

# Overview of System for Electronic Rate and Form Filing (SERFF), Master Review Tool, and Cost Sharing Review Tool

**April 24, 2020**



**Center for Consumer Information and  
Insurance Oversight (CCIIO)**

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# Agenda

- Session Guidelines
- SERFF Plan Management
- Master Review Tool
- Cost Sharing Review Tool
- Live Q&A Session
- Closing Remarks

# Intended Audience

- Please be advised that the intended audience for this webinar is state regulators in Federally Facilitated Exchange (FFE) states performing plan management activities. This is not an open press call.
- Members of the press or a media outlet should disconnect the call at this time and contact the Centers for Medicare & Medicaid Services (CMS) Press Office for further information.

# Session Guidelines

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

# WebEx Audio Issues

If you are listening to the webinar through WebEx and experience audio issues, please dial into 1-866-487-7844 and enter your six (6) digit PIN for phone access.

# Upcoming Plan Year (PY) 2021 Key Dates for QHP Certification

| Date                      | Category                    | Activity                                                    |
|---------------------------|-----------------------------|-------------------------------------------------------------|
| Tuesday, April 21, 2020   | Issuer Conference (Virtual) | 2020 QHP Issuer Conference (Policy Updates & Initiatives)   |
| Thursday, April 23, 2020  | QHP Certification           | Plan year (PY) 2021 QHP Application Submission Window Opens |
| Monday, April 27, 2020    | Issuer Conference (Virtual) | 2020 QHP Issuer Conference (Operational Training)           |
| Wednesday, April 29, 2020 | Issuer Conference (Virtual) | 2020 QHP Issuer Conference (Operational Training)           |

# Upcoming PY 2022 Key Dates for QHP Certification

| Date                | Category                      | Activity                                                                                                      |
|---------------------|-------------------------------|---------------------------------------------------------------------------------------------------------------|
| Friday, May 8, 2020 | EHB Benchmark Plan Submission | Deadline for states to submit PY 2022 Essential Health Benefits (EHB) Benchmark Plan selection documentations |

# Announcements

# SERFF Plan Management

# Online Help – Review Tools

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## [Plan Management](#)

Learn more about changes made to  
SERFF Plan Management.

**Click on any of the links below to access the corresponding topic.**

## [Plan Binders](#)

[Workspace Views and Other FAQs](#)

[QHP Application State Review Tools](#)

[Potential Future Functionality](#)



# Online Help – Review Tools

## QHP Application State Review Tools

### QHP Application State Review Tools

The QHP Application Review Tools can be found in the attached zip file.

To download the files, right-click on the link below, then choose "Save Target As".

[QHP Application State Review Tools](#)

Next, navigate to the location where you would like to save the files, then choose "Save".

To extract all the files from the zip file, navigate to the location where you saved the zip file. Right-click on the file name and choose "WinZip", then select "Extract Here".

### QHP Application Review Tools User Guides

The QHP Application Review Tools User Guides can be found in the attached zip file.

To download the files, right-click on the link below, then choose "Save Target As".

[QHP Application Review Tools User Guides and Quick Guides](#)

Next, navigate to the location where you would like to save the files, then choose "Save".

To extract all the files from the zip file, navigate to the location where you saved the zip file. Right-click on the file name and choose "WinZip", then select "Extract Here".

### Data Integrity Tool

The following files are helpful information for the Data Integrity Tool.

To download the files, right-click on the link below, then choose "Save Target As".

[Instructional Sessions](#)

Next, navigate to the location where you would like to save the files, then choose "Save".

To extract all the files from the zip file, navigate to the location where you saved the zip file. Right-click on the file name and choose "WinZip", then select "Extract Here".

[Data Integrity Tool](#)

[List of Data Integrity Checks](#)

[FAQs](#)

[Fact Sheet](#)

# Download Templates

|                   |                        |                                      |            |          |
|-------------------|------------------------|--------------------------------------|------------|----------|
| Filings           | <b>Plan Management</b> | Messages                             | Settings   | Filing R |
| <b>My Binders</b> | Search/Export          | Plan Management General Instructions | EFT Report |          |

My Binders

| Company Name          | Market Type |
|-----------------------|-------------|
| ABC Insurance Company | Individual  |

