

Cost-sharing Reduction Reconciliation for Benefit Year 2017 and Benefit Year 2016 Restatements

April 5, 2018



**Health Insurance Exchange Program
Training Series**

Agenda

- Session Guidelines
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- CSR Reconciliation Operational Processes Overview
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Session Guidelines

- This is a 90 minute webinar session.
- For questions regarding content, please submit inquiries to the CSR Reconciliation team at CSReconquestions@cms.hhs.gov.
- For questions regarding logistics and registration, please contact the Registrar at: (800) 257-9520.

New Webinar Platform

- Use Internet Explorer (IE) when accessing the new web platform.
- Test your system's compatibility, use the following link:
http://engage.vevent.com/microsite/ext/self_test.jsp?eid=140.
- If you cannot hear today's audio or having other technical issues, please contact the Registrar Support Team at registrar@regtap.info or 1 (800) 257-9520.

New Webinar Platform (continued)

- **Can I still use a landline phone to listen?**

No, the audio for the webcast will stream via your computer or smart device (Apple or Android), so you will need speakers or headphones to listen.

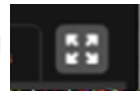
- **Can I call from a cell phone to listen?**

Yes, you may access the event from a smart device, such as an Apple or Android cell phone, using the web browser on your device.

- **How do I adjust the volume for the event?**

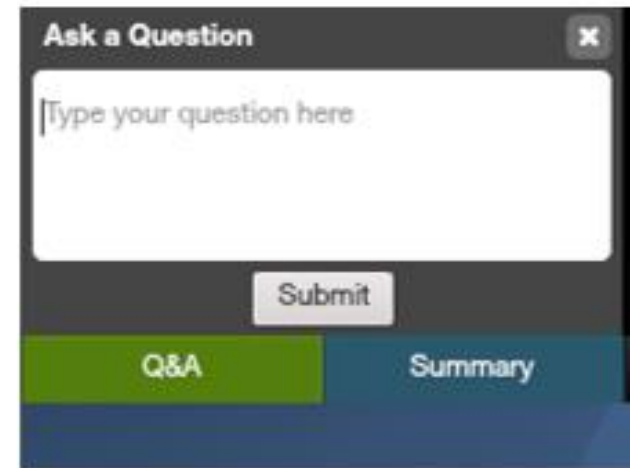
Please adjust your volume to the desired setting using the volume settings on your device. You may also adjust the volume in the lower right corner of the webcast. Please ensure the volume button is not muted in the platform.

- **Can I make the picture larger on my screen?**

Yes, you may maximize your screen by selecting the full-screen icon  located in the lower right corner of your screen.

New Webinar Platform (continued)

- To submit questions, use the Q&A panel, and CMS Subject Matter Experts will respond during the webinar or afterwards, as needed.

A screenshot of a web interface titled "Ask a Question" in a dark grey header bar with a close button (X) in the top right corner. Below the header is a large white text input field with the placeholder text "Type your question here". To the right of the input field is a grey "Submit" button. Below the input field and button are two tabs: "Q&A" on a green background and "Summary" on a blue background. The "Q&A" tab is currently selected.

Intended Audience

- The intended audience includes Issuers that received advance Cost-sharing Reduction (CSR) payments for benefit year (BY) 2017 and/or Issuers restating CSRs for BY 2016.
- The purpose of this presentation is to educate and prepare Issuers who will be participating in the CSR reconciliation submission process with CMS.

Purpose

- This stakeholder training session will:
 - Explain the CSR reconciliation process and timelines.
 - Provide an overview of the CSR Reconciliation Point of Contact (POC) Web Form.
 - Discuss the requirements Issuers must follow to submit CSR reconciliation data and attestation files, including the process and file format requirements.

CSR Reconciliation Overview

CSR Background

- 45 CFR 156.430 sets forth regulations regarding advance CSR payments, data submission and reconciliation.
 - Under §156.410, QHP Issuers must ensure that any individual enrolled through the Marketplace, who is eligible for CSRs, pays only the cost sharing required for the applicable covered service under the plan variation.
 - In the case of improper assignment to a plan variation or improper cost sharing, the Issuer must correct the plan variation assignment and refund any excess cost sharing paid by the consumer. Issuers cannot submit as CSR provided any excess cost sharing provided.

CSR Background (continued)

- For each BY, CMS reconciles CSR payments by collecting Issuer data on what the enrollee in a CSR plan variation paid in cost sharing for the entire BY and what the enrollee would have paid in cost sharing with a standard plan. The difference is the amount of CSR provided.
 - CMS then compares the amount of valid CSR provided to the enrollee to the total advance CSR amount provided to the Issuer by the Federal government for the BY.

CSR Reconciliation - Requirements

- In order to facilitate reconciliation of CSRs to reflect the amount provided to enrollees in CSR variation plans, Issuers will submit their allowable essential health benefits (EHB) medical claims costs to CMS for the entire BY, broken down by:
 - The amount the Issuer paid,
 - The amount the enrollee paid, and
 - The amount the enrollee would have paid for the same claims if enrolled in a standard plan.
- **For BY 2017, Issuers must use the standard methodology to determine enrollee cost sharing amounts for comparable claims in the standard plan.**
- By **June 1, 2018**, Issuers must submit this data for each QHP plan for BY2017 and if applicable, separately for BY 2016 restatements.

