

Qualified Health Plan (QHP) Rating Module Overview

February 28, 2017

**Qualified Health Plan (QHP)
Series II**

Agenda

- Session Guidelines
- Key Dates
- Announcements
- QHP Rating Module Overview
- Questions
- Resources
- Closing Remarks

Session Guidelines

- This is a 60-minute webinar session.
- This session is conducted to provide an overview of the QHP Rating Module.
- For questions regarding content, contact the CMS Help Desk by email at: CMS_FEPS@cms.hhs.gov or by phone at: (855) 267-1515.
- For questions regarding logistics and registration, contact the Registrar at: (800) 257-9520.

Upcoming Key Dates for QHP Plan Maintenance and Certification

Date	Category	Activity
February 12, 2017	Plan Data Change	January Data Correction Window (DCW) Plan Year (PY) 2017 Plan Data Changes display on HealthCare.gov
Mar. 15 – Mar. 17, 2017	Issuer Conference	Annual QHP Issuer Conference in Baltimore, MD

Announcements

Introduction

The purpose of this presentation is to provide a high level overview of the **Rating Module**.

- **Objectives:**

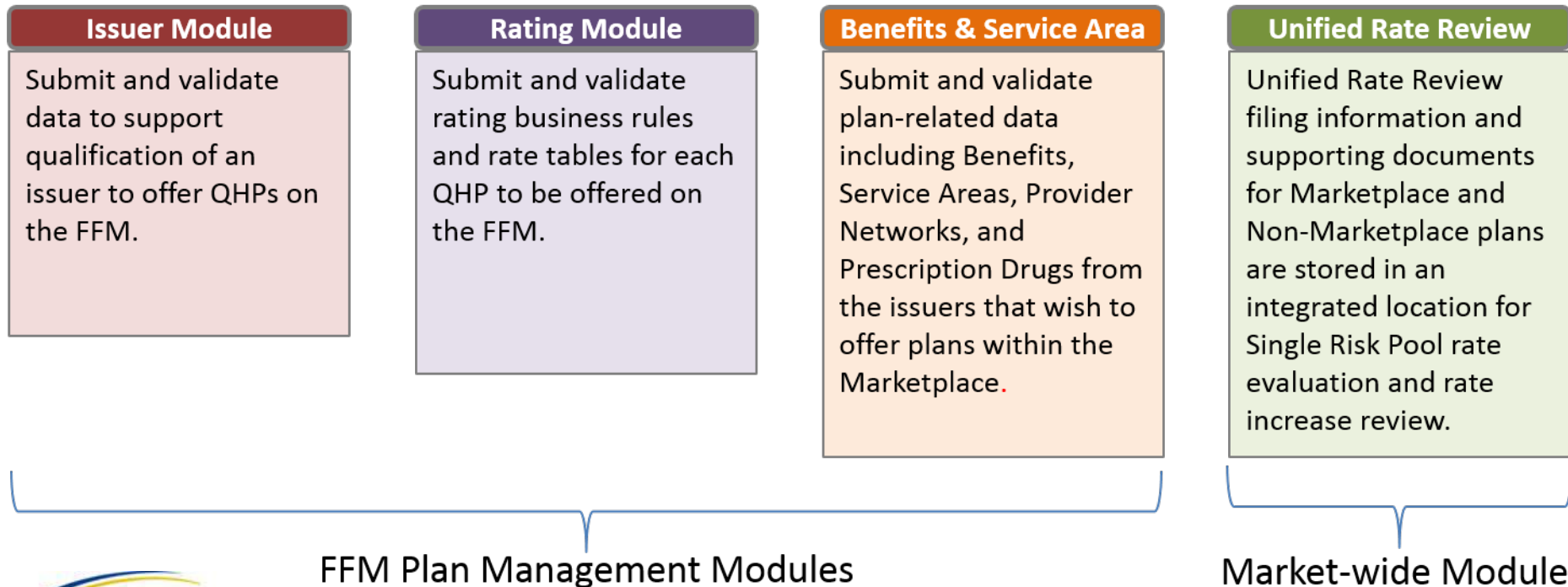
- Refresh understanding on the Rating Module and corresponding templates.

- **Intended Audience:**

- Issuers experienced with using the Rating Module from last year
- New Issuers interested in a high level discussion of the Rating Module

Plan Management Overview

There are four Federally-facilitated Marketplace (FFM) Plan Management (PM) and Market-wide data collection modules.



