

# Unified Rate Review Issuer Training

**April 2015**

**For Single Risk Pool Compliant Plans  
Qualified Health Plans (QHPs) and Non-QHPs**

# Agenda

- Introduction
- Rate Filing Process Overview
- Technical Demonstration
- Key Dates
- CMS and State Coordination
- Resubmissions
- Mapping Terminating Plans
- Contact Information
- Resources

# Introduction

The purpose of this presentation is to provide a high-level overview of the **Unified Rate Review (URR) Module** of the CMS Health Insurance Oversight System (HIOS) and discuss best practices for working with templates.

It is intended as a refresher for issuers already familiar with the system.

# Rate Filing Process Overview

# URR Data Submission

## Steps to submit Rate Filing Justifications:

### Get Access

- Get HIOS user ID (for support, contact XOSC: 855-267-1515)
- Assign user roles
- Get HIOS Product and Standard Component Plan IDs

### Submit Data

- Submit Rate Filing Justification in the URR module through HIOS
- Submit rate filing in SERFF, if required by state regulators

### Validate Data

- Review submissions for accuracy
- Validate submissions

### For QHPs

- For submissions with a qualified health plan (QHP) in the single risk pool, ensure data integrity across templates and modules required for QHP submission
- Complete QHP application by making final submission for all sections of Issuer, Rating, and Benefits and Service Area modules

# Technical Demonstration: Accessing HIOS

# System Considerations

- Disable pop-up blockers prior to attempting access to the system
- Internet Explorer, Versions 9 and 10
- Firefox, Version 28
- Chrome, Version 33
- Excel, 2007 and 2010

# CMS Enterprise Portal

**Access HIOS at**  
**<https://portal.cms.gov>**

1

If you have an Enterprise ID,  
click “Login to CMS Secure  
Portal”

If you do not have an Enterprise  
ID, click “New User  
Registration”

The screenshot shows the CMS.gov Enterprise Portal homepage. At the top, there is a navigation bar with links for Home, About CMS, Newsroom, Archive, Help & FAQs, Email, and Print. Below this is a search bar and a section for 'Learn about your healthcare options'. The main content area features a 'Physician Value' section with a stethoscope graphic and text about PORS reporting. To the right, there is a 'CMS Secure Portal' section with a 'Login to CMS Secure Portal' button (highlighted with a red box) and links for 'Forgot User ID?', 'Forgot Password?', and 'New User Registration' (also highlighted with a red box). At the bottom, there are sections for 'CMS Provides Health Coverage for 100 Million People...' and 'Get E-Mail Alerts'.

Find the HIOS User Guide on the CCIIO website:

<http://www.cms.gov/ccio/Resources/Training-Resources/index.html#Review of Insurance Rates>



# HIOS Tab in the CMS Portal

[Access HIOS at https://portal.cms.gov](https://portal.cms.gov)

Portal Help & FAQs Print Log Out Welcome Alfred Okyere

CMS .GOV Enterprise Portal

My Portal **HIOS**

CMS Portal > My Portal

## Welcome to CMS Enterprise Portal

The Enterprise Portal combines and displays content and forms from multiple applications, supports users with navigation and cross-enterprise search supports simplified sign-on, and uses role-based access and personalization to present each user with only relevant content and applications. The of the Enterprise Portal is to provide "one-stop shopping" capabilities to improve customer experience and satisfaction.

### Application Access

There are several ways to manage access to applications in the CMS Enterprise Portal

1. To get access to applications supported by [EUA](#) go to the [Enterprise User Administration](#) site.
2. To get access to applications supported by EIDM and IACS, click the 'Request Access Now' link on the right.
3. To review application access you have already been granted, click the 'My Access' link on the Welcome menu in the top right corner of the page.

### Request Access

Use the link below to request access to Systems/Applications

[Request Access Now](#)

### Contact Help Desk

**FFE / HIOS / Agents & Brokers Help Desk** - Contact the Exchange Operations Support Center [XOSC] at [CMS\\_FEPS@cms.hhs.gov](mailto:CMS_FEPS@cms.hhs.gov) or 1-855-CMS-1515

**Physician Value / PQRS Help Desk** - Contact the PV/PQRS Information Center at 1-888-734-6433.

**ACO Help Desk** - Contact the ACO Information Center at 1-888-734-6433 (select option 2) if you have any questions about using the ACO Portlet features. TTY users should call 1-888-734-6563.

**Open Payments Help Desk** - Contact the Open Payments Help Desk at [Openpayments@cms.hhs.gov](mailto:Openpayments@cms.hhs.gov).

**CMS Help Desk / EUA** Please visit the [Enterprise User Administration \(EUA\)](#) page.

2  
Click the HIOS tab.

# Plan Management and Market Wide Functions

[Access HIOS at https://portal.cms.gov](https://portal.cms.gov)

The screenshot shows the CMS Enterprise Portal interface. At the top, there are navigation links for 'Portal Help & FAQs' and 'Print', along with a 'Log Out' button and a user greeting 'Welcome Alfred Okyere'. Below the CMS.gov logo, there are buttons for 'My Portal' and 'HIOS'. The breadcrumb trail shows 'CMS Portal > HIOS'. The main heading is 'HIOS | Plan Management | Market Wide Functions'. A paragraph explains that users will be prompted for Multi-Factor Authentication (MFA) and provides instructions for registration. Another paragraph provides contact information for the Exchange Operations Support Center (XOSC) at CMS\_FEPS@cms.hhs.gov or 1-855-CMS-1515. The 'Health Insurance Oversight System (HIOS)' section includes a link to 'Access HIOS'. The 'Plan Management and Market Wide Functions' section explains that issuers will access both Market Wide modules and FFE application specific modules. A red box highlights the link 'Access Plan Management & Market Wide Functions', with a blue callout box containing the number '3' and the text 'Click "Access Plan Management & Market Wide Functions."' pointing to the link. The footer contains 'CMS Enterprise Portal Home', 'CMS.gov Enterprise Portal', and 'Helpful Links' including 'Portal Help & FAQs', 'Web Policies & Important Links', and 'Privacy Policy'.

