


# 2020 Quality Rating System (QRS) and Qualified Health Plan (QHP) Enrollee Survey Requirements, Developing the Enrollee Survey Sample Frame

**October 16, 2019**



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

This communication was printed, published, or produced and disseminated at U.S. taxpayer expense.

The information provided in this presentation is not intended to take the place of the statutes, regulations, and formal policy guidance that it is based upon. This presentation summarizes current policy and operations as of the date it was shared. Links to certain source documents may have been provided for your reference. We encourage persons attending the presentation to refer to the applicable statutes, regulations, and other guidance for complete and current information.



[HTTPS://WWW.REGTAP.INFO](https://www.regtap.info)

# Agenda

- Session Guidelines
- 2020 QRS and QHP Enrollee Survey Requirements
- QHP Enrollee Survey Responsibilities for 2020:  
Authorizing a Survey Vendor and Developing the Sample Frame
- Question & Answer (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.

# Announcements



[HTTPS://WWW.REGTAP.INFO](https://www.regtap.info)

# 2020 QRS and QHP Enrollee Survey Requirements



[HTTPS://WWW.REGTAP.INFO](https://www.regtap.info)

# Objectives

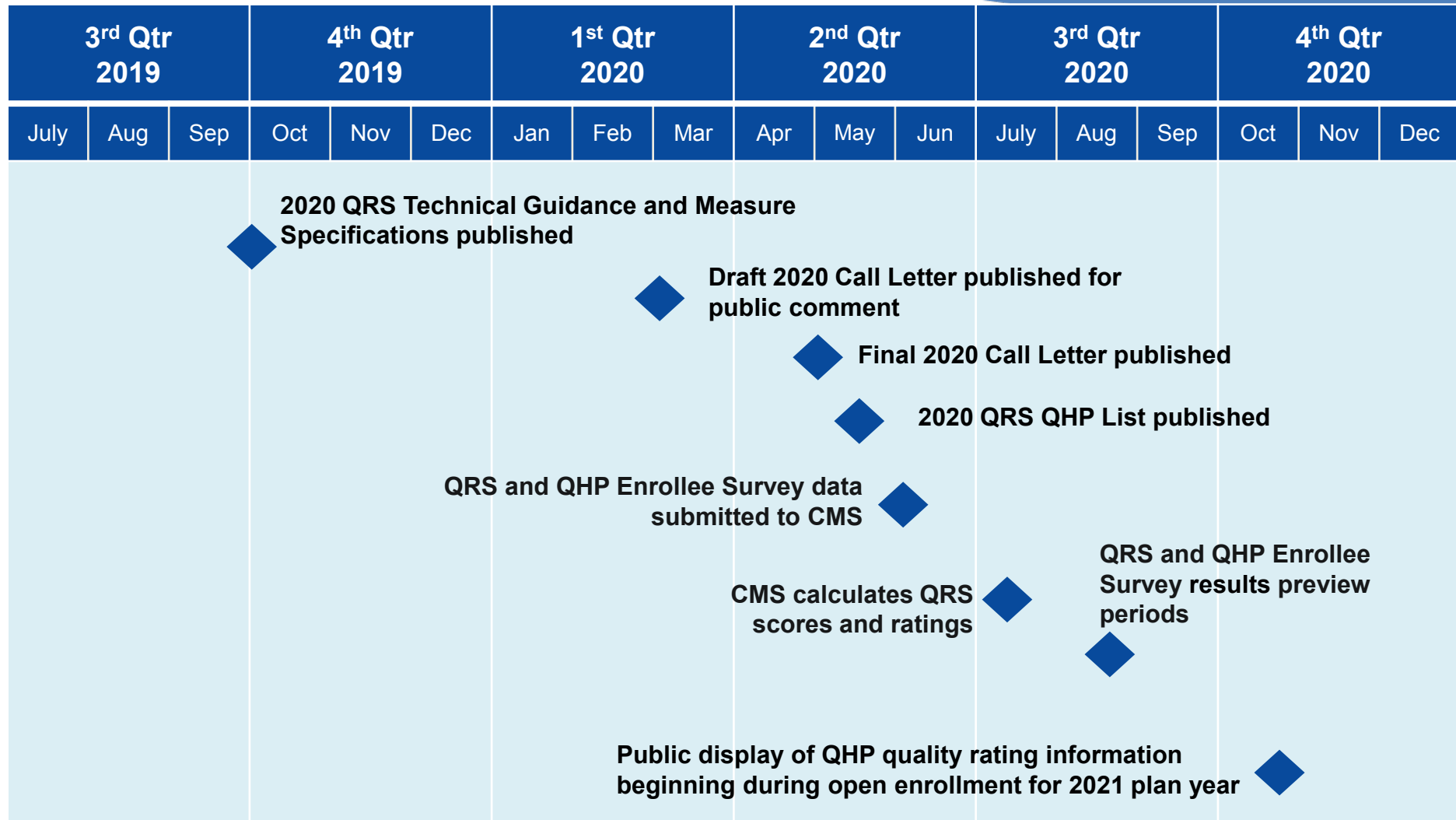
- Provide details related to the 2020 QRS timeline and requirements
- Highlight next steps and upcoming deadlines
- Review the process for future program refinements
- Provide an overview of the 2020 QHP Enrollee Survey timeline and requirements

