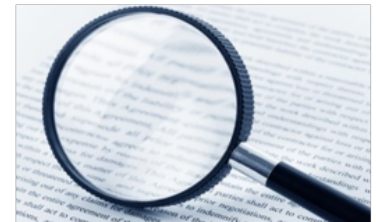
Upload CSV file (using the Job Aid) to report a large number of HIOS IDs.



Submit baselines.



Enter baselines for each HIOS ID.



Validate submitter's access to HIOS ID(s).

Baseline Reporting Data Elements: BY 2019

Provide the actual counts and amounts from your internal enrollment and claims systems as of the reporting quarter.

If a claim has a paid amount equal to zero dollars (\$0.00), then it should be included in the total count only if the claim was submitted to the EDGE server. Do not include a claim as part of the claims count total if it was denied, voided, or replaced by another claim.

- Enrollment Count
- Total Paid Medical Claims Count by Market for each HIOS ID
- Total Paid Medical Claims Amounts by Market for each HIOS ID
- Total Paid Pharmacy (Rx) Claims Count by Market for each HIOS ID
- Total Paid Pharmacy (Rx) Claims Amount by Market for each HIOS ID

Baseline Reporting Data Elements: BY 2019

(continued)

- Total Member Months for on and off-Exchange Policies
- Estimated 2019 Benefit Year Claims Amount to Date
- Total Premium Revenue Collected
- Total Earned Annualized Premium Revenue
- Risk Score Estimate
- Submitting Supplemental Diagnosis Files
- Number of Enrollees Expected to have High Cost Risk Pools (HCRP)
- Potential Estimated HCRP Payment by Market

Baseline Reporting Preparation: BY 2019

Enrollment Count	Medical Claims	Pharmacy Claims
• The actual number of unique covered lives • Includes enrollees and their dependents	• The actual number of paid medical claims (not claims lines) • The total dollar amount of paid medical claims • Do not count denied and voided claims or claims replaced by other claims as part of the paid claims amount totals.	• The actual number of paid pharmacy claims (not claims lines) • The total dollar amount of paid Rx claims • Do not count denied and voided claims or claims replaced by other claims as part of the paid claims amount totals.



Include actual counts and amounts from your internal enrollment and claims systems.

Baseline Reporting Preparation: BY 2019

(continued)

Member Months	Estimated Claims Amount to Date	Total Premium Revenue Collected
• For all enrollees/covered lives participating in plans on the Exchange • For all enrollees/covered lives participating in plans off the Exchange	• The total estimated claims amount to date; i.e., paid and adjudicated claims and Incurred But Not Reported (IBNR) • Includes claims estimates of claims qualified for but not yet submitted to the EDGE server	• The total premium revenue collected • Includes anticipated Advanced Premium Tax Credit (APTC) payments from CMS for all enrollees

Baseline Reporting Preparation: BY 2019

(continued)

Total Earned Annualized Premium Revenue	Total Cross-Year Medical Claims Count	Total Cross-Year Rx Claims Count
• Estimated (annualized) premium revenue amounts for subscriber's policies (earned and deferred premium) • Includes APTC amounts	• The total number of unique paid medical claims with dates of service beginning in BY 2018 and ending in BY 2019, within each respective quarter as of the current submission	• The total number of unique paid pharmacy claims count with dates of service beginning in BY 2018 and ending in BY 2019, within each respective quarter as of the current submission

Baseline Reporting Preparation: BY 2019

(continued)

Risk Score Estimate	Total Enrollees Expected to Have High Cost Risk Pools (HCRP)
• Estimate of your plan's liability risk score (PLRS) • Based on data qualified for submission to EDGE for each respective Market • Only for third collection	• Total number of anticipated HCRP enrollees (i.e., count of enrollees with combined claims amounts that exceed the HCRP attachment point)

Baseline Reporting Preparation: BY 2019

(continued)

Potential Estimated HCRP Payment by Market	Supplemental Diagnosis Files
• Total estimated dollar amount of high cost risk pool payments.	• Submission of supplemental documentation to support risk adjustment calculations on the EDGE server related to updated Diagnosis Codes for submitted enrollees.

Baseline Reporting Timelines: BY2019

First Collection

- Quarter 1
- Quarter 2

**10/7/19-10/18/19
by 11:59 pm ET**

Second Collection

- Quarter 1*
- Quarter 2*
- Quarter 3

*update previously submitted quarters as necessary

**11/5/19 –
11/19/19**

Third Collection

- Quarter 1*
- Quarter 2*
- Quarter 3*
- Quarter 4

*update previously submitted quarters as necessary

2/4/20 – 2/18/20

EDGE Server Baseline Reporting: Completing the Form

Baseline Reporting Form: Access

After collecting all necessary information, refer to the baseline invitation email with instructions for accessing the form in the FM Community using the Baseline tab.



Baseline Reporting Form: Tab

[MAINTENANCE](#)[INQUIRIES](#)[TRUNCATION](#)[BASELINE](#)[LIBRARY](#)

Baseline

[Guidance](#)

This page allows users to view EDGE Server Baseline data that has been submitted or to submit EDGE Server Baseline data in accordance with CMS timelines.