# HIOS Modules

Access the Rate Review module via the Health Insurance Oversight System (HIOS).

4  
Click "Unified Rate Review System"

The screenshot shows the HIOS website interface. At the top, the title "Health Insurance Oversight System" is displayed in a green header. Below the title, the date "Monday, April 13, 2015" is shown on the left, and navigation buttons for "ACCESS HIOS", "HOME", "FAQ", "CONTACT US", and "SIGN OUT" are on the right. A personalized welcome message "Welcome Jonathan Thomas" is visible. The main heading is "Plan Management and Market Wide Functions Home Page". On the left side, there is a vertical menu with categories: "Organization Management & Administrative Functions:" (containing "Manage Account", "Manage an Organization", "Role Management"), "Market Wide Functions:" (containing "Unified Rate Review System", which is highlighted with a red box), and "Plan Management Functions:" (containing "QHP Issuer Module", "QHP Benefits and Service Area Module", "QHP Rating Module", "State Evaluation", and "QHP Plan Preview Module"). The main content area on the right features the heading "Plan Management And Market Wide Functions Main Page Announcements". It contains two paragraphs of text: the first welcomes users to the portal and explains its purpose, and the second provides instructions for issuers seeking QHP certification. At the bottom of the main content area, there is contact information for the Exchange Operations Support Center (XOSC).



# Unified Rate Review System

Access the Rate Review module via the Health Insurance Oversight System (HIOS).

5

Click "Access the Unified Rate Review System"

**Health Insurance Oversight System**  
Unified Rate Review System

Monday, April 13, 2015

[FFM MAIN PAGE](#) [HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Welcome Jonathan Thomas

**Unified Rate Review System**

**Unified Rate Review System**

[Access the Unified Rate Review System](#)

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

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# **Technical Demonstration: Module Organization and Navigation**

# Rate Review Sections

- 1 Rate Review Overview
- 2 Create Submission
- 3 View/Edit Submission
- 4 Review Reports



# Overview Page

This page provides a home for Issuer Submitter and Issuer Validator users.

From this page, you can:

Read an overview of the system.

Access instructional materials to help you complete your submission.

Download the Unified Rate Review Template.

**RATE REVIEW** Text Size: A A A

Welcome, urrsbVA | Logout

### Rate Review System

The Rate Review System is a system that provides the Issuer with the ability to enter Rate Filing information for Exchange and Non-Exchange plans in an integrated location for review and adjudication.

[Rate Review Overview](#) [Create Submission](#) [View/Edit Submission](#)

Issuers are required to submit a Rate Filing Justification (RFJ) to CMS for the entire risk pool when any product in the single risk pool in the individual or small group (or merged) market is subject to a rate increase. Issuers must also submit the RFJ for any products that will be sold on the Marketplace as a Qualified Health Plan, regardless of whether the product is subject to a rate increase. Issuers must use the Unified Rate Review (URR) HIOS module to submit the RFJ to CMS and to make modifications (if applicable) subsequent to the initial submission.

The RFJ consists of three parts:

- Part I – the Unified Rate Review Template (URRT)
- Part II – Written Description Justifying the Rate Increase. (Only required for proposed rate increases of 10% or greater.)
- Part III – Actuarial Memorandum.\*

\* Starting in 2015 for the 2016 plan year, issuers must submit two versions of the Actuarial Memorandum. The first version should be an un-redacted document for CMS review ("CMS version"). The second version should be a redacted document that will be made available to the public ("public version"), as required by 45 CFR § 154.215(h)(2). The CMS version should contain all the data elements and information described in the URR instructions. The public version should redact any information that is a trade secret or confidential commercial or financial information. Issuers should upload the redacted version as a supplemental document with the following naming convention: [HIOS Issuer ID]\_Product Effective Date\_RedactedAM. For example, "12345\_01012016\_RedactedAM.pdf".

#### Unified Rate Review Instructions and Template

Please use the following resources to complete your URR submission.

- 2016 URR Instructions (Parts I, II, & III)
- 2016 URRT
- Technical Manual for using the URR HIOS module

**RATE REVIEW** A federal government website managed by the Centers for Medicare & Medicaid Services

# Overview Roles

**Issuer Submitters may create and edit submissions; Issuer Validators may view submissions.**

Only Submitters will have access to the “Create Submission” tab.

The screenshot shows the 'RATE REVIEW' system interface. At the top, there is a header with 'RATE REVIEW' in large blue letters, 'Text Size: A A A' on the right, and 'Welcome, urrsubVA | Logout' in the bottom right. Below the header is a dark blue bar. The main content area is titled 'Rate Review System' and includes a paragraph: 'The Rate Review System is a system that provides the Issuer with the ability to enter Rate Filing information for Exchange and Non-Exchange plans in an integrated location for review and adjudication.' Below this paragraph are three tabs: 'Rate Review Overview', 'Create Submission', and 'View/Edit Submission'. Two callout boxes with arrows point to the 'Create Submission' and 'View/Edit Submission' tabs, with the text '“Create Submission”' and '“View/Edit Submission”' respectively. The main content area also contains a paragraph: 'Issuers are required to submit a Rate Filing Justification (RFJ) to CMS for the entire risk pool when any product in the single risk pool in the individual or small group (or merged) market is subject to a rate increase. Issuers must also submit an RFJ for any products that will be sold on the Marketplace as a Qualified Health Plan, regardless of whether the product is subject to a rate increase. Issuers must use the Unified Rate Review (URR) HIOS module to submit the RFJ to CMS and to make modifications (if applicable) subsequent to the initial submission.' Below this is a section titled 'Unified Rate Review Instructions and Template' with a list of links: '2016 URR Instructions (Parts I, II, & III)', '2016 URRRT', and 'Technical Manual for using the URR HIOS module'. At the bottom of the page, there is a footer with 'RATE REVIEW' on the left, 'A federal government website managed by the Centers for Medicare & Medicaid Services' in the center, and the CMS logo on the right.