Plans Associate Schedule Items Fees **Templates**

**Expand All** **Collapse All** **Download Templates**

⚡ ⊕ Plan and Benefits Template

# Download Templates

Select Templates

☐ ▼

**Plan and Benefits Template**

☐ OHPBT\_v12.xml

☒ c16b7816-2396-44ed-b27f-3a96978de7ce\_DATA\_BENEFITS.xlsm

**Prescription Drug Template**

☐ OHRx\_v3.xml

☒ 81f85187-8847-4e36-ba6c-0d426d361658\_DATA\_PRESCRIPTION\_DRUG.xls

**Network Template**

☐ OHNetwork\_v1.xml

☒ f1f60b1a-3137-4808-b475-68bb68cbd2a3\_DATA\_NETWORK\_ID.xls

**Service Area Template**

☐ OHServiceArea\_V1.xml

☒ d3b8d04e-9090-42c1-a1c9-5fb7892432b0\_DATA\_SERVICE\_AREA.xls

**Essential Community Providers/Network Adequacy Template**

☐ ECP-NA-20160421T141315.zip

☒ d2043254-938d-4b2a-b6fd-a61116f2dfbd\_DATA\_ECP\_NETWORK\_ADEQUACY.xlsm

**Rate Data Template**

☐ OHRates\_v1.xml

☒ e5b5b0af-4acb-4608-9c90-bc26d4c31190\_DATA\_RATING\_TABLE.xls

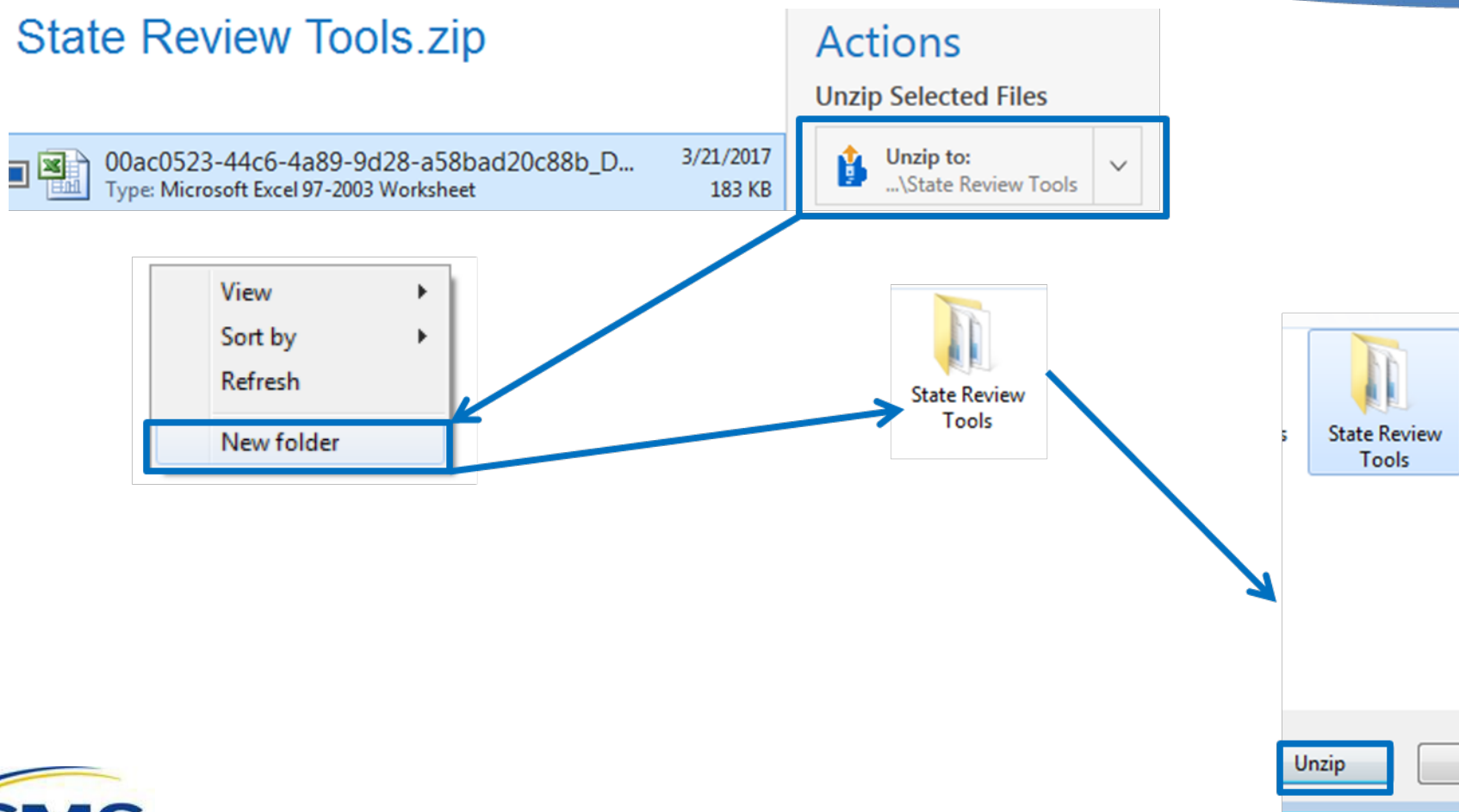
**Rating Business Rules Template**

☐ OHBRV2.xml

☒ 00ac0523-44c6-4a89-9d28-a58bad20c88b\_DATA\_RATING\_RULES.xls

# Unzip Templates

State Review Tools.zip



# State Regulators and Review Tools

# Overview of QHP Application Review Tools

- **Master Review Tool**
  - Allows the user to import select data from issuers' application templates. This is critical for running “automated review tools”.
- **Review Process Guide**
  - General functionality for the State Regulator to track state's review progress and results for a given plan across multiple standards.
  - Model step-by-step processes that State Regulators could follow to review QHP Applications for compliance with specific Patient Protection and Affordable Care Act (PPACA) standards. (Each tab is a different process/standard.)
- **Select Automated Review Tools**
  - Allows State Regulators to perform automated reviews using data submitted in their templates.

# Master Review Tool

# Master Review Tool: Data Template Import

- **Master Review Tool imports the following data templates:**
  - Plans and Benefits Template
  - Service Area Template
  - Essential Community Provider (ECP)/Network Adequacy (NA) Template
  - Prescription Drug Template
- **New for 2021:**
  - Accommodates PY21 QHP templates
  - No other file changes

# **Master Review Tool and Review Process Guide Demo**

# Cost Sharing Review Tool

# Cost Sharing Review Tool

- Imports Plans & Benefits Template data after it is aggregated into the Master Review Tool