Rating Module Overview

Plan Management Overview

The QHP Plan Management Modules can be accessed within the Health Insurance Oversight System (HIOS).



Health Insurance Oversight System

Tuesday, January 17, 2017 [ACCESS HIOS](#) [HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome First Last

Plan Management and Market Wide Functions Home Page

Organization Management & Administrative Functions:

- [Manage Account](#)
- [Manage an Organization](#)
- [Role Management](#)

Market Wide Functions

- [Unified Rate Review System](#)

Plan Management Functions

- [QHP Issuer Module](#)
- [QHP Benefits and Service Area Module](#)
- [QHP Rating Module](#)
- [Plan Confirmation](#)
- [QHP Plan Preview Module](#)

Plan Management And Market Wide Functions Main Page Announcements

Welcome to the Plan Management and Market Wide Functions Portal. Beginning April 1, 2013, the Centers for Medicare and Medicaid Services (CMS) have opened The Plan Management and Market Wide Functions portal in the Health Insurance Oversight System (HIOS). The Plan Management and Market Wide Functions Portal is where issuers will access both Market Wide modules (like, the Unified Rate Review Module) and Federally Facilitated Marketplace (FFM) application specific modules.

Issuers seeking Qualified Health Plan (QHP) certification will submit data to the Centers for Medicare and Medicaid Services (CMS) via the QHP Issuer Module, QHP Benefits and Service Area Module, and QHP Rating Module as part of the Federally-facilitated Marketplace (FFM) Qualified Health Plan (QHP) application. Edge Server Management Module is currently live in FFM under the Financial Management section.

Issuers seeking to submit the Unified Rate Review (URR) template (Part I), Consumer Justification Narrative (Part II) and Actuarial Memorandum (Part III) on or after 4/1/2013 for the plans in the single risk pool(s) are required to submit utilizing the Unified Rate Review module.

For any further inquiries or questions, please contact the Exchange Operations Support Center (XOSC) at CMS_FEPS@cms.hhs.gov or 1-855-267-1515.

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

U.S. Department of Health & Human Services • 200 Independence Avenue, S.W. • Washington, D.C. 20201

Rating Module Overview

Issuers will begin the Rating Module at the Summary page.

PLAN MANAGEMENT

Text Size: A A A

PLAN YEAR : 2018
Welcome, ACNTEST | Logout

Rating Module

Instructions and Reference Material
(PDF) [1.68 MB]

Data SubmitterData Validator

Summary

Start the Rating Data Submission

Fields marked with an asterisk (*) are required.

*Issuer:
38708 TX FFE RR Test Issuer 642

Start the Rating Module

Resume an Existing Submission

Issuer ID	Issuer:	Issuer State	Last Update:	Status:	Action:
10207	CareFirst BlueChoice	VA	Thu, 18 Feb 2016 10:17:07 EST	Cross Validations Complete	View
12786	World Insurance Company	DE	Wed, 16 Nov 2016 14:08:14 EST	Cross Validations Complete	View
13063	VA Health 9	VA	Wed, 27 Apr 2016 10:46:11 EDT	Cross Validations Complete	View
30545	123456002 Test	DE		Pending Submission	Resume

Showing 1 to 4 of 4 entries

Rating Module Overview

Issuers will select an Issuer from the drop down list and begin the Rating Module.

Rating Module

 [Instructions and Reference Material \(PDF\)](#)
[1.68 MB]

Data Submitter | Data Validator

Summary

Start the Rating Data Submission

Fields marked with an asterisk (*) are required.

*Issuer:
 ▼

Start the Rating Module

Rating Module Overview

After the Issuer Submitter clicks the 'Start the Rating Module' button, as shown on the previous slide, the users are navigated to this page, where users can submit their Rates Table and Business Rules templates.



PLAN MANAGEMENT Text Size: A A A

PLAN YEAR : 2018
Welcome, ACNTEST | Logout

30545 - 123456002 Test - DE

Rating Module

Instructions and Reference Material (PDF) [1.68 MB]
Technical Guidance (PDF) [111 KB]

Data Submitter | Data Validator | Final Submission

Upload/Download Rates & Business Rules

Download Templates

- BusinessRules.xls
- Rates.xls

Upload File(s)
Fields marked with an asterisk (*) are required.