# Introduction

- The purposes of the QRS and QHP Enrollee Survey are to:
  - Provide comparable and useful information to consumers about the quality of health care services and enrollee experience with QHPs offered through the FFEs and State-based Exchanges (SBEs)
  - Facilitate oversight of QHP issuer compliance with quality reporting standards set forth in the Patient Protection and Affordable Care Act (PPACA) and implementing regulations
  - Provide actionable information that QHP issuers can use to improve quality and performance



# 2020 QRS Implementation Timeline



# 2020 QRS and QHP Enrollee Survey Technical Guidance and Specifications

Recently  
published!

- 2020 QRS and QHP Enrollee Survey requirements are detailed in the following documents:
  - *Quality Rating System and Qualified Health Plan Enrollee Experience Survey: Technical Guidance for 2020*
  - *2020 Quality Rating System Measure Technical Specifications*
  - *Qualified Health Plan Enrollee Experience Survey: Technical Specifications for 2020*

Health Insurance Exchange

---

Quality Rating System and  
Qualified Health Plan Enrollee  
Experience Survey:  
Technical Guidance for 2020

---

September 2019

**Contents:** QRS measure set; data collection, validation, and submission requirements; implementation timeline; display information; marketing guidelines; QRS rating methodology

# Key Differences between 2019 and 2020 QRS

- Beginning with the 2020 QRS ratings year, two (2) measures: *Annual Monitoring for Patients on Persistent Medications (MPM)* and *Follow-up Care for Children with Prescribed ADHD Medications (ADD)* have been removed from the QRS measure set. They will no longer be included in scoring.
- Beginning with the 2020 QRS ratings year, one (1) measure: *International Normalized Ratio Monitoring for Individuals on Warfarin (INR)* was added to the QRS measure set. CMS anticipates the INR measure will be included in scoring beginning with the 2021 ratings year.

# 2020 QRS and QHP Enrollee Requirements for QHP Issuers

- QHP issuers attested in their QHP applications that they will comply with quality reporting requirements as a condition of QHP certification to offer coverage through an Exchange during Plan Year (PY)20.
- To comply, QHP issuers must collect and submit validated QHP Enrollee Survey response data and QRS clinical measure data to CMS by established deadlines.
  - Survey response data submitted (by HHS-approved vendor) to CMS via the QHP Enrollee Survey website by May 22, 2020
  - Validated QRS clinical measure data submitted to CMS via the National Committee for Quality Assurance (NCQA) Interactive Data Submission System (IDSS) by June 15, 2020

# Exchange Oversight Responsibilities

- Exchanges are responsible for QHP certification and oversight of compliance with certification standards for QHP issuers operating in their Exchanges.
  - CMS (on behalf of the FFEs) will monitor and enforce compliance with QRS and QHP Enrollee Survey requirements.
  - CMS will coordinate with the SBE to support their oversight efforts.
- CMS will provide the SBE with:
  - A list of QHP issuers that have eligible reporting units and are required to submit QRS clinical measure and QHP Enrollee Survey response data
  - A status update following the data submission deadline to communicate which QHP issuers submitted data for their eligible reporting units

# The 2020 QRS Measure Set

- In 2020, QHP issuers are required to submit data for their respective eligible reporting units for all 37 measures in the QRS measure set:
  - 27 clinical quality measures
  - 10 survey measures that are collected as part of the QHP Enrollee Survey

# QHP Enrollee Survey Component of QRS Measure Set

- The 10 QRS survey measures included in the QRS measure set are derived from a subset of the QHP Enrollee Survey questions.\*
- The QHP Enrollee Survey is largely based on items from the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) surveys.
- The QRS survey measures reflect QHP enrollee experience on the following topics:
  - Access to Care
  - Access to Information
  - Care Coordination
  - Plan Administration
  - Prevention

\*Refer to Appendix C of the Technical Guidance for a crosswalk that maps each survey measure in the QRS measure set to the relevant QHP Enrollee Survey item(s).

# QRS Methodology for Calculating QHP Scores and Ratings

- The QRS methodology uses a hierarchical structure designed to make the quality rating information more understandable to consumers.
- Measures are the building blocks of the hierarchy and are grouped by topic area to form additional hierarchy components (i.e., composites, domains, summary indicators, global).
- For eligible reporting units, CMS calculates QRS scores at each level of the hierarchy and converts each score into a rating using a five-category star scale.
  - CMS applies explicit weights at the summary indicator level when calculating QRS scores and ratings:
    - CMS assigns a weight of 2/3 (66.67%) to the Clinical Quality Management summary indicator, and a weight of 1/6 (16.67%) to the Enrollee Experience and 1/6 (16.67%) to the Plan Efficiency, Affordability & Management summary indicators.
  - A reporting unit must have been in operation for at least three (3) consecutive years to be eligible to receive a rating.



