

State Rate Review Training



About This Training

Overview of the new Rate Review program

- Instructions for accessing the new Rate Review module in HIOS
 - View rate review information
 - Submit rate review determinations

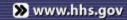
Additional training materials are available on the
 CCIIO Rate Review Page: http://cciio.cms.gov/



Rate Review Program

Established by Section 2794 of the Public
 Health Service Act (as amended by the Patient
 Protection and Affordable Care Act)

- □ Rate Increase Disclosure and Review Regulation (45 C.F.R. §§ 154.101-154.301)
 - Published on May 23, 2011
 - Effective on September 1, 2011



Overview of the Rate Review Program

- Issuers report on rate increases at or above "Subject to Review" Threshold
- □ Issuers submit a Preliminary Justification

- □ Rate Review conducted by States or CMS
- Preliminary Justification and review determinations posted on <u>healthcare.gov</u>



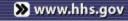
Applicability

- Requirements apply to issuers in the individual market and small group markets
- □ Do not apply to:
 - Grandfathered health plan coverage as defined in 45 C.F.R. § 147.140
 - Excepted benefits as described in section 2791(c) of the PHS Act





- □ Consists of three parts:
 - □ Part I, the Rate Increase Summary Form
 - Standardized, summary level rate data
 - Part II, Written Explanation of the Rate Increase
 - Brief, non-technical explanation of the rate increase
 - Part III, Rate Filing Documentation
 - Detailed rate information, required only if CMS is reviewing the rate increase



Timing of Preliminary Justification Submissions

Requirement starts on September 1, 2011

- States with Rate Filing Requirements: on the same date filing is submitted to the State
- □ States without Rate Filing Requirements: Prior to implementing rate increases that go into effect on or after September 1, 2011





Notification of New Preliminary Justification Records

----- Forwarded message -----

From: <<u>HIOS Submissions@hhs.gov</u>> Date: Tue, Jul 19, 2011 at 4:46 PM

Subject: SysTest: Rate Review System - Notification of Preliminary Justification Submission

To: Manaswini@federal.gov,

Rate Review Record: Issuer Name: Health, Inc. Effective Date: 07/15/2011 Submission ID: 000001

Product(s): 31317AL002-VH38-Small Group-HMO

Policy Form Id(s): 3214

Attestation Date: 7/19/2011 4:46:42 PM

The above preliminary justification record has been attested to in the Rate Review System. You may access this record by logging into the Rate Review System.

If you have any questions regarding this email notification, please contact the help desk at insuranceoversight@hhs.gov or 1-877-343-6507.

Thank you,

The Rate Review System Team

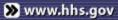


HIOS Rate Review Module

- All Rate Review issuer reporting requirements must be submitted in HIOS
- □ All States can view Rate Review submission

- Training announcement included HIOS registration information
- States should review the technical HIOS instructions manual





HIOS Sign-In

Health I	Insurance	Oversig	ht S۱	/stem

Tuesday, July 26, 2011

Sign-In

* Indicates required fields.

User Name:*
Password:*

Forgot Password?

Type the letters you see in the image into the Word Verification field below. If you are unable to read the image pictured below, please click the Play Audio Code link for audio verification

Word Verification * Please enter the letters you see in the image. If you use the Audio Verification, type the pronounced numbers and the first letter of each word.

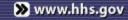


Can't read it? Generate New Image



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Log In



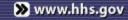






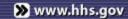
Rate Review Menu













Accessing Preliminary Justification Submissions (continued)

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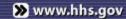


Accessing Preliminary Justification Submissions (Continued)

☐ HIOS Record Status Labels

Pre-attestation phase

- Review phase
- Determination phase





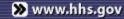
Accessing Preliminary Justification Submissions (Continued)

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Viewing Preliminary Justification Data

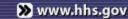






Viewing Preliminary Justification Data (Continued)