Document Type
Select document type

Upload File(s):
Choose File No file chosen **Upload**

Uploaded File History Update Status

Document Type	File Name	Submission Date	Status
You have not uploaded any documents			

By clicking "Submit" you attest that all of the Issuer and plan-level information submitted is correct; and a) any revisions submitted after the application window closed are only to address an application deficiency noted by HHS or the State; or b) any data corrections submitted that are not in response to a deficiency have been approved by HHS; or c) if you have previously submitted a QHP Application and are now submitting additional information for certification of stand-alone dental plans, you are making no changes to your previously submitted QHPs.

Back to Summary Submit

System Requirements

The supported system requirements for the Modules are as follows:

Browser Requirements

- Internet Explorer 11
- Firefox 50.0

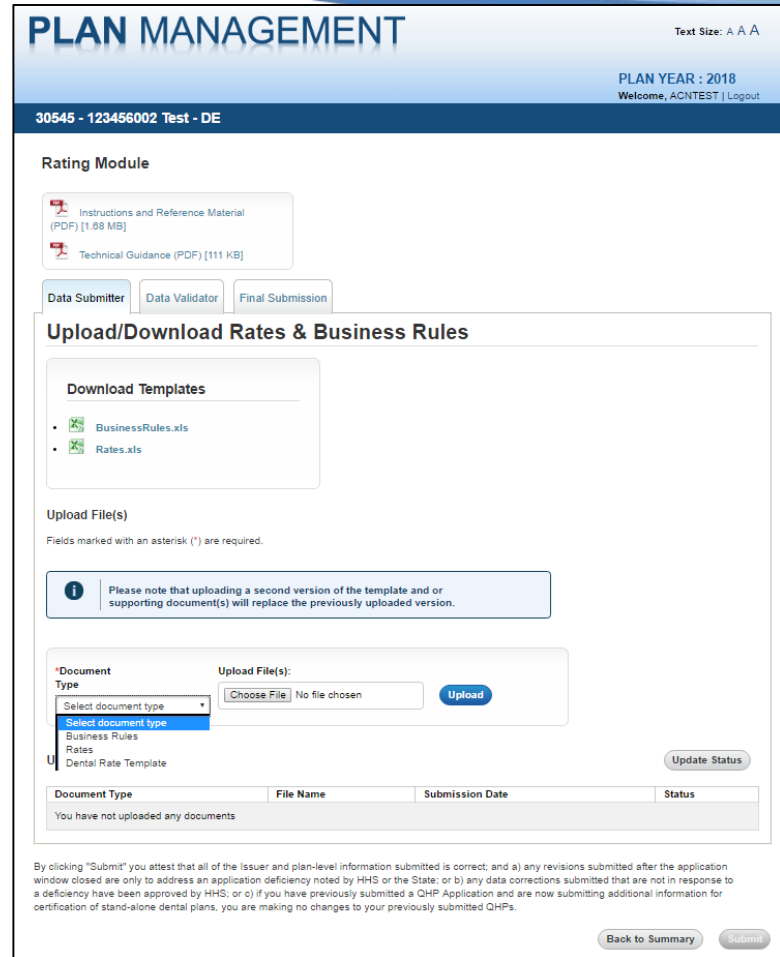
Excel Requirements

- Microsoft 2010
- Microsoft 2013

Rates Table Template

IMPORTANT: Issuers must provide separate Rates Tables templates for medical and dental plans.

- Issuers with both medical and dental plans should upload each template separately as “Rates” and “Dental Rate Template”, respectively.
- Issuers with only medical plans should upload a single Rates Table template with Document Type “Rates”.
- Issuers with only dental plans should upload a single Rates Table template with Document Type “Dental Rate Template”.