# 2020 Preview Process for Quality Rating Information for PY21

- August-September 2020, QHP issuers and State Exchange administrators will be able to preview their respective 2020 QRS ratings for PY21 and submit inquiries to CMS during a preview period.
- QHP issuers and State Exchange administrators will also receive their complete 2020 QHP Enrollee Survey results for PY21, including results for those survey measures not used for the QRS, in the form of Quality Improvement reports.

# Public Display of QHP Quality Rating Information PY21

- Public display of quality rating information by all Exchanges, including the FFEs, inclusive of FFE states where the state performs plan management functions, SBE-FPs, and SBEs that do not use HealthCare.gov is required during the Open Enrollment Period (OEP) for PY21.
- CMS intends to release subsequent details about the display of 2020 QHP quality rating information at HealthCare.gov.

# 2020 Marketing Guidelines for QHP Quality Rating Information for PY21

- QHP issuers may reference the 2020 quality ratings and survey results for PY21 for their respective QHPs in their marketing materials, in a manner specified by CMS.\*
- QHP issuers must comply with all applicable State laws and regulations on health plan marketing.\*\*
- QHP issuers participating in the FFE maintain responsibility for the compliance of delegated or downstream entities (e.g., affiliated agents and brokers) with the QRS and QHP Enrollee Survey marketing guidelines.\*\*\*

*\*45 CFR 156.1120(c), 156.1125(c); \*\*45 CFR 156.225; \*\*\*45 CFR 156.340(a)(1)*

**QHP Enrollee Survey  
Responsibilities for 2020:  
Authorizing a Survey Vendor and  
Developing the Sample Frame**

# QHP Enrollee Survey Issuer Requirements

- **QHP issuers** provide a validated sample frame and authorize an HHS-approved survey vendor to administer the survey.
- **Survey vendors** draw the sample, administer the survey, and submit results to CMS on the issuer's behalf.

# High-Level QHP Enrollee Survey Issuer Requirements

Step 1

- Contract with an NCQA licensed HEDIS® Compliance Organization (HEDIS® Compliance Auditor) to validate the sample frame.

Step 2

- Contract with an HHS-approved QHP Enrollee Survey Vendor to administer the QHP Enrollee Survey on the issuer's behalf.

Step 3

- Create a sample frame for each reporting unit according to the 2020 QHP Enrollee Survey Technical Specifications.

Step 4

- Determine the desired survey sample size.

Step 5

- Formally authorize survey vendor by selecting a survey vendor from a menu within NCQA's Healthcare Organization Questionnaire (HOQ).

Step 6

- Complete the sample frame validation process with a HEDIS® Compliance Auditor.

*Healthcare Effectiveness Data and Information Set (HEDIS®) is a registered trademark of the NCQA.*

# Contracting with and Authorizing a QHP Enrollee Survey Vendor

- QHP issuers are required to contract with and authorize an HHS-approved QHP Enrollee Survey vendor.
  - A list of approved survey vendors is available on the Marketplace Quality Initiatives (MQI) website:  
[https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/Downloads/2020\\_QHP\\_Enrollee\\_Survey\\_Conditionally\\_Approved\\_Vendors\\_List\\_508.pdf](https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/Downloads/2020_QHP_Enrollee_Survey_Conditionally_Approved_Vendors_List_508.pdf).
- In November 2019, QHP issuers will receive operational instructions via email prior to the opening of NCQA's HOQ.
- The deadline to complete the vendor authorization process is **January 31, 2020.**

# Resources for Additional Information

Resource	Link
Marketplace Service Desk (MSD) (reference Marketplace Quality Initiatives, or “MQI – QRS”)	<a href="mailto:CMS_FEPS@cms.hhs.gov">CMS_FEPS@cms.hhs.gov</a> or 1-855-CMS-1515 (1-855-267-1515)
CMS Marketplace Quality Initiatives (MQI) website	<a href="http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/Health-Insurance-Marketplace-Quality-Initiatives.html">http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/Health-Insurance-Marketplace-Quality-Initiatives.html</a>
National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data and Information Set (HEDIS®) Compliance Audit™ website	<a href="http://www.ncqa.org/HEDISQualityMeasurement/CertifiedSurveyVendorsAuditorsSoftwareVendors/HEDISComplianceAuditProgram.aspx">http://www.ncqa.org/HEDISQualityMeasurement/CertifiedSurveyVendorsAuditorsSoftwareVendors/HEDISComplianceAuditProgram.aspx</a>
Registration for Technical Assistance Portal (REGTAP) (key word search “QRS”)	<a href="https://REGTAP.info">https://REGTAP.info</a>



# Live Q&A



[HTTPS://WWW.REGTAP.INFO](https://www.regtap.info)

# 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 1-866-487-7844 and enter your six-digit PIN then 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.'

*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