# For 2020: Data Changes and Limited Data Correction Window, Process and CMS Required Corrections

### **September 11, 2019**

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

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## Agenda

- Session Guidelines
- Key Dates
- Data Change Windows and the State Role
- Data Correction Related Notices of Non-Compliance (NoNCs)
- Special Enrollment Period (SEP)
- Question & Answer (Q&A) Session
- Closing Remarks



### **Intended Audience**

- Please be advised that 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 <a href="mailto:registrar@regtap.info">registrar@regtap.info</a> or (800) 257-9520.



## **Upcoming Key Dates for Plan Year (PY) 2020**QHP Certification

Date	Category	Activity
August 22 – September 9, 2019	QHP Certification	CMS reviews QHP Applications as of 8/21/19
September 6 – September 11, 2019	QHP Certification	CMS posts review results to PM Community on a rolling basis
Monday, September 16, 2019	QHP Certification	CMS sends QHP Certification Agreements
Monday, September 16, 2019	QHP Certification	CMS releases final correction notice to issuers and states
September 16 – September 20, 2019	Transparency in Coverage	CMS reviews initial QHP data submissions as of 9/13/19
September 16 – September 24, 2019	QHP Certification	Issuers return signed Agreements and final plan crosswalks to CMS



## Upcoming Key Dates for PY 2020 QHP Certification

Date	Category	Activity
September 16 – September 24, 2019	QHP Certification	States send CMS final plan recommendations
September 19 – September 20, 2019	QHP Certification	September Limited Data Correction Window (LDCW)
Friday, September 27, 2019	QHP Certification	Machine Readable file posting deadline
Thursday, October 3, 2019	QHP Certification	CMS releases certification notice with the final plan list and countersigned agreements to states



## **Announcements**



## Data Change Windows and the State Role



### What Are Data Change Windows?

- After QHP certification is complete, CMS offers opportunities for issuers to make changes to data.
- The primary reasons for issuers to change data:
  - CMS or state request
  - Small Business Health Options Program (SHOP) quarterly rate updates
  - Updates to administrative data (Uniform Resource Locator [URL] changes, plan marketing names)
  - Issuer error when completing QHP templates
- CMS offers data change windows through July of the PY.



#### **Issuer Role**

- Issuers submit data change requests throughout the year to request changes to their application.
- Issuers in Federally-facilitated Exchange (FFE) states submit changes directly to CMS in the Health Insurance Oversight System (HIOS).
- Issuers in states performing plan management functions or State-Based Exchanges Using the Federal Platform (SBE-FP) submit changes to their state in the System for Electronic Rate and Form Filing (SERFF), which are then transferred to CMS.



### **State Approvals**

- Issuers must have state approval for all changes for a data change window.
  - FFE states: Issuers will submit a state approval form for review and signature.
  - States performing plan management functions: Data transfers from SERFF to HIOS constitute state approval of changes.
  - SBE-FPs: States must determine states' own process for soliciting and approving changes.
- CMS requests that states review both the change and the reason for the change.



### September LDCW

CMS will offer a limited data correction window in September. This LDCW will be limited to CMS identified data changes.

Dates	Activity
9/6-9/11	Issuers and states notified of required corrections.
9/12-9/19	CMS hosts calls with issuers.
9/9-9/20	Issuer specific windows open for HIOS changes and SERFF transfers
9/10-10/2	States and Issuers notified of unapproved changes and corrections required



### State Approval in September LDCW

- For the September LDCW, as with other data correction windows, the issuer may make only the data changes authorized by the state.
- CMS instructs issuers which corrections to make.
- If the state will not authorize the issuer to make any identified corrections, please notify the issuer and <a href="mailto:PlanManagementStateCoordination@cms.hhs.gov">PlanManagementStateCoordination@cms.hhs.gov</a> as soon as possible, but no later than 12pm ET Monday September 16.
- CMS will assume the state authorizes all required changes unless the state informs CMS to the contrary.
- In this instance, a State Authorization of a QHP Data Change Request (DCR) is not required.



