

Qualified Health Plan (QHP) Application Resubmission Tips

June 7, 2016

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

Agenda

- Session Guidelines
- Key Dates
- Announcements
- Steps for Resubmitting the QHP Application
- Issuer Module – Resubmissions
- Rating Module – Resubmissions
- Benefits and Service Area – Resubmissions
- Final Submission Tasks
- Q&A Session
- Closing Remarks

Session Guidelines

- This is a 60-minute webinar session
- This webinar will provide an opportunity for Center for Consumer Information and Insurance Oversight (CCIIO) Plan Management (PM) Subject Matter Experts (SMEs) to respond to questions from QHP 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 Certification

Date	Category	Activity
Ongoing	Submission	Issuers' QHP data in Health Insurance Oversight System (HIOS) Plan Preview HIOS Modules and System for Electronic Rate and Form Filing (SERFF) Transfer are open for data resubmission
May 12 – June 10, 2016	CMS Review	CMS conducts Round 1 review of Plan Year (PY) 2017 QHP Applications
June 15 – 16, 2016	CMS Notice	CMS sends Round 1 Correction Notice to issuers and state regulators
June 15 – 16, 2016	CMS Notice	CMS sends first Plan Crosswalk Notice to issuers and state regulators
June 30, 2016	Submission	Round 2 Deadline for HIOS Submission and SERFF Transfer of updated QHP Application Data

Announcements

Steps for Resubmitting the QHP Application

Steps for Resubmission



Steps to get an already submitted QHP application resubmitted

- Final submission status for module is "Cross Validation Completed"



Validator Makes Changes

- Validator returns module to Submitter



Submitter Updates

- Submitter makes corrections and updates



Validator Confirms

- Validator re-validates updates from the Submitter



Validator

- Validator performs Final Submission

Issuer Module - Resubmissions

PY 2017 Issuer Data Validator – Summary Page

The Data Validator Summary Page will allow you to select the application to initiate the resubmission. You must be assigned the role of Data Validator to access this page.

PLAN MANAGEMENT

Text Size: A A A

PLAN YEAR : 2017
Welcome, TEST510 | Logout

Issuer Application

Welcome to the Issuer Application. This application module will allow you to submit an Issuer Application for QHP Certification to participate in a single State. This module will take you through a series of pages where you will be asked to enter specific information about your company and the plans you wish to offer as Qualified Health Plans (QHPs). From this summary page you can resume an existing Issuer Application that was previously saved, or you can start a new Issuer Application.

Please note that in order to be certified as a QHP Issuer, you must submit a completed Issuer Application by the specified deadline. An Issuer Application must be submitted for each State for which your company seeks QHP Certification. You will only be able to submit an Issuer Application for an Issuer ID that is associated with your HIOS account. If you need to add a new Issuer ID to your HIOS account, please contact the Exchange Operation Support Desk at 1-855-267-1515.

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

[Data Submitter](#) [Data Validator](#)

Summary

Validate a Submitted Application

Issuer ID	Issuer	Date Last Modified	Status	Action
97764	FFE RR Test Issuer 604	05/25/2016 7:06:55 PM	Cross Validations Completed	Edit
13425	Virginia Health 3	05/23/2016 2:02:06 PM	Cross Validations Completed	Edit

You will have the ability select **Edit** for any submissions with the status of **'Cross Validation Completed.'**

PY 2017 Issuer Data Validator – Resubmission Alert Box

Note:

At the top of each section a **Resubmission** button will be displayed.



PLAN MANAGEMENT

Text Size: A A A

PLAN YEAR : 2017
Welcome, TEST510 | Logout

97764 - FFE RR Test Issuer

Program Attestations

The Issuer Module requires applicants to attest to their adherence to the regulations set forth in 45 CFR 155 and 156 as well as programmatic requirements necessary for the operational success of the Federally-Facilitated Marketplace (FFM). These attestations apply to all QHP Issuers seeking to participate in the FFM, as well as downstream vendors and contractors of the QHP Issuer or Company.

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

Summary

Program Attestations ✓

State Licensure ✓

Good Standing ✓

Accreditation ✓

ECP/Network Adequacy ✓

Review

Data Submitter

Data Validator

Final Submission

i

The Submission is currently locked; select "Resubmission" to update this module.

Resubmission

Fields marked with an asterisk (*) are required.