Baselines are entered online, directly or uploaded as a CSV file. If you require assistance, please refer to the **Guidance** link. Additional reference materials, including the BY 2019 EDGE Baseline File Layout, BY 2019 EDGE Baseline Reporting Job Aid, and BY 2019 EDGE Baseline Job Aid Guide are available on the *Library* Tab.

EDGE Baseline Collection Period 1

The first EDGE baseline collection period (Collection Period 1) requires issuers to provide baseline data for the first quarter (Q1) and the second quarter (Q2) of the 2019 Benefit Year (BY).

You may provide Collection Period 1 data from October 7, 2019 through October 18, 2019.

All Collection Period 1 data must be submitted by 11:59 p.m. Eastern Time (ET) on October 18, 2019.

ABC Company -- BY 2019

Upload CSV File

If your company has 10 or more HIOS IDs, CMS recommends that you streamline the baseline reporting process by utilizing the EDGE Baseline File Layout and submitting a CSV file. Instructions for creating this are available in the EDGE Baseline Reporting Job Aid .

Once your CSV file has been uploaded, the data contained within will be populated in the web form for your review.

Select the **Upload CSV File** button below to upload a CSV file.

[Upload CSV File](#)

EDGE Baseline Status

The first EDGE baseline collection period (Collection Period 1) requires issuers to provide baseline data for the first quarter (Q1) and the second quarter (Q2) of the 2019 Benefit Year (BY).



Baseline Reporting Form: Tab (continued)

Upload CSV File

EDGE Baseline Status

The table below displays the EDGE Baseline submission status for each HIOS ID and Market.

To enter EDGE Baseline data, select the **Edit** link in the Action column of each HIOS ID/Market. To view or edit EDGE Baseline data, select the **View** or the **Edit** links for a given HIOS ID/Market. Select the **History** link to review the data submitted for previous Collection Periods.

Select the Submit button to submit the EDGE Server Baseline data.

Submit

Note: If any of your HIOS ID(s)/Market(s) are missing from the table or incorrectly displayed, please submit an inquiry through the Inquiry tab or by emailing raripaymentoperations@cms.hhs.gov.

Select the Refresh button to refresh the data in the table.

Refresh

Action	HIOS ID	Market	Submission Status
Edit View History	10111	Individual Catastrophic	Collection 1 Submitted
Edit View History	10111	Individual Non-Catastrophic	Collection 1 Submitted
Edit View History	10112	Small Group	
Edit View History	10113	Merged	
Edit View History	10114	Individual Non-Catastrophic	

Submit

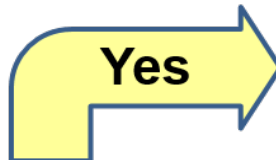


For Massachusetts (MA) and Vermont (VT) issuers, each metric should be reported for the entire merged market. Market type will be pre-populated so issuers in merged market states will only see 'Merged'.

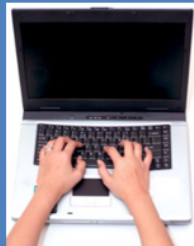
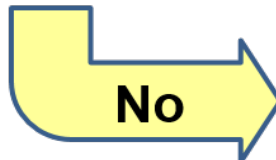
Baseline Reporting Form: Submission Method

**How are you going to submit your 2019
EDGE Server Baseline Counts?**

**Are you reporting for a
large number of HIOS IDs?**



**Use the EDGE
Baseline Reporting
Job Aid to create a
CSV file to upload.**



**Manually enter
Baselines on the web
form by HIOS ID and
Market.**

Baseline Reporting Form: Submission Method – Upload CSV File

EDGE Baseline File Layout, BY 2019 EDGE Baseline Reporting Job Aid, and BY 2019 EDGE Baseline Job Aid Guide are available on the *Library* Tab.

EDGE Baseline Collection Period 1

The first EDGE baseline collection period (Collection Period 1) requires issuers to provide baseline data for the first quarter (Q1) and the second quarter (Q2) of the 2019 Benefit Year (BY).

You may provide Collection Period 1 data from October 7, 2019 through October 18, 2019.

All Collection Period 1 data must be submitted by 11:59 p.m. Eastern Time (ET) on October 18, 2019.

ABC Company -- BY 2019

Upload CSV File

If your company has 10 or more HIOS IDs, CMS recommends that you streamline the baseline reporting process by utilizing the EDGE Baseline File Layout and submitting a CSV file. Instructions for creating this are available in the EDGE Baseline Reporting Job Aid.

Once your CSV file has been uploaded, the data contained within will be populated in the web form for your review.

Select the **Upload CSV File** button below to upload a CSV file.

Upload CSV File

EDGE Baseline Status



Baseline Reporting Form: Submission Method - Manual

Upload

EDGE Baseline Status

The table below displays the EDGE Baseline submission status for each HIOS ID and Market.

To enter EDGE Baseline data, select the **Edit** link in the Action column of each HIOS ID/Market. To view or edit EDGE Baseline data, select the **View** or the **Edit** links for a given HIOS ID/Market. Select the **History** link to review the data submitted for previous Collection Periods.

Select the Submit button to submit the EDGE Server Baseline data.

Submit

Note: If any of your HIOS ID(s)/Market(s) are missing from the table or incorrectly displayed, please submit an inquiry through the Inquiry tab or by emailing raripaymentoperations@cms.hhs.gov.

Select the **Refresh** button to refresh the data in the table.

