DISTRIBUTED DATA COLLECTION (DDC) FOR REINSURANCE (RI) AND RISK ADJUSTMENT (RA): 2016 PLAN DATA UPLOAD

March 1, 2016

Health Insurance Marketplace Program Training Series

CMS CENTERS FOR MEDICARE & MEDICAID SERVICES

WWW.REGTAP.INFO

Agenda

- Session Guidelines
- Intended Audience
- Purpose
- Plan Reference Table: Overview
- Plan Reference Table: Data Integration
- Plan Reference Table: Load Schedule
- Interim Issuer Testing of 2016 Data
- Questions
- Upcoming Webinars
- Resources
- Closing Remarks

Session Guidelines

- This is a 90-minute webinar session.
- For questions regarding content and the DDC program, please contact your Financial Management (FM) Service Representative directly and copy the Centers for Medicare & Medicaid Services (CMS) Help Desk (CMS_FEPS@cms.hhs.gov).
- For questions regarding logistics and registration, please contact the Registrar at (800) 257-9520.

Intended Audience

- Amazon and On-Premise External Data Gathering Environment (EDGE) server issuers (Marketplace and non-Marketplace) of plans in states where the U.S. Department of Health & Human Services (HHS) operates the Affordable Care Act (ACA) RA and RI Programs
- Third Party Administrators (TPAs) and Support Vendors

Purpose

This DDC session will provide:

- Review of plan reference data table information sources and structure.
- 2016 timeline for EDGE plan reference data table load.
- Key plan data elements to review between now and the data submission blackout to identify gaps in plan data on issuers' EDGE servers.

Plan Reference Table: Overview

Overview

- CMS routinely deploys reference data to the MySQL reference tables on issuers' EDGE servers. Each reference table contains data used to verify data values submitted on the enrollment, pharmacy, medical and supplemental diagnosis files.
  - The INSRNC_PLAN reference table stores the issuer's on and off Marketplace plan offerings to verify the Plan IDs submitted on the inbound files.
- Issuers must have a current "Market Year" associated with each plan for records to be accepted regardless of the plan start and/or end date.
  - The reference tables and the descriptions of the data fields can be found in the Common Data Dictionaries, published in the REGTAP Library at https://www.REGTAP.info.