General Issuer Attestations

- 1.) By the first resubmission period during the QHP certification period, the issuer is licensed, by all applicable states, to offer the specific type of health insurance or health plans that the issuer is submitting to CMS for certification; is in compliance with all applicable state solvency requirements; and is in compliance with all other applicable state laws and regulations.
- 2.) Applicant attests that it will not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity or sexual orientation in accordance with 45 CFR §156.200(e).

Click on any section to open the module for resubmission.

Click the '**Resubmission**' button from the alert box to resubmit a section.

PY 2017 Issuer Data Validator – Issuer Confirmation Pop-Up

A confirmation pop-up will appear to confirm resubmissions approved by CMS.

The screenshot displays the 'PLAN MANAGEMENT' interface. At the top, it shows 'PLAN YEAR : 2017' and 'Welcome, TEST510 | Logout'. Below this, the user is identified as '67764 - FFE RR Test Issuer 604 - CA'. The main section is titled 'Program Attestations' and includes a link for 'Instructions and Reference Material (PDF) [3.21 MB]'. A confirmation pop-up is overlaid on the screen, asking: 'Are you submitting for one of the following reasons?'. The pop-up lists three reasons: (a) to address an application deficiency noted by HHS or the State; (b) to submit a data correction during the plan preview period; and/or (c) to submit additional information for certification of stand-alone dental plans. It also states: 'By selecting 'Yes' you are temporarily invalidating your previously submitted QHP application. This will allow you to enter the necessary information related to one or more of the above reasons for resubmission.' The pop-up has 'Yes' and 'No' buttons. An arrow points from the 'Yes' button in the pop-up to a text box on the left that says: 'Click 'Yes'. By selecting 'Yes' you are temporarily invalidating your previously submitted QHP Application.'

Click 'Yes'. By selecting 'Yes' you are temporarily invalidating your previously submitted QHP Application.

Note: Selecting 'No' will simply close the pop-up screen with no changes made to the module/ application.

PY 2017 Issuer Data Validator – Resubmission Confirmation Message

A confirmation message informs you that the section status has changed to **'Return to Submitter.'**

Click the **'Review'** section of the application to finalize resubmission.

PLAN MANAGEMENT Text Size: A A A

PLAN YEAR : 2017
Welcome, TEST510 | Logout

97764 - FFE RR Test Issuer 604 - CA

Program Attestations

The Issuer Module requires applicants to attest to their adherence to the regulations set forth in 45 CFR 155 and 156 as well as programmatic requirements necessary for the operational success of the Federally-Facilitated Marketplace (FFM). These attestations apply to all OHP Issuers seeking to participate in the FFM, as well as downstream vendors and contractors of the OHP Issuer or Company.

[Instructions and Reference Material \(PDF\) \[3.21 MB\]](#)

Summary | **Program Attestations** | State Licensure | Good Standing | Accreditation | ECP/Network Adequacy | Review

Data Submitter | **Data Validator** | Final Submission

The section status has been changed to "Returned For Changes" proceed to the review page to trigger the resubmission process.

Fields marked with an asterisk (*) are required.

General Issuer Attestations

- 1.) By the first resubmission period during the OHP certification process, applicant is in good standing and as such is licensed, by all applicable states, to offer the specific type of health insurance or health plans that the issuer is submitting to CMS for certification; is in compliance with all applicable state solvency requirements; and is in compliance with all other applicable state laws and regulations.
- 2.) Applicant attests that it will not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity or sexual orientation in accordance with 45 CFR §156.200(e).
- 3.) Applicant attests that it will market its OHPs in accordance with all applicable state laws and regulations and will not employ discriminatory marketing practices in accordance with 45 CFR 156.225.

Note: Repeat these steps for each section.

PY 2017 Issuer Review Page – Resubmission Confirmation Message

Select 'Return to Submitter' button to initiate the resubmission for the confirmation upon successful resubmission.

