Plan Year (PY) 2018 Plan Confirmation for Issuers, and Data Integrity Tool (DIT), Plan Crosswalk, Correction and Certification Notices

May 30, 2017

2017 Qualified Health Plan (QHP) Series

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

HTTPS://WWW.REGTAP.INFO

Agenda

- Session Guidelines
- Key Dates
- Announcements
- PY 2018 Plan Confirmation for Issuers, and DIT, Plan Crosswalk, Correction and Certification Notices
- Live Questions & Answers (Q&A)
- Resources
- Closing Remarks

Session Guidelines

- This 60-minute session is conducted to provide a presentation of the PY 2018 Plan Confirmation for Issuers, and DIT, Plan Crosswalk, Correction and Certification Notices, as well as a live Q&A session for issuers.
- For questions regarding content, contact the Centers for Medicare & Medicaid Services (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
April 27, 2017 – June 14, 2017	Technical Assistance	Issuers Request Review Tool Technical Assistance Outreach Sessions
May 10, 2017 –June 21, 2017	Submission Window	Initial PY 2018 QHP Application Submission Window
June 30, 2017	Outreach	Confirm QHP Certification Notice Points of Contact

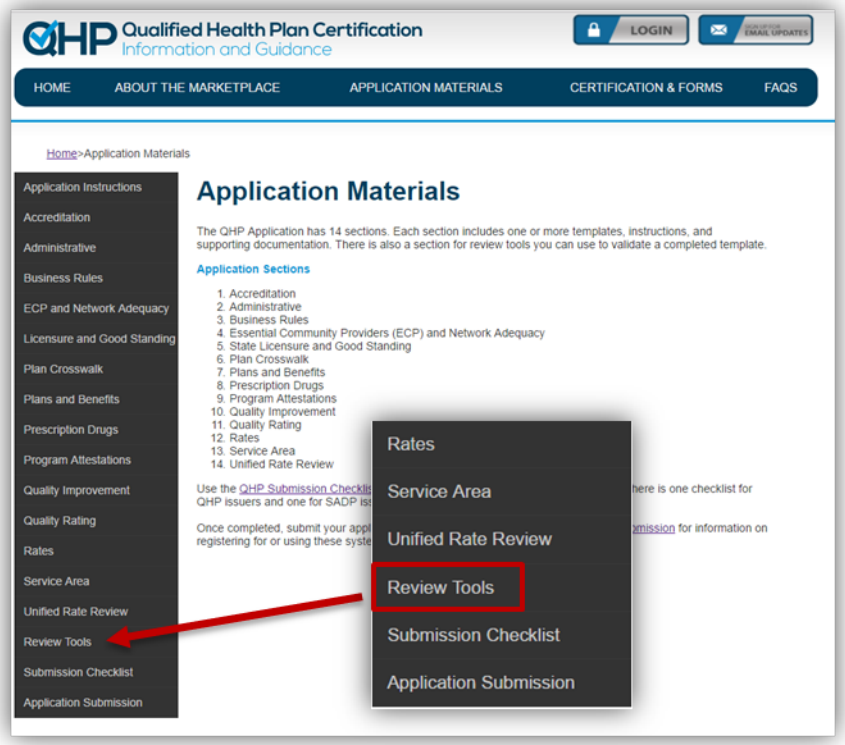
Review Tool Technical Assistance Outreach Sessions

- Marketplace Plan Management Group (MPMG) is offering all issuers review tool technical assistance sessions with Center for Consumer Information and Insurance Oversight (CCIIO) subject matter experts (SMEs) before the initial PY 2018 submission window closes on June 21, 2017.
  - Issuers can request calls with CCIIO SMEs from April 27th to June 14th.
- These outreach sessions will provide issuers with an opportunity:
  - To share their review tool results,
  - Discuss review areas with CCIIO SME(s), and
  - Receive answers to any questions while finalizing templates.
- Please request a review tool technical assistance session here: *https://www.qhpcertification.cms.gov/outreachform*
- Issuers may also request Plan Preview training once their application is submitted.

Locating the Review Tool Technical Assistance Outreach Form

- To locate the Review Tool Technical Assistance Outreach form, please go to www.qhpcertification.cms.gov and click “Application Materials”.