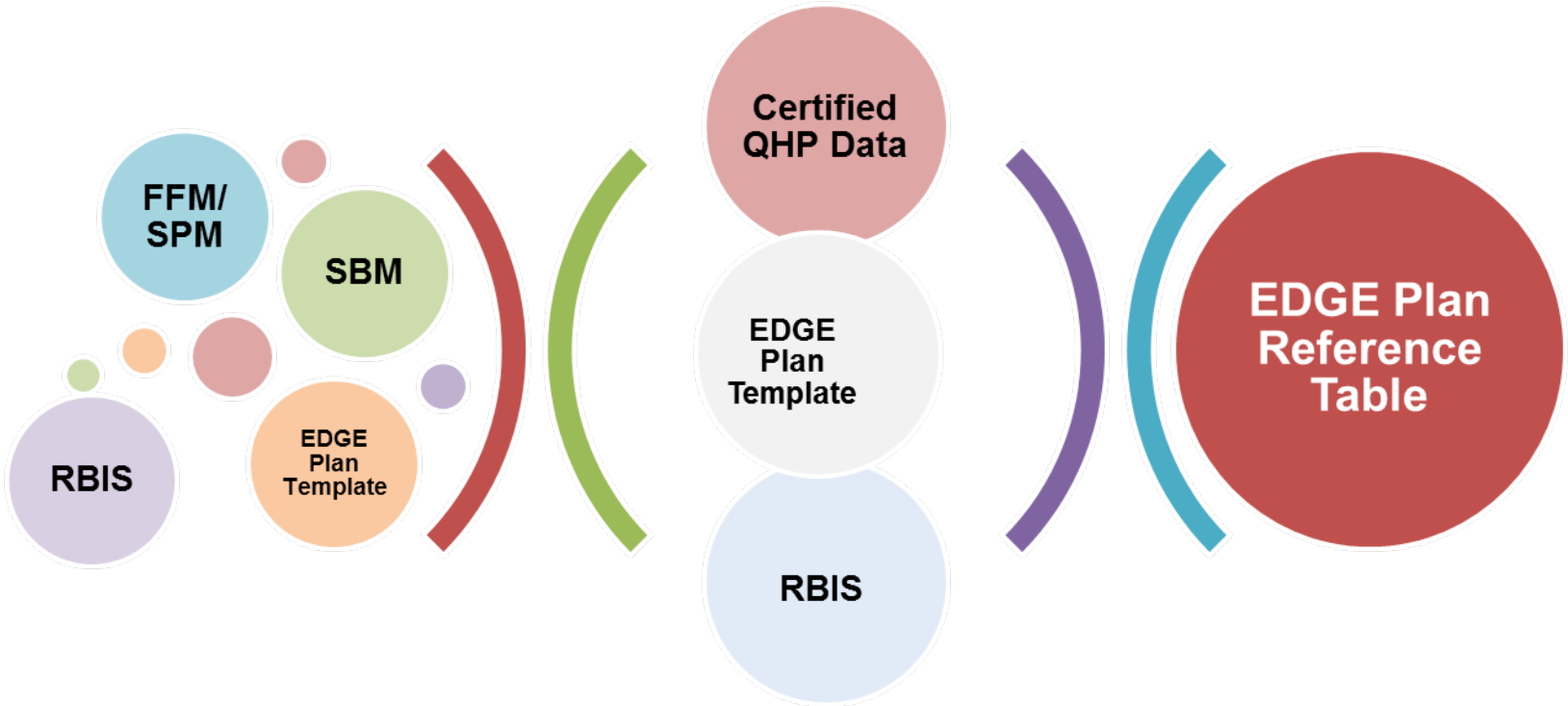
Plan Reference Table Example*

INSRNC_PLAN ID	EFCTV_STRT_DT	EFCTV_END_DT	MARKETYEAR	Comments
12345VA001000101	01/01/2014	12/31/9999	2014	This plan only existed for the 2014 Benefit Year even though the Effective End Date is beyond the 2014 Market Year.
12345VA001000200	01/01/2014	12/31/2014	2014	This plan existed for the 2014 and 2015 Benefit Years.
12345VA001000200	01/01/2015	12/31/2015	2015	
12345VA001000201	01/01/2014	12/31/9999	2014	This plan only exists for the 2014 and 2015 Benefit Years even though the Effective End Dates are beyond the calendar year.
12345VA001000201	01/01/2015	12/31/9999	2015	

***Data fields are limited and comments are provided for illustrative purposes.**

Plan Reference Table: Data Integration

Structure: Hierarchy



Data Integration: Overview

Plan data is collected and integrated for deployment to issuers' EDGE servers from four (4) sources:

- Federally Facilitated Marketplace (FFM) and State Partnership Marketplace (SPM)
  - Data source is CMS
  - Annual collection of Qualified Health Plan (QHP) data with issuers submitting to HIOS' plan data module for FFM or System for Electronic Rate and Form Filing (SERFF) for SPM
- State-Based Marketplace (SBM)
  - Data source is state
  - Annual collection of QHP data with issuers submitting to SERFF or directly to SBM's proprietary system

Data Integration: Overview (continued)

- Off-Marketplace
  - Data source is issuer.
  - Annual collection of non-QHP data with issuers submitting to HIOS' Rate and Benefits Information System (RBIS).
    - A data collection window is open each quarter to allow for plans that begin throughout a benefit year.
- EDGE Templates
  - Data source is issuer.
  - As needed collection of Small Group plans that cross calendar years and are not renewed but still have enrollees until the plan end date.
  - Templates are submitted via email to the issuer's FM Service Representative upon direction by CMS.