New for Benefit Year (BY) 2017

- No testing window.
 - We encourage issuers to submit files early and often to obtain successful submission.
- Updated the data submission timeline.
 - April 2, 2018 – June 1, 2018
- Elimination of the Simplified and Simplified AV methodology selection process.
 - Issuers must use the CMS standard methodology to calculate the value of cost-sharing reductions provided for each enrollee throughout the 2017 benefit year.

No CSR Payments

- In October 2017, CMS announced that CSR payments will be discontinued until an appropriation exists. In the absence of an appropriation, CMS cannot make CSR reconciliation payments resulting from the BY 2017 reconciliation process and BY 2016 restatement process.

Issuers that are not Required to Submit

- Similar to past years:
 - Issuers may elect to reimburse CMS the full advance payment amount if, for example, the Issuer had little or no enrollment in a plan or enrollees with few claims for which cost-sharing reductions were provided.
 - Issuers that wish to return advance payments for all plans in a Health Information Oversight System (HIOS) ID for BY 2017 are not required to submit the data.
 - Issuers should notify CMS with the subject line “return advance CSRs for 2017” at CSRreconquestions@cms.hhs.gov as soon as possible upon making this decision (REGTAP FAQ 15109 and 15270).

Transferring Accumulators

- When transferring accumulators under 45 CFR 156.425(b), Issuers (when possible and practical) should transfer an enrollee's accumulated cost sharing in the order in which cost sharing is required in the new plan.
 - For example, if the original plan does not have a deductible and the new plan has a deductible, the Issuer should first transfer amounts for any type of cost sharing incurred by the consumer in the original plan to the new plan's deductible.
- In February 2017, CMS delayed guidance that would have *required* Issuers to follow this order when transferring accumulators, and we said we would work with Issuers to determine a least burdensome method to implement this accumulator policy.
- We continue to seek Issuer input on when to implement the above policy and alternative ways to transfer accumulators or address the policy goal. Please email CSRreconquestions@cms.hhs.gov if you have feedback on this matter.

List of Materials Released by CMS

To assist QHP Issuers in the CSR Reconciliation Process, CMS has updated the following resources:

Resource	Resource Link
CSR Reconciliation Guidance for Benefit Year 2017	https://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/Downloads/Final-CSR-Reconciliation-Guidance-BY2017.pdf
CSR Reconciliation Issuer to MIDAS Attestation Inbound Specification	https://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/Downloads/Final-CSR-Reconciliation-Issuer-to-MIDAS-Attestation-Specification-BY2017.pdf
CSR Reconciliation Issuer to MIDAS Inbound Specification	https://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/Downloads/Final-CSR-Reconciliation-Issuer-to-MIDAS-Inbound-Specification-BY2017.pdf
CSR Reconciliation Data File Error Code List	https://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/Downloads/Final-CSR-Reconciliation-Data-File-Error-Code-List-BY2017.pdf
CSR Reconciliation Attestation File Error Code List	https://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/Downloads/Final-CSR-Reconciliation-Attestation-File-Error-Code-List-BY2017.pdf
CSR Reconciliation POC Web Form User Guide	https://www.regtap.info/uploads/library/FT_CSRContactDataWeb_Form_Guide_5CR_033018.pdf

List of Materials Released by CMS (continued) - CSR Reconciliation Attestation Forms for BY 2017 and BY 2016 Restatements

Attestation Form	Resource Link
Attestation Form A – Benefit Year 2017	https://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/index.html
Attestation Form B – Benefit Year 2017	
Attestation Form C – Benefit Year 2016	

UPDATES:

- In prior years, there were separate versions of each Attestation Form for each Form type and BY.
- Updated Attestation Forms A and B at the link above can be used for BY 2017 and/or BY 2016 restatements.
 - Attestation Form C is only applicable for Issuers restating BY 2016, that used the simplified or simplified actuarial value (AV) methodologies.

Timelines

Timing of BY 2017 Reconciliation Process Calendar

Timing	Activity
March 29, 2018	CSR Recon POC web form opens.
March 30, 2018	Final manual and specifications published.
April 2, 2018	Submission window opens for benefit year 2017 reconciliation and benefit year 2016 restatements.
June 1, 2018	Submission window closes for benefit year 2017 reconciliation and benefit year 2016 restatements.
June 29, 2018	CMS notifies issuers of charge amounts (i.e. CSR charges owed by the issuer).

CSR Reconciliation POC Web Form Overview

CSR Reconciliation POC Web Form

- CMS created a web form for Issuers to report CSR reconciliation business and technical POCs.
- CMS emailed company CEO and/or CEO designates on **March 29, 2018** to ask them to provide a CSR reconciliation business and technical POC for each HIOS ID that received advance CSR payments for benefit year 2017.
- Company CEO and/or CEO designates should provide the POCs by **April 6, 2018**, but can continue to access the web form at any time after that to update their POCs.
 - The web form is connected to the contact database used for the EDGE server. Accordingly, CEO and/or CEO designates will be asked to use their EDGE Server Contact Database Access Code to access the web form.
- The web form must be completed and submitted in a single session; it is not possible to save and return to the session.

CSR Reconciliation POC Web Form

- The CSR reconciliation POCs will receive attestation confirmation emails and any other CSR reconciliation related outreach CMS performs.
 - There is a lag between when the Company CEO and/or CEO designate provides the POCs via the web form and when the POCs are updated in MIDAS (for purposes of where CMS sends attestation confirmation emails).
- The user guide to complete the CSR Reconciliation POC Web Form is available at:
https://www.regtap.info/uploads/library/FT_CSRContactDataWeb_Form_Guide_5CR_033018.pdf

CSR Reconciliation Operational Process Overview

CSR Reconciliation Process for BY 2017 and BY 2016 Restatements

- For BY 2017 reconciliation and BY 2016 restatements, the CSR reconciliation process and requirements – including data and attestation file data elements, data and attestation file structure, validations, and error codes - are largely the same as last year.
 - Only minimal updates were made to update the BY to allow Issuers to submit files for BYs 2017 and 2016 restatements.

