

FM Series III: 2015 – 2016 Transition to Policy-based Payments

October 26, 2015

Financial Management Series III

Agenda

- Session Guidelines
- Manual Payment Process
- Manual Process APTC, CSR, and UF Supplemental Report
- Additional FM Testing
- HIX 820 Scenarios
- FAQs
- Q&A
- Closing
 - Resources
 - Closing Remarks

Session Guidelines

- This is a 90-minute webinar session.
- Documented Q&As will be posted in the coming weeks.
- For questions regarding logistics and registration, contact the Registrar at:
(800) 257-9520

FM Series III Continuation

- The Centers for Medicare & Medicaid Services (CMS) will continue to roll out trainings throughout 2015 and 2016.
- Series III provides additional information related to testing, timelines, HIX 820 scenarios, and any additional guidance related to the 2016 transition.
- As part of this series, CMS will conduct Monday content webinars and Friday Q&A sessions at least through the end of 2015.

FM Series III Dates: October 2015

Date of Session	Time	Target Audience	Session Title
October 5, 2015	2:00 – 3:30 p.m. ET	FFM and SBM Issuers	Webinar
October 9, 2015	12:00 – 1:00 p.m. ET	FFM and SBM Issuers	Q&A
October 12, 2015	HOLIDAY	N/A	N/A
October 16, 2015	12:00 – 1:00 p.m. ET	FFM and SBM Issuers	Q&A
October 19, 2015	2:00 – 3:30 p.m. ET	FFM and SBM Issuers	Webinar
October 23, 2015	12:00 – 1:00 p.m. ET	FFM and SBM Issuers	Q&A
October 26, 2015	2:00 – 3:30 p.m. ET	FFM and SBM Issuers	Webinar
October 30, 2015	12:00 – 1:00 p.m. ET	FFM and SMB Issuers	Q&A

2015 FFM Issuer Pilot

- All 2015 FFM Issuers should have received nine (9) PPRs as part of the pilot (January-August and October).
- Any FFM issuers who did not receive all nine (9) of their PPRs, please reach out to FMCC at FMCC@cms.hhs.gov with your Issuer ID.
- Issuers who are planning to send payment discrepancies, please try to do so by November 15, 2015.

Manual Payment Process

Manual Payment Process

- CMS began using the Manual Payment Process in January 2014 to process monthly payments for Advanced Payments of the Premium Tax Credit (APTC) and Cost-Sharing Reductions (CSR) and to net FFM User Fees (UF).
- As part of the Manual Payment Process, Issuers or State-based Marketplaces (SBMs) submit data to CMS via e-mail in Excel format Workbooks at the Qualified Health Plan (QHP)-level. Each Workbook is a full enrollment profile organized by enrollment month and represents all known effectuated enrollments for that month in addition to all retroactive enrollment data.

2016 Enrollment & Payment Workbooks: Who submits?

- **ALL** FFM, SBM Issuer submitters and SBM state submitters will continue to submit Manual Payment Process Workbooks into 2016 including 2015 restatements and 2016 new data.
- FFM Issuers who are transitioning to Policy-Based Payments will still submit an Enrollment & Payment Data Workbook (Manual Payment Process) for 2015 data and 2016 data.

Manual Process Training

- In the month of November, Financial Management (FM) will roll out training related to submitting workbooks for 2015 restatements and 2016 statements.
- If you are new to this process, please reference the REGTAP Library at <https://www.REGTAP.info>, to familiarize yourself with the workbook submitting process.

Manual Process APTC, CSR and UF Supplemental Payment Report

Supplemental Payment Report

- Beginning in January 2016, Issuers will receive a PPR and HIX 820 to provide marketplace payment and charge-related information.
- To help provide further detail related to the Manual Workbooks submission program-level amounts represented on these transactions, FM will be replacing the monthly Manual Payment Report Issuers currently receive at the end of the month with an APTC, CSR, and UF Supplemental Report.

Supplemental Payment Report

(Continued)

- This Supplemental Payment Report will:
 - Be in Microsoft Excel Format and sent to Issuers via e-mail the same way it is currently sent in the Manual Process
 - Provide supplemental details related to the Manual Process only. It will not include any details related to Policy-Based Payments
 - Be at the Issuer-level by year (2015 and 2016)
- CMS is still working on the schema for this report and will provide it in the upcoming weeks.

