# Plan Management (PM) Community Overview and Non-Discrimination Benefit Review Tool

## April 17, 2019

Center for Consumer Information and Insurance Oversight (CCIIO)

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# Agenda

- Session Guidelines
- Overview of Plan Management Community
- Highlights for PY2020 Certification
- Viewing Issuers and Plans in the State
- Updating Users & Contacts
- Plan Withdrawal
- Email Communication from CMS
- PM Community Resources
- Live Q&A Session
- Closing Remarks

# Intended Audience

- Please be advised that this is not an open press call.
- Members of the press or a media outlet should disconnect the call at this time and contact the Centers for Medicare & Medicaid Services (CMS) Press Office for further information.

# Session Guidelines

- This is a 45-minute webinar session.
- Throughout the webinar, you may submit questions via the Q&A Panel.
- We will address questions during the Q&A session at the end of the presentation.
- For questions regarding content or logistics, contact the Registration for Technical Assistance Portal (REGTAP) Registrar at registrar@regtap.info or (800) 257-9520.

# Announcements

# Overview

- The **Plan Management (PM) Community** is an online platform that allows issuers to receive information about their Qualified Health Plan (QHP) Application(s) and plan certification(s), and for states to receive information about the QHP Applications and certifications of plans offered by issuers in their state.
- Federally-facilitated Exchange (FFE) states, states performing plan management functions, and State-based Exchanges using the Federal Platform (SBE-FPs) designate representatives in their organizations as PM Community users.

# Overview (continued)

- As of plan year (PY) 2019, all states on the federal platform use the PM Community to view QHP Application data for issuers in their state, manage their contact list for QHP certification communications, download notices from CMS, and upload their completed plan confirmation tables.

- In addition, states in all Exchange models will perform activities related to Essential Health Benefits (EHB) in the PM Community.

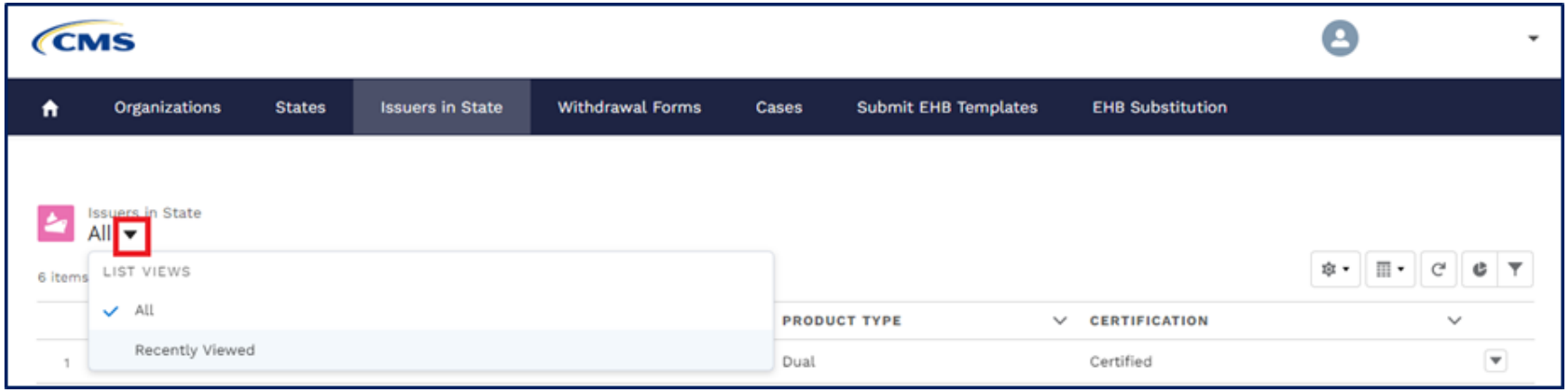
# Highlights for PY2020 Certification

- Each state may request access to the PM Community for up to three partner users.
- New and updated training videos

# Viewing Issuers and Plans in the State

# Viewing Issuers in the State

- In the PM Community, issuers are organized at the plan year-level. Each issuer has a unique ID for each plan year, beginning in 2018 (e.g., 12345-2018, 12345-2019, 12345-2020).
  - Issuers new to the Exchange for plan year 2020 will not have a 2018 or 2019 designated issuer ID.
- To see all issuers within the state, navigate to the “Issuers in State” tab.
  - Select “All PY2018” or “All PY2019” from the dropdown list to narrow results to a particular plan year. Once PY2020 application submission begins, an “All PY2020” category will also be available for use.