# Create Submission Page

This page is where Issuer Submitters can submit rate filings into the system.

The screenshot shows the 'RATE REVIEW' system interface. At the top, there are navigation tabs for 'Rate Review Overview', 'Create Submission', and 'View/Edit Submission'. The 'Create Submission' tab is active. Below the tabs, there is a heading 'Create Submission' followed by a brief instruction: 'The Create Submission page requires an issuer to select which segment of the health insurance market a Rate Filing Justification submission will apply to and submit appropriate documentation. A field with an asterisk (\*) before it is a required field.'

The 'Issuer Information' section contains three dropdown menus: '\*State:', '\*Issuer:', and '\*Market Type:'. Each dropdown menu currently displays 'Please Select'. A callout box with the number '1' points to the '\*State:' dropdown, with the text 'Select the state.' Below this, there is a dropdown for '\*Annual or Quarterly Submission ?' with 'Annual' selected. A callout box with the number '2' points to the '\*Issuer:' dropdown, with the text 'Select the issuer.' Below this, there is a text input field for 'Policy ID' and a table of policy form IDs.

The 'Submission Documentation' section contains three file upload fields: '\*Part 1: Unified Rate Review Template: (Must be a valid .xml file)', '\*Part 3: Actuarial Memorandum: (Must be a valid .doc, .docx, or .pdf file)', and 'Supplemental Memorandum: (Must be a valid .xls, .xlsx, .doc, .docx, .pdf or .txt file)'. Each field has a 'Browse...' button and 'No file selected' text. A callout box with the number '3' points to the '\*Market Type:' dropdown, with the text 'Select the market type.' At the bottom of the form, there is a '+ ADD SUPPLEMENTAL FILES' link and a 'Submit' button.

# Create Submission Page (Policy ID)

Click the “Add Policy ID” button to display the added policy ID in the list box below.

To remove a Policy Form ID, select it and click the “Remove Policy Form ID” button.

The screenshot shows the 'RATE REVIEW' application interface. At the top, there are navigation tabs: 'Rate Review Overview', 'Create Submission' (which is active), and 'View/Edit Submission'. Below the tabs is the 'Create Submission' section. It includes a header 'Create Submission' and a sub-header 'Issuer Information'. Under 'Issuer Information', there are fields for 'State', 'Issuer', and 'Market', each with a 'Please Select' dropdown menu. Below these is a field for 'Annual or Quarterly Submission?' with a dropdown set to 'Annual'. A red box highlights the 'Policy ID' field, which is currently empty, and the 'Add Policy Form ID' button next to it. A callout box with the number '4' points to this button and contains the text: 'Enter the Policy Form ID and click “Add Policy ID.”'. Below the 'Policy ID' field is a list box for 'Added Policy Form IDs' and a 'Remove Policy Form ID' button. Further down is a 'Filing Tracking Number' field, which is highlighted by a callout box with the number '5' containing the text: 'Enter SERFF tracking number as Filing Tracking Number (optional)'. Below the tracking number field is the 'Submission Documentation' section, which includes three 'Browse' buttons for uploading files: 'Part 1: Unified Rate Review Template', 'Part 3: Actuarial Memorandum', and 'Supplemental Memorandum'. At the bottom right of the page is a 'Submit' button.



# Create Submission Page (Upload)

Upload the Unified Rate Review template, Actuarial Memorandum and supplemental materials.

Use Supplemental Files to report any rate changes.

Every submission requires an .xml extract from a finalized Unified Rate Review template.

**NOTE:** If errors are found during the validation process, an appropriate error message is displayed at the top of the page.

The screenshot shows the 'RATE REVIEW' application interface. At the top, there's a navigation bar with 'Rate Review Overview', 'Create Submission', and 'View/Edit Submission'. The main heading is 'Create Submission'. Below it, there's a section for 'Issuer Information' with dropdown menus for State, Issuer, and Market Type. A section for 'Annual or Quarterly Submission?' has a dropdown for 'Annual'. Below that is a 'Policy ID' section with an 'Add Policy Form ID' button and a list of 'Added Policy Form IDs' with a 'Remove Policy Form ID' button. A 'Filing Tracking Number' field is also present. The 'Submission Documentation' section is highlighted with a red box and contains three parts: 'Part 1: Unified Rate Review Template', 'Part 3: Actuarial Memorandum', and 'Supplemental Memorandum', each with a 'Browse...' button. At the bottom, there's a '+ ADD SUPPLEMENTAL FILES' link and a 'Submit' button. Annotations include a blue box with '6 Upload documentation.' pointing to the 'Add Policy Form ID' button, and another blue box with '7 Click "Submit."' pointing to the 'Submit' button.



# Submission Pending Rate Validation Summary Page

**This is where the Issuer Submitter can review all submission data and submitted files.**

Both Submitters and Validators receive email notifications when submission and validation are complete.