The screenshot displays the 'Data Validator' tab of the PY 2017 Issuer Review Page. A green confirmation message at the top states: 'You have successfully initiated the resubmission of the Issuer Module. The status has been changed to "Returned For Changes" and the module has been returned for changes to the Submitter.' Below this, a note reads: 'All sections must be completed to the best of your knowledge before being submitted.' A table titled 'Validator Sections Table' lists the following sections and their status:

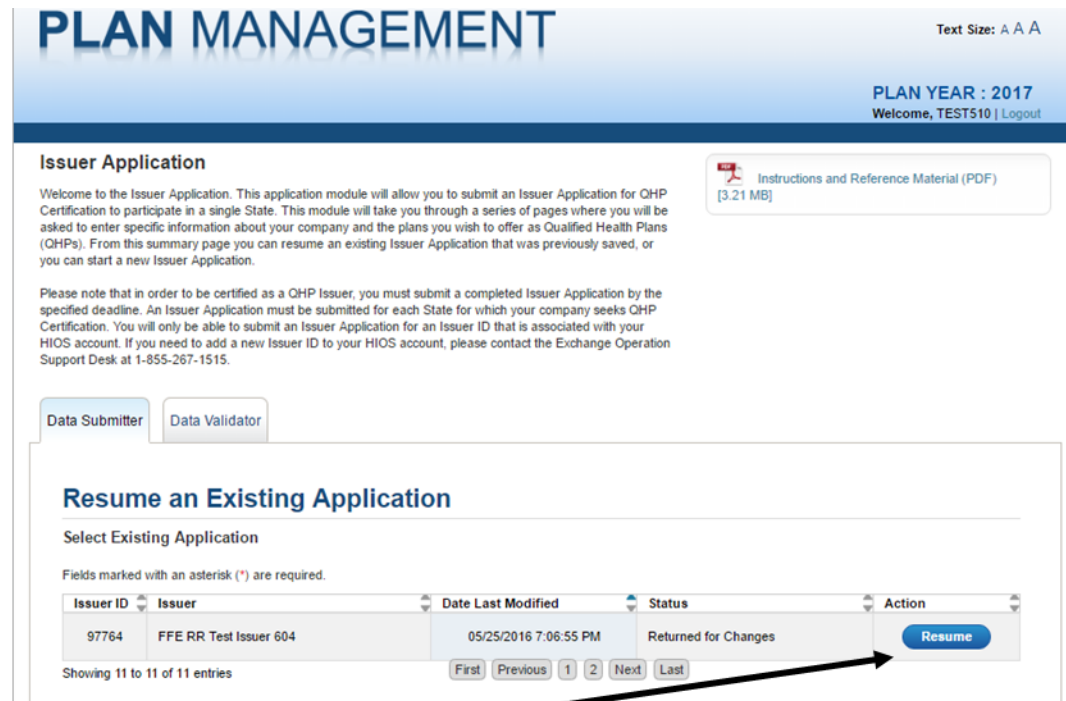
Application Sections	Modified Date	Modified By	Status
Program Attestations	05/25/2016 7:06:39 PM	TEST451@FFETEST.COM	Validation Failed
State Licensure	05/25/2016 7:06:54 PM	TEST451@FFETEST.COM	Validation Passed
Good Standing	05/25/2016 7:07:02 PM	TEST451@FFETEST.COM	Validation Passed
Accreditation	05/25/2016 7:08:41 PM	TEST451@FFETEST.COM	Validation Passed
ECP/Network Adequacy	05/25/2016 7:14:00 PM	TEST451@FFETEST.COM	Validation Passed

At the bottom of the page, there are three buttons: 'Return to Submitter', 'Previous', and 'Submit Application'. An arrow points from the 'Return to Submitter' button to the text box on the left.

Note: From the Review Page, verify all sections intended for resubmission have a status of '**Return for Changes.**'

PY 2017 Issuer Submitter – Summary Page

The Issuer Summary Page will allow you to continue working on an existing application or view an already submitted application. You must be assigned the role of data submitter to access this page.



PLAN MANAGEMENT

Text Size: A A A

PLAN YEAR : 2017
Welcome, TEST510 | Logout

Issuer Application

Welcome to the Issuer Application. This application module will allow you to submit an Issuer Application for QHP Certification to participate in a single State. This module will take you through a series of pages where you will be asked to enter specific information about your company and the plans you wish to offer as Qualified Health Plans (QHPs). From this summary page you can resume an existing Issuer Application that was previously saved, or you can start a new Issuer Application.