CSR Reconciliation Step I Activities: Issuer Submits Data and Attestation Forms to CMS

- CMS requires Issuers to report CSR reconciliation data in an electronic file via the CMS Enterprise File Transfer (EFT) location.
- The file must be in pipe-delimited format and in ASCII text.
- The data elements in the file include Issuer, plan (optional), and policy level information.
- The CSR Reconciliation Issuer to MIDAS Inbound Specification document provides the technical specifications for the file.
- **CMS only accepts submissions through EFT.**

CSR Reconciliation Step I Activities: Issuer Submits Data and Attestation Forms to CMS

(continued)

- CMS also requires Issuers to complete the Attestation Form(s) which are available on the CCIIO website.
- CMS strongly encourages that Issuers wait to submit their Attestation Form(s) until after they have submitted their final data file and confirmed the data file has a status of Accepted or Accepted with Errors.
- Issuers will submit Attestation Forms via EFT.
 - Attestation Form A: Allowed Costs for Essential Health Benefits (with the exception of issuers who estimated Allowed Costs for Essential Health Benefits)
 - Attestation Form B: Estimate of Allowed Costs for Essential Health Benefits
 - Attestation Form C: Simplified Methodology Effective Parameters and Formulas (*applicable only for some issuers restating BY 2016*)

CSR Reconciliation Step I Activities: Issuer Submits Data and Attestation Forms to CMS

(continued)

- Attestation Forms must be completed and submitted separately from the data files.
- All Issuers must complete either Attestation Form A or B, as applicable.
 - Some Issuers will also have to submit Attestation Form C, if they are restating BY 2016, as applicable.
- **Issuers complete the applicable Attestation Forms available on the CClO website. The CSR Reconciliation Issuer to MIDAS Attestation Inbound Specification provides requirements for how Issuers submit the Attestation Forms through EFT, as well as the file format and business validations that MIDAS performs on the Attestation Forms.**

CSR Reconciliation Step II Activities: CMS Data Validation

- CMS will perform a series of validations on the data and Attestation Forms.
- Issuers will receive emails confirming the status of their data and attestation file submissions.
 - Confirmation emails for data files are sent to the business and technical POC email addresses the Issuer included in their data file.
 - Confirmation emails for attestation files are sent to the POC email addresses CMS has on file from the web form the Company CEO/CEO Designate submitted.
- Every Issuer will receive a report in their EFT folder for all data file processing statuses (Accepted and Processed, Accepted with Errors, or Rejected).
- Please refer to the CSR Reconciliation Issuer to MIDAS Inbound Specification document for a list of validations that CMS performs on data and attestation files. CMS may perform additional validations and will follow up with additional guidance if needed.

CSR Reconciliation Step III Activities: CMS Error Reporting to Issuers

- Possible data file statuses include Accepted, Accepted with Errors, or Rejected. If the file is Rejected or Accepted with Errors, the error report will include a comprehensive list of the data file errors.
 - The file will be rejected when mandatory data elements are not included or are input incorrectly, or if critical validations fail, and the Issuer will receive an email indicating that the file has been rejected.
 - The file will be Accepted with Errors when other, non-critical validations fail, in which case the Issuer will receive an email indicating that the file has been accepted and processed but there are errors. CMS will generate an error report that summarizes the non-critical errors, which are informational and do not affect CMS's processing of the CSR recon data submitted.
- Issuers should review the error reports to determine what corrections are needed, make the corrections, and resubmit the data file(s) before the submission deadline.
- If attestation files are rejected, the error codes associated with the rejection will be communicated within the confirmation email for the attestation files.

CSR Reconciliation Step III Activities: CMS Error Reporting to Issuers (continued)

- When correcting data and resubmitting data files, Issuers must re-submit the entire file (i.e., the full pipe-delimited file).
- CMS will consider every resubmission as a new submission, so the filename for the resubmission must be unique and include a new date and time.
 - CMS will not accept or process resubmissions with identical dates and times in the filename.



Because CMS will not process partial resubmissions, Issuers should plan accordingly by saving their flat, pipe-delimited file in a separate environment so that it can be modified and resubmitted as necessary.

Data File Structure Overview

Data File Structure

- CMS will only accept data file submissions through EFT.
 - When using SFTP, send files using the “Inbound 30” folder.
 - Issuers must use “.P” in the file name for files submitted during the April 2-June 1, 2018 submission window. The data file names must consist of the following sections:
 - Trading Partner (TP) Identifier (ID)
 - Application ID
 - Function Code
 - Date
 - Time
 - Environment Code
 - Direction

Data File Structure (continued)

- The data file includes three (3) record levels of data elements, each with a specific set of information that must be included:
 - Issuer Summary Record (01)
 - Plan Summary Record (02) *Optional*
 - Policy Detail Record (03)
- There are no changes to the data elements or lay out of data elements in the file format [besides updates to the benefit year(s)].