The screenshot shows the 'PLAN MANAGEMENT' interface. At the top, it says 'PLAN YEAR : 2018' and 'Welcome, ACNTEST | Logout'. Below this is a header for '30545 - 123456002 Test - DE'. The main section is titled 'Rating Module' and contains links for 'Instructions and Reference Material (PDF) [1.88 MB]' and 'Technical Guidance (PDF) [111 KB]'. There are three tabs: 'Data Submitter', 'Data Validator', and 'Final Submission'. The 'Data Submitter' tab is active, showing 'Upload/Download Rates & Business Rules'. Under 'Download Templates', there are links for 'BusinessRules.xls' and 'Rates.xls'. The 'Upload File(s)' section has a note: 'Please note that uploading a second version of the template and/or supporting document(s) will replace the previously uploaded version.' Below this is a form with a 'Document Type' dropdown menu (options: 'Select document type', 'Business Rules', 'Rates', 'Dental Rate Template') and an 'Upload File(s)' section with a 'Choose File' button and an 'Upload' button. At the bottom, there is a table with columns 'Document Type', 'File Name', 'Submission Date', and 'Status', and a message 'You have not uploaded any documents'. A 'Submit' button is at the bottom right, and a 'Back to Summary' button is at the bottom left.

Rates Table Template

The Rating Table Template will collect the following type of data:

- HIOS Issuer ID
- Tax Identification Number (TIN) or Employer Identification Number (EIN)
- Rate Effective Date
- Rate Expiration Date
- Rating Method
- Plan ID
- Rating Area ID
- Tobacco Use
- Rate Information

Rates Table Template

The Rates Table template collects rating information for plans offered on the FFM.

	A	B	C	D	E
1	2018 Rates Table Template v7.1	All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.			
2	Validate	If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.			
3		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.			
4	Finalize	If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
5		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
6	HIOS Issuer ID*				
7	Federal TIN*				
8	Rate Effective Date*				
9	Rate Expiration Date*				
10	Rating Method*				
11	Add Sheet				
12					
13	Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
14	Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
15					
16					

Rates Table Template – Rating Method

A new required field in the Rates Table Template is the Rating Method field, which identifies which type of rating method will be used and displays the corresponding required fields. There are two Rating Methods to select from:

- Age-Based Rates
- Family-Tier Rates

	A	B	C	D	E
1	2018 Rates Table Template v7.1		All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.		
2	Validate		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.		
3			If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.		
4	Finalize		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.		
5			To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.		
6	HIOS Issuer ID*				
7	Federal TIN*				
8	Rate Effective Date*				
9	Rate Expiration Date*				
10	Rating Method*		Required: Enter the Rating Method		
11	Add Sheet		Age-Based Rates Family-Tier Rates		
12					
13	Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
	Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan

Rates Table Template – Updated Age Bands

Rates Table Template, when selecting Age-Based Rates for PY18, have updated age bands to align with 2018 Payment Notice¹.

- 0-14 (Child Age Band, occupying a single row)
- 15-63 (occupying individual rows)
- 64 and over (occupying a single row)

	A	B	C	D	E
1	2018 Rates Table Template v7.1	<i>All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.</i>			
2	Validate	<i>If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.</i>			
3		<i>If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.</i>			
4	Finalize	<i>If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.</i>			
5		<i>To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.</i>			
6	HIOS Issuer ID*	12345			
7	Federal TIN*	12-3890210			
8	Rate Effective Date*	12/22/2016			
9	Rate Expiration Date*	12/22/2017			
10	Rating Method*	Age-Based Rates			
11	Add Sheet				
12					
13	Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
	Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
14	12345AV1234567 Rating Area 1			0-14	
15	12345AV1234567 Rating Area 1			15	
16	12345AV1234567 Rating Area 1			16	
17	12345AV1234567 Rating Area 1			17	
18	12345AV1234567 Rating Area 1			18	
19	12345AV1234567 Rating Area 1			19	
20	12345AV1234567 Rating Area 1			20	
21	12345AV1234567 Rating Area 1			21	
22	12345AV1234567 Rating Area 1			22	
23	12345AV1234567 Rating Area 1			23	
24	12345AV1234567 Rating Area 1			24	
25	12345AV1234567 Rating Area 1			25	
26	12345AV1234567 Rating Area 1			26	
27	12345AV1234567 Rating Area 1			27	
28	12345AV1234567 Rating Area 1				

¹Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2018 Final Rule

Rates Table Template – Warning Message When Changing Rating Method

When the Rating Method is changed, then a warning message will appear.

NOTE: Changing the Rating Method will delete all rates entered for that tab.

2018 Rates Table Template v7.1

All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.

If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.

If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.

If Tobacco is Tobacco Use.

To add a new sheet, press

CAUTION!