If the template fails system validation, the submission will not be created in the system.

**RATE REVIEW** Text Size: A A A  
Welcome, urrsuDE | Logout

World Insurance Company - DE (12786)

Rate Review Overview Create Submission View/Edit Submission

**Submission Pending Rate Validation Summary**

**i** The submission with the details below has been received by the Rate Review System. After it has been validated by the system, you will receive an email notification with the validation details.

**FFE RR Test Issuer 521 - MI (79220)**

Market Type:	Individual
Quarterly or Annual Submission:	Annual
Policy Form ID(s):	563365
Number of Policy Form ID(s):	1
Filing Tracking Number:	525
Created Date/Time:	03/25/2015 12:46:23 PM
Created By:	urrsuDE
Submission Tracking Number:	79220-391764686804682752

**Documents uploaded for this record**

Unified Rate Review Template:	79220_MI_UniformedRateReviewSubmissi
Actuarial Memorandum:	ActuarialMemorandum.docx
Supplemental Materials:	

**RATE REVIEW** A federal government website managed by the Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Baltimore, MD 21244

Home  
Acrobat Reader  
Accessibility  
Web Policies

**CMS**  
CENTERS FOR MEDICARE & MEDICAID SERVICES

The page displays a note when the record has been uploaded into the system and is pending validation.

# Submission Search Page

Use this page to search a submission based on one or more of the available search criteria.

Available search criteria include:

- State
- Issuer
- Market Type
- Review Type
- Tracking Number
- Frequency
- Status
- Created Date
- Validated Date

**RATE REVIEW** Text Size: A A A  
Welcome, MAMBA2014 | Logout

Rate Review Overview Create Submission View/Edit Submission

### Submission Search

State:  Issuer:  Market Type:

Primary Reviewer Type:  Submission Tracking Number:  Quarterly or Annual Submission:

Status:  
Select multiple statuses by holding down the CTRL key

Final Justification Comments Submitted  
Pre-Validation Pending Part 2 Consumer Justification Narratives  
Contractor Review in Progress  
Rate Error Reported

Created Date:  
From  To

Validated Date:  
From  To

Search

**RATE REVIEW**  
A federal government website managed by the Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Baltimore, MD 21244  
**CMS**  
CENTERS FOR MEDICARE & MEDICAID SERVICES

# Submission Search Results Page

The system will display data table of all submissions based on selected search criteria.

Access the Submission Summary Page for a particular submission by clicking the hyperlink name of the submission.

Click the submission link.

**RATE REVIEW** Text Size: A A

Welcome, urrrstateDE | Logout

State of DELAWARE

Rate Review Overview | Review Submissions | View Reports

### Submission Search

State:  Issuer:  Market Type:

Primary Reviewer Type:  Submission Tracking Number:  Quarterly or Annual Submission:

Status:  
Select multiple statuses by holding down the CTRL key

Created Date:  
From  To

Validated Date:  
From  To

### Submissions Available for Review

Show 10 entries

State	Issuer	Submission Tracking Number	Submitted Date/Time	Validated Date/Time	Days Since Validation	Status	Content Review Complete?	Days in Status	Contractor Assigned?	Primary Reviewer Type	Annual Or Quarterly Submission
DE		12785-301764896904682758	03/25/2015 01:55:15 PM	03/25/2015 01:57:54 PM	0 Days	Review Complete	Yes	0 Days	No	State	Annual

Showing 1 to 1 of 1 entries First Previous 1 Next Last



# Submission Summary Page

This page allows Submitters and Validators to View/Edit a submission and displays a summary of all submission level data and documents.

Hyperlinks to the functionality for which you have permission:

- Edit Unified Rate Review Template
- Edit Actuarial Memorandum
- View/Enter Consumer Narrative
- Upload Supplemental Materials

**RATE REVIEW** Text Size: A A A

Welcome, urrsuDE | Logout

World Insurance Company - DE (12786)

[Rate Review Overview](#) [Create Submission](#) [View/Edit Submission](#)

### Submission Summary

[Edit Unified Rate Review Template](#)   [Edit Actuarial Memorandum](#)   [View/Enter Consumer Justification Narratives](#)   [Upload Supplemental Materials](#)

**Submission Summary Details:**

Issuer/State:	FFE RR Test Issuer 521 - MI (79220)
Market Type:	Individual
Quarterly or Annual Submission:	Annual
Created Date/Time:	03/25/2015 12:58:52 PM
Created By:	urrsuDE
Template Validated Date/Time:	03/25/2015 01:00:22 PM
Validated Date:	
Validator:	
Policy Form ID(s):	676643
Filing Tracking Number:	5654
Submission Tracking Number:	12786-391764686804682753
Primary Reviewer Type:	State
Submission Status:	Pre-Validation Pending Part 2 Consumer Justification Narratives

**Submission Documents:**

Unified Rate Review Template:	79220MI_UnifiedRateReviewSubmission.xlsx Version 1 03/25/2015 01:00:21 PM
Actuarial Memorandum:	ActuarialMemorandum.docx Version 1 03/25/2015 12:58:53 PM
Supplemental Materials:	

[Deactivate Submission](#)   [Back To Search Results](#)

# Submission Summary Page – Download Documents

The “Submission Documents” section includes links to templates, memoranda and supplemental material.

Click the links to download.