# Viewing Issuers' Plans in the State

- Plans are also organized by plan year; each plan ID has an extension containing the plan year, similar to issuer IDs (e.g., -2018, -2019, -2020).
- States can see the plans of issuers in their state by clicking on an issuer ID and navigating to the Plans box.
  - All plans displayed will be for the same plan year as the selected issuer.
  - The Plans box will display the six most recently viewed plans. If an issuer has more than six plans, users can select "View All" to see a complete list of the issuer's plans for that plan year.



# Managing Users and Contacts

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# PM Community Users vs. Contacts

## PM Community Users

- Someone who has access to the PM Community for the state
- Complete activities within the PM Community like viewing corrections, submitting withdrawal forms, or submitting plan confirmation tables
- Can only be removed by submitting a ticket to the Marketplace Service Desk (CMS_FEPS@cms.hhs.gov)

## Contacts

- Members of a state who should receive email communication from CMS regarding QHP certification
- Along with users, form the distribution list for QHP certification-related email outreach, notices, and other important communications
- Can be added, removed, or edited by any PM Community User for the state

# Updating Users

- CMS recommends that states maintain at least two active users throughout each plan year, and replace users whenever a current user leaves the organization. If a PM Community user leaves the organization or should no longer have access, please let CMS know as soon as possible, and identify a suitable replacement, where possible.
  - Remove a user by following the steps outlined in the PM Community User Guide.
  - Replace a user to the PM Community by submitting a ticket to the Marketplace Service Desk (MSD) at CMS_FEPS@cms.hhs.gov.
- For instructions on how a new PM Community user can request access, please refer to the "Accessing the PM Community" training video, available from the "QHP Certification Resources" tab on the PM Community home page.
  - Due to a limited number of licenses, the state may not be able to add additional users; if that is the case, the MSD can help the state replace existing users instead.

# Plan Withdrawal

# Plan Withdrawal

- States can submit withdraw plans for the upcoming plan year as needed, using the “Withdrawal Forms” tab in the PM Community.

- States that need to submit a form can do so by following these steps in the PM Community:
  - Navigate to the “Withdrawal Forms” tab in the top navigation bar.
  - Click the “New” button on the top right of the screen to create a new form.
  - Use the Issuer ID field to look up the issuer ID; click on the desired issuer ID.
  - Complete the form (required fields are denoted with an asterisk).
  - Click “Save” and then click “Submit for Approval” to submit the form to CMS.

- Additional information about the plan withdrawal process is also available on the QHP certification website (https://www.qhpcertification.cms.gov/s/Plan%20Withdrawal) as well as in the PM Community User Guide, located on the “QHP Certification Resources” tab of the PM Community home screen.

# Email Communications from CMS

# Email Communications from CMS

- CMS sends QHP certification-related communications to states when **new review results for issuers in the state are available** in the PM Community, or when **action is required within the system**.
- CMS sends these communications from two addresses:
  - CCIIOMemos@cms.hhs.gov
  - QHP_Applications@cms.hhs.gov
- Communications are sent to those listed in the “Contacts” section on the “Organizations” tab.
- These communications include, but are not limited to:
  - QHP Application Notices for the state
  - Plan Confirmation Notices for the state
  - Notification of corrections being released for issuers in the state