Please note that in order to be certified as a QHP Issuer, you must submit a completed Issuer Application by the specified deadline. An Issuer Application must be submitted for each State for which your company seeks QHP Certification. You will only be able to submit an Issuer Application for an Issuer ID that is associated with your HIOS account. If you need to add a new Issuer ID to your HIOS account, please contact the Exchange Operation Support Desk at 1-855-267-1515.

[Data Submitter](#) [Data Validator](#)

Resume an Existing Application

Select Existing Application

Fields marked with an asterisk (*) are required.

Issuer ID	Issuer	Date Last Modified	Status	Action
97764	FFE RR Test Issuer 604	05/25/2016 7:06:55 PM	Returned for Changes	Resume

Showing 11 to 11 of 11 entries

[First](#) [Previous](#) [1](#) [2](#) [Next](#) [Last](#)

Click 'Resume' for the 'Returned for Changes' status.

Rating Module - Resubmissions

PY 2017 Rating Validator – Summary Page

The Rating Validator Summary Page will allow you to select the application to initiate the resubmission. You must be assigned the role of Data Validator to access this page.

PLAN MANAGEMENT Text Size: A A A

PLAN YEAR : 2017
Welcome, TEST510 | Logout

Rating Module

[Data Submitter](#) [Data Validator](#)

Summary

Validate a Submission

Issuer ID:	Issuer:	Issuer State:	Last Update:	Status:	Action:
97764	FFE RR Test Issuer 604	CA	Wed, 25 May 2016 19:06:55 EDT	Validation Completed	Edit

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

Click '**Edit**' for the '**Validation Completed**' status.

PY 2017 Rating Validator – Submission Page

This page provides the current template/data provided by the Submitter and allows the Validator to validate that the information provided is accurate.

Click here to select 'No.'

PLAN MANAGEMENT

Text Size: A A A

PLAN YEAR : 2017
Welcome, TEST510 | Logout

97764 - FFE RR Test Issuer 604 - CA

Rating Module

Instructions and Reference Material (PDF)
[1.68 MB]

Data SubmitterData ValidatorFinal Submission

Validate The Rates & Business Rules Submission

Please review and validate the completed submissions.
Fields marked with an asterisk (*) are required.

Uploaded File(s)

Document Type	File Name	Upload Date
Business Rules	Rules_Both_97764_CA_2017.xls	05/25/2016 7:11:25 PM
Rates	Rates_Health_97764_CA_2017.xls	05/25/2016 7:11:28 PM
Dental Rate Template	Rates_Dental_97764_CA_2017.xls	05/25/2016 7:11:42 PM

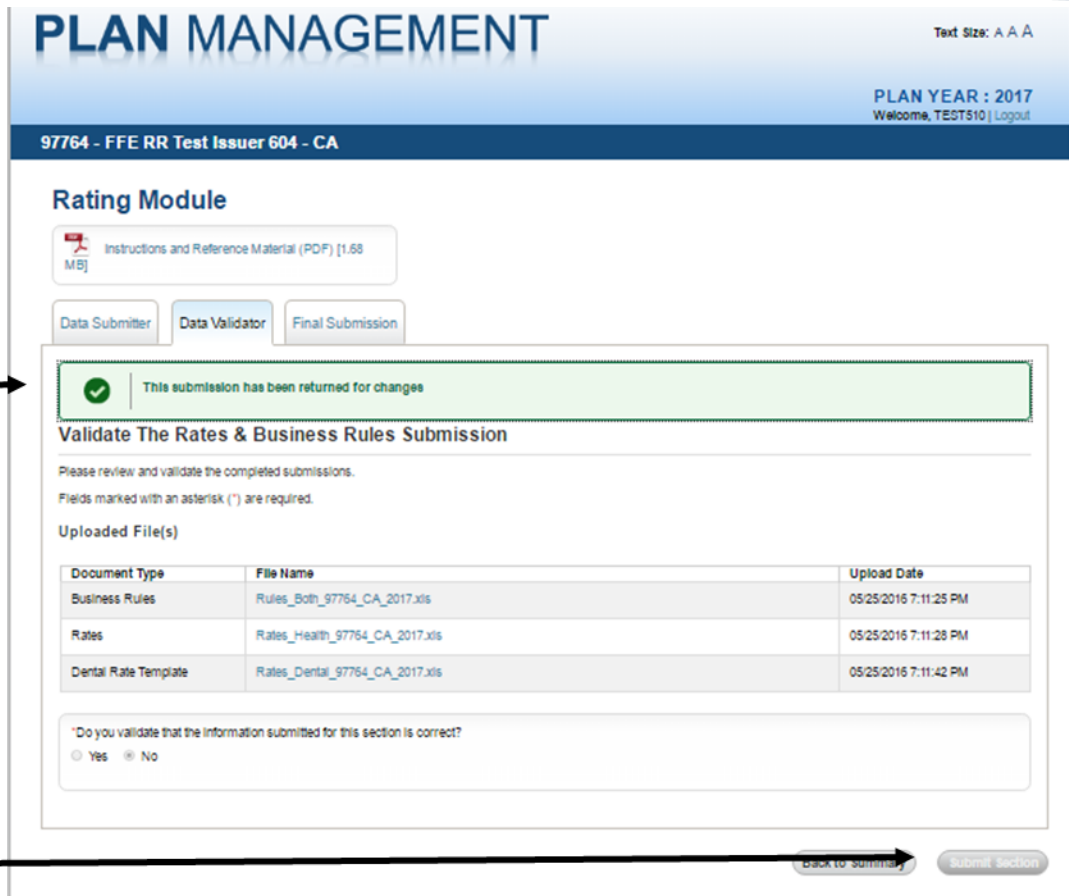
Do you validate that the information submitted for this section is correct?
☒ Yes ☐ No