Warning! Changing the Rating Method to Family-Tier Rates will delete all rate data entered in this worksheet and reconfigure the worksheet to collect rates for family tiers rather than age bands. Choose OK to continue or Cancel if you would like to continue with the current Rating Method.

OK Cancel

Plan ID*	Rating Area ID*	Tobacco User/Non-Tobacco User	Individual Rate*	Individual Tobacco Rate*
Required: Enter the 18-character Plan ID	Required: Select the Rating Area	determine if a person is eligible for a rate from a plan	Required: of an individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of an individual tobacco enrollee on a plan
12345NJ1234567	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	100.00
12345NJ1234567	Rating Area 1	Tobacco User/Non-Tobacco User	15	100.00
12345NJ1234567	Rating Area 1	Tobacco User/Non-Tobacco User	16	100.00
12345NJ1234567	Rating Area 1	Tobacco User/Non-Tobacco User	17	100.00
12345NJ1234567	Rating Area 1	Tobacco User/Non-Tobacco User	18	100.00

Rates Table Template – Warning Message When Changing Plan ID

When the Plan ID is changed for a plan with age-based rates, a warning message will appear.

Changing the Plan ID in one row will update the Plan ID for the next 50 rows (each age band).

The screenshot displays the '2018 Rates Table Template v7.1' spreadsheet. A red-bordered dialog box with the title 'CAUTION!' is centered over the spreadsheet. The dialog box contains the following text: 'Warning: Changing the Plan ID will change all Plan IDs currently associated with the next 50 Rows that directly correspond with the 51 Rating Age Bands required for this plan. Choose Cancel if you would like to continue with the current Plan ID.' At the bottom of the dialog box are 'OK' and 'Cancel' buttons.

The spreadsheet background shows the following data:

2018 Rates Table Template v7.1		All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.			
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.			
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.			
		If Tobacco is Tobacco User			
		To add a new sheet, press			
Validate					
Finalize					
HIOS issuer ID*					
Federal TIN*		123456789			
Rate Effective Date*					
Rate Expiration Date*		12			
Rating Method*		Age-Based Rates			
Add Sheet					
Plan ID*		Rating Area ID*		Individual Rate*	
Required: Enter the 14-character Plan ID		Required: Select the Rating Area ID		Required: Enter the rate of an individual tobacco enrollee on a plan	
		determine if a person is eligible for a rate from a plan		Enter the rate of an individual tobacco enrollee on a plan	
12345AZ1234567		Rating Area 1		Tobacco User/Non-Tobacco User	
12345NJ1234567		Rating Area 1		Tobacco User/Non-Tobacco User	
12345NJ1234567		Rating Area 1		Tobacco User/Non-Tobacco User	
				0-14	
				15	
				16	
				100.00	
				100.00	
				100.00	
				100.00	

Rates Table Template – Warning Message When Deleting Plan ID

When the Plan ID is deleted for a plan with age-based rates, a warning message will appear.

Deleting the Plan ID in one row will remove the Plan ID for the next 50 rows (each age band).

The screenshot displays the '2018 Rates Table Template v7.1' spreadsheet. A red-bordered dialog box titled 'CAUTION!' is centered over the spreadsheet. The dialog box contains the following text: 'Warning: Deleting the Plan ID will Delete all Plan IDs currently associated with the next 50 Rows that directly correspond with the 51 Rating Age Bands required for this plan. Choose Cancel if you would like to continue with the current Plan ID.' At the bottom of the dialog box are 'OK' and 'Cancel' buttons.

The background spreadsheet shows the following fields and data:

- Buttons:** Validate, Finalize, Add Sheet.
- Fields:** HIOS Issuer ID*, Federal TIN* (123456789), Rate Effective Date*, Rate Expiration Date* (12/31/2018), Rating Method* (Age-Based Rates).
- Table Headers:** Plan ID*, Rating Area ID*, Individual Rate*, Individual Tobacco Rate*.
- Table Data:**

Plan ID*	Rating Area ID*	Tobacco User/Non-Tobacco User	Age Band	Individual Rate*	Individual Tobacco Rate*
12345NJ1234567	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	100.00	100.00
12345NJ1234567	Rating Area 1	Tobacco User/Non-Tobacco User	15	100.00	100.00
12345NJ1234567	Rating Area 1	Tobacco User/Non-Tobacco User	16	100.00	100.00

Rates Table Template – Warning Message When Changing the Rating Area ID

When the Rating Area ID is changed for a plan with age-based rates, a warning message will appear.