(01) Issuer Summary Record

- The **(01) Issuer Summary Record** contains information on aggregate amounts of EHB claims, amounts paid by policy holders, the Issuer, and CSR provided for all QHPs under this Issuer.
- **Issuer Summary Records must have 28 fields.**
- **Sample Issuer Summary Record Format:**

01|54631|VA|11512|20180501|103256|2017|2.00|5.00|STANDARD|Y|0601201
6|11512|N||FIRSTNAME1|LASTNAME1|Email1@email.com|TPOC1|4063608
629|POCFIRSTNAME1|POCLASTNAME1|Email2@email.com|BPOC1|406360
8630|1|1

(01) Issuer Summary Record (Continued)

This table lists the data elements and position of data elements in the **Issuer Summary Record**.

Note: There are no changes to these elements from last year.

Issuer Summary Record Data Elements

Field Name	Position	Field Name	Position	Field	Position
Record Code	101	Acquisition	111	Technical POC Organization Title	120
Trading Partner ID	102	Acquisition Effective Dates	112	Technical POC Phone Number	121
Issuer State Code	103	Acquiring Issuer	113	Business POC First Name	122
HIOS ID	104	Merger	114	Business POC Last Name	123
Issuer Extract Date	105	Merger Issuer	115	Business POC Email Address	124
Issuer Extract Time	106	Merger Effective Dates	116	Business POC Organization Title	125
Benefit Year	107	Technical POC First Name	117	Business POC Phone Number	126
Total Actual CSR Amount	108	Technical POC Last Name	118	Total number of CSR Variant Plans under HIOS ID	127
Total CSR Amount Advanced to the Issuer by CMS	109	Technical POC Email Address	119	Total number of Exchange-assigned Subscriber IDs in all CSR Variant Plans under this HIOS ID	128
Reconciliation methodology	110				

(02) Plan Summary Record

- The **(02) Plan Summary Record** includes plan-related data elements such as a list of all QHPs, financial amounts, and methodology selected for the applicable BY.
- **Plan Summary Records are optional.**
- **Sample Plan Summary Record Format:**
02 | 11512NC006002403 | 0.00 | 5.00 | 4.00 | 1.00 | 2.00 | 1.00 | 1

(02) Plan Summary Record (continued)

The table below lists the data elements and position of data elements in the **Plan Summary Record**. These elements have not changed since last year. Plan Summary Records are optional.

Plan Summary Record Data Elements	
Field Name	Position
Record-Code	201
QHP ID	202
Total Annual Premium	203
Total Allowed Costs for EHB	204
Total Actual Amount the Issuer Paid for EHB	205
Total Actual Amount Paid For EHB by Enrollees	206
Total actual amount for EHB enrollees would have paid in the standard plan	207
Total actual value of CSR Provided	208
Total number of Exchange Subscriber IDs in this plan variation for the benefit year	209

(03) Policy Detail Record

- The **(03) Policy Detail Record** includes policy-related data elements for all QHPs, financial amounts, and methodology selected for the applicable benefit year.
- **Policy Detail Records must have 17 fields.**
- **Example Policy Summary Record Format:**

03|0000238689|1234567890|20170701|20171231|11512NC00600240
3|20160701|20161231|0.00|S|100.00|0.70|10.00|6.00|4.00|6.00|2.0
0

(03) Policy Detail Record (continued)

Note: There are no changes to these elements from last year.

This table lists the data elements and position of data elements in the **Policy Detail Record**.

Policy Detail Record Data Elements

Field Name	Position	Field Name	Position
Record Code	301	Self Only/Other than self-only	310
Exchange-assigned Subscriber ID	302	Annual limitation on cost sharing for the standard plan	311
Exchange-assigned Policy ID	303	Actuarial value amount of the Standard Plan	312
Exchanged-assigned Policy Start Date	304	Total allowed costs for EHB	313
Exchange-assigned Policy End Date	305	Actual amount the issuer paid for EHB	314
QHP Plan ID	306	Actual amount the enrollee(s) paid for EHB	315
Plan Benefit Start Date	307	Actual amount the enrollee(s) would have paid under the standard plan	316
Plan Benefit End Date	308	Actual CSR Provided	317
Total Monthly Premium	309		

Optional Data Elements

- If Issuers are not populating optional data elements in a record, Issuers must ensure they populate the preceding and proceeding pipe delimiters for the data element.
 - (01) Issuer Summary records must have **28 fields**.
 - (02) Plan Summary records, if included, must have **9 fields**.
 - (03) Policy Detail records must have **17 fields**.
 - Issuers may populate a space in between the pipe delimiters, although a space is not required.

Data Accuracy at the Issuer, Plan and Policy Levels

- Preliminary valid CSR and CSR charge amounts will be displayed in the error report sent to the Issuer.
- **Valid CSR and CSR charge amounts, including revised amounts resulting from restatements, in error reports are preliminary. CMS will send final valid CSR and CSR charge amounts to Issuers in their CSR reconciliation report on June 29, 2018, based on the data in the Issuer's most recent acceptable (Accepted or Accepted with Errors) data file as of the submission deadline.**

Data Accuracy at the Policy Level

- CMS considers (03) Policy Detail records to be valid if they have a valid QHP ID, valid Exchange-assigned subscriber ID, and the records meet file format/structural requirements.
 - For purposes of validating QHP IDs, CMS verifies that the QHP ID had enrollment for the benefit year.
 - For purposes of validating Exchange-assigned subscriber IDs, CMS verifies the ID against enrollment reconciliation data for the benefit year.
- Issuers will receive error code CSRIFIL50 for invalid Exchange-assigned subscriber IDs and error code CSRIFIL67 for invalid QHP IDs.
- CMS does not include CSR Provided for invalid (03) Policy Detail records in the calculation of the issuer's final valid CSR and CSR charge amounts for the BY.