Note: By clicking 'Submit Section' you allow the Submitter to have access to the module to make any modifications needed.

PY 2017 Rating Validator – Confirmation Page

This page states the submission has been returned for changes.

Message states that the module status has been changed to “return for changes.”



PLAN MANAGEMENT Text Size: A A A

PLAN YEAR : 2017
Welcome, TESTS10 | Logout

97764 - FFE RR Test Issuer 604 - CA

Rating Module

 Instructions and Reference Material (PDF) [1.68 MB]

[Data Submitter](#) [Data Validator](#) [Final Submission](#)

 This submission has been returned for changes

Validate The Rates & Business Rules Submission

Please review and validate the completed submissions.
Fields marked with an asterisk (*) are required.

Uploaded File(s)

Document Type	File Name	Upload Date
Business Rules	Rules_Both_97764_CA_2017.xls	05/25/2016 7:11:25 PM
Rates	Rates_Health_97764_CA_2017.xls	05/25/2016 7:11:28 PM
Dental Rate Template	Rates_Dental_97764_CA_2017.xls	05/25/2016 7:11:42 PM

*Do you validate that the information submitted for this section is correct?

☐ Yes ☒ No

[Back to Summary](#) [Submit Section](#)

Click 'Submit Section.'

PY 2017 Rating Submitter – Summary Page

The Rating Summary Page will allow you to start a new application. The Summary page also provides you with the ability to continue working on a pending application or view an already submitted application.

PLAN MANAGEMENT Text Size: A A A

PLAN YEAR : 2017
Welcome, TESTS10 | Logout

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: 10207 VA Care and Choice, Inc. Start the Rating Module

Resume an Existing Submission

Issuer ID:	Issuer:	Issuer State:	Last Update:	Status:	Action:
97764	FPE RR Test Issuer 604	CA	Wed, 25 May 2016 19:05:55 EDT	Returned for Changes	Resume

Click 'Resume' to continue working on a pending application.

Benefits and Service Area - Resubmissions

PY 2017 Benefits and Service Area Validator – Summary Page

The Benefits and Service Area Validator Summary Page will allow you to select the application to initiate the resubmission. You must be assigned the role of Data Validator to access this page.

PLAN MANAGEMENT Text Size: A A A

PLAN YEAR : 2017
Welcome, TESTS10 | Logout

Benefits & Service Area Module - Summary

[Data Submitter](#) [Data Validator](#)

[Instructions and Reference Material \(PDF\) \[2.36 MB\]](#)

Validate a submission

Issuer ID:	Issuer Name:	State:	Last Update:	Status:	Action:
97764	FFE RR Test Issuer 604	CA	Wed, 25 May 2016 19:05:55 EDT	Validation Completed	Edit

Click '**Edit**' for the '**Validation Completed**' status.

PY 2017 Benefits and Service Area Validator – Submission Page

This page provides the current template/data provided by the Submitter and allows the Validator to validate that the information provided is accurate.