Data Integration: FFM and SPM Data

CMS integrates FFM and SPM data as follows:

- All certified QHPs for the applicable benefit year are included in the plan reference deployment.
  - The on-Marketplace certified QHP offerings include the standard Variant ('01') and cost sharing Variants ('02' through '06').
  - Since all on-Marketplace certified QHPs are also required to be offered off-Marketplace, the off-Marketplace version of the QHP is included with a '00' Variant.
- Data received through the FFM and SPM data submission process is given the highest priority when constructing the plan reference table.

Data Integration: SBM Data

CMS integrates the SBM data as follows:

- All certified QHPs for the applicable benefit year are included in the plan reference deployment.
  - The certified on-Marketplace QHP data offerings include the standard Variant (‘01’) and cost sharing Variants (’02’ through ‘06’).
  - Since all on-Marketplace certified QHPs are also required to be offered off-Marketplace, the off-Marketplace version of the QHP may be included (‘00’ Variant) from the SBM.
- Data is collected from the SBM either through SERFF or directly submitted to CMS by the state.
- Data received through the SBM data submission process is given the highest priority when constructing the reference table.

Data Integration: Off-Marketplace

CMS integrates the off-Marketplace data as follows:

- All off-Exchange plans that have been submitted, attested to and verified for the applicable benefit year are included in the plan reference deployment.
  - Off-Marketplace plans include a '00' Variant only.
- Data is collected from issuers who submit the plans through RBIS.
  - To be included in an extract from RBIS, issuers must complete their RBIS templates and then validate and attest to the data.
  - RBIS has a requirement that issuers attest to their data quarterly.
  - When CMS prepares to deploy an update to a plan reference table, CMS includes only the last version of the data that has been validated and attested to by the issuer.
    - Ex: HIOS ID 12345 has 10 plans that the issuer validated and attested to in Q1. The issuer then validated and attested to only nine (9) plans in Q2. CMS would deploy only the nine (9) plans validated and attested to from Q2.
- Data received through the RBIS submission process is given the lowest priority when constructing the reference table.

Data Integration: Off-Marketplace (Continued)

2016 RBIS Submission Schedule:

Calendar Year 2016 Window	Date Range
Window 1	8/31/2015 – 11/20/2015
Window 2	12/7/2015 – 1/22/2016
Window 3	2/1/2016 – 4/8/2016
Window 4 (Final RBIS)	5/2/2016 – 7/8/2016

Please Note:

- *If you do not submit, validate or attest to RBIS plan filings for your organization, please contact the appropriate department within your organization frequently to ensure they meet the plan data submission deadlines.*
- *Failure to submit plan data timely will result in enrollment and claim records being rejected.*

Data Integration: EDGE Server Plan Reference Data Templates

- Issuers submit EDGE Server Plan Reference Data Templates for plans that are missing from the plan reference table.
  - Any corrections to on-Marketplace data must be approved by the applicable Marketplace.
  - Data received through the EDGE Server Plan Reference Data Template submission process is given priority over RBIS data when constructing the reference table.
- Only five (5) key data values from the plan data template are submitted by the issuer. The remaining data values deployed to the plan reference table are defined by CMS.

Data Integration: EDGE Server Plan Reference Data Templates (Continued)

- For 2014 and 2015 Benefit Years, the EDGE Server Plan Reference Data Templates were used to make corrections to off-Marketplace plan data.
- In 2016, issuers must ensure that all RBIS data is accurate through the standard RBIS submission process.
  - CMS will not utilize templates for adding off-Marketplace plans that should have been submitted to RBIS.
  - CMS will only utilize templates for Small Group plans that cross calendar years and are not renewed but still have enrollees until the plan end date.