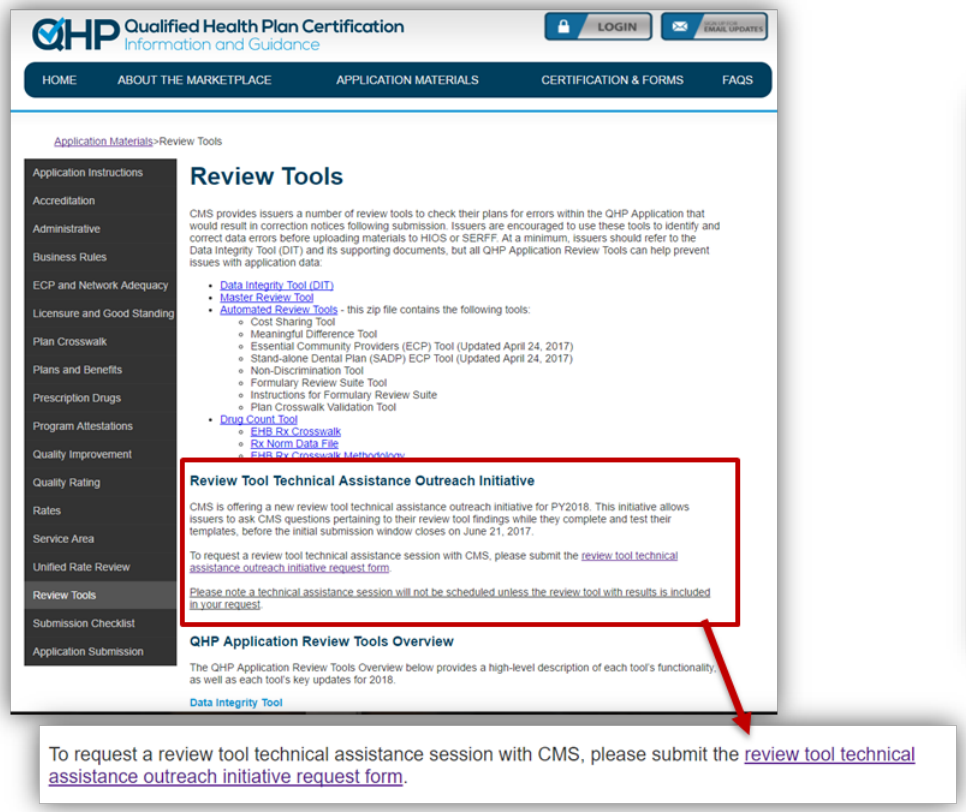
- After clicking “Application Materials”, click “Review Tools” located on the right side-bar.



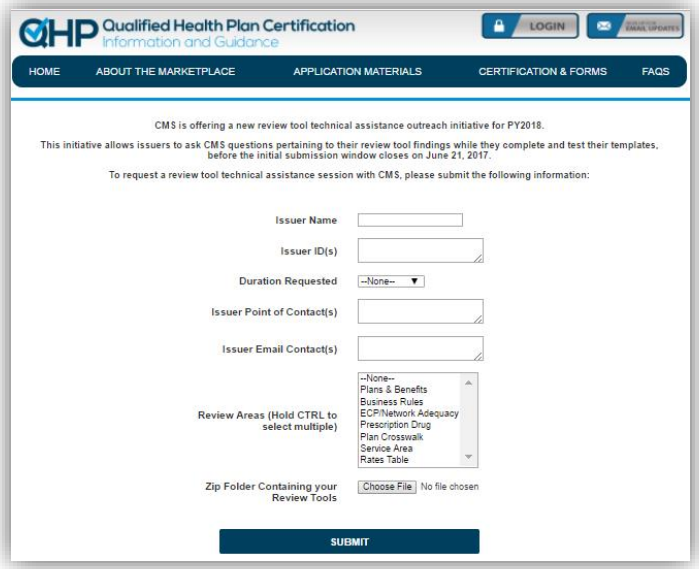
HTTPS://WWW.REGTAP.INFO

Locating the Review Tool Technical Assistance Outreach Form (continued)

- On the Review Tools page, you will find review tool technical assistance instructions and a link to the request form.



- After clicking the request form link, issuers may fill out each field, including uploading their review tool in a zip file format.



- After your request is received and processed, CMS will send an Outlook meeting invite from QHP_Applications@cms.hhs.gov to the provided email addresses in your submission.

Announcements

Overview of PY 2018 Notices

QHP Notices by Marketplace

- Issuers receive different notices based on issuers' Marketplace Model, products offered and previous participation in the Marketplace.