Refresh

Action	HIOS ID	Market	Submission Status
Edit View History	10111	Individual Catastrophic	
Edit View History	10111	Individual Non-Catastrophic	
Edit View	10112	Small Group	

Baseline Reporting Form: Status

The EDGE Baseline Status table displays the submission status for each HIOS ID and market.

- Select the **Edit** link in the Action column to enter EDGE Baseline data.
- Select the **View** or **Edit** links for a given HIOS ID/market to view or edit previously entered EDGE Baseline data.
- Select the **History** link to review data submitted for previous Collection Periods.



Reminder

You will be required to navigate through the form and enter data for each HIOS ID. If you have a large number of HIOS IDs, you may want to use the Baseline Reporting Job Aid.

Baseline Reporting Form: Status (Continued)

EDGE Baseline Status

The table below displays the EDGE Baseline submission status for each HIOS ID and Market.

To enter EDGE Baseline data, select the **Edit** link in the Action column of each HIOS ID/Market. To view or edit EDGE Baseline data, select the **View** or the **Edit** links for a given HIOS ID/Market. Select the **History** link to review the data submitted for previous Collection Periods.

Select the **Submit** button to submit the EDGE Server Baseline data.

Submit

Note: If any of your HIOS ID(s)/Market(s) are missing from the table or incorrectly displayed, please submit an inquiry through the Inquiry tab or by emailing raripaymentoperations@cms.hhs.gov.

Select the **Refresh** button to refresh the data in the table.

Refresh

Action	HIOS ID	Market	Submission Status
Edit View History	10111	Individual Catastrophic	Collection 1 Submitted
Edit View History	10111	Individual Non-Catastrophic	Collection 1 Submitted
Edit View History	10112	Small Group	
Edit View History	10113	Merged	
Edit View History	10114	Individual Non-Catastrophic	

Submit



Select the **Refresh** button to update the contents of the table.

Baseline Reporting Form: Edit Data Page

Enrollment Count

- Enter positive whole number
- Actual number of unique covered lives including enrollees and their dependents
- For the current benefit year

Edit EDGE Server Baseline Data

[Guidance](#)

Instructions

Complete all required fields for the given HIOS ID/Market for the current collection period. If a field is not applicable, then you may enter zero (0).

Note: Use the **start date** of the service to determine whether a claim should be included within a quarter.

The red asterisk (*) indicates required fields.

Enrollment Count

Enter the count of enrollees associated with 10111 - Individual Catastrophic as of today's date.

Enrollment Count*

54321

Total 2019 Paid Claims/Paid Amounts

Enter the Total BY 2019 Paid Medical and Pharmacy (Rx) Claims Counts and Amounts from your internal enrollment and claims systems for the selected HIOS ID and Market for each quarter of the applicable collection period in the table below. You can make adjustments to the data in prior collection periods, as

Baseline Reporting Form: Edit Data Page

(Continued)

Medical Claims

Total Paid Medical Claims Count



Provide the total number of unique paid claims (not claims lines) of each quarter.

For each quarter, include claims where the beginning Dates of service fall within that quarter.

Total Paid Medical Claims Amounts



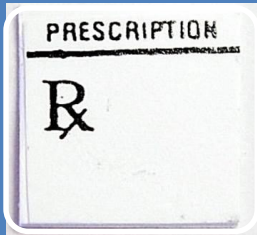
Provide the total amount paid as of each quarter.

For each quarter, include claims amounts for claims where the beginning Dates of Service fall within that quarter.

Baseline Reporting Form: Edit Data Page

(Continued)

Pharmacy Claims



Total Paid Rx Claims Count

- Provide the total number of unique paid claims (not claims lines) as of each quarter.
- For each quarter, include claims where the beginning Dates of Service fall within that quarter.



Total Paid Rx Claims Amounts

- Provide the total amount paid as of each quarter.
- For each quarter, include claims amounts for claims where the beginning Dates of Service fall within that quarter.

Baseline Reporting Form: Edit Data Page

(Continued)

Total 2019 Paid Claims/Paid Amounts

Enter the Total BY 2019 Paid Medical and Pharmacy (Rx) Claims Counts and Amounts from your internal enrollment and claims systems for the selected HIOS ID and Market for each quarter of the applicable collection period in the table below. You can make adjustments to the data in prior collection periods, as needed.

Note: If a claim has a paid amount equal to zero dollars (\$0.00), then it should be included in the total count only if the claim was submitted to the EDGE server. Do not include a claim as part of the claims count total if it was denied, voided, or replaced by another claim.

Quarter	Total 2019 Paid Medical Claims Count* i	Total 2019 Paid Medical Claims Amount* i	Total 2019 Paid Rx Claims Count* i	Total 2019 Paid Rx Claims Amount* i
Q1	1500	150000	1500	150098
Q2	2000	200052	2000	200076

Total 2019 Benefit Year Paid Claims to Date: 700226

Baseline Reporting Form: Edit Data Page

(Continued)

Enter the Total Member Months for On-Exchange Policies.

- Provide the member months for all enrollees/covered lives participating in plans on the Exchange.

Enter the Total Member Months for Off-Exchange Policies.

- Provide the member months for all enrollees/covered lives participating in plans off the Exchange.

Baseline Reporting Form: Edit Data Page

(Continued)

Estimated Claims Amount to Date

- Enter the total estimated dollar amount of claims.
- Must include those claims qualified for but not yet submitted on the EDGE server.