First select
“No.”

Then click “**Submit.**”



PLAN MANAGEMENT

Text Size: A A A

PLAN YEAR : 2017
Welcome, TEST510 | Logout

97764 - FFE RR Test Issuer 604 - CA

Benefits & Service Area Module

Instructions and Reference Material (PDF) [2.36 MB]

Data SubmitterData ValidatorFinal Submission

Please review the completed templates and supplementary documents.
Fields marked with an asterisk (*) are required.

Document Type	File Name	Description	Last Update	Status
*Plan & Benefits Template (SHOP)				
*Plan & Benefits Template (Individual)	Plans_Indiv_Health_97764_CA_2017.xls		05/25/2016 7:14:46 PM	Complete
Dental Plan & Benefits Template (SHOP)				
Dental Plan & Benefits Template (Individual)	Plans_Ind_Dental_97764_CA_2017.xls		05/25/2016 7:12:00 PM	Complete
*Network ID Template	Network_97764_CA_2017.xls		05/25/2016 7:11:53 PM	Complete
*Service Area Template	ServiceArea_97764_CA_2017.xls		05/25/2016 7:11:44 PM	Complete
Prescription Drugs Template	RX_97764_CA_2017.xls		05/25/2016 7:11:57 PM	Complete

Showing 1 to 7 of 7 entries

*Do you validate that the information submitted for this section is correct?
☒ Yes ☐ No

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 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 SummarySubmit

PY 2017 Benefits and Service Area Validator – Confirmation Page

This page states the submission has been returned for changes.

Message states that the module status has been changed to 'Return for Changes.'

PLAN MANAGEMENT

Text Size: A A A

PLAN YEAR : 2017
Welcome, TESTS10 | Logout

97764 - FFE RR Test Issuer 604 - CA

Benefits & Service Area Module

Instructions and Reference Material (PDF) [2.35 MB]

Data Submitter Data Validator Final Submission

This submission has been returned for changes

Please review the completed templates and supplementary documents.
Fields marked with an asterisk (*) are required.

Document Type	File Name	Description	Last Update	Status
*Plan & Benefits Template (SHOP)				
*Plan & Benefits Template (Individual)	Plans_Indiv_Health_97764_CA_2017.xlsm		05/25/2016 7:14:45 PM	Complete
Dental Plan & Benefits Template (SHOP)				
Dental Plan & Benefits Template (Individual)	Plans_Ind_Dental_97764_CA_2017.xls		05/25/2016 7:12:00 PM	Complete
*Network ID Template	Network_97764_CA_2017.xls		05/25/2016 7:11:53 PM	Complete
*Service Area Template	ServiceArea_97764_CA_2017.xls		05/25/2016 7:11:44 PM	Complete
Prescription Drugs Template	RX_97764_CA_2017.xls		05/25/2016 7:11:57 PM	Complete

Showing 1 to 7 of 7 entries

*Do you validate that the information submitted for this section is correct?
☐ Yes ☒ No

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

PY 2017 Benefits and Service Area Submitter – Summary Page

The Benefits and Service Area Summary Page allows you to start a new submission, continue working on a pending submission, or view a completed submission.

PLAN MANAGEMENT Text Size: A A A

PLAN YEAR : 2017
Welcome, TESTS10 | Logout

Benefits & Service Area Module - Summary

Instructions and Reference Material (PDF) [2.35 MB]

Data Submitter Data Validator

Start working on a Benefits and Service Area Module Submission

Issuer: 27169 DE Test Insurance Firm 1 **Start Benefits Module**

Resume an Existing Submission

Issuer ID:	Issuer Name:	State:	Last Update:	Status:	Action:
97764	FPE RR Test Issuer 604	CA	Wed, 25 May 2016 19:06:55 EDT	Returned for Changes	Resume

Click 'Resume' for the 'Returned for Changes' status.

Final Submission Tasks

PY 2017 Final Submission Tasks

The screenshot shows the PLAN MANAGEMENT web interface. At the top, the title "PLAN MANAGEMENT" is displayed in large blue letters. To the right, there is a "Text Size: A A A" link. Below the title, the "PLAN YEAR : 2017" is shown, along with a welcome message "Welcome, TEST510 | Logout" and a "Logout" link. A dark blue banner below this contains the text "97764 - FFE RR Test Issuer 604 - CA". The main content area is titled "Final Submission". On the right side of this area, there is a link for "Instructions and Reference Material (PDF) [3.21 MB]" with a PDF icon. At the bottom of the main content area, there are three buttons: "Data Submitter", "Data Validator", and "Final Submission". The "Final Submission" button is highlighted with a blue border. An arrow points from a text box below to this button.