Notice	FFM QHP/SADP	FFM Off-Marketplace SADP	SPM QHP/SADP	SPM Off-Marketplace SADP	SBM-FP QHP/SADP
Correction/Data Integrity	√	√**	√	√**	√***
Plan ID Crosswalk	√*		√*		√*
Plan ID Crosswalk Validation	√*		√*		√*
Final Correction Notice	√	√**	√	√**	√***
Certification	√	√	√	√	√

*Only applies to issuers who participated in the Marketplace in 2017
** Issuers will only receive Correction Notice from CMS
***Issuers will only receive a DIT Notice from CMS

QHP Notices – Quick Reference

Correction/Data Integrity	•Lists required corrections to the content of QHP Applications, in order to comply with certification standards. •Summarizes critical data errors that could lead to exclusion or incorrect display of plan information to consumers, or regulatory non-compliance.
Plan ID Crosswalk	•Includes required corrections to the Plan ID Crosswalk Template before CMS may process auto-enrollments for PY 2018.
Plan ID Crosswalk Validation	•Contains the most recent version of an issuer's Plan ID Crosswalk Template that CMS has on file. Issuers should reply to CMS and indicate it is the file that should be used for auto-enrollment.
Final Correction Notice	•Notifies issuers of outstanding corrections required to issuers' QHP Application before they may be certified and/or displayed on HealthCare.gov. •Contains final plan list to be returned to CMS, confirming which plans should be available through the Marketplace. •Contains instructions for all issuers regarding the process for signing the QHP Agreement.
Certification	•Lists final certified QHPs for PY 2018 and CMS-countersigned QHP Agreements.

QHP Notices - Key Issuer Outreach Dates

Notice	Outreach Date	Issuer Response Requested
First Correction/Data Integrity	8/2/2017	No. Make Corrections to QHP Application, if applicable.
First Plan ID Crosswalk	8/2/2017	No. Make changes and resubmit Plan ID Crosswalk Template, if applicable.
Final Correction/Data Integrity	9/14/2017	Yes. Reply to Correction Notice and indicate whether the issuer will make the required changes. Also complete and return final plan list and QHP Agreement to CMS, if applicable.
Plan ID Crosswalk Validation	9/22/2017	Yes. Validate CMS has correct template on file, or make changes and resubmit Plan ID Crosswalk Template.
Certification	10/12/2017	Yes. Return Table and QHP Agreement to CMS, if applicable.

CMS Review of QHP Application Data

- CMS conducts three types of reviews on issuers' application data:
  - **Data integrity (DIT)** reviews identify critical data errors that could lead to incorrect display of plan information to consumers, or regulatory non-compliance.
  - **Certification reviews** ensure each issuer's QHP Application is compliant with Patient Protection and Affordable Care Act (ACA) requirements before they can be offered to consumers on HealthCare.gov.
  - **Plan Crosswalk reviews** confirm that issuers in Federally-facilitated Marketplace (FFM), FFM States performing Plan Management activities (SPM), and State-based Marketplaces using the Federal Platform (SBM-FP) states that offered on-Marketplace plans in 2017 successfully maps to a 2018 Plan ID to ensure guaranteed renewability for consumers.
- Review results for each of these three areas are distributed to issuers via Excel attachments in their official notices.

QHP Notice Recipients

- Notices are sent to Health Insurance Oversight System (HIOS) users with the following roles in HIOS:
  - QHPAttester
  - QHPValidator
  - QHPSubmitter
- Only contacts for these HIOS user roles will receive notice information.
- Notices are sent to all issuers via email with an embedded link to an Excel spreadsheet, regardless of whether CMS identified needed corrections.
  - Note: Issuers participating in the Plan Management (PM) Community will receive notices within the Community; additional guidance on accessing these notices will be given in the Community training sessions.

Receiving QHP Notices

- Issuers should immediately contact issuers' CMS Account Manager (AM) if a notice is not received by 11:59 PM ET on the expected date.
- Issuers can refer to the QHP Application Notices page on the QHP website for help understanding corrections or errors identified.
- For additional questions, issuers can call the Exchange Operations Support Center (XOSC) Help Desk at 1-855-CMS-1515, or submit a Help Desk ticket to CMS_FEPS@cms.hhs.gov. The ticket should specify the correction or error code and describe specific questions about corrective action. Do not include the entire notice.
- For System for Electronic Rate and Form Filing (SERFF)-specific questions, issuers may also call the SERFF Help Desk at 816-783-8990.

Reviewing CMS Notices

- Open and review all notice attachments in their entirety upon receipt.
- CMS will note the cutoff date for the data reviewed for each notice.
- Direct any questions regarding notice(s) to the XOSC Help Desk as soon as possible.