Total Premium Revenue Collected

- Enter the total premium revenue actually collected as of the reporting quarter.
- Must include APTC payments from CMS.

Baseline Reporting Form: Edit Data Page

(Continued)

Total Annualized Premium Revenue

- Enter the estimated (annualized) premium revenue amounts for subscriber's policies (earned and deferred premium).
- Annualized amounts are the Premium Amounts collected plus those anticipated to be collected through the end of the year.
- Must include the anticipated APTC amounts from CMS.

Enter the Total Cross-Year Medical Claims Count

- Enter the total number of unique paid medical claims with dates of service beginning in the prior benefit year and end dates in the current benefit year, within each respective quarter as of the current submission.

Baseline Reporting Form: Edit Data Page

(Continued)

Enter the Total Cross-Year Rx Claims Count

- Enter the total number of pharmacy claims within a cross-year paid medical claim with a dates of service beginning in the prior benefit year and end dates in the current benefit year within each respective quarter

Risk Score Estimate

- Estimate of your PLRS
- Based on the data qualified for submission to EDGE for each respective market
- Third collection period only

Baseline Reporting Form: Edit Data Page

(Continued)

Number of Enrollees Expected to Have HCRP

- Enter total number of enrollees

Potential Estimated HCRP Payment by Market

- Enter the estimated HCRP payment

Supplemental Diagnosis File

- **Will you be submitting supplemental diagnosis files?**
 - Select the **Yes** or **No** radio button



A selection of **Yes** will not require a company to submit supplemental files.

Baseline Reporting Form: Edit Data Page

(Continued)

BY 2019 EDGE Baseline Data

Enter the BY 2019 EDGE Baseline data in the appropriate fields.

BY 2019 Baseline Data	
BY 2019 Total Member Months for On Exchange Policies*	34567
BY 2019 Total Member Months for Off Exchange Policies*	54321
Estimated BY 2019 Claims Amount to Date*	444440
Total BY 2019 Premium Revenue Collected*	555566
Total BY 2019 Earned Annualized Premium Revenue*	321456
Total Cross-Year Medical Claims Count*	456321
Total Cross-Year Rx Claims Count*	87654
2019 Risk Score Estimate*	32.1
Number of Enrollees Expected to Have High Cost Risk Pools*	56732
Potential Estimated HCRP Payment by Market*	23765
Submitting Supplemental Diagnosis Files*	Yes

Baseline Reporting Form: Edit Data Page

(Continued)

Explanation - Enter an explanation for why baseline information was submitted outside of the collection period.

- Only required if baseline information is submitted outside of the collection period.
- Text entry field (limit 2000 characters).

Baseline Reporting Form: Edit Data Page

(Continued)

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Summary

[Guidance](#)

Instructions

Review the details provided in the EDGE Baseline Information table below.

Select the **Edit** action link in the EDGE Baseline Information table to update EDGE Baseline data for an individual HIOS ID. If you need to make changes to more than ten (10) HIOS IDs, it is recommended that you use the **Replace CSV File** button. Previously uploaded data will be deleted and replaced by the information in the most recent CSV file.

Warning: The Baseline Reporting collection period has closed. Please provide an explanation for your Response Outside Collection Period.

EDGE Baseline Information

To view or edit EDGE Baseline data, select the **View** or the **Edit** links for a given HIOS ID/market.

Action	HIOS ID	Market	Enrollment Count	Total BY 2019 Paid Medical Claims Amount	Total BY 2019 Paid Rx Claims Amount
Edit View	10111	Individual Catastrophic	0	\$12,009	\$9,090
Edit View	10111	Individual Non-Catastrophic	0	\$12,009	\$9,090

Replace CSV File

To replace the previously submitted 2019 EDGE Baseline Reporting CSV file, select the **Replace CSV File** button. Any data previously uploaded will be deleted and replaced by the most recent content.

Replace CSV File

Enter an explanation for why baseline information is being submitted outside of the collection period.

The explanation for why baseline information is being submitted outside of the collection period must be entered here.

Form Navigation

Instructions: Select the **Continue** button below to navigate to the next page.

Continue

Baseline Reporting Form: Edit Data Page

(Continued)

Once you have completed all the fields on this page, select the **Continue** button.

- If you have additional HIOS IDs and markets to complete, the form navigates back to the Baseline tab to select the next HIOS ID and market.
- If you have no other HIOS IDs and markets to complete, the form navigates to the next page.

Potential Estimated HCRR Payment by Market

23765

Submitting Supplemental Diagnosis Files*

Yes

Form Navigation

Instructions: Select the **Continue** button to save the EDGE Baseline data and proceed to the next page.

Select the **Cancel** button to discard your changes and return to the Baseline tab.

Cancel **Continue**

Baseline Reporting Form: Ratio Variance Explanation Page

Ratio Variance Explanation

- Required when the claims to enrollee ratio is outside the following thresholds:
 - First Collection – 10 claims per enrollee
 - Second Collection – 15 claims per enrollee
 - Third Collection – 20 claims per enrollee
- Select the **Edit** button in the Action column to return to the Edit EDGE Server Baseline Data page to make updates, if needed.
- Provide an explanation for each HIOS ID and market listed in the Ratio Variance Explanation column.
- Select the **Continue** button.