PLAN MANAGEMENT

Text Size: A A A

PLAN YEAR : 2017
Welcome, TEST510 | Logout

97764 - FFE RR Test Issuer 604 - CA

Final Submission

Instructions and Reference Material (PDF) [3.21 MB]

Data Submitter Data Validator Final Submission

Click 'Resume' for the 'Returned for Changes' status.

PY 2017 Final Submission Page

The Final Submission page allows users to perform two functions: cross validation and final submission of the QHP Application.

PLAN MANAGEMENT

Text Size: A A A

PLAN YEAR : 2017
Welcome, TEST510 | Logout

97764 - FFE RR Test Issuer 604 - CA

Final Submission

Instructions and Reference Material (PDF) [3.21 MB]

Data SubmitterData ValidatorFinal Submission

✓

Issuer ID 97764 has been Cross Validated.

To qualify for QHP Certification, Cross Validation must be passed. To cross validate template data within a submission, click the Cross Validate or Submit Button. A submission must pass cross validation prior to the submission window closing in order to be a certified QHP.

Please Note: The Unified Rate Review module submission(s) are required for QHP certification which is necessary for plans to be displayed on the Marketplace.

Module	Submission Date	Status
Issuer Module	05/26/2016 12:11:10 PM	Returned for Changes
Benefits and Service Area Module	05/26/2016 12:21:37 PM	Returned for Changes
Rating Module	05/26/2016 12:17:59 PM	Returned for Changes

BackCross ValidateSubmit

PY 2017 Final Submission Tasks (continued)

PLAN MANAGEMENT Text Size: A A A

PLAN YEAR : 2017
Welcome, TEST510 | Logout

97764 - FFE RR Test Issuer 604 - CA

Final Submission

Instructions and Reference Material (PDF) [3.21 MB]

Data Submitter Data Validator **Final Submission**

To qualify for QHP Certification, Cross Validation must be passed. To cross validate template data within a submission, click the Cross Validate or Submit Button. A submission must pass cross validation prior to the submission window closing in order to be a certified QHP.

Please Note: The Unified Rate Review module submission(s) are required for QHP certification which is necessary for plans to be displayed on the Marketplace.

Module	Submission Date	Status
Issuer Module	05/25/2016 12:11:10 PM	Returned for Changes
Benefits and Service Area Module	05/25/2016 12:21:37 PM	Returned for Changes
Rating Module	05/25/2016 12:17:59 PM	Returned for Changes

Back Cross Validate Submit

Use the Final Submission section to first **"Cross Validate."**

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7500 Security Boulevard, Baltimore, MD 21244

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

And then **"Submit."**

PY 2017 Final Submission Tasks (continued)

If errors are generated, view the error report and fix the inconsistencies detected. Once errors are fixed, cross-validate and re-submit.

PLAN MANAGEMENT Text Size: A A A

PLAN YEAR : 2017
Welcome, TEST510 | Logout

97764 - FFE RR Test Issuer 604 - CA

Final Submission

Data Submitter Data Validator Final Submission

Instructions and Reference Material (PDF)
[3.21 MB]

Please correct the following errors
1. There were errors identified during cross-validation between templates. Please download the error report below for details.

Download Final Submission Error Report.
ErrorReport.csv

For going for CHP Certification, cross validation must be passed. To cross validate, click the cross validate or submit button. A submission must pass cross validation prior to the submission window closing in order to be a certified CHP.
Please Note: The Unified Rate Review module submission(s) are required for CHP certification which is necessary for plans to be displayed on the Marketplace.

