Establish Issuer and Plan Initial Certification and Agreement PM-01

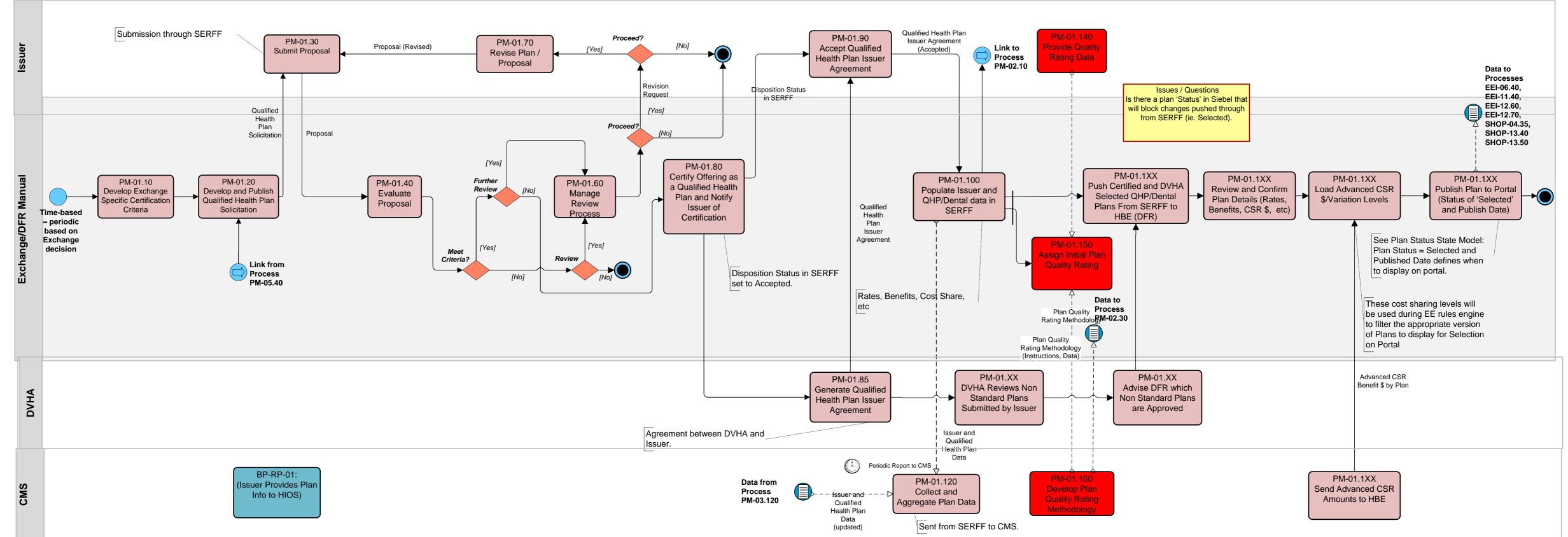
#### <u>Synopsis</u>

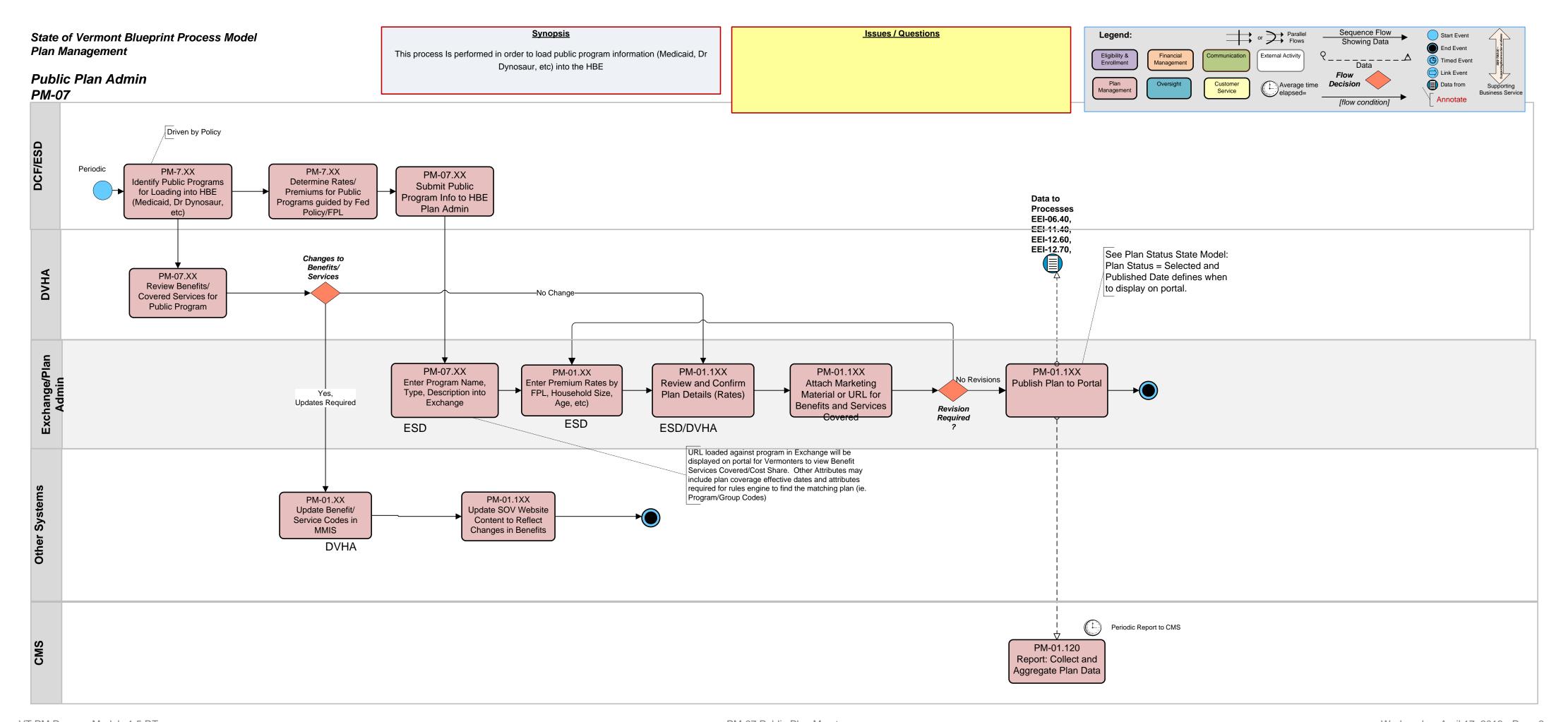
This process may be performed in order to accomplish the initial (first-time) certification and agreement for a qualified health plan provided by an issuer. Components of this process may also be reused for recertification.

Legend:

| Start Event | Showing Data | Showing Data | Start Event | Showing Data | Showing Data | Start Event | Showing Data | Showing Data | Showing Data | Showing Data | Start Event | Showing Data | Showing

[flow condition]