Supplemental Payment Report

(Continued)

- Example information provided:
 - Payment Month: January
 - Issuer ID: 12345
 - **2015**
 - APTC Amount: \$100
 - CSR Amount: \$50
 - UF Amount: \$25
 - **2016**
 - APTC Amount: \$232
 - CSR Amount: \$88
 - UF Amount: \$46

Additional Resources

- Issuers may find detailed information regarding the Manual Payment Process by clicking the links below to view the following documents:
 - November 2015 Enrollment & Payment Data Workbook
https://www.regtap.info/uploads/library/FT_NovEnrollmentPaymentDataWorkbook_5CR_101415.xlsx
 - Manual Payment Process Timeline: September 2015 – December 2015
https://www.regtap.info/uploads/library/FT_MPP_Timeline_JobAid_v2_5CR_091515.pdf
 - Marketplace Payment Processing Cycle: Enrollment & Payment Data Reporting and Restatement (09/14/15)
https://www.regtap.info/uploads/library/FT_MPP_slides_091415_5CR_091115.pdf

Additional FM Testing

Additional FM Testing

- For those Issuers who have completed HIX 820 Connectivity Testing, CMS will be rolling out an additional round of testing to help Issuers understand what they will receive beginning in January.
- Beginning in November, CMS will create two (2) or three (3) scenarios, which will include a Preliminary Payment Report and corresponding HIX 820 to send to Issuers via Electronic File Transfer (EFT).

Additional FM Testing (Continued)

- The scenarios in this test will reflect:
 - Partial-Month/Change-In-Circumstance (CiC)
 - Prospective and Retroactive Payments
 - Program-Level Payments (2015 Restatements)
 - Small Business Health Options Program (SHOP) UFs for Issuers who are in the SHOP Market

Additional FM Testing (Continued)

- These scenarios will be tailored to reflect what the Payee will actually see beginning in January.
- Payees with multiple Issuers will receive all their Issuers in one (1) file.

Additional FM Testing (Continued)

- Similar to the connectivity test, data used will be actual Issuer information (e.g., Payee Name, Payee Tax ID, Payee QHP IDs) but the policy-level information in these files will be test data created by CMS.
- CMS will post the policy-level details used to create the scenarios to REGTAP in case Issuers would like to set them up in their test systems in order to process the PPRs and HIX 820s.

Additional FM Testing (Continued)

- FMCC will coordinate this effort and will send out notification e-mails once the scenarios are sent.
- Issuers are encouraged to respond with a TA1/999 to the HIX 820 but CMS will not monitor these responses during this test.
- This test is set to begin in early November and run until all Issuers have received their test files.

2015 FFM-only Issuers

- FFM-only Issuers will receive two (2) PPRs and two (2) HIX 820 Transactions.
 - Scenario 1: Prospective Policy-Level Amounts, 2015 Restatement Program-Level Amounts (APTC, CSR UF).
 - Scenario 2: Prospective Policy-Level Amounts, Change-in-Circumstance Partial-Month Retroactive Adjustment Policy-Level Amounts, 2015 Restatement Program-Level Amounts (APTC, CSR UF).

2015 SBM-only Issuers

- SBM-only Issuers will receive one (1) PPR and one (1) HIX 820 Transaction.
 - Scenario 1: 2015 Restatement Program-Level Amounts (APTC and CSR) and 2016 Statement Program-Level Amounts (APTC and CSR).

FFM and SBM Issuers in the same Payee Group

- FFM and SBM Issuers in the same Payee Group will receive two (2) PPRs and two (2) HIX 820 Transactions.
 - Scenario 1: Prospective Policy-Level Amounts, 2015 Restatement Program-Level Amounts (APTC, CSR UF) for FFM Issuers and 2015 Restatement Program-Level Amounts (APTC and CSR) and 2016 Statement Program-Level Amounts (APTC and CSR) for SBM Issuers.
 - Scenario 2: Prospective Policy-Level Amounts, Change-in-Circumstance Partial-Month Retroactive Adjustment Policy-Level Amounts, 2015 Restatement Program-Level Amounts (APTC, CSR UF) for FFM Issuers and 2015 Restatement Program-Level Amounts (APTC and CSR) and 2016 Statement Program-Level Amounts (APTC and CSR) for SBM Issuers.