If there is no ratio variance, you will not navigate to this page.

Baseline Reporting Form: Ratio Variance Explanation Page (Continued)

Ratio Variance

The Ratio Variance table lists each HIOS ID/market for which the claims to enrollment ratio exceeded the threshold.

Enter a **Ratio Variance Explanation** for each HIOS ID and market included in the table.

The red asterisk (*) indicates required fields.

Action	HIOS ID	Market	Ratio Variance	*Ratio Variance Explanation
Edit	10111	Individual Non-Catastrophic	180.00	Explanation goes here. Explanation goes here. Explanation goes here.
Edit	10112	Small Group	180.00	Explanation goes here. Explanation goes here. Explanation goes here.
Edit	10113	Merged	180.00	Explanation goes here. Explanation goes here. Explanation goes here.
Edit	10114	Individual Non-Catastrophic	180.00	Explanation goes here. Explanation goes here. Explanation goes here.

Baseline Reporting Form: Attestation Page

Attestation Page

An individual with the authority to legally and financially bind the company must attest to the information submitted in the EDGE Server Baseline Reporting Form.

- Read the attestation statements and select each check box.

Baseline Reporting Form: Attestation Page

Attestation

Guidance

CMS requires an individual who has the authority to legally and financially bind the company to attest to the information provided as part of the baseline submission.

To attest, this person must select the checkbox next to the attestation and provide their contact details. The individual completing the web form does not need to be the attester; however, the attester must be aware of the baseline submission.

The red asterisk (*) indicates required fields.

As of 09/27/19, you agree to the following statements:

- ☒ I hereby attest and certify that the information for the HIOS ID (or HIOS IDs) provided in this baseline submission is true, complete, and accurate to the best of my knowledge as of 09/27/19.*
- ☒ This baseline submission has been approved by my company's chief actuary.*
- ☒ If the company becomes aware that the information provided/submitted in support of this return is incorrect, incomplete, or misreported, then my company will promptly inform CMS.*
- ☒ If CMS identifies an issue or has questions about the information submitted, then I agree to be a contact for responding to such questions. I acknowledge that failing to comply with the HHS-operated risk adjustment data requirements could result in my organization triggering the enforcement actions under 45 CFR § 153.740.*
- ☒ I acknowledge that the data submitted to the EDGE server and made available for the permanent risk adjustment program established under Section 1343 of the Affordable Care Act may be subject to the False Claims Act.*
- ☒ I am authorized to legally and financially bind my company.*

Baseline Reporting Form: Attestation Page (Continued)

Financial Reviewer/Forecaster Details

An individual who has reviewed and approved the baseline data.

- Company actuary.
- Enter all required financial reviewer/forecaster details.

Attester Details

An individual with the authority to legally and financially bind the company.

- Enter all required attester details.
- Does not need to be the person submitting the form.

Select the **Submit** button to submit your data and attestation for EDGE Server Baseline Reporting.

Baseline Reporting Form: Attestation Page (Continued)

☒ I am authorized to legally and financially bind my company.

Financial Reviewer/Forecaster Details

Enter the contact details for the Financial Reviewer/Forecaster. This is the individual who reviewed and approved the baseline data for your company.

The red asterisk (*) indicates required fields.

First Name*	Last Name*	Email Address*	Job Title*	Phone Number*	Phone Extension
Scrooge	McDuck	smcduck@email.com	Actuary	(555) 555-5555	

Attester Details

Enter the contact details for the Attester. This is an individual who agrees with the information provided, indicates agreement with the attestation statements, and has the authorization to legally and financially bind your company.

First Name*	Last Name*	Email Address*	Job Title*	Phone Number*	Phone Extension
Daisy	Duck	dduck@email.com	Business Analyst	(333) 333-3333	

Form Navigation

Instructions: Select the **Submit** button to submit the EDGE server baseline information and the attestation.

Select the **Cancel** button to discard your changes and return to the Summary/Edit EDGE Server Baseline Data page.

Cancel

Submit

Web Form: Confirmation Page

Confirmation Page

- Submission End Time – date and time baselines were submitted.
- Acknowledgement email and submission information sent to email addresses – FM User, Financial Reviewer/Forecaster, and Attester email addresses listed.

Creating the CSV File Using the Job Aid

Baseline Reporting Job Aid: Overview

- Macro-enabled Excel file that will allow you to enter baseline counts and create a CSV file by selecting a button within the tool.
- 2019 Baseline Reporting Job Aid Guide is available to guide you through the process of using the Job Aid.

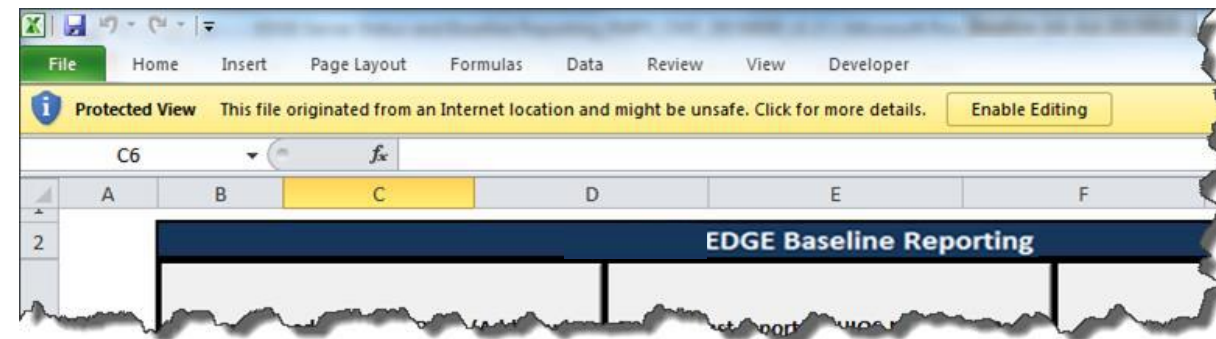
Baseline Reporting Job Aid: Overview (continued)