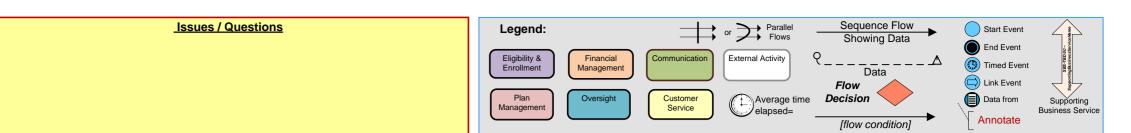


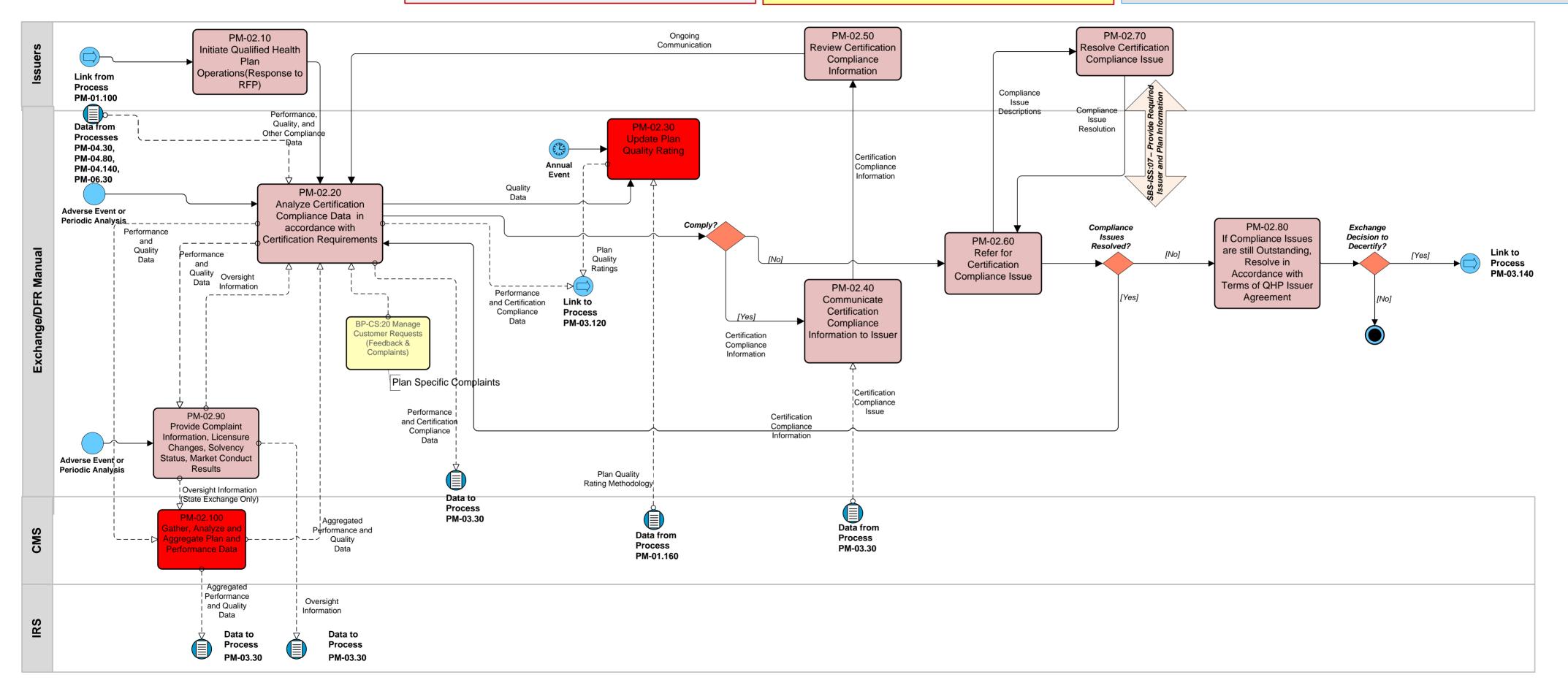


# Monitor Issuer and Plan Certification Compliance PM-02

### **Synopsis**

This process may consist of administrative activities performed in order to monitor plan performance and certification compliance. Plan quality ratings are also updated as part of this process.