Data File Submission Process

Data File Submission

- Issuers will submit files to MIDAS through EFT in pipe-delimited format using ASCII text and a CRLF as the line terminator.
- Issuers must submit only one (1) HIOS identifier and BY per file.
- If an Issuer is submitting data for multiple HIOS IDs the issuer must create a separate file for each HIOS ID.
- The function code for the data submission will be CSRI.



Issuers must submit attestation files and data files separately by HIOS ID and benefit year. CMS will accept and process the attestation files and data files separately.

Data File Submission (continued)

- Possible statuses for data file submissions include:
 - Accepted and Processed
 - Accepted with Errors
 - Rejected
- CMS will send confirmation email messages to issuers regarding status of files.
- CMS will provide issuers with an error report for each file submitted detailing any file format or validation errors.

Data File Submission Scenario # 1

Successful Submission

Scenario 1	Status	Email Message Sent to the Business and Technical POCs in the data file
Data file has been accepted.	DATA FILE ACCEPTED AND PROCESSED SUCCESSFULLY	CMS has processed your CSR reconciliation file submission. Your submission passed all CMS validation checks. Your data submission will be marked as complete contingent on your attestation(s) submission being accepted and processed successfully. You will receive a summary report in your EFT folder within the next 24 hours that includes your CSR charge amount, which was calculated based on the data you have submitted to date. Please review the report. It will include any QHP IDs for which you have not submitted data, if applicable.

Data File Submission Scenario # 2

Submission Accepted, but with Errors

Scenario 2	Status	Email Message Sent to the Business and Technical POCs in the data file
Data file has been accepted and processed, but it has errors.	DATA FILE ACCEPTED BUT WITH ERRORS	CMS has processed your CSR reconciliation file submission, but the file has errors. You will receive an error report in your EFT folder within the next 24 hours that summarizes the errors. Review the error report to determine if you need to correct the data, in which case you should resubmit the entire file to CMS. Additionally, the report includes your CSR charge amount, which was calculated based on the data you have submitted to date. The report will also include any QHP IDs for which you have not submitted data, if applicable. Your data submission will be marked as complete contingent on your attestation(s) submission being accepted and processed successfully.

Data File Submission Scenario # 3

Submission Rejected

Scenario 3	Status	Email Message Sent to the Business and Technical POCs in the data file
Data file has been rejected.	DATA FILE REJECTED	CMS has rejected your CSR reconciliation file submission due to formatting or other critical errors. You will receive an error report in your EFT folder within the next 24 hours that summarizes the errors. Review the error report to determine what you need to correct, and then resubmit the entire file to CMS. All data resubmissions must include the required attestations in order for your submission to be considered complete.

Restatements

Restatements

- Similar to past years, Issuers may restate BY 2016 amounts of CSR provided to maintain data accuracy. **However, Issuers whose recalculated data results in a charge owed to CMS must submit restatements.**
- Issuers restating CSRs for 2016 should submit complete data files in the same manner and using the same file format as BY 2017.
 - Data files for restatements must be submitted separately by HIOS ID and BY. Data files for restatements must be a full file.
 - Restatements must be in the new data file format outlined in this presentation. MIDAS will not process files in the old file format.
- Restatements can apply to policies previously reported to CMS for a prior BY as well as new policies (policies that were in force but not formerly reported to CMS for reconciliation of that BY).
- Issuers must use the methodology selected for the BY being restated to re-calculate actual CSRs provided for that BY.

Restatements (continued)

- Restatements should not include data for which a discrepancy or request for reconsideration was previously submitted and denied by CMS.
- Issuers must submit the applicable Attestation Form(s) that correspond with the BY being restated.
- Issuers will receive an updated CSR reconciliation report on June 29, 2018 for the restated HIOS ID and BY.
- For complete information on restatements, please see the Manual for Reconciliation of the Cost-Sharing Reduction Component of Advance Payments for Benefit Year 2017, available at:
<https://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/Downloads/Final-CSR-Reconciliation-Guidance-BY2017.pdf>

Outlier Analysis

Determination of Outliers

- CMS will conduct an analysis on Issuers' reported valid CSR amounts to determine whether they are within an expected range; based on an analysis of other Issuers' submissions and a threshold derived from that analysis.
- Specifically, CMS will conduct a comparison against other metrics of Issuer risk (e.g., Risk Adjustment data) adjusting for state characteristics (such as, differences in states' premiums in reflection of the CSR amounts provided) to determine if the Issuers' reported amounts are within a reasonable range compared to other Issuers.
- Issuers flagged as outliers will be asked to provide explanations for their data anomaly. Issuers that do not provide such sufficient and reasonable explanation will be subject to CMS audits.

Attestation Form Completion and Submission Process

Attestation Form – Requirements

- Issuers should complete Attestation Forms as appropriate, and submit the forms separate from the data files.
- All issuers must complete either Attestation Form A or B.
- If restating 2016 CSRs, some issuers will complete Attestation Form C as applicable.
 - Attestation Forms A, B & C should be submitted via EFT.
 - The process for submitting attestations has not changed from last year.
- Issuers should upload attestations after confirming successful submission of final data files.
- The Attestation Forms are available on the CCIO website. Separate forms have been created for each form type and benefit year.
- **For 2016 restatements, issuers must complete the Attestation Form(s) that corresponds to the benefit year being restated.**

Attestation Form– Requirements

(continued)

- The forms are in Excel format. The forms for each BY should be sent in Excel format and be zipped together.
- **Signatures must be typed on each attestation form.**
- The forms include instructions for submission:
 1. Issuers must upload a signed copy of the required form(s) to an EFT folder by **June 1, 2018**.
 2. Issuers are required to submit a separate Attestation Form(s) for BY 2017 and BY 2016 restatements.
 3. Issuers are required to include name, title, organization, telephone, email address and signature on each form before submission (signature must be typed in the attestation form(s)).
- We strongly encourage Issuers to submit final data files first and confirm successful submission (Accepted or Accepted with Errors), before submitting attestation files to avoid having to submit attestation files multiple times.