Changing the Rating Area ID in one row will update the Rating Area ID for the next 50 rows (each age band).

The screenshot shows the '2018 Rates Table Template v7.1' spreadsheet. A red dialog box with the title 'CAUTION!' is overlaid on the spreadsheet. The dialog box contains the following text: 'Warning: Changing the Rating Area ID will change all Rating Area IDs currently associated with the next 50 Rows that directly correspond with the 51 Rating Age Bands required for this plan. Choose Cancel if you would like to continue with the current Rating Area ID.' The dialog box has 'OK' and 'Cancel' buttons.

The spreadsheet background shows the following data:

Plan ID*	Rating Area ID	Individual Rate*	Individual Tobacco Rate*
12345NJ1234567	Rating Area 3	100.00	100.00
12345NJ1234567	Rating Area 1	100.00	100.00
12345NJ1234567	Rating Area 1	100.00	100.00
12345NJ1234567	Rating Area 1	100.00	100.00

Rates Table Template – Warning Message When Deleting the Rating Area ID

When the Rating Area ID is deleted for a plan with age-based rates, a warning message will appear. Deleting the Rating Area ID in one row will remove the Rating Area ID for the next 50 rows (each age band).

The screenshot shows the '2018 Rates Table Template v7.1' spreadsheet. A red-bordered dialog box titled 'CAUTION!' is overlaid on the spreadsheet. The dialog box contains the following text: 'Warning: Deleting the Rating Area ID will Delete all Rating Area IDs currently associated with the next 50 Rows that directly correspond with the S1 Rating Age Bands required for this plan. Choose Cancel if you would like to continue with the current Rating Area ID.' The dialog box has 'OK' and 'Cancel' buttons at the bottom right. The spreadsheet background shows various input fields for plan information, including 'HIOS Issuer ID*', 'Federal TIN*', 'Rate Effective Date*', 'Rate Expiration Date*', 'Rating Method*', 'Plan ID*', 'Rating Area ID*', 'Individual Rate*', and 'Individual Tobacco Rate*'. The 'Rating Method*' is set to 'Age-Based Rates'. The 'Rating Area ID*' is currently empty. The 'Individual Rate*' and 'Individual Tobacco Rate*' are both set to 100.00. The spreadsheet also includes instructions for validation and finalization.

Plan ID*	Rating Area ID*	Individual Rate*	Individual Tobacco Rate*
12345NJ1234567		100.00	100.00
12345NJ1234567	Rating Area 1	100.00	100.00
12345NJ1234567	Rating Area 1	100.00	100.00

Rates Table Template – Warning Message When Changing the Tobacco Option

When the Tobacco Option is changed for a plan with age-based rates, a warning message will appear.

Changing the Tobacco Option in one row will update the Tobacco Option for the next 50 rows (each age band).

The screenshot shows the '2018 Rates Table Template v7.1' spreadsheet. A red dialog box with the title 'CAUTION!' is overlaid on the spreadsheet. The dialog box contains the following text: 'Warning: Deleting the Tobacco Option will Delete all Tobacco Options currently associated with the next 50 Rows that directly correspond with the 51 Rating Age Bands required for this plan. Choose Cancel if you would like to continue with the current Tobacco Option.' The dialog box has 'OK' and 'Cancel' buttons.

The spreadsheet background shows the following data:

Plan ID*	Rating Area ID*	Individual Rate*	Individual Tobacco Rate*
12345NJ1234567 Rating Area 1		100.00	100.00
12345NJ1234567 Rating Area 1		100.00	100.00
12345NJ1234567 Rating Area 1		100.00	100.00

Rates Table Template – Warning Message When Deleting the Tobacco Option

When the Tobacco Option is deleted for a plan with age-based rates, a warning message will appear. Deleting the Tobacco Option in one row will remove the Tobacco Option for the next 50 rows (each age band).

2018 Rates Table Template v7.1

All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.

If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.

If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.

If Tobacco is Tobacco User/Non-Tobacco User, select the appropriate option.

To add a new sheet, press Add Sheet.

CAUTION!

