# Machine Readable Data Refresher

## July 26, 2018

**2018 Qualified Health Plan (QHP) Series**

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# Agenda

- Session Guidelines
- Key Dates
- Announcements
- Machine Readable Data Refresher
- Question & Answer (Q&A) Session
- Resources
- Closing Remarks

# Session Guidelines

- This is a 60-minute session.
- This webinar will provide an opportunity for Center for Consumer Information and Insurance Oversight (CCIIO) PM Subject Matter Experts (SMEs) to discuss Machine Readable Data Refresher.
- 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 Plan Year (PY) 19 Key Dates for QHP Certification

| Date | Category | Activity |
|---|---|---|
| June 21 – August 3, 2018 | CMS Reviews | CMS Reviews Initial PY 2019 QHP Applications as of June 20, 2018 and releases Round 1 Review results to PM Community on a rolling basis |
| July 25, 2018 | QHP Certification | Initial Deadline for QHP Application Rates Table Template |
| August 10, 2018 | QHP Certification | CMS Uploads the First Correction Notice to the PM Community |
| August 13, 2018 | QHP Certification | Deadline for PY 2019 Service Area Data Change Request |
| August 22, 2018 | QHP Certification | Deadline for issuers to change PY 2019 QHP Applications |

# Key Dates for PY18 Data Submission

| Date | Category | Activity |
|---|---|---|
| March 15, 2018 | URRT Deadline | PY 2018 Q3 Unified Rate Review Template Submission Deadline |
| April 11, 2018 | DCRQ Submission | Deadline for submitting PY 2018 Data Change Requests for the April DCW (SHOP Q3 Rate Change Window) |
| Prior to May 16, 2018 | Refresh Date | Approximate Refresh Date for the PY 2018 April DCW |
| June 15, 2018 | URRT Deadline | PY 2018 Q4 Unified Rate Review Template Submission Deadline |
| July 11, 2018 | DCRQ Submission | Deadline for submitting PY 2018 Data Change Requests for the July DCW (SHOP Q4 Rate Change Window) |
| Prior to August 16, 2018 | Refresh Date | Approximate Refresh Date for the PY 2018 July DCW |

# Additional Webinar Sessions

All questions regarding Enrollment, External Data Gathering Environment (EDGE) Server or Federally-facilitated Small Business Health Options Program (FF-SHOP) can be addressed during the following webinar 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 (Monthly) | 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.

# Announcements

# Machine Readable Data Refresher

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- Today's presentation is a quick refresher of Machine Readable Data and some of the troubleshooting and validation tools available for issuer use when examining JSON data, and answer any questions you may have.

# Machine Readable Data Overview

- Basic Process
  - Quick overview
- Troubleshooting: Process
  - Review of common issues encountered and how to resolve them
- Troubleshooting: Coverage
  - Review of self-service troubleshooting tools to be used for troubleshooting display of covered items

# Machine Readable Data Process

File creation (ongoing cycle):

- Issuers create and update files on a continuous basis, with updates made to each provider/facility/drug item at least every 30 days.
- Any files included in the index file will be reviewed during the daily crawl.

Index File Submission:

- One-time submission through https://marketplace.cms.gov/submission and resubmission of the Uniform Resource Locator (URL) itself, technical contact, or covered Health Insurance Oversight System (HIOS) IDs change.

Daily Crawl:

- Submitted index file URLs are crawled, files are downloaded and validated.
- Providers/facility/drug items that pass validation are included in that day's database and used to display coverage on Healthcare.gov.

# Machine Readable Data Process: Common Errors Encountered

File creation (ongoing cycle):

- Items left out of files – search within file to ensure the relevant item is properly noted, and has the correct plan ID(s) and year(s)
- Files left out of index file – check to ensure that all links are correct and included within the index file

Index File Submission:

- Typos or incorrect technical contact: resubmit if necessary.

Daily Crawl:

- Crawl Errors: file(s) unable to be crawled or downloaded due to access errors, incorrect location information, etcetera.
- Syntax or Validation Errors: entire file fails validation due to incorrect schema or formatting of items in the file.
- Validation Warnings: part of file fails validation due to mismatch of National Provider Identifier (NPI) type and object type, or invalid/non-existent NPI.

# Machine Readable Data: Coverage

- Valid files from the daily crawl will make up the coverage database and are used to display coverage on Healthcare.gov.
- Providers, facilities and drugs are shown as follows:
  - Covered / In Network:
    - Any NPI or or RxNorm Concept Unique Identifier (RxCUI) listed with a Plan ID (and valid year) will be shown as “Covered” or “In Network”.
  - Not Covered / Out of Network:
    - Any NPI or RxCUI not included will be shown as “Not Covered” or “Out of Network”.