FFM SHOP Issuers Who Participate in Individual Market

- FFM SHOP Issuers participating in the Individual Market will receive two (2) PPRs and two (2) HIX 820 Transactions
 - Scenario 1: Prospective Policy-Level Amounts, 2015 Restatement Program-Level Amounts (APTC, CSR UF) and 3 Program-Level Amounts with SHOPUF and Report Type Code SHOPUFRPT
 - Scenario 2: Prospective Policy-Level Amounts, Change-in-Circumstance Partial-Month Retroactive Adjustment Policy-Level Amounts, 2015 Restatement Program-Level Amounts (APTC, CSR UF) 3 Program-Level Amounts with SHOPUF and Report Type Code SHOPUFRPT

FFM SHOP Issuers Who Do Not Participate in Individual Market

- FFM SHOP Issuers not participating in the Individual Market will receive one (1) PPR and NO HIX 820 Transaction
 - Scenario 1: 3 Program-Level Amounts with SHOPUF and Report Type Code SHOPUFRPT

New 2016 Issuers

- New 2016 Issuers will receive two (2) PPRs and two (2) HIX 820 Transactions
 - Scenario 1: Prospective Policy-Level Amounts
 - Scenario 2: Prospective Policy-Level Amounts, Change-in-Circumstance Partial-Month Retroactive Adjustment Policy-Level Amounts

HIX 820 Scenarios

HIX 820 Scenarios

- Beginning in January 2016, Issuers could expect to receive two (2) additional payment type codes:
 - UFR – User Fee Reserve Adjustment code is related to reducing UF amounts at the issuer-level related to providing contraceptive coverage
 - RC– Risk Corridors code is related to payments and charges for the Risk Corridors program
 - Please refer to Scenario 5 posted to the REGTAP library to see examples of these codes in a HIX 820 transactions

HIX 820 Scenarios

- HIX 820 Scenarios

Additional Resources

Title: 2015 to 2016 Financial Management Transition Guide

Description: Contains information regarding the Pilot including the PPR Schema and Business Rules.

Link:

https://www.regtap.info/uploads/library/FT_FM_2015_2016_Transition_Guide_5CR_092815.pdf

Additional Resources (Continued)

Title: September 14, 2015 Marketplace Payment Processing Cycle: Enrollment & Payment Data Reporting and Restatement

Description: Contains information regarding the Manual Payment Process and the Enrollment & Payment Data Workbook.

Link:

https://www.regtap.info/uploads/library/FT_MPP_Slides_011215_5CR_020315.pdf

Additional Resources (Continued)

Title: Scenario 2 SBM-only Issuers

Description: Contains information regarding the Manual Payment Process and the Enrollment & Payment Data Workbook.

Link:

https://www.regtap.info/uploads/library/FT_MPP_Slides_011215_5CR_020315.pdf

FAQs

FAQ 1

Question: During the Pilot, Issuers will compare Preliminary Payment Report (PPR) information against mid-month benefit effective dates and start dates, but in 2016 Issuers can use the Advanced Premium Tax Credit (APTC) start dates because they will represent mid-month information?

Answer: For 2015 restatement, Issuers will verify mid-month enrollments using the benefit effective dates. In 2016, Issuers can use the APTC start dates because they will represent mid-month information.

FAQ 2

Question: Will Issuers receive an invoice for User fees if an Issuer owes a balance after netting payments?

Answer: Yes, Issuers who owe a balance after netting payments will receive an invoice or dunning letter for charges owed. Issuers will receive the invoice between the 13th and 16th of the month.

FAQ 3

Question: When does CMS expect Issuers to complete discrepancy reporting for the PPR Pilot?

Answer: CMS expects Issuers to complete PPR Pilot discrepancy reporting by mid-November 2015.

FAQ 4

Question: What if Issuers did not receive their Pilot Files?