- Identifies errors in the Cost Sharing data that will generate deficiencies
  - Template validation and Data Integrity Tool (DIT) do not check for cost sharing errors.
- Plan Year (PY) 2021 Changes
  - Updated with proposed PY 2021 Maximum Out of Pocket (MOOP) limits for standard plans and silver plan variations

# Cost Sharing Overview

- QHPs must meet cost sharing standards, including:
  - MOOP limit
  - Cost Sharing Reduction (CSR) requirements for cost sharing plan variations
- Catastrophic plans' and Expanded Bronze plans' requirements pertain to applicable QHPs.

# MOOP

- PY 2021 MOOP Limits proposed in the 2021 Payment Notice:
  - \$8,550 for an individual (self-only or in family)
  - \$17,100 for family plans
- Limit applies to plans offered on and off the Exchange.
- The Cost Sharing Review Tool flags a deficiency if the PY 2021 MOOP limit is exceeded.

# Cost Sharing Reductions

- Silver plan variations
  - Reduce cost sharing for individuals between 100% and 250% of federal poverty level (FPL).
- Limited cost sharing variation
  - Eliminate cost sharing for American Indians/Alaska Natives (AI/AN) when services are provided by the Indian Health Services; by an Indian tribe, a tribal organization or an urban Indian organization; or through referral under contract health services.
- Zero cost sharing variation
  - Eliminate all cost sharing for AI/AN under 300% of the FPL.

# Cost Sharing Reductions (continued)

- Limited and zero cost sharing variations, as well as silver plan variations, are required in QHPs on the Exchange only.
- The Cost Sharing Review Tool flags a deficiency if the plan variation requirements or successive cost sharing requirements are not met.
- Successive cost sharing requires:
  - Reduced cost sharing in plan variations with higher AV
  - Consistent cost sharing structure

# Catastrophic Plans

- Available to certain eligible individuals in QHPs both on and off the Exchange.
- Catastrophic plan requirements:
  - No multiple in-network tiers
  - Integrated medical and drug deductibles
  - Integrated medical and drug MOOPs
  - In-Network MOOP and deductible are equal to MOOP limit set in the 2021 Payment Notice
  - All Essential Health Benefits (EHBs) (except primary care/preventive care) have in-network cost sharing of “no charge after deductible”.
- The Cost Sharing Review Tool flags deficiencies in Catastrophic plans where requirements are not met.