### Submission Summary

[Edit Unified Rate Review Template](#)   [Edit Actuarial Memorandum](#)   [View/Enter Consumer Justification Narratives](#)   [Upload Supplemental Materials](#)

**Submission Summary Details:**

Issuer/State: FFE RR Test Issuer 521 - MI (79220)  
Market Type: Individual  
Quarterly or Annual Submission: Annual  
Created Date/Time: 03/25/2015 12:59:52 PM  
Created By: urrsubDE  
Template Validated Date/Time: 03/25/2015 01:00:22 PM  
Validated Date:  
Validator:  
Policy Form ID(s): 676643  
Filing Tracking Number: 5654  
Submission Tracking Number: 12786-391764686804682753  
Primary Reviewer Type: State  
Submission Status: Pre-Validation Pending Part 2 Consumer Justification Narratives

**Submission Documents:**

Unified Rate Review Template: [79220MI\\_UniformedRateReviewSubmission.xlsx Version 1](#)  
03/25/2015 01:00:21 PM

Actuarial Memorandum: [ActuarialMemorandum.docx Version 1](#)  
03/25/2015 12:59:53 PM

Supplemental Materials:

[Deactivate Submission](#)



# Submission Summary Page – Deactivate

**Submitters and Validators can deactivate a submission from the Submission Summary Page.**

The Deactivate Submission button is enabled until the submission is validated, then disabled after validation or deactivation.

**Submission Summary**

[Edit Unified Rate Review Template](#)   [Edit Actuarial Memorandum](#)   [View/Enter Consumer Justification Narratives](#)   [Upload Supplemental Materials](#)

**Submission Summary Details:**

Issuer/State: FFE RR Test Issuer 521 - MI (79220)  
Market Type: Individual  
Quarterly or Annual Submission: Annual  
Created Date/Time: 03/25/2015 12:58:52 PM  
Created By: urrsuBDE  
Template Validated Date/Time: 03/25/2015 01:00:22 PM  
Validated Date:  
Validator:  
Policy Form ID(s): 676643  
Filing Tracking Number: 5654  
Submission Tracking Number: 12786-391764686804682753  
Primary Reviewer Type: State  
Submission Status: Pre-Validation Pending Part 2 Consumer Justification Narratives

**Submission Documents:**

Unified Rate Review Template: [79220MI\\_UnifiedRateReviewSubmission.xlsx Version 1](#)  
03/25/2015 01:00:21 PM  
Actuarial Memorandum: [ActuarialMemorandum.docx Version 1](#)  
03/25/2015 12:58:53 PM  
Supplemental Materials:

Click **“Deactivate Submission”** to deactivate.

Click **“Back to Search Results”** to return to the Submission Search Results Page.

[Deactivate Submission](#)   [Back To Search Results](#)

# Submission Summary Page – Issuer Validator

**Issuer Validators can validate a submission from the Submission Summary Page once the submission has a status of “Pre-Validation.”**

First, certify that all files submitted for this record are complete and accurate.

Then, use the Submission Validation section to validate the submission.

Check the box to validate submission.

**RATE REVIEW** Text Size: A A A  
Welcome, urrvalDE | Logout  
World Insurance Company - DE (12786)

Rate Review Overview View/Edit Submission

### Submission Summary

View/Enter Consumer Justification Narratives Upload Supplemental Materials

**Submission Summary Details:**

Issuer/State:	DE (12786)
Market Type:	Individual
Quarterly or Annual Submission:	Annual
Created Date/Time:	03/25/2015 01:55:15 PM
Created By:	urrsubDE
Template Validated Date/Time:	03/25/2015 01:55:43 PM
Validated Date:	
Validator:	
Policy Form ID(s):	543325
Filing Tracing Number:	5646433
Submission Tracing Number:	12786-39176-4686804682756
Primary Reviewer Type:	State
Submission Status:	Pre-Validation

**Submission Documents:**

Unified Rate Review Template:	12786DE_UnifiedRateReviewSubmission_Above10_20150317105051.xdms Version 2 03/25/2015 02:48:36 PM
Actuarial Memorandum:	ActuarialMemorandum.docx Version 1 03/25/2015 01:55:16 PM
Supplemental Materials:	

**Submission Validation**

Validation: I certify that all files submitted for this record are complete and accurate.

Save

Deactivate Submission Back To Search Results

Then click **Save.**

# Edit Unified Rate Review Template

This page allows you to browse and upload a new version of the Unified Rate Review template.

An edited Unified Rate Review template will not be added to a submission until it passes back-end validation.

Click **Browse** and select your file.

**RATE REVIEW** Text Size: A A A  
Welcome, ursutDE | Logout  
World Insurance Company - DE (12786)  
Rate Review Overview Create Submission View/Edit Submission  
**Edit Unified Rate Review Template**  
Issuers can use the edit Unified Rate Review Template feature to upload a new version of the Unified Rate Review Template. The issuer can locate the file using the browse feature below and, upon upload, the template will be system validated for accuracy. If the updated Unified Rate Review Template fails validation, it will not be added to the submission, and the most recently validated version of the Unified Rate Review Template will be considered relevant to the submission. A user may need to re-enter Consumer Justification Narratives after editing the Unified Rate Review Template, if applicable.  
Unified Rate Review Template : (Must be a valid .xml file)  
Browse... No file selected.  
Return to Submission Summary Upload  
**RATE REVIEW** A federal government website managed by the Centers for Medicare & Medicaid Services  
MD 21244  
Home Acrobat Reader Accessibility Web Policies

Then click **Upload**.



# Edit Actuarial Memorandum

This page allows you to browse and upload a new Actuarial Memorandum.

You will receive a confirmation message once the upload is successful.

Click **Browse** and select your file.