Addressing Correction/Data Integrity Notices

- Issuers must address issues CMS identifies by either:
  - Correcting the relevant data; or
  - Providing adequate justification to demonstrate that corrections are not required and the application meets all certification standards.
- All corrections and errors identified must be addressed before the plan can be certified and/or available on HealthCare.gov.
- If the notice does not include any CMS-identified corrections, no changes to the application are necessary unless required by a state regulator (or CMS in a CMS direct enforcement state).

Overview of PY 2018 Plan Confirmation

Initial Issuer Plan Confirmation Notice

- After the initial submission window deadline, issuers will receive a list of all the QHPs, including Stand-alone Dental Plans (SADPs), CMS received during the initial submission window.
- This phase of plan confirmation will allow issuers to review the list of plans CMS will review for 2018 QHP certification, immediately after the initial data submission deadline.
  - **Note:** Issuers participating in the PM Community will receive lists and respond as needed within the Community; additional guidance on completing this process will be given in the Community training sessions.
- **Date CMS sends lists: June 30, 2017**
- **Recipients:**
  - Designated issuer contacts in FFM states, states performing plan management functions in the FFM, and SBM-FP states with an active QHP Application.
- Any plans submitted after June 21, 2017 will not be reviewed for QHP certification.

Initial Issuer Plan Confirmation Notice (Continued)

Issuer Action

- This notice asks issuers to review the list of submitted plans for accuracy and completeness, which CMS will review for CMS certification.
- If the list is accurate and complete, no further action is needed.
- **If the issuer has any concerns with the plan IDs listed, the issuer must respond to QHP_Applications@cms.hhs.gov within 48 hours of receipt of the Plan Confirmation Notice.**
  - The issuer should include a brief description of the issue in its response.
- Issuers should contact issuers' AM if issuers have not received the notice by 11:59 PM ET on June 30, 2017.

Final Plan Confirmation & Correction Notice

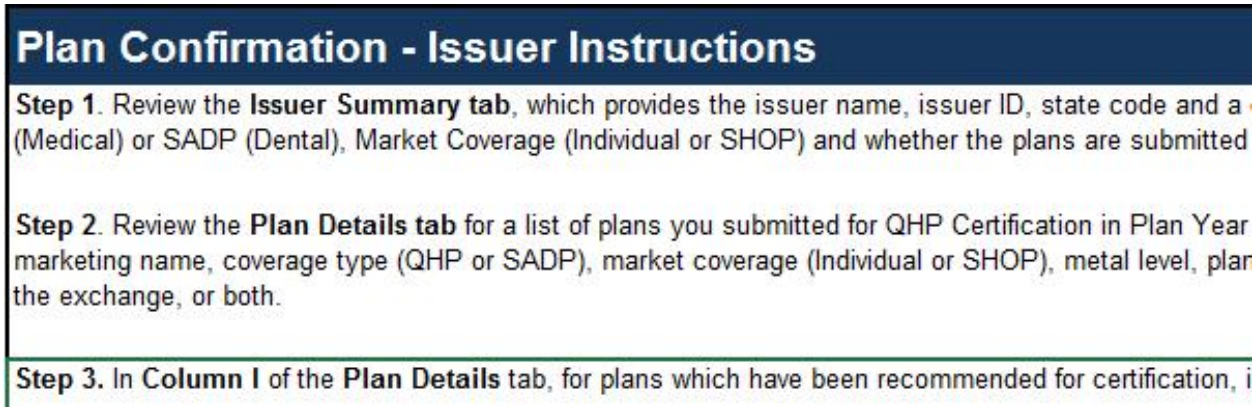
- After the final data submission deadline, issuers will receive a list of all the QHPs, including SADPs, that the issuer submitted for certification for PY 2018.

- This phase of plan confirmation will allow issuers to review and confirm the final list that should be available through the Marketplace for PY 2018.

- **CMS sends lists: September 14, 2017**

- **Recipients:**
  - Designated issuer contacts in FFM states, states performing plan management functions in the FFM, and SBM-FP states with an active QHP Application.

Plan Confirmation Workbook



Plan Confirmation - Issuer Instructions

Step 1. Review the **Issuer Summary tab**, which provides the issuer name, issuer ID, state code and a
(Medical) or SADP (Dental), Market Coverage (Individual or SHOP) and whether the plans are submitted

Step 2. Review the **Plan Details tab** for a list of plans you submitted for QHP Certification in Plan Year
marketing name, coverage type (QHP or SADP), market coverage (Individual or SHOP), metal level, plar
the exchange, or both.