Structure: Summary

- FFM/SPM/SBM overrides any data submission conflicts with RBIS.
  - No conflict should exist between FFM/SPM and SBM as they are mutually exclusive.
- When constructing the plan reference table:
  - On-Marketplace plan data is highest priority and overrides any data submission conflicts with RBIS.
  - EDGE Server Plan Reference Data Templates are second priority and override any data submission conflicts with RBIS.
  - Off-Marketplace data is lowest priority.

Plan Reference Table: Load Schedule

Load Schedule: Overview

Date	Description
3/31/2016	CMS deploys first 2016 Plan Reference Data Upload
3/31/16 - 7/30/2016	Issuers conduct testing of 2016 enrollment and claims data in the test zone. ***Issuers should not submit 2016 data to the production zone until notified by CMS.**
6/1/2016 - 6/30/2016	Collection of templates of 2015 Small Group plans with enrollment into 2016
8/29/2016	August 2016 Plan Reference Data Upload

Note: 2016 plan data updates will not occur outside of this schedule.

Load Schedule: First 2016 Plan Data Upload

- All available 2016 Benefit Year plan data will be deployed on March 31, 2016.
- Upload will include:
  - 2016 FFM/SPM certified QHPs
  - 2016 SBM certified QHPs
  - 2016 RBIS data collected through the second collection window of Friday, January 22, 2016
- Upload will NOT include:
  - Plans yet to be submitted to RBIS
  - 2015 Small Group plans that are not being renewed but have enrollment that continues into 2016

Interim Issuer Testing of 2016 Data

Interim Issuer Testing of 2016 Data

- Between **3/31/16 and 7/30/16,** issuers can begin testing their 2016 claims and enrollment information in the test zone.
- Issuers should not submit **ANY** 2016 claims or enrollment information to production.
- Any data submitted to production will need to be resubmitted after the blackout is lifted because the data will be archived.

Interim Issuer Testing of 2016 Data (Continued)

- Issuers should use the testing period to not only test their data, but review their plan reference data for missing or inaccurate information:
  - Identify 2015 Small Group plans that are not being renewed but have enrollment that continues into 2016.
  - Identify plans that have not been submitted to RBIS and should be submitted by the final submission window.
  - Identify errors in plan reference data (ex: inaccurate Maximum Out-of-Pocket [MOOP] values, missing Rating Areas, etc.).

Interim Issuer Testing of 2016 Data: Plan Reference Data 101

The following query can be used at any time to identify what is actively loaded on a servers' plan reference table:

1. You need a row in your "INSRNC_PLAN" table of the "EDGE_SRVR_COMMON" schema on your EDGE server for each 16-digit plan ID for each market year that you have enrollment.
   - Query to determine whether the plan and variant exists: **select * from EDGE_SRVR_COMMON.INSRNC_PLAN where INSRNC_PLAN_ID = 'Insert 16-Digit Plan ID' and MARKETYEAR = 'Insert Market Year'**

2. You need a row in your "ISSR_PLCY_RATG_AREA" table of the "EDGE_SRVR_COMMON" schema on your EDGE server for each 16-digit plan ID for each market year for each rating area that you have enrollment
   - Query to determine whether the rating area exists: **select * from EDGE_SRVR_COMMON.ISSR_PLCY_RATG_AREA where PLAN_ID = 'Insert 16-Digit Plan ID' and MARKETYEAR = 'Insert Market Year'**

Interim Issuer Testing of 2016 Data: Plan Reference Data 101 (Continued)

Element Name	Description
INSRNC_PLAN_ID	A 16-digit field that serves as a Unique Plan Identifier for a plan and a given variant.
INSRNC_PLAN_NAME	Text field of the plan when available, frequently left blank (NOT USED).
EFCTV_STRT_DT	Start date of plan (NOT USED).
EFCTV_END_DT	End date of plan (NOT USED).
CREATN_DT	CMS Only use field.
CREATD_BY	CMS Only use field.
LAST_MDFYD_DT	CMS Only use field.
MDFYD_BY	CMS Only use field.