Answer: 2015 FFM Issuers who did not receive their pilot files, please reach out to the FMCC at FMCC@cms.hhs.gov

FAQ 5

Question: Will the CMS include UFs in the HIX 820 transaction?

Answer: Yes, CMS will include UFs in the HIX 820 transaction at the policy-level. CMS will also prorate UFs for mid-month and partial month coverage periods.

FAQ 6

Question: Does CMS expect Issuers to conduct discrepancy reporting on Risk Corridors (RC) payments?

Answer: CMS does not expect Issuers to conduct discrepancy reporting on RC payments because Issuers will only receive RC payments at the program level in the HIX 820 transaction.

FAQ 7

Question: What formula should Issuers use to prorate UFs?

Answer: To prorate UFs, Issuers should multiply the prorated premium by 3.5%.

FAQ 8

Question: Will Risk Corridors payments for 2014 begin in January 2016?

Answer: Currently CMS is targeting December to begin making Risk Corridors Payments based on netted amounts. Any additional Risk Corridors payments made based on collected funds beginning in January will be reflected on the HIX 820 at the program-level with the Payment Type Code of RC as reflected on the WPC website . Any payments made prior to January 2016 will be reflected on the Manual Process Payment Report.

Questions?

To submit questions by phone:

- *dial '14' on your phone's keypad*
 - *dial '13' to withdraw your question*

To submit questions by webinar:

- *type your question in the text box under the 'Q&A' tab*

Acronyms

Acronym	Definition
DSH	Data Services Hub
EDI	Electronic Data Interchange
EPS	Enrollment and Payment System
FFM	Federally-facilitated Marketplace
FMCC	Financial Management Coordination Center
HIOS	Health Insurance Oversight System
HIX	Health Insurance Exchange
PBP	Policy-based Payments
PPR	Preliminary Payment Report
SBM	State-based Marketplace
SHOP	Small Business Health Options Program

Resources

Resource	Resource Link
Centers for Medicare & Medicaid Services (CMS)	http://www.cms.gov/
U.S. Department of Health & Human Services	http://www.hhs.gov/
The Center for Consumer Information & Insurance Oversight (CCIIO) web page	http://www.cms.gov/ccio
Consumer website on Health Reform	http://www.healthcare.gov/
ASC X12 Store	http://store.x12.org/store/health-insurance-exchanges
Registration for Technical Assistance Portal (REGTAP) - presentations, FAQs	https://www.REGTAP.info

Inquiry Tracking and Management System (ITMS)

Stakeholders can submit inquiries to ITMS at <https://www.REGTAP.info>

Select “Submit an Inquiry” from My Dashboard.

The screenshot displays the REGTAP My Dashboard interface. The top navigation bar includes links for Registration, Technical Assistance Portal, My Dashboard, Training Events, Inquiry Tracking, Library, FAQs, Contact Us, About REGTAP, and Log Out. The user is logged in as 'user2@regtap.info'. The dashboard is divided into sections: Announcements (with a reminder for July 15, 2014), My Events (stating the user is not currently registered), and a central grid of icons. The 'Submit an Inquiry' icon, which features an information symbol, is highlighted with a red box. A red arrow points from the text 'Select “Submit an Inquiry” from My Dashboard.' to this icon. Other icons include Library, FAQs, Contact Us, Suggestion Box, Update Password, Training Events, My Events, My Proxy Events, and REGTAP Training. The footer contains copyright information for 2013 ARDX, links for Contact Us, Privacy Policy, and Terms of Use, and the CMS logo.

FAQ Database on REGTAP

My Dashboard



The FAQ Database allows users to search FAQs by FAQ ID, Keyword/Phrase, Program Area, Primary and Secondary Categories, and Publish Date.

FAQ Database is available at <https://www.regtap.info/>

FAQ Search

FAQ ID Enter numeric FAQ ID only

Keyword/Phrase

Program Area

Select All
Agent Broker
Distributed Data Collection for RI and RA/Edge Server
Enrollment and Eligibility
Event Registration and Logistics

Primary Category

Secondary Category

Publish Date

Start Date

22

End Date

22

Search

Clear Search

Closing Remarks