Warning: Changing the Tobacco Option will change all Tobacco Options currently associated with the next 50 Rows that directly correspond with the 51 Rating Age Bands required for this plan. Choose Cancel if you would like to continue with the current Tobacco Option.

Fields:

- HIOS Issuer ID*
- Federal TIN*
- Rate Effective Date*
- Rate Expiration Date*
- Rating Method*
- Plan ID*
- Rating Area ID*
- Individual Rate*
- Individual Tobacco Rate*

Required:

- Enter the 14-character Plan ID
- Select the Rating Area
- determine if a person is eligible for a rate from a plan
- of an Individual Non-Tobacco or No Tobacco Preference enrollee on a plan
- Enter the rate of an Individual tobacco enrollee on a plan

Plan ID*	Rating Area ID*	Rating Method*	Individual Rate*	Individual Tobacco Rate*
12345NJ1234567	Rating Area 1	No Preference	100.00	100.00
12345NJ1234567	Rating Area 1	Tobacco User/Non-Tobacco User	100.00	100.00
12345NJ1234567	Rating Area 1	Tobacco User/Non-Tobacco User	100.00	100.00

Business Rules Template

The Business Rules Template will collect the following type of data:

- HIOS Issuer ID
- Tax Identification Number (TIN) or Employer Identification Number (EIN)
- Product / Plan ID
- How are rates for contracts covering two or more enrollees calculated?
- What are the maximum number of underage (under 21) dependents used to quote a two parent family?
- What are the maximum number of underage (under 21) dependents used to quote a single parent family?
- Is there a maximum age for a dependent?
- What are the maximum number of children used to quote a children-only contract?
- Are domestic partners treated the same as secondary subscribers?
- Are same-sex partners treated the same as secondary subscribers?
- How is age determined for rating and eligibility purposes?
- How is tobacco status determined for subscribers and dependents?
- What relationships between primary and dependent are allowed, and is the dependent required to live in the same household as the primary subscriber?

Business Rules Template

The Business Rules template collects rating information for plans offered on the Federally Facilitated Marketplace.

	A	B	C	D	E	F	G
1	2018 Business Rules Template v7.0		All fields with an asterisk (*) are required. To validate the template, press Validate button or Ctrl + Shift + I. To finalize the template, press				
2	Validate		Enter the Issuer Rule on the first row (no Product ID or Plan ID).				
3			For each Product rule, enter only the Product ID and the business rules that differ from the Issuer Rule.				
4			For each Plan rule, enter only the Plan ID and the business rules that differ from the Product or Issuer Rule				
5	Finalize						
6							
7	HIOS Issuer ID*						
8	TIN*						
9	Product ID	Plan ID (Standard Component)	How are rates for contracts covering two or more enrollees calculated?	What are the maximum number of under age (under 21) dependents used to quote a two parent family?	What are the maximum number of under age (under 21) dependents used to quote a single parent family?	Is there a maximum age for a dependent?	What are the maximum number of children used to quote a children-only contract?
10							
11							
12							
13							
14							
15							
16							
17							

Rating Module Overview

The following was reviewed:

- Rating Module
- Rates Table Template
- Business Rules Template

Resources at a Glance

Resource	Audience	Primary Use	Look here for:	Access
HIOS / Issuer Portal	All Issuers	Allows issuers access to tools like RBIS	Registration to provide issuer information for Plan Finder	Through the CMS Enterprise Portal Access Link
zONE	Communities of States, Issuers, Web Brokers, other CMS partners	Social platform to connect, communicate, and share information, including documents and best practices	- Community specific documents - CMS templates	- CALT ID to access until 5/24/14 - EIDM profile after 6/1/14 Access Link
REGTAP	Open registration	Information hub for CMS technical assistance related to Marketplace and Premium Stabilization programs	- Registration for recurring training sessions - Training materials	- Open - Register on site and create log in Access Link
SERFF	All Issuers	System supporting rate and form filings submissions to the states and jurisdictions	- Assistance with state filing submission requirements - CMS templates	Fee based Access Link
CALT	CMS and designated CMS partners	Social platform to assist with collaboration on CMS led Initiatives	CMS documents	- Closed community - CMS approval required

Open Q&A Session

Questions?