# Expanded Bronze Plans

- The Cost Sharing Review tool includes checks to confirm each Expanded Bronze Plan:
  - Is a high deductible health plan (HDHP)
    - “Yes” selected in HSA-Eligible field
    - The Data Integrity Tool evaluates whether the plan meets HDHP’s deductible and MOOP requirements, or;
  - Pays for at least one major service before the deductible with reasonable cost sharing.
    - “Major Benefits” include: Primary Care Visits, Specialist Visit, Emergency Room Services, Inpatient Hospital Services (e.g., Hospital Stay), Generic Drugs, Preferred Brand Drugs, and Specialty Drugs.
    - **“Reasonable cost sharing” means a coinsurance of 50% or less, or an equivalent copay, as defined by the state.**

# Cost Sharing Tool: Common Errors

# Common Error 1: Non-zero Cost Sharing

A zero cost sharing variation has non-zero cost sharing.

| Plan                                               |                                 |                                        |                                     |                                     |
|----------------------------------------------------|---------------------------------|----------------------------------------|-------------------------------------|-------------------------------------|
| HIOS Plan ID*<br>(Standard Component<br>+ Variant) | Plan Variant Marketing<br>Name* | Level of<br>Coverage*<br>(Metal Level) | CSR Variation Type*                 | In Network (Tier 1)                 |
| 55555FL555555-01                                   | Florida Expanded Bronze         | Expanded Bronze                        | Standard Bronze On Exchange         | 50.00% Coinsurance after deductible |
| 55555FL555555-02                                   | Florida Expanded Bronze         | Expanded Bronze                        | Zero Cost Sharing Plan Variation    | 50.00% Coinsurance after deductible |
| 55555FL555555-03                                   | Florida Expanded Bronze         | Expanded Bronze                        | Limited Cost Sharing Plan Variation | 50.00% Coinsurance after deductible |

# Common Error 1: Non-zero Cost Sharing

A non-zero value for the zero cost sharing variation prompts the deficiency:

| HIOS Plan ID<br>(Standard Component) ▼ | Plan variation<br>type ▼ | Requirement that was<br>not met ▼                                               | Benefit/Field ▼  | Detailed Description ▼                                                                                                        |
|----------------------------------------|--------------------------|---------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------------------------------------------------|
| 55555FL5555555                         | Zero                     | Cost sharing for EHBs in the zero cost sharing plan variation must be \$0 or 0% | Specialist Visit | <a href="#">The cost sharing for Specialist Visit In Network (Tier 1) coinsurance is 50.00% Coinsurance after deductible.</a> |

# Common Error 2: Successive Cost Sharing

The standard Silver plan has a copay of \$20 for Generic Drugs, and the Silver 73% AV plan has a copay of \$30.

| Plan                                               |                                 |                                        |                                |                     |
|----------------------------------------------------|---------------------------------|----------------------------------------|--------------------------------|---------------------|
| HIOS Plan ID*<br>(Standard Component<br>+ Variant) | Plan Variant Marketing<br>Name* | Level of<br>Coverage*<br>(Metal Level) | CSR Variation Type*            | In Network (Tier 1) |
| 55555FL5555550-00                                  | Florida Silver                  | Silver                                 | Standard Silver Off Exchange P | \$20.00             |
| 55555FL5555550-01                                  | Florida Silver                  | Silver                                 | Standard Silver On Exchange P  | \$20.00             |
| 55555FL5555550-02                                  | Florida Silver                  | Silver                                 | Zero Cost Sharing Plan Variat  | \$0.00              |
| 55555FL5555550-03                                  | Florida Silver                  | Silver                                 | Limited Cost Sharing Plan Vari | \$20.00             |
| 55555FL5555550-04                                  | Florida Silver                  | Silver                                 | 73% AV Level Silver Plan       | \$30.00             |
| 55555FL5555550-05                                  | Florida Silver                  | Silver                                 | 87% AV Level Silver Plan       | \$20.00             |
| 55555FL5555550-06                                  | Florida Silver                  | Silver                                 | 94% AV Level Silver Plan       | \$10.00             |

# Common Error 2: Successive Cost Sharing

A plan with higher Actuarial Value (AV) (e.g. Silver 73%) cannot have higher cost sharing than a plan with lower AV (e.g. standard Silver). The error prompts the deficiency:

| HIOS Plan ID<br>(Standard Component) ▼ | Plan variation<br>type ▼ | Requirement that was<br>not met ▼                                      | Benefit/Field ▼ | Detailed Description ▼                                                                                                                                                  |
|----------------------------------------|--------------------------|------------------------------------------------------------------------|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 55555FL5555550                         | Silver                   | Cost sharing for all EHBs must follow the successive cost sharing rule | Generic Drugs   | <a href="#">Successive cost sharing is not followed between the standard silver plan and the 73% AV plan variation for In Network (Tier 1) copay for Generic Drugs.</a> |