## Overview of the PY2020 data changes process

1. CMS announces Data Change Windows 2. Issuers submit Data Change Requests 3. CMS reviews Data Change Request 4. CMS approves/de nies Change Request

5. Issuer submits/SPE state transfers data

6. CMS reviews data submitted

7. CMS communicate s any problems to state & issuer

8. CMS prepares data for refresh on Healthcare.gov

9. CMS refreshes data

10. CMS takes compliance action on data changes/CMS formalizes SEPs



## Key Changes to Data Change Windows for PY20

1. CMS announces Data Change Windows

2. Issuers submit Data Change Requests 3. CMS reviews Data Change Request

4. CMS approves/ denies Change Request 5. Issuer submits/
SPE state transfers data

- Step 2: CMS will no longer require issuers to submit DCRs for URL changes
- Step 4: CMS will include DOIs as well as issuers in Help Desk communications approving or denying DCRs.
- Step 7: CMS will require issuers to fix or justify any data changes not approved as part of the DCR.
- Step 8: CMS will display only approved changes on Healthcare.gov, and will no longer display unapproved changes, or data that did not pass review.

6. CMS reviews data submitted

7. CMS communica tes any corrections to state & issuer

8. CMS prepares data for refresh on Healthcare.

9. CMS refreshes data

10. CMS takes compliance action on data changes/ CMS formalizes SEPs



### 1. CMS announces data change windows

Current process: The Letter to Issuers announces the Limited Data Correction Window prior to the start of QHP Certification application each year. CMS also provides the dates for SHOP quarterly rate change windows on

https://www.qhpcertification.cms.gov/s/Data%2 0Change%20Windows

No other windows are announced.

What's changing for PY2020? Nothing



### 2. Issuers submit data change requests

<u>Current process</u>: Issuers should submit data change requests as soon as they realize they need to make a correction. Data change requests are submitted via the PM Community and must include details of the request, and documented state authorization for FFE states. For SPE and SBE-FP states, CMS will take your transfer of plan data as approval of its contents.

What's changing for PY2020? CMS will no longer require issuers to submit DCRs for URL Changes (SBC, Payment, Plan Brochure, Network, Formulary). CMS will still require issuers to obtain State authorization according to each State's regulations prior to submitting changes in the HIOS Supplemental Submission Module.



### 3. CMS reviews data change requests

Current process: After CMS receives a data change request, we review for complete documentation and determine whether to approve the change. We also provide a preliminary SEP determination.

What's changing for PY2020? Nothing



## 4. CMS approves/denies data change request

<u>Current process</u>: CMS sends a helpdesk response to the issuer approving or denying the request, and providing the dates when the issuer can submit the updated data. CMS separately notifies SPE states of all requests for their state and when to transfer approved changes.

What's changing for PY2020?: All states will now be CC'ed on helpdesk responses approving or denying data change requests. This will be the notification to states and issuers on when changes can be submitted in HIOS (FFE) or transferred to CMS (SPE).



## 5. Issuer submit data/SPE states transfer data

Current process: Issuers submit data to HIOS or states transfer data from SERFF to HIOS (after issuers have edited templates in SERFF). Data is submitted/transferred within a 2 day window. Each window is specific for an issuer, though they can overlap. For example:

Issuer	Issuer submits data or State transfers data
Α	Monday/Tuesday
В	Tuesday/Wednesday
С	Thursday/Friday

What's changing for PY2020? Nothing.



### 6. CMS reviews data as submitted

Current process: CMS reviews the data submitted to verify (1) it still complies with QHP certification requirements and (2) the new data is consistent with the change(s) CMS approved.

What's changing for PY2020? Nothing



## 7. CMS communicates with state and issuers on corrections

#### **Current process:**

CMS notifies issuers and states if corrections are needed (this is rare in DCWs).

CMS may notify states and issuers about unapproved changes or changes that were not made per the request.

What's changing for PY2020?

No changes to corrections process.