Attestation Form A

- Issuers, with the exception of those that are estimating allowed costs for EHBs, must submit this form to attest that CSR amounts provided to enrollees represent only cost sharing for EHB.

Attestation Form A (continued)



Department of Health and Human Services
Centers for Medicare & Medicaid Services

Issuers must attest that cost-sharing reduction amounts provided to enrollees represent only cost sharing for EHBs that may be included in the issuer's cost-sharing reductions provided (in the case of fee-for-service providers, these amounts must have been passed through by the issuer to such provider pursuant to 45 CFR 156.430(c)(5)).¹ NOTE: Issuers that are estimating EHBs must use Attestation Form B.

Instructions: Issuer must upload a signed copy of this form to an EFT folder by June 1, 2018. Signatures may simply be typed in the form. Please submit a separate attestation for each benefit year advance cost-sharing reduction payments were received.

Benefit year: _____

Select Benefit Year

Enter Issuer
Name

HIOS Issuer ID:² _____

Enter HIOS ID

I certify in my capacity as actuary (or authorized delegate of actuary) of [(Issuer Name)] as indicated below:

- I have reviewed the information on cost-sharing reduction amounts provided as calculated under the Standard or Simplified Methodology, as applicable, and submitted to the Centers for Medicare & Medicaid Services (CMS). I further certify that to the best of my knowledge, information, and belief, the information provided is accurate and that cost-sharing reduction amounts represent only cost-sharing reductions paid for essential health benefits that are permitted to be included in the cost-sharing reductions provided, as described in Section 1303 of the Patient Protection and Affordable Care Act (in the case of fee-for-service providers, these amounts must have been passed through by the issuer to such providers, pursuant to 45 CFR 156.430(c)(5)). I understand the information included in this submission is the basis for calculating cost-sharing reduction amounts provided by my organization to eligible enrollees.

Name of the Person Completing this Form: _____

Title: _____

Organization: _____

Telephone: _____ ext: _____

Email Address: _____

Signature: _____ (type)

Date Signed: _____ example: MM/DD/YYYY

Enter the
following
information:

- Name,
- Title,
- Organization,
- Telephone number,
- Email address,
- Signature, and
- Date Signed

¹ See 45 CFR 156.430(c)(5) Reimbursement of providers. In the case of a benefit for which the QHP issuer compensates an applicable provider in whole or in part on a fee-for-service basis, allowed costs associated with the benefit may be included in the calculation of the amount that an enrollee(s) would have paid under the standard plan without cost-sharing reduction only to the extent the amount was either payable by the enrollee(s) as cost sharing under the plan variation or was reimbursed to the provider by the QHP issuer.

² The five-digit Health Insurance Oversight System (HIOS)-generated issuer ID number.



Attestation Form B

- Issuers that estimate total allowed EHB must submit this form to attest that they used a reasonable method to estimate, that non-EHB is less than 2% of total, and also that CSR amounts submitted as CSRs provided represent only cost sharing for EHB that can be included as CSRs provided.

Attestation Form B (continued)



Department of Health and Human Services Centers for Medicare & Medicaid Services

Issuers that estimate total allowed essential health benefits must submit this form, instead of Attestation Form A. Attestation must be provided for each plan for which the issuer uses the plan-specific percentage estimate of total allowed essential health benefits. Issuers that do not use the plan-specific percentage estimate of total allowed essential health benefits must submit this form for the corresponding benefit year to calculate claims amounts attributable to essential health benefits. An issuer using this procedure is required to do so for all plan variations for which the criteria below are met, and must list each plan on this attestation.

Instructions: Issuer must upload a signed copy of this form to an EFT folder by June 1, 2018. The issuer's name must be typed in the form. Please submit a separate attestation for each benefit year advance cost-sharing reduction payments were received.

Select Benefit
Year

Benefit year: _____

Enter
HIOS ID

HIOS Issuer ID:³ _____

Enter QHP ID

Qualified Health Plan ID(s)⁴ _____

(List all QHPs for which the issuer has estimated the percentage of essential health benefits for the purpose of calculating cost-sharing reductions provided.)

Enter Issuer
Name

I certify in my capacity as actuary (or authorized delegate of actuary) of [Issuer Name] as indicated below:

• I have reviewed the information on cost-sharing reduction amounts provided as calculated under the Standard or Simplified Methodology, as applicable, and submitted to the Centers for Medicare & Medicaid Services (CMS). I further certify that to the best of my knowledge, information, and belief, the information provided is accurate and that cost-sharing reduction amounts represent only cost-sharing reductions paid for essential health benefits that are permitted to be included in cost-sharing reductions provided, as described in Section 1303 of the Patient Protection and Affordable Care Act, (if applicable). If the issuer is a self-insured employer, these amounts must have been passed through by the issuer to such providers, pursuant to 45 CFR 156.430(c)(5).