# Coverage Troubleshooting Tools

- Tools and tips we will cover for each stage of creating, validating, and reviewing your data:
  - Before import and validation: Schema Validation Tool
  - After import and validation: Coverage Validation Tool

# Schema Validator

- Schema validator still available at http://coverage-validator-beta.herokuapp.com/
  - Upload entire files to check against schema
    OR
  - Copy-paste portions of files to check against schema
- Note:
  - After clicking 'validate', review may take a few minutes to display results, particularly at high traffic times.
  - When encountering warnings and errors, a "show more" option is available to display beyond the first few errors.
    - Warnings and errors being emailed daily have a limited text output per file validated, but more can be displayed here for self-service review without having to wait to clear earlier errors.
    - *Syntax errors cause validation to stop, and will not display any subsequent errors downstream in the file.

# Coverage Validator Tool Functions

- Coverage validator at https://cmsgov.github.io/coverage-inspector/index.html allows self-service review of the following items:
  - Plan IDs per HIOS ID
  - NPI lookup tool querying National Plan and Provider Enumeration System (NPPES)
  - RxCUI lookup tool querying National Institutes of Health (NIH)/RxNav
  - Drug name (string) to show RxCUI and NIH's display Name
  - Provider name (string) with ZIP search to show NPI, and NPPES name, specialty, taxonomy
  - Drug coverage
  - Provider coverage

# 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."*

# Review Areas Released to PM Community by State Exchange Type

| Review Area | Federally-facilitated Exchange (FFE) | State Performing Plan Management Functions | State-based Exchange using the Federal Platform (SBE-FP) |
|---|---|---|---|
| Accreditation | • | | |
| Administrative | • | • | |
| Compliance Plan and Organizational Chart | • | | |
| Cost Sharing Reduction (CSR) – Plan Variation | • | • | |
| Dental Maximum Out of Pocket (MOOP) | • | | |
| Data Integrity | • | • | • |
| Essential Community Providers | • | | |
| Non-Discrimination (Clinical Appropriateness) | • | | |
| Non-Discrimination (Cost-Sharing) | • | | |
| Non-Discrimination (Formulary Outlier) | • | | |
| Non-Discrimination (Treatment Protocol Calculator) | • | | |

# Review Areas Released to PM Community by State Exchange Type (continued)

| Review Area | Federally-facilitated Exchange (FFE) | State Performing Plan Management Functions | State-based Exchange using the Federal Platform (SBE-FP) |
|---|---|---|---|
| Network Breadth | *Network Breadth Pilot Participants (TN, TX, ME)* | | |
| Plan ID Crosswalk | • | • | • |
| Program Attestations | • | | |
| Quality Improvement Strategy (QIS) | • | • | |
| Quality Rating System (QRS) | • | • | |
| Service Area (Including Partial County) | • | | |
| Silver/Gold | • | | |
| Stand-Alone Dental Plan (SADP) Actuarial Value (AV) Supporting Documents | • | | |
| SADP EHB Benchmark | • | | |
| SADP EHB Supporting Documents | • | | |

# Submission of Inquiries

Users/Issuers can contact:

- **CMS Help Desk** with questions about specific situations, the Federal Templates and their functionality and Health Insurance Oversight System (HIOS)
  - **Call: 855-CMS-1515**
  - **Email:** CMS_FEPS@cms.hhs.gov
- **National Association of Insurance Commissioners (NAIC)** with questions about state requirements/System for Electronic Rate and Form Filing (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 a question is for the SHOP or Individual Exchange.

# HIOS User Group Conference Call

- 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

# Plan Management Webinar Dates

The August QHP Webinar sessions occur on Thursdays as shown below:

| Date | Day | Time (ET) | Topic |
|---|---|---|---|
| 08/02/18 | Thursday | 1:00 p.m. – 2:00 p.m. | Quality Rating System (QRS) and QHP Enrollee Survey: Upcoming PY19 Results and Preview |
| 08/09/18 | Thursday | 1:00 p.m. – 2:00 p.m. | PY19 Plan Confirmation, Correction, and Certification Notices |
| 08/16/18 | Thursday | 1:00 p.m. – 2:00 p.m. | Common QHP Corrections: Round 1 |

# Resources for QHP Plan Maintenance and Certification

| Resource | Resource Link |
|---|---|
| CMS Regulations and Guidance | https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/index.html |
| Qualified Health Plan (QHP) Application Materials | https://www.qhpcertification.cms.gov/s/Application%20Materials |
| QHP Application Review Tools | https://www.qhpcertification.cms.gov/s/Review%20Tools |
| Registration for Technical Assistance Portal (REGTAP) | https://www.REGTAP.info |
| Health Insurance Oversight System (HIOS) | https://portal.cms.gov/wps/portal/unauthportal/home/ |
| System for Electronic Rate and Form Filing (SERFF) | https://login.serff.com/ |

# Commonly Used Acronyms

| Acronym | Definition |
|---|---|
| AV | Actuarial Value |
| BHP | Basic Health Program |
| ECP | Essential Community Provider |
| EHB | Essential Health Benefit |
| EIDM | Enterprise Identity Management |
| FFE | Federally-facilitated Exchange |
| 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 |
| SBE | State-based Exchange |
| SERFF | System for Electronic Rate and Form Filing |
| USP | United States Pharmacopeia |

# Closing Remarks