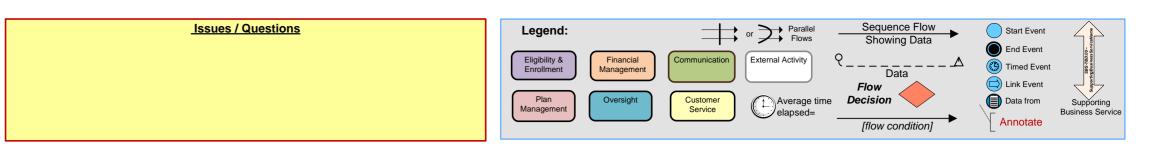


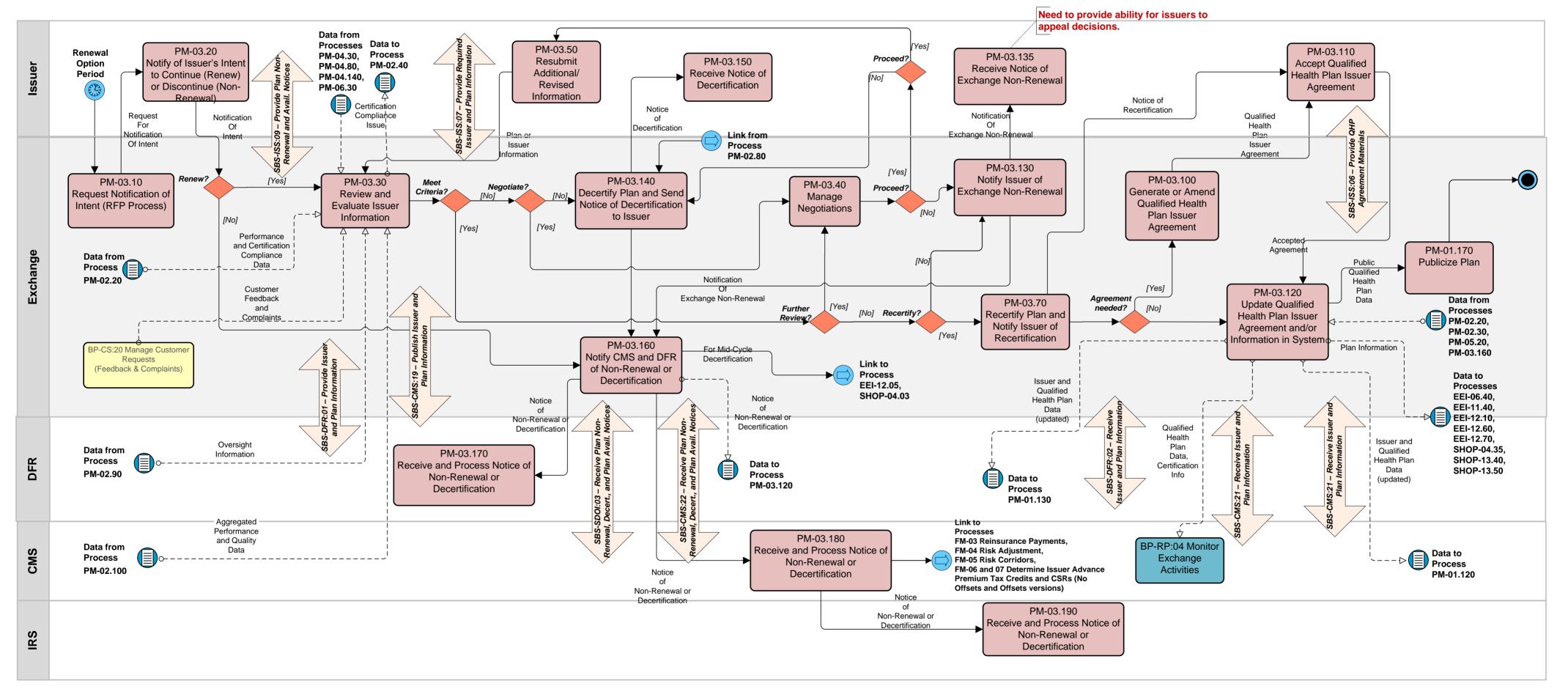


# Establish Issuer and Plan Renewal and Recertification PM-03

## <u>Synopsis</u>

This process may be performed after the initial certification process for qualified health plans. The process may include activities associated with the recertification of qualified health plan participation, including potential decertification of the qualified health plan.