Enter Issuer
Name

• I also certify that to the best of my knowledge, information, and belief, that the non-essential health benefit percentage estimate of total allowed costs for essential health benefits for (insert issuer name) is less than 2 percent, as required by CMS for an issuer to be able to calculate claims amounts attributed to essential health benefits for the purpose of cost-sharing reduction reconciliation using the plan-specific percentage estimate of non-essential health benefit claims submitted to the Unified Rate Review Template for the corresponding benefit year, or other reasonable method (insert explanation). I understand that the information included in this submission is the basis for calculating cost-sharing reduction amounts provided by my organization to eligible enrollees.

Name of the Person Completing this Form: _____

Title: _____

Organization: _____

Telephone: _____

ext: _____

Email Address: _____

Signature: _____

(type)

Date Signed: _____

example: MM/DD/YYYY

Enter the
following
information:

- Name,
- Title,
- Organization,
- Telephone number,
- Email address,
- Signature, and
- Date Signed

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

³ The five-digit Health Insurance Oversight System (HIOS)-generated issuer ID number.



Attestation Form Submission Scenario # 1

Successful Submission

Scenario 1	Status	Email Message Sent to Issuer POCs Provided via the Web Form
Attestation form(s) has been accepted.	ATTESTATION FORM(S) ACCEPTED AND PROCESSED SUCCESSFULLY	CMS has received your CSR reconciliation Attestation Form(s) and it has been processed successfully. Your form(s) passed CMS's validation checks. Your submission will be marked as complete contingent on your data file being submitted and processed successfully.

Attestation Form Submission

Scenario # 2

Rejected Submission

Scenario 2	Status	Email Message Sent to Issuer POCs Provided via the Web Form
Attestation form(s) has been rejected and must be resubmitted	ATTESTATION FORM(S) HAS BEEN REJECTED	CMS rejected your attestation form(s) because it failed the validation process. Your attestation form(s) needs to be corrected and resubmitted. Below is a summary of the errors associated with your attestation form(s). Review the errors to determine what corrections need to be made, and then submit a corrected form(s). CSRATI001 Form A - Mandatory Benefit Year value is missing

Attestation Form Structure Overview

CSR Reconciliation Issuer to MIDAS Attestation Inbound Specification File Structure

- **CSR Reconciliation Attestation Forms:**
 - CMS will only accept Attestation Form A, B, and C, if applicable, submissions through EFT.
 - For direct SFTP (for automation) - sftp://eft.feps.cms.gov
 - When using SFTP, send files using the “Inbound 30” folder.
- The folder structure is applicable to production.
 - Issuers must use “.P” in the file name for files submitted during the April 2-June 1, 2018 submission window.
 - The attestation filenames must consist of the following sections:
 - Trading Partner (TP) Identifier (ID)
 - Application ID
 - Function Code
 - Date
 - Time
 - Environment Code
 - Direction

CSR Reconciliation Attestation Form Structure

- Issuers will create a ZIP file that includes their attestation form(s) for each HIOS ID and benefit year.
- Issuers will complete an attestation form for **each attestation type per HIOS ID and benefit year.**
- The ZIP file containing the attestations will be named as:
1234567890.MID.CSRATI.D170612.T145543452.P.IN
- The attestation file will be named as:
Attestation<<A/B/C>>_benefitYear_HIOSID.
- The Excel forms inside the file will be the name of the forms, such as Attestation A, Attestation B or Attestation C.
- CMS will not accept partial submission of attestation forms.

CSR Reconciliation Team

- The CSR reconciliation team will facilitate the accurate and timely submission of files from Issuers to CMS, and to assist issuers in resolving data validation errors.
- CMS will convene periodic technical assistance calls with Issuers.
- The team can be reached for questions and assistance at CSRreconquestions@cms.hhs.gov.

Next Steps

Next Steps

- CSR Reconciliation POC web form: Emails were sent to Company CEO and/or CEO designates on March 29, 2018 and they will have until Friday, April 6, 2018 to provide their Issuer's CSR reconciliation POCs.
- CSR Reconciliation Data Submission Window: April 2, 2018 to June 1, 2018.

Upcoming Webinars

Date	Day	Time
Wednesday	May 9, 2018	2:00 p.m. ET – 2:30 p.m. ET
Wednesday	May 16, 2018	2:00 p.m. ET – 2:30 p.m. ET
Wednesday	May 23, 2018	2:00 p.m. ET – 2:30 p.m. ET
Wednesday	May 30, 2018	2:00 p.m. ET – 2:30 p.m. ET

Questions?

To submit questions by computer:

- *Type your question in the text box under the “Q&A” tab located to the left hand panel of your screen.*
 - *To submit the question, click “Submit”*

Resources

Resources

Resource	Resource Link
U.S. Department of Health & Human Services (HHS)	http://www.hhs.gov/
Centers for Medicare & Medicaid Services (CMS)	http://www.cms.gov/
The Center for Consumer Information & Insurance Oversight (CCIIO) web page	http://www.cms.gov/cciiio
Consumer website on Health Reform	http://www.healthcare.gov/
Registration for Technical Assistance Portal (REGTAP) - presentations, FAQs	https://www.REGTAP.info

Locating CSR Reconciliation Documents in REGTAP

Stakeholders can access additional documents at <https://www.REGTAP.info> in the REGTAP Library.