Interim Issuer Testing of 2016 Data: Plan Reference Data 101 (Continued)

Element Name	Description
NON_GRANDFTHRED_PLAN_IND	Always set to a value of 'Y' (NOT USED).
ISSR_ORG_ID	Five (5)-Digit HIOS ID.
RA_IND/RI_IND	Not Used.
MARKET_TYPE	1 = Individual or Merged Market, 2 = Small Group.
EXCH_TYP	Not Used.
EXCH_TYP_CD	Not Used.
FMLY_OUT_OF_POCKET_MAX_AMT	Numeric field used in on-Marketplace reinsurance calculations.
INDV_OUT_OF_POCKET_MAX_AMT	Numeric field used in on-Marketplace reinsurance calculations.

Interim Issuer Testing of 2016 Data: Plan Reference Data 101 (Continued)

Element Name	Description
MTL_LVL_CD	Field which indicates the Metal Level of the plan.
MARKETYEAR	Indicates market year of the plan for EDGE data submission. A plan must have a value of 2016 to submit 2016 claims or enrollment data.
ACTIVE_FL	Value of 'Y' for all active plans.
ACT_INACT_DATE	Date field indicates the last date the insurance plan was made active or inactive.

Interim Issuer Testing of 2016 Data: Plan Reference Data 101 (Continued)

Issuers who have Plan IDs with an EFCTV_END_DT beyond 12/31/2015 should not assume they will be able to submit 2016 data for this plan.

- The Market Year field determines what Plan ID can be submitted.
- The Market Year field will be populated with a value of 2014, 2015 and/or 2016, indicating the year in which the plan was effective.
- A unique occurrence of a given INSRNC_PLAN_ID must be present with the current Market Year for a plan to be considered active, regardless of the EFCTV_END_DT of the plan.
  - Ex: An issuer with a plan that has an EFCTV_END_DT of 12/31/9999 and a MARKETYEAR value of 2015 could not submit claims or enrollment data for this plan in 2016.

Interim Issuer Testing of 2016 Data: Plan Reference Data 101 (Continued)

- During file processing, the EFCTV_END_DT is not used to determine if a plan is effective during a benefit year.
- The EFCTV_END_DT is only used during file processing validation to identify when an Enrollment End Date is beyond the plan EFCTV_END_DT. When this occurs, an Error Code of 6.5.23 is produced, but the record is accepted as long as the Market Year on the plan is in the current benefit year.

Interim Issuer Testing of 2016 Data (Continued)

- What should issuers do if they identify missing plans during the testing period?
  - **Missing on-Exchange plans:** Contact your FM Service Representative after the close of 2015 data submission on May 2, 2016.
  - **Missing off-Exchange plans:** Submit plans to RBIS during their Q3 or Q4 collection windows.
  - **Missing off-Exchange 2015 Small Group non-renewed plans with enrollment in 2016:** Issuers missing a 2016 MARKETYEAR version of a plan should identify their plans and submit them to CMS during the June 2016 plan collection period.

Load Schedule: Collection of 2015 Small Group Plans with Enrollment into 2016

- Plans that do not have a Market Year of 2016 will result in claims and enrollment data rejection.
- In June of 2016, CMS will collect Small Group plans from issuers to ensure they are populated onto the table.
- CMS will provide more guidance on this after the close of the May 2, 2016 deadline for 2015 data.

Load Schedule: August 2016 Plan Reference Data Upload

- 2016 Benefit Year plan data upload will occur on August 29, 2016.
- Upload will include:
  - 2016 FFM/SPM certified QHPs
  - 2016 SBM certified QHPs
  - 2016 RBIS data as of the window four (4) RBIS collection on July 8, 2016
  - 2015 Small Group plans that are not being renewed but have enrollment that continues into 2016

Key Dates to Remember

Date	Description
1/22/2016	Off-Marketplace data submitted to RBIS as of this date will be included in the first 2016 plan reference upload.
3/31/2016	2016 plan reference data is uploaded to servers.
5/2/2016	Window four (4), the **FINAL** 2016 RBIS window opens.
6/1/2016	CMS collects non-renewed 2015 Small Group plans with coverage into 2016.
6/30/2016	Non-renewed 2015 Small Group plans with coverage into 2016 due to CMS.
7/8/2016	Final day to submit 2016 RBIS data as window four (4) closes.
8/29/2016	Final plan reference data upload.