2019 EDGE Baseline Reporting							
Report for additional HIOS ID and market							
Create CSV File							
	HIOS ID	Market 1 = Individual Non-Catastrophic 2 = Individual Catastrophic 3 = Small group 4 = Merged	Medical		Rx		
			Total BY 2019 Paid Claims Count	Total BY 2019 Paid Claims Amount	Total BY 2019 Paid Claims Count	Total BY 2019 Paid Claims Amount	
Delete Section	Quarter 1						
	Quarter 2						
	Quarter 3						
	Quarter 4						
	Enrollment Count						
	BY 2019 Total Member Months for On Exchange Policies						
	BY 2019 Total Member Months for Off Exchange Policies						
	Estimated BY 2019 Claims Amount to Date						
	Total BY 2019 Premium Revenue Collected						
	Total BY 2019 Earned Annualized Premium Revenue						
	Total Cross-Year Medical Claims Count						
	Total Cross-Year Rx Claims Count						
BY 2019 Risk Score Estimate							
Number of Enrollees Expected to have High Cost Risk Pools (HCRP)							
Potential Estimated HCRP Payment by Market							
Will you be submitting supplemental diagnosis files?							

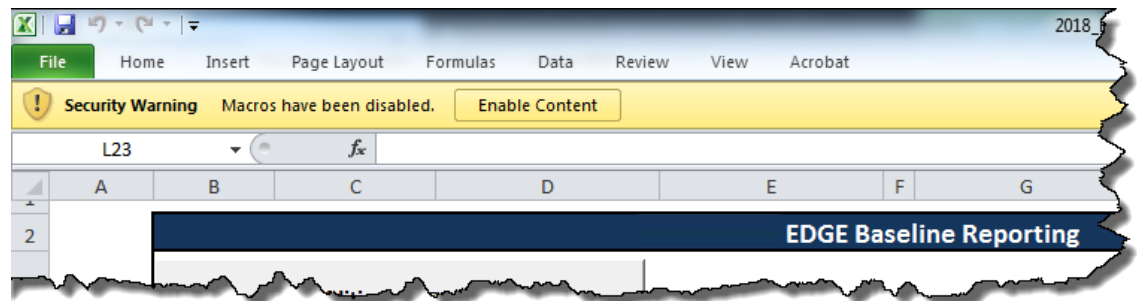
Baseline Reporting Job Aid:

Overview (Continued)

Enable Editing:
Select the **Enable Editing** button in the yellow ribbon at the top of the page.



Enable Macros:
Select the **Enable Content** button in the yellow ribbon at the top of the page.



Baseline Reporting Job Aid: Entering HIOS ID Information

Enter HIOS ID information starting for Quarter 1.

1. Enter a five (5)-digit HIOS ID. This must be a valid 2019 HIOS ID. The HIOS ID entered for Quarter 1 will be carried through Quarter 4.
2. Select the Market type from the drop-down menu. The Market type selected for Quarter 1 will be carried through Quarter 4.
3. Enter the Total Paid Medical Claims Count.
4. Enter the Total Paid Medical Claims Amount.
5. Enter the Total Paid Pharmacy Claims Count.
6. Enter the Total Paid Pharmacy Claims Amount.

	HIOS ID	Market 1 = Individual Non-Catastrophic 2 = Individual Catastrophic 3 = Small group 4 = Merged	Medical		Rx	
			Total BY 2019 Paid Claims Count	Total BY 2019 Paid Claims Amount	Total BY 2019 Paid Claims Count	Total BY 2019 Paid Claims Amount
Quarter 1	1	2	3	4	5	6
Quarter 2						
Quarter 3						
Quarter 4						

Baseline Reporting Job Aid: Entering HIOS ID Information (Continued)

7. Enter the Enrollment Count.
8. Enter the Total Member Months for On Exchange Policies.
9. Enter the Total Member Months for Off Exchange Policies.
10. Enter the Estimated Claims Amount to Date.

Enrollment Count	7
BY 2019 Total Member Months for On Exchange Policies	8
BY 2019 Total Member Months for Off Exchange Policies	9
Estimated BY 2019 Claims Amount to Date	10

Baseline Reporting Job Aid: Entering HIOS ID Information (Continued)

11. Enter the Total Premium Revenue Collected.
12. Enter the Total Annualized Premium Amount.
13. Enter the Total Cross-Year Medical Claims Count.
14. Enter the Total Cross-Year Rx Claims Count.