The screenshot shows the 'RATE REVIEW' system interface. At the top, it says 'RATE REVIEW' and 'Text Size: A A A'. Below that, it says 'Welcome, urrsuBDE | Logout'. The main header is 'World Insurance Company - DE (12786)'. The page title is 'Rate Review System'. There are three tabs: 'Rate Review Overview', 'Create Submission', and 'View/Edit Submission'. The main content area is titled 'Edit Actuarial Memorandum'. Below the title, there is a text box with the instruction: 'Issuers can use the Edit Actuarial Memorandum feature to upload a new version of the Actuarial Memorandum to their submission. The issuer can locate the file using the browser features below:'. Below this, there is a red-bordered box containing the text 'Actuarial Memorandum : (Must be a valid .doc, .docx or .pdf file)' and a 'Browse...' button next to the text 'No file selected.'. To the right of this box, there are two buttons: 'Return to Submission Summary' and 'Upload'. At the bottom of the page, there is a footer with the 'RATE REVIEW' logo, the text 'A federal government website managed by the Centers for Medicare & Medicaid Services', the address '7500 Security Boulevard, Baltimore, MD 21244', and the CMS logo. There are also links for 'Home', 'Acrobat Reader', 'Accessibility', and 'Web Policies'.

Then click **Upload**.

# Consumer Justification Narratives

**This page allows you to enter a Consumer Justification Narrative for a group of selected products.**

A Consumer Justification Narrative is required for every product rate increase at or above a 10% threshold.

If multiple products have the same rate increase, these products can be bundled together to share the same Narrative.

If products have different rate increases, each product must have a distinct narrative

The screenshot shows the 'RATE REVIEW' web application interface. At the top, it says 'World Insurance Company - DE (12786)' and 'Welcome, unsubsDE | Logout'. The main heading is 'Enter Consumer Justification Narratives'. Below this, a note states: 'Based on the information captured in the Rate Review Template, your submission requires Consumer Justification Narratives for some product rate increases. Each Consumer Justification Narrative must be below 15000 characters.' There are three tabs: 'Rate Review Overview', 'Create Submission', and 'View/Edit Submission'. The 'Create Submission' tab is active. The form contains a required field for 'Consumer Justification Narrative Title'. Below that is a section for '\*Products' with 'Available Options' and 'Selected Options' lists. The 'Available Options' list includes 'Katie's Product IFP 9 EPO - 11%'. There are buttons for 'Add >>', '<< Remove', 'Add All >>', and '<< Remove All'. A large text area for the '\*Consumer Justification Narrative' is provided, with a 'Remove' button at the bottom right. At the bottom of the form, there is a '+ ADD NEW NARRATIVE' link and 'Back', 'Save', and 'Submit' buttons.

# Consumer Justification Narratives – Select Products and Submit

The page displays a list of all products included in your submission.

Click to select the products associated with the Narrative.

Click the **Add/Remove** or **Add All/Remove All** buttons to add and remove your selected products.

Enter the justification description.

The screenshot shows the 'RATE REVIEW' web application interface. At the top, it says 'World Insurance Company - DE (12786)'. Below that, the main heading is 'Enter Consumer Justification Narrative'. A sub-heading reads: 'Based on the information captured in the Rate Review Template, your submission in this section must be below 15000 characters. Justification Narrative must be below 15000 characters.' There are three tabs: 'Rate Review Overview', 'Create Submission', and 'View/Edit Submission'. Below the tabs, there is a text input field for the title with a note: 'A field with an asterisk ( \* ) before it is required.' Below that is a section for '\*Products' with two columns: 'Available Options' and 'Selected Options'. The 'Available Options' column contains a dropdown menu with 'Katie's Product IFP 9 EPO - 11%' selected. To the right of this dropdown are four buttons: 'Add >>', '<< Remove', 'Add All >>', and '<< Remove All'. The 'Selected Options' column is currently empty. Below the products section is a large text area for the '\*Consumer Justification Narrative:'. At the bottom right, there are buttons for 'Back', 'Save', and 'Submit'. A 'Remove' button is also visible near the bottom right. The callout boxes point to the title field, the 'Add >>' button, the narrative text area, and the 'Submit' button.

Enter a title to describe the Narrative.

Click **Submit** to submit the narrative.



# Upload Supplemental Materials

This page allows Submitters and Validators to add supplemental materials to a submission.

You may submit Supplemental Materials at any time before submission is validated.

You may upload up to ten Supplemental Materials at a time.

Click **Browse** and select your file.

Click **Add Supplemental File** to add more files.

Then click **Upload** to perform validation checks on your documents.

**RATE REVIEW** Text Size: A A A  
Welcome, urrsuDE | Logout

World Insurance Company - DE (12786)

Rate Review Overview Create Submission View/Edit Submission

### Upload Supplemental Materials World Insurance Company-DE (12786)

The Upload Supplemental Materials page is provided for issuers to respond to requests from reviewers for additional information needed to complete a review. Issuers can also optionally upload any Supplemental Materials before a submission is validated. The issuer can locate the supplemental materials files using the browse feature below and can upload up to ten files at a time.

**Supplemental Materials :**  
(Must be a valid .doc, .docx, .pdf or .txt file)

Browse... No file selected.

+ ADD SUPPLEMENTAL FILE

Return to Submission Summary Upload

**RATE REVIEW** A federal government website managed by the Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Baltimore, MD 21244

Home  
Acrobat Reader  
Accessibility  
Web Policies

# Unreasonable Rate Increase Comments

This page allows you to view and respond to comments explaining why a rate increase was determined unreasonable.

Scroll here to view Reviewer Comments explaining why the Reviewer determined the increase unreasonable.

Provide Unreasonable Rate Increase Justification to further explain the rate increase.

Click **Submit**. A content check is conducted before any comments can be web posted.