Questions?

To submit questions by phone:

- ❑ Dial ‘14’ on your phone’s keypad
- ❑ Dial ‘13’ to exit the phone queue

Upcoming Webinars

Webinar Topic	Scheduled Event Date
TBD	March 8, 2016 11:30 a.m. – 1:00 p.m. ET

Resources

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

WWW.REGTAP.INFO

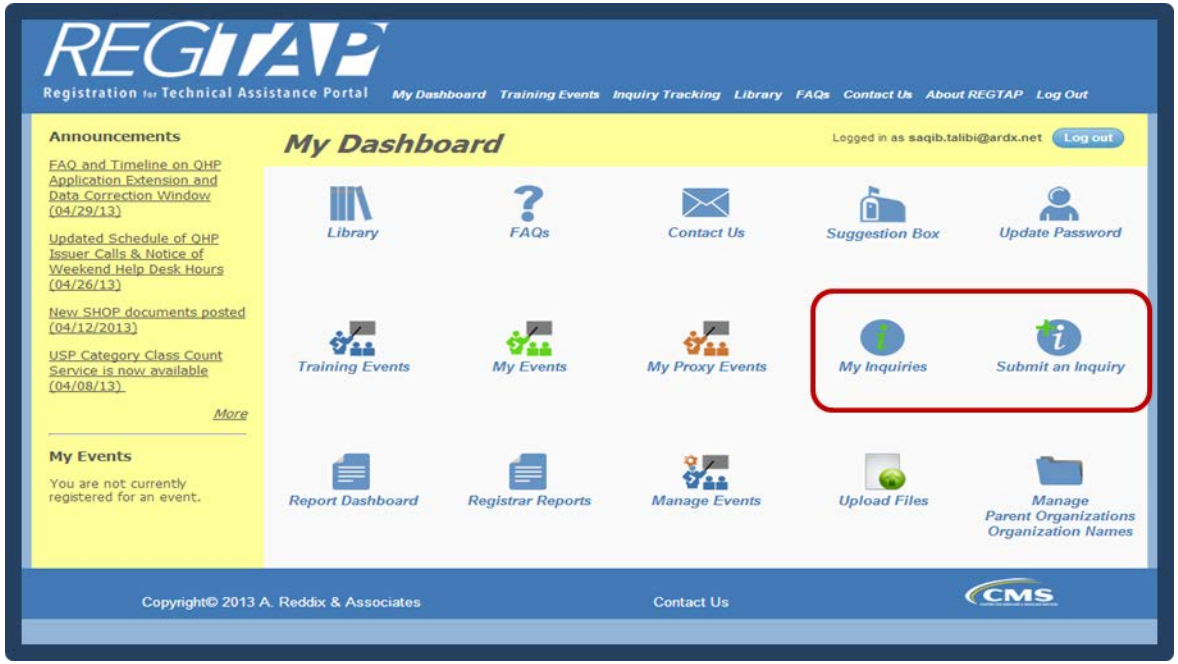
Resources

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

Inquiry Tracking and Management System (ITMS)