Module	Submission Date	Status
Issuer Module	05/26/2016 5:12:11 PM	Cross Validations Completed
Benefits and Service Area Module	05/26/2016 5:12:11 PM	Cross Validations Completed
Rating Module	05/26/2016 5:12:11 PM	Cross Validations Completed

Back Cross Validate

PLAN MANAGEMENT
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CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Example Error Report

	A	B	C	D	E	F
1	URAC template has not been uploaded					
2	NCOA template has not been uploaded					
3	Rate Table template has not been uploaded					
4	Admin template has not been uploaded					
5	Prescription Drug template has not been uploaded					
6	PlanBenefit-Small Group template has not been uploaded					
7	PlanBenefit-Individual template has not been uploaded					
8	ECP template has not been uploaded					
9	Network template has not been uploaded					
10	Service Area template has not been uploaded					
11	Rate Business Rules template has not been uploaded					
12	The following NetworkId's exist in Benefit but not in Networ					
13	Not yet checking RateTable dates for PlanBenefit-Individual					
14	Not currently checking URR planId's					
15	Issuer Module is not complete and validated					
16						

PY 2017 Final Submission Tasks (continued)

PLAN MANAGEMENT

Text Size: A A A

PLAN YEAR : 2017
Welcome, TEST510 | Logout

97764 - FFE RR Test Issuer 604 - CA

Final Submission

Data Submitter

Data Validator

Final Submission

 Instructions and Reference Material (PDF) [3.21 MB]

 Issuer ID 97764 has been Cross Validated.

To qualify for QHP Certification, Cross Validation must be passed. To cross validate template data within a submission, click the Cross Validate or Submit Button. A submission must pass cross validation prior to the submission window closing in order to be a certified QHP.

Please Note: The Unified Rate Review module submission(s) are required for QHP certification which is necessary for plans to be displayed on the Marketplace.

Module	Submission Date	Status
Issuer Module	05/25/2016 12:11:10 PM	Returned for Changes
Benefits and Service Area Module	05/25/2016 12:21:37 PM	Returned for Changes
Rating Module	05/25/2016 12:17:59 PM	Returned for Changes

Back

Cross Validate

Submit

PLAN MANAGEMENT

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Complete final submission by clicking "Submit."

Submitting Questions

CMS recommends that issuers with technical or policy questions about data display follow these guidelines when submitting questions:

- Email subject line: “QHP Plan Preview Question”
- Include the following information:

- | | |
|--|---|
| <ol style="list-style-type: none">1. HIOS Issuer ID (the one you were viewing)2. Issuer name3. Issuer state4. Impacted Plan ID(s)5. A screenshot of the issue6. Date of the error7. The data element in question (please refer to the Plan Preview User Guide) | <ol style="list-style-type: none">8. A detailed description of the problem, including:<ol style="list-style-type: none">a) Zip code, county, smoking status and birthdates used in scenariob) What appeared in Plan Previewc) What the user was expecting to see9. Preferred contact information (desk, mobile, email) in case the Help Desk needs to follow-up on your ticket |
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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' to submit your questions*

Submission of Inquiries

Users/Issuers can contact:

- **CMS Help Desk** with questions about specific situations, the Federal Templates and their functionality and HIOS
Call: 855-CMS-1515 or **Email: CMS_FEPS@cms.hhs.gov**
- **National Association of Insurance Commissioners (NAIC)** with questions about state requirements/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 Small Business Health Options Program (SHOP) or Individual Marketplace

Plan Management Webinar Dates

The 2016 QHP June Webinar Series VI sessions continue on Tuesdays and Thursdays as shown below.

Date	Day	Time (ET)	Topic
6/9/16	Thursday	1:00 p.m.—2:00 p.m.	Re-Enrollment of Discontinued QHPs
6/14/16	Tuesday	3:00 p.m. —4:00 p.m.	Common QHP/SADP Application Data Errors
6/16/16	Thursday	1:00 p.m.—2:00 p.m.	Common Deficiencies Round 1
6/21/16	Tuesday	3:00 p.m. —4:00 p.m.	Window Shopping and Decision Tools Wireframes Demonstration
6/23/16	Thursday	1:00 p.m.—2:00 p.m.	Open Q&A
6/28/16	Tuesday	3:00 p.m. —4:00 p.m.	Open Q&A
6/30/16	Thursday	1:00 p.m.—2:00 p.m.	Plan Design Certification Reviews and Common Corrections and 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 twice-weekly PM webinar sessions, issuers are encouraged to attend the following sessions:

Program Area	Day	Time (ET)
Enrollment	Monday (bi-weekly)	12:00 p.m. – 1:30 p.m.
FF-SHOP	Tuesdays	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

- 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	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