CMS will notify issuers and states of any changes to QHP data that were not requested and approved in the issuer's Data Change Request. The issuer must respond to indicate whether the discrepancy was intentional or in error. If the discrepancy was intentional, the issuer must submit a new DCR to reflect their new changes. If the discrepancy was made in error, the issuer must fix their data to conform with the approved change.

States are not required to take action in response to this notification, but CMS does encourage issuers to maintain communications with their state as well as CMS.



## 8. CMS prepares data for refresh on HealthCare.gov

<u>Current process</u>: After CMS completes its review of data changes made, CMS prepares the data for display on HealthCare.gov. All data submitted in a window is sent for refresh, including changes that are unapproved or unintended on the issuer's part.

What's changing for PY2020? Healthcare.gov will only display data that has passed all reviews. CMS will exclude unapproved or incorrect data changes from refresh.

### 9. CMS refreshes data

Current process: Healthcare.gov data refreshes occur per pre-scheduled dates. After a data refresh, CMS notifies states and issuers that data has been refreshed.

What's changing for PY2020? Nothing



## 10. CMS takes compliance action on data changes/CMS finalizes SEP determinations

Current process: Issuers may face compliance action for changing QHP data after the QHP final submission deadline. CMS may require specific actions to address concerns or issue a Notice of Non-compliance. CMS finalizes review of data changes for special enrollment periods for plan display errors and communicates findings to states and issuers.

What's changing for PY2020? Nothing (related to data changes)



## Data Correction Related Notices of Non-Compliance (NoNCs)



## Notices of Non-Compliance (NoNCs)

- Technical assistance and NoNCs are two (2) of the methods that CMS uses to ensure issuer conformity with regulations and guidance.
- NoNCs are letters that notify an issuer of an incident of non-compliance related to its operations and filings with CMS.
- The NoNC summarizes the compliance incident and sets out the steps required for the issuer to resolve the incident.



## Reasons Issuers May Receive NoNCs for Data Changes

- Having remaining errors or creating new errors after final submission deadline
  - Issuer fails to follow CMS direction to correct a specific data error during a data correction window
  - Issuer creates a new error during a DCW that requires the issuer to correct in the next DCW



## Reasons Issuers May Receive a NoNC for Data Changes (Continued)

- Submitting a late data change request ticket
  - Issuer submits a data change request after the communicated deadline
- Making unapproved changes
  - Submitting plan data without submitting a data change petition to CMS
  - Submitting plan data without receiving CMS approval for data change petition
  - Submitting plan data outside the scope of the approved data change petition



## Reasons Issuers May Receive a NoNC for Data Changes (Continued)

- Having inaccurate or incomplete application
  - Issuers that make data changes to their applications after the final submission deadline to correct deficiencies
    - These changes are approved by CMS, so they are not considered "unapproved changes."
  - However, issuers are required to have accurate and complete plan data *prior* to the final submission deadline.
  - As such, approved data changes after the final submission deadline may still result in a NoNC.

### Data Changes Not Applicable for NoNCs

- Post-certification Assessment (PCA) related data changes
- Administrative changes
  - URL changes
  - Marketing name changes
  - Minor grammatical changes
- State approved rate changes



### **Main Takeaways**

#### Issuers should remember to:

- Submit accurate and complete plan data that is in accordance with what is on file with the state prior to the final submission deadline
- Submit data change requests per the DCW protocol
- Only make approved changes as requested
- Make all changes as directed by CMS



## **Special Enrollment Period**



### SEP Process – High Level

CCIIO opens
Data Correction
Window for
issuers to make
approved critical
data changes

CCIIO notifies state regulators of all potential SEPs

The issuer is alerted to SEP

Issuer honors benefit

consumers keep more generous benefit

**Affected** 

OR

Issuer notifies affected consumers of SEP

Affected consumers may return to Exchange for new plan selection



## 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:

- To submit a question, dial 'star(\*) pound(#)' on your phone's keypad.
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 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 <a href="CMS\_FEPS@cms.hhs.gov">CMS\_FEPS@cms.hhs.gov</a> with the subject line "State Question."



## State Regulators Webinar Session Survey

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- 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**