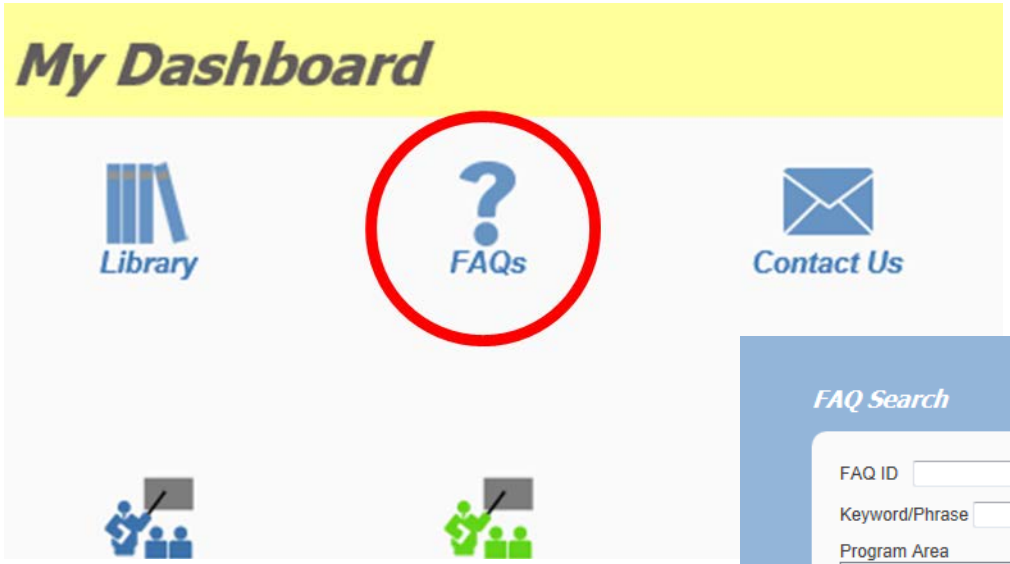
ITMS is available at https://www.REGTAP.info.

Users can submit questions after the User Group by selecting “Submit an Inquiry” from My Dashboard.

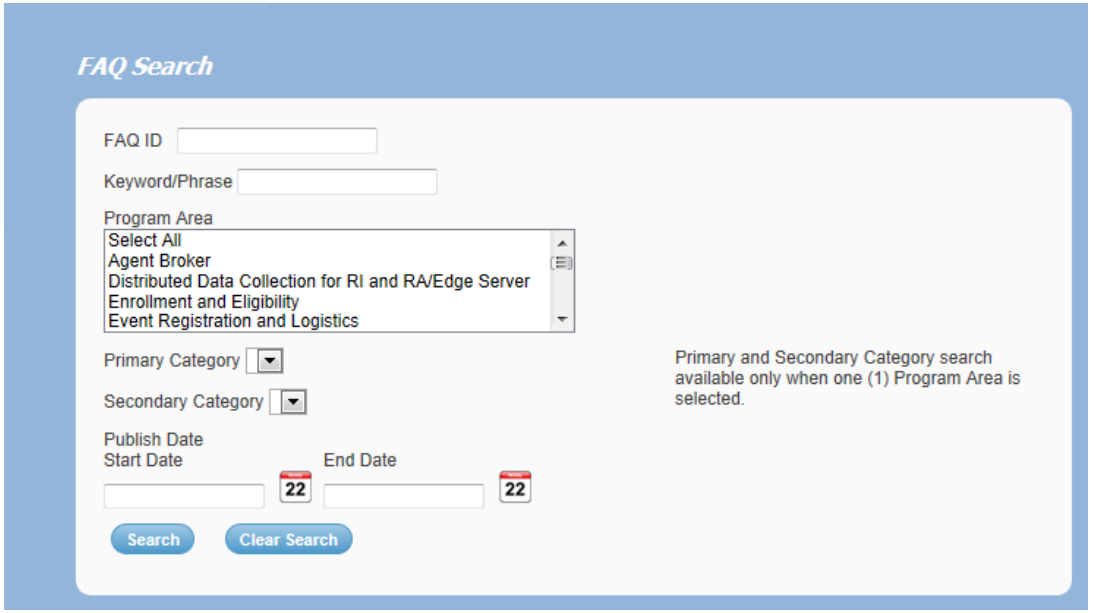


Note: Enter only one (1) question per submission.

FAQ Database on REGTAP



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



FAQ Database is available at https://www.REGTAP.info

Closing Remarks