Step 3. In **Column I** of the **Plan Details** tab, for plans which have been recommended for certification, i

Issuer Instructions

Instructs issuers on how to review and respond to the plan confirmation list

Reference

Defines the contents of and fields in each tab

Reference Tab	
This tab explains what information is included in this Excel workbook and provides def Details tabs.	
Issuer Summary Tab	
This tab includes Issuer-Level summary information.	
Field	**Definition**
Issuer Name	This is the issuer's legal name.
Issuer ID	This is the unique ID assigned to each issuer upon register
State Code	This is the state code of the issuer's submission.

Plan Confirmation Workbook (Continued)

Issuer Summary

Summarizes issuer-level counts of plans by type

Issuer Name	Issuer ID	State Code	Totals						
			Total Plans	Coverage Type		Market Coverage		Exchange Type	
				QHP	SADP	Individual	SHOP	On the Exchange or Both	Off the Exchange

Plan Detail

Lists each plan submitted for review

CMS Record of Transferred Plans						
Standard Component ID	Plan Marketing Name	QHP or SADP	Market Coverage	Metal Level	Plan Type	Exchange Type
12123MT0140003	MLI Catastrophic	QHP	Individual	Catastrophic	PPO	Both
12123MT0140004	SmartHealth Value Bronze 6450	QHP	SHOP	Bronze	PPO	Both

Final Plan Confirmation & Correction Notice (Continued)

ACTION

- **This notice asks issuers to review and complete the final plan list and return it to QHP_Applications@cms.hhs.gov by September 27, 2017.**
  - For each listed plan that is approved to be certified, the issuer should indicate the intent to offer or not offer that plan by selecting the appropriate option from a dropdown list.
  - **Note:** Issuers participating in the PM Community will receive the~~ir~~ lists and respond within the Community; additional guidance on completing this process will be given in the Community training sessions.
- If the issuer believes the plan list is inaccurate, it should include a brief description of the issue in its response.
- Issuers should contact the AM if issuers have not received their notice by 11:59 PM ET on September 14, 2017.
- CMS will conduct outreach to issuers who have not responded within the allotted period of time.

Live Q&A Session

HTTPS://WWW.REGTAP.INFO

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**
  - **Email:** CMS_FEPS@cms.hhs.gov
- **National Association of Insurance Commissioners (NAIC)** with questions about state SERFF
  - **Email:** serffplanmgmt@naic.org

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 question is for the Small Business Health Options Program (SHOP) or Individual Marketplace

Plan Management Webinar Dates

The 2017 QHP June Webinar sessions occur on Tuesdays and Thursdays as shown below:

Date	Day	Time (ET)	Topic
6/1/17	Thursday	1:00 p.m. – 2:00 p.m.	Submission Tips
6/6/17	Tuesday	3:00 p.m. – 4:00 p.m.	Submission Tips
6/8/17	Thursday	1:00 p.m. – 2:00 p.m.	Submission Tips
6/13/17	Tuesday	3:00 p.m. – 4:00 p.m.	Open Q&A
6/15/17	Thursday	1:00 p.m. – 2:00 p.m.	Open Q&A
6/20/17	Tuesday	3:00 p.m. – 4:00 p.m.	Open Q&A
6/22/17	Thursday	1:00 p.m. – 2:00 p.m.	Plan Preview: Tools and Tips
6/27/17	Tuesday	3:00 p.m. – 4:00 p.m.	Plan Preview Scenario/Open Q&A
6/29/17	Thursday	1:00 p.m. – 2:00 p.m.	2018 Updates for Machine Readable Data

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.

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 (Bi-Weekly)	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
QHP Certification Website	https://www.qhpcertification.cms.gov
Centers for Medicare & Medicaid Services (CMS)	http://www.cms.gov/
CMS Regulations and Guidance	http://www.cms.gov/Regulations-and-Guidance/Regulations-and-Guidance.html?redirect=/home/regsguidance.asp
HealthCare Website	http://www.healthcare.gov/
National Conference of State Legislatures	http://www.ncsl.org
Registration for Technical Assistance Portal (REGTAP)	https://REGTAP.info
U.S. Department of Health & Human Services	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
FFM-DE	Federally-facilitated Marketplace in a Direct Enforcement State
HIOS	Health Insurance Oversight System
MSP	Multi-State Plans

Commonly Used Acronyms (continued)

Acronym	Definition
NAIC	National Association of Insurance Commissioners
NCQA	National Committee for Quality Assurance
QHP	Qualified Health Plan
SADP	Stand-Alone Dental Plan
SBM	State-based Marketplace
SBM-FP	State-based Marketplace on the Federal Platform
SERFF	System for Electronic Rate and Form Filing
SHOP	Small Business Health Options Program
USP	United States Pharmacopeia

Closing Remarks