Total BY 2019 Premium Revenue Collected	11
Total BY 2019 Earned Annualized Premium Revenue	12
Total Cross-Year Medical Claims Count	13
Total Cross-Year Rx Claims Count	14

Baseline Reporting Job Aid: Entering HIOS ID Information (Continued)

15. Enter the Risk Score Estimate. This field is available during the third collection period only.
16. Enter the Number of Enrollees Expected to Have High Cost Risk Pools (HCRP).
17. Enter the Potential Estimated HCRP Payment by Market.
18. Select **Yes** or **No** to indicate if you will be submitting Supplemental Diagnosis Files.

BY 2019 Risk Score Estimate	15
Number of Enrollees Expected to have High Cost Risk Pools (HCRP)	16
Potential Estimated HCRP Payment by Market	17
Will you be submitting supplemental diagnosis files?	18
	Yes No



Reminder

A selection of **Yes** will not require a company to submit supplemental files.

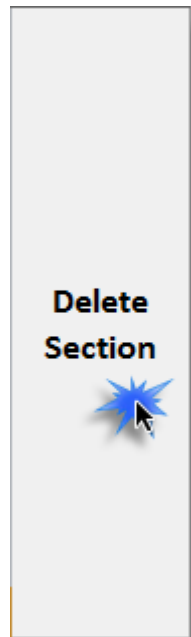
Baseline Reporting Job Aid: Adding HIOS ID and Market Information

Report for additional HIOS ID and market



- Select the **Report for additional HIOS ID and market** button to add as many additional HIOS ID/Markets as necessary.
- A new block within the Excel workbook will be added to enter information for all four (4) quarters.

Baseline Reporting Job Aid: Removing HIOS ID/Market Information



- Select the **Delete Section** button to delete an individual block of HIOS ID, market, claims, and additional information fields.
 - The Job Aid will remove a block within the Excel workbook, which will include Quarters 1-4, information, along with the questions.
- Remove as many additional HIOS IDs/markets as necessary.

Baseline Reporting Job Aid: Reviewing and Creating the CSV File

- Review the HIOS ID and market information you have entered into the Job Aid.
- Select the **Create CSV File** button.
 - The workbook will display all relevant records that contain an error.
 - All identified errors must be corrected before the Job Aid will create the CSV file.
 - When saving the CSV file on your computer, you will be prompted to select a location and file name for the CSV file.

Create CSV File



NOTE

Saving the spreadsheet using the CSV file extension will **NOT** create a CSV file. You must select the **Create CSV File** button in the Job Aid to create the CSV file.

Baseline Reporting Job Aid: Saving the Job Aid



NOTE

You are encouraged to use the same Job Aid to report baselines for the first, second, and third collections.

- Locate and select the **Save As** command in Excel.
- The **Save As** dialog box will appear. Select the location where you want to save the Job Aid Excel file.
- When reporting baselines for a new collection period, open the saved job aid Excel file and enter the new required data.

Baseline Reporting Job Aid: CSV File Upload to Form

- Once the CSV file has been created:
 - Navigate to the form from the **Baseline** tab in the FM Community.
 - Select **CSV File Upload** button to open the Upload CSV File page.
 - In the CSV File Upload page, select the **Browse** button to locate the completed CSV file to upload.
 - Select the **Upload CSV File** button to validate the CSV file and move forward to complete the form.
 - Select the **Exit** button to close the window and return to the form.

Baseline Reporting Job Aid: Verification Summary (CSV) in Form

Summary Page

- Verify the information entered for each of the listed fields is correct.
 - Select the **Action** links to make corrections.
 - To upload a corrected CSV file, select the **Replace CSV File** button (selecting this option will clear the data uploaded from the original CSV file).
- Select the **Continue** button to navigate to the Attestation page where you will attest and submit.

Returning to Form Inputs

Returning to the Form (after previous submissions within the collection period):

After accessing FM Community and selecting the Baseline tab, the Baseline page displays. From this page, you are able to:

- **View, Edit, or Delete** previously submitted information for a HIOS ID and Market.
- **Replace CSV File.**
- **Report baselines for another HIOS ID or market.**

The form will navigate to the appropriate page depending on your selection. Once your changes are complete, you must repeat your attestation and receive a confirmation.

Returning to Form Inputs (Continued)

Please Note: If you return to the form to edit a HIOS/market after attesting and submitting for all HIOS IDs, the EDGE Edit Baseline Data page will also include Attestation and Ratio Variance (if needed) to streamline the editing process.

Key Dates and Deadlines

Key Dates and Deadlines

Collection Period	Notification Date	Deadline	Data Collection
First Collection	October 7, 2019	October 18, 2019	Quarters 1 and 2
Second Collection	November 5, 2019	November 19, 2019	Quarters 1, 2, and 3
Third Collection	February 4, 2020	February 18, 2020	Quarters 1, 2, 3, and 4

Review and Next Steps

Baseline Reporting BY 2019: Review

- You will need to report EDGE baselines for each HIOS ID by market (unless exempt).
- Baseline reporting will be completed through the form available in the FM Community.
- A job aid for creating a CSV file is available for reporting baselines for a large number of HIOS IDs.
- Send an email to raripaymentoperations@cms.hhs.gov and include **EDGE Server Baseline** and at least one (1) **HIOS ID** in the subject line for questions regarding the EDGE server baseline reporting process.

Next Steps

NOW

- Collect baseline counts for Enrollment, Medical Claims, Medical Claims Amounts, Pharmacy Claims, and Pharmacy Claims Amounts for Quarter 1 and Quarter 2.
- Consult with your Financial Reviewer/Forecaster.
- Determine the person from your organization who will submit the Baseline Reporting Form.