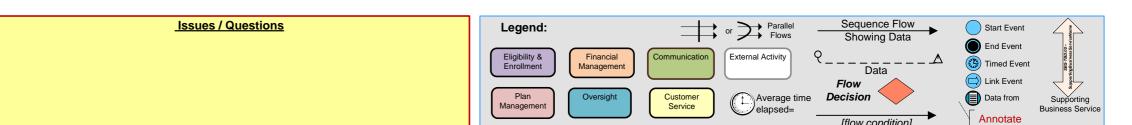


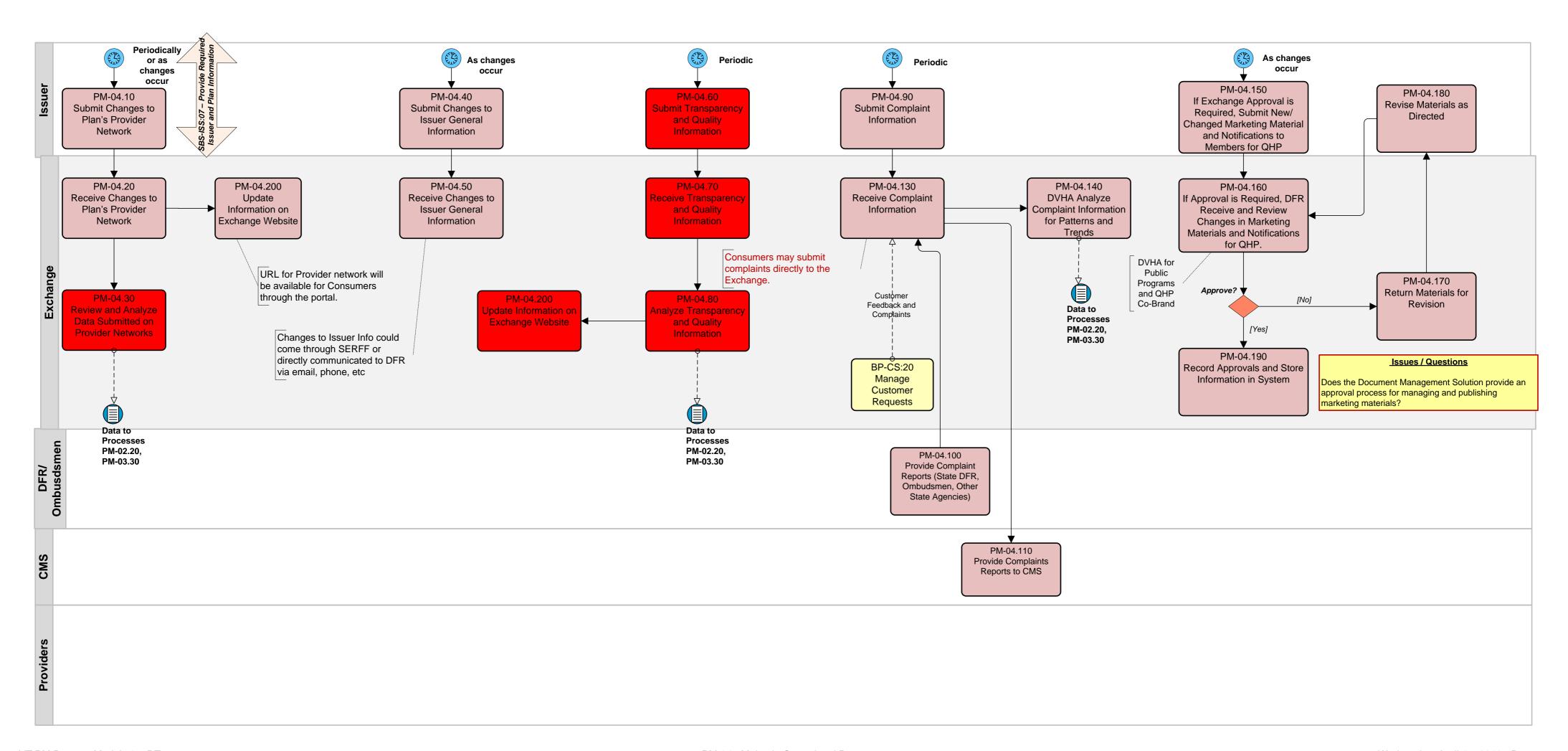


Maintain Operational Data PM-04

### **Synopsis**

This process may be performed to maintain the currency of the operational data received from issuers, to analyze changes in the data, and to take appropriate actions based on the changes in the data. The data may include: provider network data, issuer general information, transparency data, quality information, complaint data (from multiple sources), and marketing materials and notifications to members.