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'Issuer/State:	Health Inc. (a PA corp.)-VA
Product:	64641VA002-Health Maintenance Organization - Small Group-POS ▼
Effective Date:	08/01/2011
'Date/Time Submitted for Review:	7/11/2011 12:51:22 PM 💌
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Attester: Date/Time Attested: Filing Tracking Number: Product(s): Fotal Number of Products: Fotal Number of Policy Form ID(s): Fotal Number of Policy Form IDs: Submission Type: Current Status: Contractor Assigned:	Zach 7/11/2011 1:09:13 PM xxxx-123456789 64641VA002-Health Maintenance Organization-Small Group-POS 1 aaaa-9898 : 1 HHS Primary Review In Progress No
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Viewing Preliminary Justification Data (Continued)

HHS Part II Content Review:	
Web-Post Preliminary Justification(Y/N):	○Yes ○No
Public Rate Filing:	test.doc (21.5KB)
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Justification(Y/N):	○Yes ○No
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Rate Review Determinations

- □ State Reviewers must enter in HIOS:
 - Review determination
 - Description of review findings and determination

 Determinations must be submitted within five business days of the completion of the review

Information will be web-posted on <u>healthcare.gov</u>



Rate Review Determinations (Continued)

- States must select one of the following rate review determinations:
 - Unreasonable Rate Increase
 - Unreasonable Rate Increase (Modified)
 - Unreasonable Rate Increase: (Rejected by State)
 - Not Unreasonable
 - Not Unreasonable (Modified)
 - Withdrawn Prior to Determination

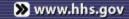


Rate Review Determinations (Continued)

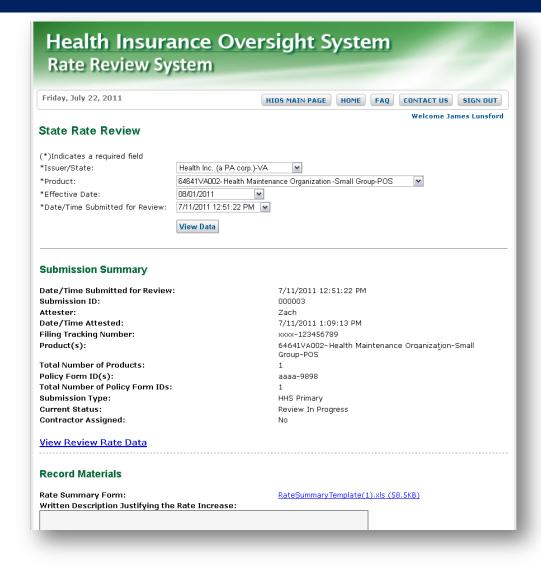
 States must provide a brief explanation of their review findings and determination

Non-technical and consumer-oriented

Should not exceed two to three paragraphs



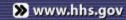
Entering Rate Determinations in HIOS





Entering Rate Determinations in HIOS (Continued)

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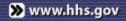
Post Determination Issuer HIOS Actions

- Issuers may withdraw rate increases
- If a rate increase is determined to be unreasonable
 - Issuers must submit a Final Justification within ten calendar days of the determination if implementing increase
 - Not required if the issuer withdraws the rate increase within ten calendar days



CMS Web-Posting of Rate Review Information

- Posted on <u>Healthcare.Gov</u>
 - Preliminary Justification Part I in consumer-friendly format
 - Preliminary Justification Part II
 - Result of Rate Review (determination)
 - Final Justification for unreasonable rate increases that are implemented
- CMS reviews Preliminary Justifications prior to web posting
 - Issuers to submit new justification if deficiencies found
- CMS will also perform a content review of Final Justification submissions



CMS Web-Posting of Rate Review Information (continued)

HHS Part II Content Review: Web-Post Preliminary Justification(Y/N):	OYes ONo
HHS Content Review:	
Web-Post Unreasonable Rate Increase Final Justification(Y/N):	○Yes ○No





State Posting of Rate Review Information

- States with Effective Rate Review designation must:
 - Post information on all "subject to review" increases
 - Provide an opportunity for public comments



Contact

 Please submit your questions about this training to <u>RateReview@hhs.gov</u>

Submitted questions will be addressed during CMS
 Rate Review User Group calls

 User Group calls will take place in August and September (see training confirmation email for details)