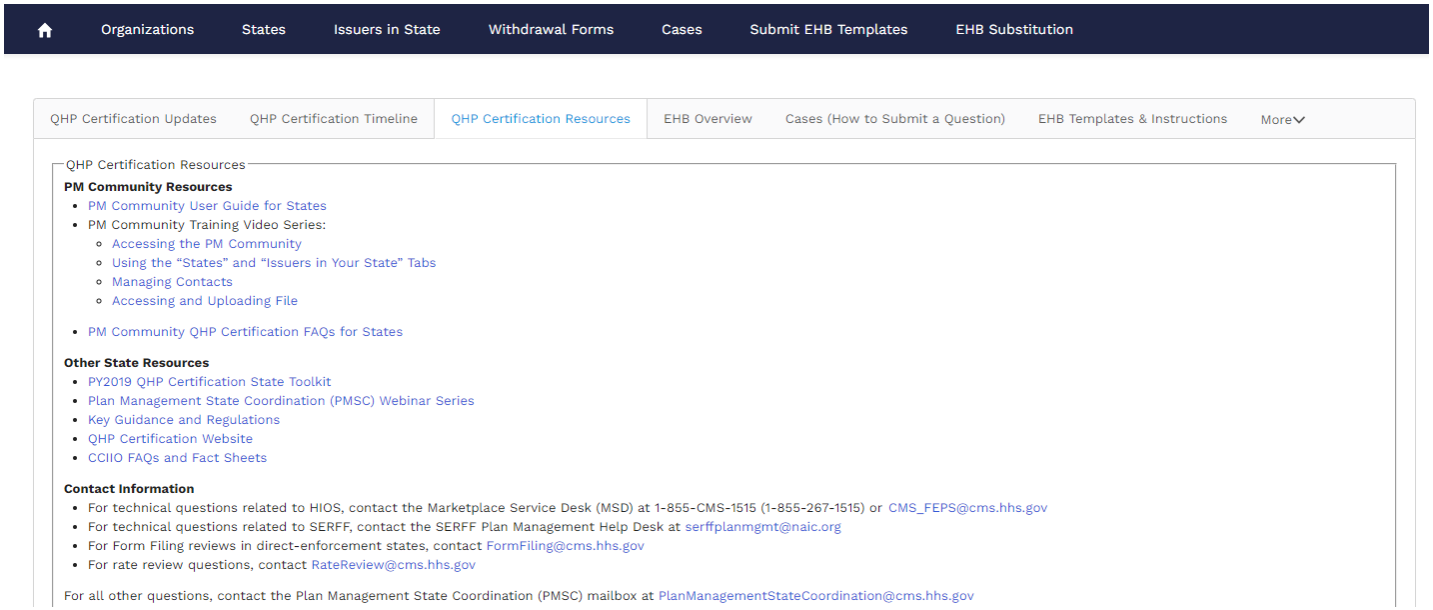
# PM Community Resources

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# Resources

- The “QHP Certification Resources” tab also includes a detailed PM Community User Guide, training videos, and links to additional resources. CMS plans to make updated training videos available to users in the spring.
- Previously-conducted webinars related to the PM Community are posted on REGTAP for additional assistance.






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# Non-Discrimination Benefit Review Tool



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# Non-Discrimination Benefit Review Tool

- CMS performs Non-Discrimination Cost Sharing Review for individual market QHPs in the Federally-facilitated Exchanges (FFE). The review is not applicable for Catastrophic plans or Stand-alone Dental Plans (SADPs).
- The corresponding Non-Discrimination Benefit Review Tool:
  - Imports Plans & Benefits Template data from the Master Review Tool.
  - Performs an outlier analysis for QHP discriminatory benefit design as discussed in the 2020 Letter to Issuers.
  - Reviews a set of benefits and identifies any plan that has a significantly higher copay or coinsurance compared to others in the state and nation as applicable.
- As the tool compares data from ALL issuers in a state, the tool will not yield meaningful results if run by a single issuer.
  - **Use of this tool by individual issuers is not recommended.** The tool is provided to issuers to give transparency into how the CMS review is conducted. States may use this tool.

# Non-Discrimination Review Tool Demo



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# Live Q&A

# Questions

Please help us provide an accurate response by identifying your State when asking a question.

**To submit or withdraw questions by phone:**

- **To submit a question, dial 'star(*) pound(#)' on your phone's keypad.**
- **To withdraw a question, dial 'star(*) pound(#)' on your phone's keypad.**

**To submit questions by webinar:**

- **Type your question in the text box under the 'Q&A' tab and click 'Send.'**

*If you are not able to ask your question during today's session, or if your question is best answered by subject matter experts (SMEs) outside Plan Management (PM), you may submit it via CMS_FEPS@cms.hhs.gov with the subject line "State Question."*

# State Regulators Webinar Session Survey

- CMS welcomes your feedback regarding this webinar series and values any suggestions that will allow us to enhance this experience for you.
- Shortly after this call, we will send a link to you for a convenient way to submit any ideas or suggestions you wish to provide that you believe would be valuable during these sessions.
- Please take time to complete the survey and provide CMS with any feedback.



# Closing Remarks