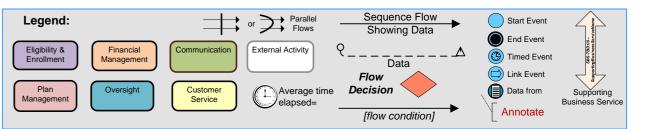


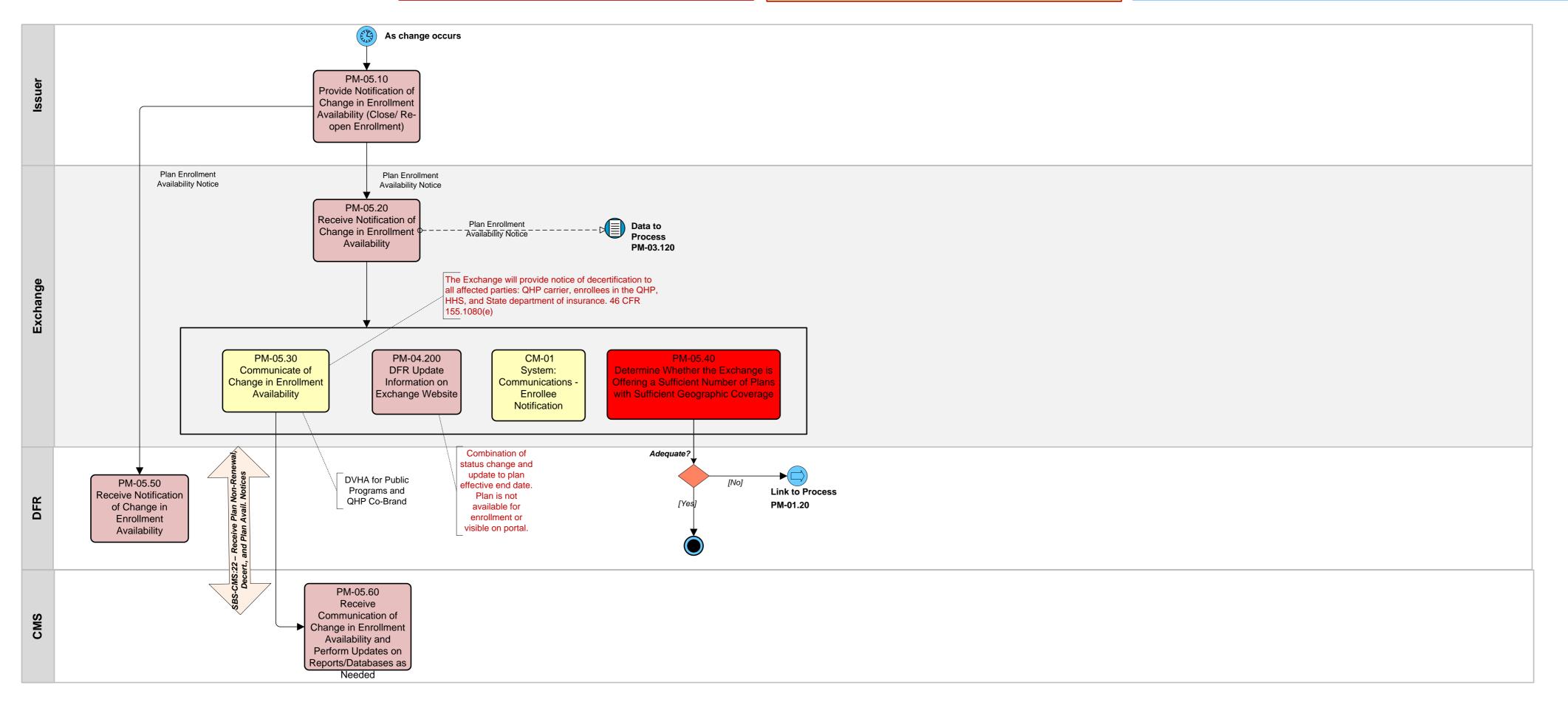
Process Change in Plan Enrollment Availability PM-05

## **Synopsis**

This process may be performed when an issuer either closes or re-opens enrollment for a QHP during a plan year. The issuer may close enrollment of a QHP under certain conditions specified in section 2702 of the Public Health Service Act (i.e., service capacity limits).