**RATE REVIEW**

Text Size: A A A

Welcome, unsubsDE | Logout

World Insurance Company - DE (12786)

Rate Review Overview Create Submission View/Edit Submission

### View/Enter Unreasonable Rate Increase Comments

Product(s) in your submission have been determined by the reviewer to have unreasonable rates. Please respond to the unreasonable rate increase determination by providing an Unreasonable Rate Increase Comment that is less than 15000 characters.

Date/Time of Reviewer Request: Wed, 25 Mar 2015 14:03:48 EDT

title

Products:  
Katie's Product IFP 9 EPO

Reviewer Comments:  
reviewer comments

Unreasonable Rate Increase Justification:  
the comment

Save

Return to Submission Summary Submit



# Submitting the Template

## Complete the following steps when working with templates:

### *Complete*

- Click the **Download Template** button.
  - Enable Macros in Microsoft Excel. (See the URR User Guide for instructions.)
  - Fill out the template and save it to your desktop.
- 

### *Validate*

- Click the **Validate** button **in the template** after filling in all required fields.
  - Review errors found in the template, if any.
  - Fix any errors and repeat the validation process until your template is valid.
- 

### *Finalize*

- Click the **Finalize** button **in the template**.
- Wait for the template to create the .xml file that you will submit.
- Save the .xml file to your local computer.

Once your template is validated and finalized, submit the template-generated .xml file in the appropriate section of the URR module.



# Key Dates

Milestone	Date	Associated Activities
Submission deadline for single risk pool compliant plans (QHPs & non-QHPs)	<b>5/15</b>	Issuers submit the RFJ if any plan in the single risk pool has a rate increase > 0% or is a QHP
Proposed rate increases $\geq$ 10% posted on Healthcare.gov	<b>6/1</b>	CMS posts the written description justifying the rate increase (Part II) and the information in the URRT (Part I) and Actuarial Memorandum (Part III) that is not a trade secret or confidential
All QHP submissions must be in final status in HIOS	<b>8/25</b>	Regulators finish reviewing all submissions that contain a QHP and enter final determinations in HIOS.
All non-QHP submissions must be in final status in HIOS	<b>10/9</b>	Regulators finish reviewing all non-QHP submissions and enter final determinations in HIOS.
Final rates posted on Healthcare.gov	<b>10/26</b> (target)	CMS posts final rates on Healthcare.gov and posts the Public Use File on the CCIIO website
Open Enrollment Begins	<b>11/1</b>	

# Redacted Actuarial Memorandum

- CMS must publicly post information in the Actuarial Memorandum (Part III) that is not trade secret or confidential financial or commercial information (45 CFR § 154.215(h))
- Submit two versions of the Actuarial Memorandum (AM):
  - Un-redacted version for regulatory review (Part III)
  - Redacted version that will be made available to the public
- Do not redact information unless it would likely result in specific, reasonably foreseeable, and substantial competitive harm
- File Naming Convention: **[HIOS Issuer ID]\_[Effective Date]\_[Market Abbreviation]\_RedactedAM.pdf**
  - Example: 12345\_01012016\_SG\_RedactedAM.pdf
  - Use “IND” and “SG” for the market abbreviations
  - Must be PDF
- Submit the redacted version as a supplemental document

# Improper Redaction or Failure to Submit Redacted Copy

## **Improper Redaction**

If CMS determines that an issuer redacted information that does not constitute trade secrets or confidential commercial or financial information as defined in HHS's FOIA regulations (45 CFR § 5.65), we will provide written notice to the issuer that we will make the inappropriately redacted information public

## **Failure to Submit Redacted AM:**

If an issuer does not submit a redacted AM, CMS will assume that the un-redacted AM does not contain any trade secrets or confidential commercial or financial information and will publicly post the un-redacted version.

# State and CMS Coordination

- Submit the URRT to CMS on the same day you file with your state
- In HIOS, enter the applicable SERFF tracking number in the File Tracking Number field
- If you revise your submission with the state, you must also revise your submission with CMS

# Resubmissions

- HIOS will be updated on May 21 so that state regulators can unlock submissions
- If you need to resubmit before May 21, email [ratereview@cms.hhs.gov](mailto:ratereview@cms.hhs.gov) with the following info:
  - Submission Tracking Number
  - Description of change
  - Indication that your state approved the change
  - Whether a QHP template is affected
  - Whether the Index Rate is affected
- Remember to validate after resubmitting

# Incorrect Warning Message

- Worksheet 2, Row 65: If you enter a number other than zero, you will get an incorrect warning message
- The warning will not prevent the template from being Finalized into an XML file. Simply click “OK” and save the file

**Note:** There was a separate error on template v2.0.3 that prevented negative values in Worksheet 2, Rows 64 and 90. We fixed it on April 10 and v2.0.4 is on the CCIIO website. You can upload either version into HIOS.