Under Program Area, select “Payment-CSR Reconciliation”

REGTAP
Registration for Technicians

Library

Filter by:

Program Area

- ACA Financial Appeals
- Agent Broker
- Distributed Data Collection for RI and RA/Edge Server
- Enrollment and Eligibility
- Event Registration and Logistics
- HHS-Operated Risk Adjustment Data Validation (RADV)
- Issuer Oversight Branch
- Payments
- Payments-CSR Reconciliation**
- Payments-Monthly Payment Cycle
- Payments-Payee Groups
- Payments-Remittance Message (X12 HIX 820)
- Payments-Remitting Amounts Due
- PM-Rx
- Premium Payments
- Qualified Health Plan (QHP)
- Qualified Health Plan (QHP)-APTC & CSR Data
- Reinsurance
- Reinsurance-Contributions
- Risk Adjustment
- Risk Corridors
- SHOP
- User Fees
- Web-Broker Entities
- Other

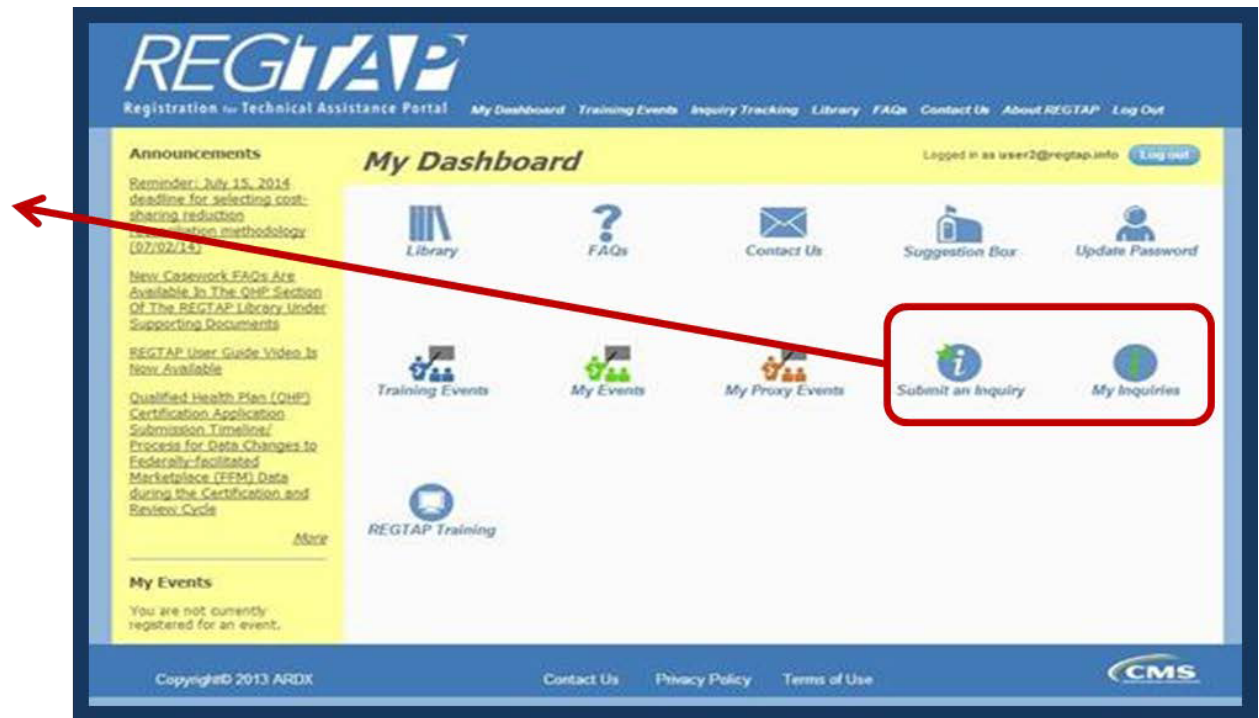
Program Area

Program Area	Resource Type	Download
Payments-CSR Reconciliation	FAQ	Download
Payments-CSR Reconciliation	FAQ	Download
Payments-CSR Reconciliation	FAQ	Download
Payments-CSR Reconciliation	Supporting Documents	Download
Payments-CSR Reconciliation	Supporting Documents	Download
Payments-CSR Reconciliation	Presentation Slides	Download
Payments-CSR Reconciliation	Supporting Documents	Download

Inquiry Tracking and Management System (ITMS)

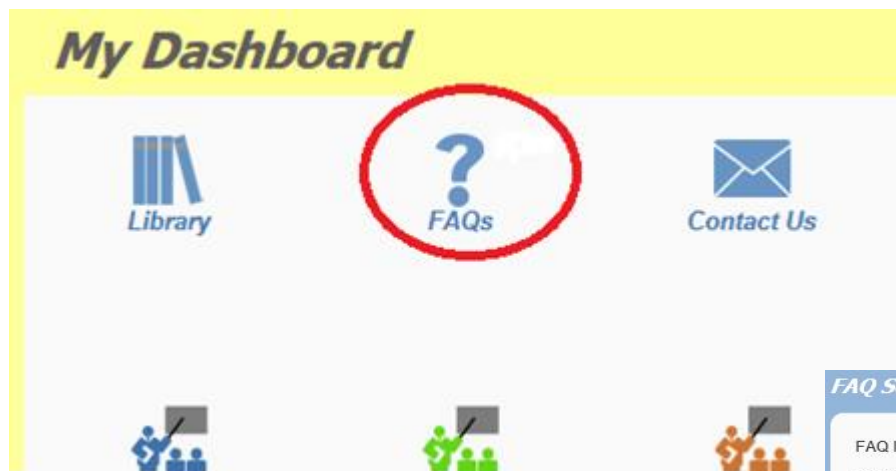
Stakeholders can submit inquiries to <https://www.REGTAP.info> through ITMS.

Select '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 Categories, Benefit Year, Retired and Current FAQs and Publish Date.

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

Closing Remarks