DEPARTMENT OF HEALTH & HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES
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DATE: November 21, 2011

TO: Issuers of Health Insurance

CC: State Departments of Insurance Commissioners

FROM: Doug Pennington

Director, CCIIO Web Services Division

SUBJECT: January 2012 Plan Finder Refresh – Data Submission Schedule

The next Individual/Family Plan Finder refresh will occur on **January 19, 2012**. All Issuers with open products or those that have active policies within closed products on January 19, 2012 are required to enter new or revised product-level data into Health Insurance Oversight System (HIOS) for the individual/family market. Products that have not yet obtained approval from the state Department of Insurance may be entered into HIOS, but must be marked as "closed" until they have been approved. **This refresh will be limited to the individual market.** 

In addition, Issuers are required to submit new or revised plan-level data into the Rate and Benefits Information System (RBIS) for the individual market. As a reminder, only plans that have been approved by the state Department of Insurance should be entered into RBIS. Existing issuers may use their HIOS username/password for both HIOS and RBIS.

Pre-populated updated HIOS and RBIS templates will be available to Issuers by Monday, December 5, 2011.

The first issuer training session on the updated data templates and reporting process will take place December 2, 2 p.m. ET. Training will be via Webinar and conference call. Additional details on how to log into the training session will be provided in an upcoming memo. A repeat of the training will be held December 7, 10 a.m. ET. The weekly user group call will take place as scheduled December 7, 2 p.m. ET.

## **New Required Field in HIOS**

Issuers will be required to report the "number of administrative disqualifications" by product when updating information in HIOS. This field refers to those applications that were disqualified for administrative or eligibility reasons, not health status. These reasons include, but are not limited to, ineligibility for policy due to non-residency in an insurer's defined service areas, dependent's age, or legal status. The "number of applications denied" refers to the total number of applications that were denied on account of health status.

The remainder of this memo outlines the data submission deadlines for the January refresh.

**December 5-December 9, 2011: HIOS Data Submission Window for all Issuers:** All Issuers must update the application, denial, administrative disqualifications, and up-rate data for their individual/family

products, update enrollment counts, and add new or revised product data during the open HIOS data submission window that begins on Monday, December 5 and ends on Friday, December 9.

Updated Enrollment, Denial, Administrative Disqualifications, and Up-Rate Data Required: Please note that all Issuers must update their products' number of applications received, number of applications denied, number of administrative disqualifications, and number of applications up-rated based on the 3rd quarter of calendar year 2011 (June 1 through September 30, 2011). In addition, enrollment data should be updated as of September 30, 2011.

December 9 Deadline: It is the sole responsibility of each Issuer to submit to HIOS, by the submission deadline, accurate and error-free data in accordance to instructions provided. All new and existing product data for HIOS must be submitted by 11:59 p.m. ET on Friday, December 9. Any data submitted after December 9 will not be displayed on Healthcare.gov for the January 19 refresh.

**December 12-December 23, 2011: RBIS Data Submission Window for All Issuers:** Issuers will need to submit individual/family plan-level data beginning on Monday, December 12. Issuers are required to attest that submissions are accurate in order for their plans to be displayed.

Issuers submitting new plans: As a reminder, Issuers must obtain a HIOS Issuer ID before submitting plan data into RBIS if they have not already done so. In addition, Issuers with new products must obtain a HIOS Product ID for those products before submitting plans for those products into RBIS. Issuers should be aware that identifying numbers must be obtained before the HIOS submission window closes on December 9. Issuers should not submit plans into RBIS that have not yet been approved by the state Department of Insurance.

Please note that RBIS plans that are no longer open for enrollment due to rate approvals or other product-level concerns should have their associated product marked as "closed" in HIOS prior to the closing of the data submission window on December 9.

December 23 deadline for all Issuers: All plan data for RBIS must be submitted by 11:59 p.m. ET on Friday, December 23. Any data submitted after December 23 will not be displayed for the January 19 refresh.

Error-free submissions: It is the sole responsibility of each Issuer to have submitted to RBIS by the submission deadline, accurate and error-free plan data in accordance with the instructions provided. All RBIS plan data provided by December 23 must be free of the following errors or the entire submission will fail, and plans associated with these submissions not being displayed on January 19:

- Alteration of the benefits and/or rate templates
- Submission of multiple benefits and/or rate templates for a single plan
- Missing benefits and/or rate templates for a plan

Note: We strongly advise Issuers begin their process immediately after the data submission windows open to allow enough time for data entry, CEO/CFO attestation, QA, corrections of minor errors, and processing.

**December 23: CEO/CFO Attestation Deadline for All Issuers:** All Issuers submitting new or revised plan data into RBIS must provide CEO or CFO attestation to the accuracy of that data by 11:59 p.m. ET on Friday, December 23.

**Issuer Group Calls:** Weekly User Group calls with Issuers will continue to be held on Wednesdays at 2:00 p.m. ET to provide guidance and answer questions.

## **Summary of Key Dates**

December 5 (Monday)	RBIS Individual & Family templates available: Issuers can download and access to work off-line before the data submission window opens on 12/12.
December 5 (Monday)	HIOS Mini-window for Individual opens for issuers to enter number of plans per product and for new issuers to register and receive HIOS user IDs. Mini-window closes December 9 (Friday).
December 12 (Monday)	RBIS Data Submission Window for Individual & Family opens for all Issuers to submit new and revised plan data.
December 23 (Friday)	Last day announced for all Issuers to submit new and updated individual & family plan data. Last day for all Issuers to provide CEO or CFO attestation.
January 19 (Thursday)	Healthcare.gov Plan Finder will display new and updated plans.

For policy questions regarding the HealthCare.gov Plan Finder, please email <a href="mailto:ccliOPlanFinder@cms.hhs.gov">ccliOPlanFinder@cms.hhs.gov</a>.

For technical assistance regarding product-level data submissions, please contact the HIOS Help Desk at 1-877-343-6507 or <a href="mailto:insuranceoversight@hhs.gov">insuranceoversight@hhs.gov</a>.