LATER

- Complete the baseline reporting process.

Questions?

To submit or withdraw questions by phone:

- *Dial *# (star-pound) on your phone's keypad to ask a question.*
 - *Dial *# (star-pound) on your phone's keypad to withdraw your question.*

Upcoming Webinar

Webinar	Scheduled Event Date
EDGE Server 32.2 Maintenance Release Preview and EDGE Server Business Rules (ESBR) Version 14.0	October 15, 2019

Resources

Resources

Resource	Link/Contact Information
Center for Consumer Information and Insurance Oversight (CCIIO)	http://cms.gov/ccio/
Registration for Technical Assistance Portal (REGTAP) • Registration • Inquiry Tracking and Management System (ITMS) • Resource Library • Frequently Asked Questions (FAQs)	https://www.REGTAP.info/

FAQ Database on REGTAP

My Dashboard



The FAQ Database is available at
<https://www.regtap.info/>.

The FAQ Database allows users to search FAQs by FAQ ID, Keyword/Phrase, Program Area, Primary and Secondary categories, Benefit Year, and Publish Date.

FAQ Search

FAQ ID Enter single FAQ ID or multiple IDs (1-10 or 15,18,87)

Keyword/Phrase

Program Area

Select All
ACA Financial Appeals
Agent Broker
Distributed Data Collection (DDC) for RA Including HCRP/EDGE
Server
Enhanced Direct Enrollment
Enrollment and Eligibility
Event Registration and Logistics
HHS-Operated Risk Adjustment Data Validation (RADV)
High Cost Risk Pool (HCRP)

Primary Category

Secondary Category

Benefit Year

Publish Date

Start Date

22

End Date

22

FAQs to Display:

☒ Current FAQs Only

☐ Retired FAQs Only

☐ All FAQs (Current and Retired)

Search

Clear Search

DDC/EDGE Server Resource Page

The DDC/EDGE Server Resource Page provides central access to job aids, announcements, documentation, FAQs, deadlines, and other resources.

To access the DDC/EDGE Server Resource Page, click on the Program Area Pages icon on 'My Dashboard' or access the page at <https://www.REGTAP.info/ddc.php>.



Distributed Data Collection (DDC) for Risk Adjustment (RA) Including High Cost Risk Pool (HCRP)/EDGE Server [Get Adobe Reader](#)

2018 RA Default Charge Data Submission
March 5 - April 12, 2019 (Deadline - 11:59 p.m. ET)

Days Left
28

EDGE 30.0 Released to Test and Production Zones

MARCH
29

EDGE SERVER TIMELINE
click image to enlarge

Welcome to the Distributed Data Collection (DDC) for Risk Adjustment (RA) Including High Cost Risk Pool (HCRP)/EDGE Server page designed to assist you with locating accurate and valuable information regarding External Data Gathering Environment (EDGE) server data submission.

CMS conducts the EDGE Server Webinar Series training sessions with the purpose of providing issuers with additional information related to data submission, testing, timelines, submission scenarios, and any additional guidance related to the data submission or blackout periods.

Please visit [CCIIO's Regulation and Guidance Page](#) for further guidance.

TOPICS OF INTEREST

REFERENCE TABLE UPDATES	BASELINE SUBMISSION
DATA SUBMISSION	ENROLLMENT SUBMISSION
MEDICAL SUBMISSION	PHARMACY SUBMISSION
SUPPLEMENTAL SUBMISSION	

EDGE Core Resources

EDGE Server Operations & Maintenance Manual (O&MM) V 4.0	EDGE Server Business Rules (ESBR) V 11.0	Interface Control Document (ICD) V 02.01.15	EDGE Server Mailbox Assistance
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[View More](#)

DDC/EDGE Server Resource Page

(continued)

TOPICS OF INTEREST

REFERENCE TABLE UPDATES	BASELINE SUBMISSION
DATA SUBMISSION	ENROLLMENT SUBMISSION
MEDICAL SUBMISSION	PHARMACY SUBMISSION
SUPPLEMENTAL SUBMISSION	

EDGE Core Resources

[EDGE Server Operations & Maintenance Manual \(O&MM\) V 3.0](#)



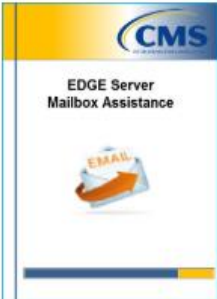
[EDGE Server Business Rules \(ESBR\) V 10.0](#)



[Interface Control Document \(ICD\) V 02.01.15](#)



[EDGE Server Mailbox Assistance](#)



[View More](#)

For quick access to related documentation, users can find resources organized by Topics of Interest, such as 'Medical Submission' or 'Registration'.

Users can also register for active EDGE Server training series, contact CMS, provide feedback, and more.

NEW TO REGISTRATION?
click the button below

REGISTER
for next event session



DO YOU HAVE FEEDBACK?
click the button below

PROVIDE FEEDBACK
to DDC



Closing Remarks

Closing Remarks

- Immediately following this session you will be directed to complete a survey.
 - Please take a moment to submit any ideas, suggestions, or feedback you may have regarding DDC EDGE Server Series IX.