# Common Error 3: Cost Sharing Structure

The standard Silver plan has \$100 copay for Urgent Care, and the Silver 73% AV plan has 20% coinsurance.

| Plan                                            |                              |                                     |                                | Copay               |                     |                |                     |
|-------------------------------------------------|------------------------------|-------------------------------------|--------------------------------|---------------------|---------------------|----------------|---------------------|
| HIOS Plan ID*<br>(Standard Component + Variant) | Plan Variant Marketing Name* | Level of Coverage*<br>(Metal Level) | CSR Variation Type*            | In Network (Tier 1) | In Network (Tier 2) | Out of Network | In Network (Tier 1) |
| 55555FL5555550-00                               | Florida Silver               | Silver                              | Standard Silver Off Exchange F | \$100.00            |                     | Not Applicable | Not Applicable      |
| 55555FL5555550-01                               | Florida Silver               | Silver                              | Standard Silver On Exchange    | \$100.00            |                     | Not Applicable | Not Applicable      |
| 55555FL5555550-02                               | Florida Silver               | Silver                              | Zero Cost Sharing Plan Variat  | \$0.00              |                     | \$0.00         | 0.00%               |
| 55555FL5555550-03                               | Florida Silver               | Silver                              | Limited Cost Sharing Plan Vari | \$100.00            |                     | Not Applicable | Not Applicable      |
| 55555FL5555550-04                               | Florida Silver               | Silver                              | 73% AV Level Silver Plan       | Not Applicable      |                     | Not Applicable | 20.00%              |
| 55555FL5555550-05                               | Florida Silver               | Silver                              | 87% AV Level Silver Plan       | Not Applicable      |                     | Not Applicable | 20.00%              |
| 55555FL5555550-06                               | Florida Silver               | Silver                              | 94% AV Level Silver Plan       | Not Applicable      |                     | Not Applicable | 20.00%              |

# Common Error 3: Cost Sharing Structure

Different cost sharing structures in plan variations prompt the same successive cost sharing deficiency:

| HIOS Plan ID<br>(Standard Component) ▼ | Plan variation<br>type ▼ | Requirement that was<br>not met ▼                                      | Benefit/Field ▼                   | Detailed Description ▼                                                                                                                                                                            |
|----------------------------------------|--------------------------|------------------------------------------------------------------------|-----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 55555FL5555550                         | Silver                   | Cost sharing for all EHBs must follow the successive cost sharing rule | Urgent Care Centers or Facilities | <a href="#">Successive cost sharing is not followed between the standard silver plan and the 73% AV plan variation for In Network (Tier 1) coinsurance for Urgent Care Centers or Facilities.</a> |

# Cost Sharing Review Tool Demo

# Resources

- CMS posted the PY21 Review Tools on the new QHP application website:
  - <https://www.qhpcertification.cms.gov/s/Review%20Tools>
- For ongoing technical assistance with tools:
  - Attend upcoming webinars
  - Submit questions to [CMS\\_FEPS@cms.hhs.gov](mailto:CMS_FEPS@cms.hhs.gov)

# Live Q&A

# Questions

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

- To Submit or Withdraw Questions by Phone:
  - *If you are listening through your computer speakers and want to submit a question by phone, dial 1-866-391-5945 and enter your unique six-digit PIN, then dial “star(\*) pound(#)” on your phone’s keypad.*
  - *If you are already dialed in by phone and want to submit a question, then dial “star(\*) pound(#)” on your phone’s keypad.*
  - *If you would like to withdraw a question and you are dialed in by phone, then dial “star(\*) pound(#)” on your phone’s keypad.*
- To submit questions by webinar:
  - *Type your question in the text box under the “Q&A” tab and click “Send.”*

If you are not able to ask your question during today’s session, or if your question is best answered by subject matter experts (SMEs) outside Plan Management (PM), you may submit it via [CMS\\_FEPS@cms.hhs.gov](mailto:CMS_FEPS@cms.hhs.gov) with the subject line “State Question.”

# State Regulators Webinar Session Survey

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



# Closing Remarks