- 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.”*

Submission of Inquiries

Users/Issuers can contact:

- **CMS Help Desk** with questions about specific situations, the Federal Templates and their functionality and the HIOS
Call: 855-CMS-1515 or **Email: CMS_FEPS@cms.hhs.gov**
- **National Association of Insurance Commissioners (NAIC)** with questions about state SERFF
Email: serffplanmgmt@naic.org
- **CMS Help Desk** with questions about policy
Call: 855-CMS-1515 or **Email: CMS_FEPS@cms.hhs.gov**

Best Practices- Submitting Help Desk Tickets

- Include HIOS ID, issuer state and issuer legal name.
- Include screenshots or attach templates when asking about an error or issue with the template.
- Submit separate Help Desk requests for different, unrelated questions.
- Put the question in the body of the email; do not attach Excel or Word documents with lists of questions.
- Identify or note whether a question is for the SHOP or Individual Marketplace.

PM Webinar Dates

The 2017 QHP March Webinar Series III sessions occur on Tuesdays and Thursdays as shown below:

Date	Day	Time (ET)	Topic
3/2/17	Thursday	1:00 p.m. – 2:00 p.m.	SERFF vs. HIOS/Service Area Template Demonstration
3/7/17	Tuesday	3:00 p.m. – 4:00 p.m.	Qualified Health Plan (QHP) Plans and Benefits Template Updates & Benefits and Service Area Module Overview
3/9/17	Thursday	1:00 p.m. – 2:00 p.m.	Open Q&A for the Plans and Benefits Template
3/14/17	Tuesday	3:00 p.m. – 4:00 p.m.	No Webinar (Issuer Onsite Conference)
3/16/17	Thursday	1:00 p.m. – 2:00 p.m.	No Webinar (Issuer Onsite Conference)
3/21/17	Tuesday	3:00 p.m. – 4:00 p.m.	Business Rules Template, Rates Table Template and related Dental FAQs Review
3/23/17	Thursday	1:00 p.m. – 2:00 p.m.	Open Q&A
3/28/17	Tuesday	3:00 p.m. – 4:00 p.m.	New Tool Kit Demo
3/30/17	Thursday	1:00 p.m. – 2:00 p.m.	Open Q&A

Please register if you wish to participate, even if you have registered for a previous series. For registration and additional information on CMS' webinar series, please log in to <https://www.REGTAP.info>.

Additional Webinar Dates

In addition to the weekly PM webinar sessions, issuers are encouraged to attend the following sessions:

Program Area	Day	Time (ET)
Enrollment	Mondays (Bi-Weekly)	12:00 p.m. – 1:00 p.m.
EDGE Server	Tuesdays	11:30 a.m. – 1:00 p.m.
FF-SHOP	Tuesdays (Bi-Weekly)	1:00 p.m. – 2:00 p.m.

Please register if you wish to participate, even if you have registered for a previous series. For registration and additional information on CMS' webinar series, please log in to <https://www.REGTAP.info>.

HIOS User Group Conference Call

- The HIOS User Group Conference Call occurs every Wednesday from 2:00 p.m. to 3:30 p.m. Eastern Time (US & Canada) (GMT-05:00).
- Call Access: 1-888-455-8828; Passcode: 6714482

Resources

Resource	Resource Link
CMS	http://www.cms.gov/
CMS Regulations and Guidance	http://www.cms.gov/Regulations-and-Guidance/Regulations-and-Guidance.html?redirect=/home/regsguidance.asp
Data Templates	https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/qhp.html
HealthCare.gov	http://www.healthcare.gov/
National Conference of State Legislatures (NCSL)	http://www.ncsl.org
Registration for Technical Assistance Portal (REGTAP)	https://REGTAP.info
U.S. Department of Health & Human Services (HHS)	http://www.hhs.gov/

Commonly Used Acronyms

Acronym	Definition
AV	Actuarial Value
BHP	Basic Health Program
ECP	Essential Community Provider
EHB	Essential Health Benefit
EIDM	Enterprise Identity Management
FFM	Federally-facilitated Marketplace
HIOS	Health Insurance Oversight System

Commonly Used Acronyms

(continued)

Acronym	Definition
MSP	Multi-State Plans
NAIC	National Association of Insurance Commissioners
NCQA	National Committee for Quality Assurance
QHP	Qualified Health Plan
SBM	State-based Marketplace
SERFF	System for Electronic Rate and Form Filing
USP	United States Pharmacopeia

Closing Remarks