# Mapping Terminating Plans

# Mapping Terminating Plans (cont.)

- The URRT instructions did not address mapping multiple plans
  - Mapping (i.e., auto-enrolling) multiple terminating plans to one new plan
  - Mapping one terminating plan to multiple new plans
- Next three slides provide examples of mapping multiple plans into one plan and vice versa
- Each slide includes:
  - Brief description of the scenario
  - Condensed Worksheet 2 detailing which plan's information should be reflected in each section

# Mapping Multiple Terminating Plans to a New Plan

## Map largest terminating plan to the new plan

- Historical Rate Increases & Experience Period: Use the terminating plan with largest membership
- Rate Change: Weighted average change of terminating plans to new plan

## List the other terminating plans as terminating plans

- Example: Plans A, B, and C are terminating and being mapped to new Plan D

Year	Plans Available		
2014	A	B	C
2015	A	B	C
2016	D	D	D

Section I: General Product and Plan Information	Plan D	Terminated Plan B	Terminated Plan C
Effective Date of Proposed Rates	01/01/2016	01/01/2016	01/01/2016
Rate Change & (over prior filling)	Plans A, B, C → Plan D	0	0
Cum'tive Rate Change & (over 12 mos prior)	Plans A, B, C → Plan D	0	0
Section II: Components of Premium Increase (PMPM Dollar Amount above Current Average Rate PMPM)	Plan A → Plan D	0	0
Section III: Experience Period Information	Plan A	Plan B	Plan C
Section IV: Projected (12 months following effective date)	Plan D	[Blank]	[Blank]

Plan A is shown as mapped to Plan D because Plan A has the highest enrollment of plans mapped to Plan D.

Rate Change is based on weighted average of Plans A, B C to Plan D.



# Mapping One Terminating Plan to Multiple New Plans

Map terminating plan to each new plan

Allocate terminating plan experience among new plans in Section III

Example: Terminating Plan A is being Mapped to New Plans B and C

Year	Plans Available
2014	A
2015	A
2016	B C

Section I: General Product and Plan Information	Plan B	Plan C
Effective Date of Proposed Rates	01/01/2016	01/01/2016
Rate Change & (over prior filling)	Plan A → Plan B	Plan A → Plan C
Cum'tive Rate Change & (over 12 mos prior)	Plan A → Plan B	Plan A → Plan C
<b>Section II: Components of Premium Increase (PMPM Dollar Amount above Current Average Rate PMPM)</b>	Plan A → Plan B	Plan A → Plan C
<b>Section III: Experience Period Information</b>	Weighted Plan A	Weighted Plan A
<b>Section IV: Projected (12 months following effective date)</b>	Plan B	Plan C

Plan A experience is divided in Section II between Plans B and C based on weighting of mapped members.

# Mapping Multiple 2014 Plans to Multiple 2015 Plans to New Plan

## Map largest terminating 2015 plan to the new 2016 plan

- Historical Rate Increases & Experience Period: Use the 2014 plan that was mapped to the largest terminating 2015 plan
- Rate Change: Weighted average change of the 2015 terminating plans to the 2016 new plan

## List the other terminating plans as terminating plans

- Example: 2014 Terminating Plans A, B, & C are mapped to new 2015 Plans D, E, & F
- Terminating 2015 Plans D, E, & F are Mapped to New 2016 Plan G

Year	Plans Available
2014	A B C
2015	D E F
2016	G G G

Section I: General Product and Plan Information	Plan G	Terminated Plan B	Terminated Plan C
Effective Date of Proposed Rates	01/01/2016	01/01/2016	01/01/2016
Rate Change & (over prior filling)	Plans D, E, F → Plan G	0	0
Cum'tive Rate Change & (over 12 mos prior)	Plans D, E, F → Plan G	0	0
<b>Section II: Components of Premium Increase (PMPM Dollar Amount above Current Average Rate PMPM)</b>	Plan D → Plan G	0	0
<b>Section III: Experience Period Information</b>	Plan A	Plan B	Plan C
<b>Section IV: Projected (12 months following effective date)</b>	Plan G	[Blank]	[Blank]

Plan D is shown as mapped to Plan G because Plan D has the highest enrollment of plans mapped to Plan G



# Contacting the Rate Review Staff

- Send questions about the content of URR (or RRJ) submissions to [ratereview@cms.hhs.gov](mailto:ratereview@cms.hhs.gov)
  - Send questions about HIOS or QHP templates (including the QHP rate table template) to [CMS\\_FEPS@cms.hhs.gov](mailto:CMS_FEPS@cms.hhs.gov)
- Include submission tracking number, state, and issuer legal name
- When there is an error or issue with the template:
  - Include screenshots or attach template
  - List steps taken that produced the error
- 😊 Please read the instructions before emailing us 😊

# Troubleshooting and Support

**Contact the Exchange Operations Support Desk for support.**

Contact	Organization	Phone	Email	Role	Responsibility
Marketplace Operation Support Desk (XOSC)	CMS	855-CMS-1515 (855-267-1515)	<a href="mailto:CMS_FEPS@cms.hhs.gov">CMS_FEPS@cms.hhs.gov</a>	Help desk support	1st level user support & problem reporting



# Resources

Resource	Resource Link
Centers for Medicare and Medicaid Services (CMS)	<a href="http://www.cms.gov/">CMS Website: http://www.cms.gov/</a>
CMS Regulations and Guidance	<a href="http://www.cms.gov/Regulations-and-Guidance/Regulations-and-Guidance.html?redirect=/home/regsguidance">Regulations &amp; Guidance: http://www.cms.gov/Regulations-and-Guidance/Regulations-and-Guidance.html?redirect=/home/regsguidance</a>
URRT and Instructions	<a href="http://www.cms.gov/ccio/Resources/Forms-Reports-and-Other-Resources/index.html#Review of Insurance Rates">http://www.cms.gov/ccio/Resources/Forms-Reports-and-Other-Resources/index.html#Review of Insurance Rates</a>
URR Training Materials	<a href="http://www.cms.gov/ccio/Resources/Training-Resources/index">URRT Training: http://www.cms.gov/ccio/Resources/Training-Resources/index</a>
Healthcare.gov Website	<a href="https://ratereview.healthcare.gov">Healthcare Website: https://ratereview.healthcare.gov</a>
U.S. Department of Health and Human Services	<a href="http://www.hhs.gov/">HHS Website: http://www.hhs.gov/</a>

# Questions?