Issues / Questions



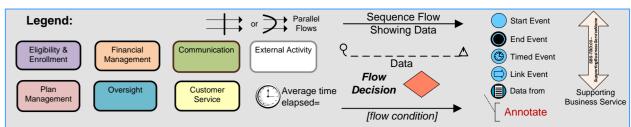


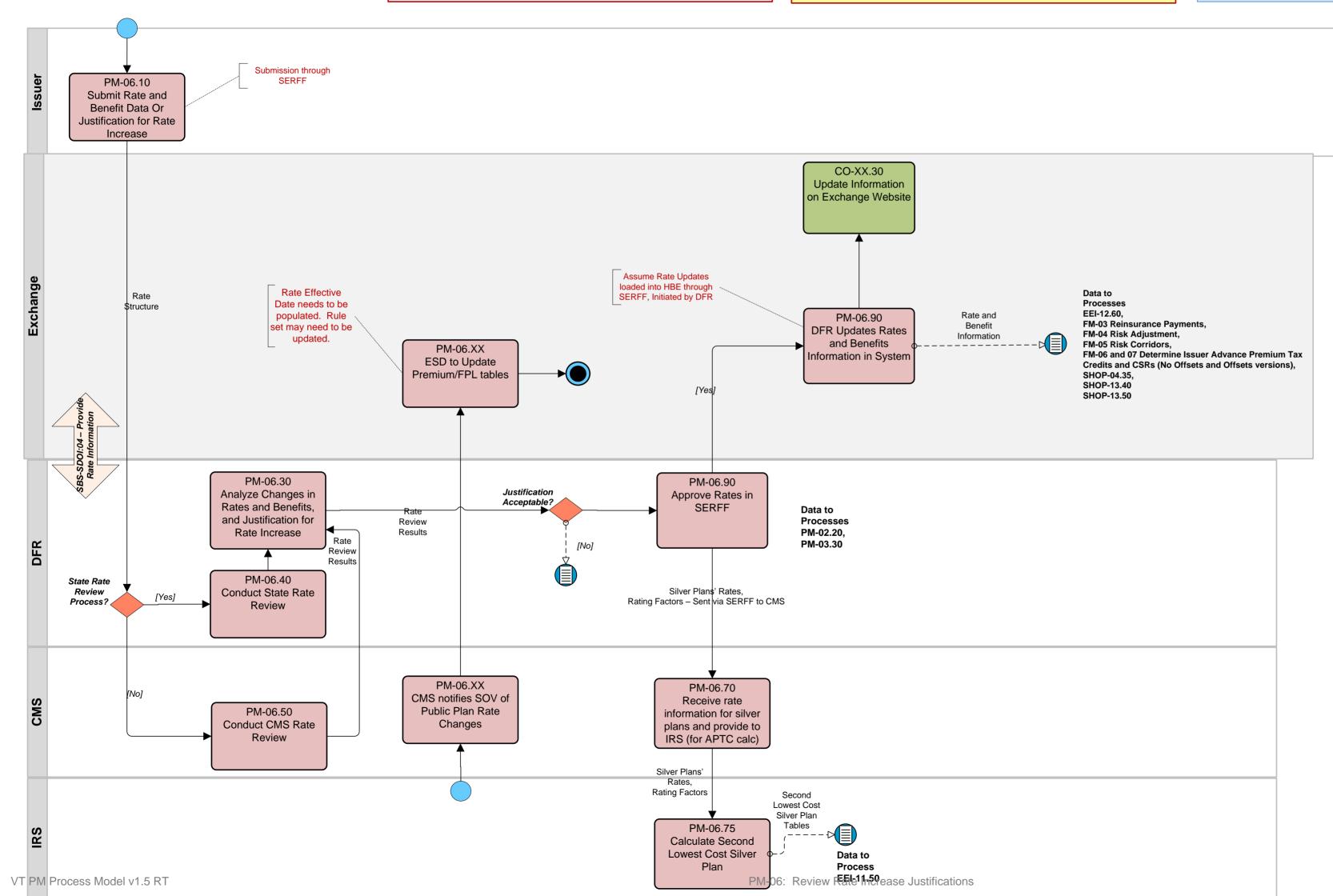
Review Rate Increase Justifications PM-06

## Synopsis

This process may be performed to receive rate information and review justifications for rate increases. The Exchange review also utilizes information received from the State and/or CMS rate review processes.

<u>Issues / Questions</u>





Generic Blueprint Process Model Plan Management

Issuer Account Management BP-PM-09

<u>Synopsis</u>

This process will be performed on an ongoing basis throughout the plan year to manage the relationship between a QHP Issuer and the Exchange. This process allows an Account Manager to coordinate between a QHP Issuer and any relevant Exchange business area, such as Financial Management or Enrollment, as needed in order to resolve issues or make updates to Issuer Information.

Issues / Questions

