DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services Center for Consumer Information &Insurance Oversight 200 Independence Avenue SW Washington, DC 20201



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Title: Insurance Standards Bulletin Series -- INFORMATION

Subject: Revised Bulletin: Timing of Submission of Rate Filing Justifications for the 2020

Filing Year for Single Risk Pool Coverage Effective on or after January 1, 2021

I. Purpose

On March 27, 2020, the Centers for Medicare & Medicaid Services (CMS) issued the Bulletin: Timing of Submission Rate Filing Justifications for the 2020 Filing Year for Single Risk Pool Coverage Effective on or after January 1, 2021 (March 27, 2020 bulletin). To support efforts by health insurance issuers and States to monitor and evaluate the impact of the COVID-19 public health emergency, and to provide additional time for health insurance issuers to revise Rate Filing Justifications based on the most current information available, CMS is releasing this revised bulletin, which amends some of the submission deadlines that the March 27, 2020 bulletin originally established under 45 CFR 154.220 for health insurance issuers to submit Rate Filing Justifications for single risk pool coverage in the individual and small group (or merged) markets effective on or after January 1, 2021. This revised bulletin supersedes and replaces the March 27, 2020 bulletin.

This bulletin also provides the revised date on which CMS will provide public access to information regarding proposed rate changes for single risk pool coverage, as well as the revised deadline for States with Effective Rate Review Programs⁴ to post proposed rate increases subject to review. The date on which CMS intends to post final rate changes has not changed, but is repeated below. This bulletin also provides the CMS web address that States with an Effective Rate Review Program can use if they elect to provide public access from their website through a

¹ The March 27, 2020 bulletin is available at https://www.cms.gov/files/document/2020-final-rate-review-timeline-bulletin.pdf.

² The term "single risk pool coverage" is used to describe non-grandfathered health insurance coverage in the individual or small group (or merged) market that is subject to the single risk pool provisions at 45 CFR 156.80 and is required to file rate information using the Unified Rate Review Template.

³ Deadlines that have been revised from those originally established in the March 27, 2020 bulletin are denoted by an asterisk (*).

⁴ See 45 CFR 154.301 for the list of criteria CMS considers when evaluating whether a State has an Effective Rate Review Program.

link to the CMS website.

II. Revised Rate Review Timelines for the 2020 filing year for single risk pool coverage effective on or after January 1, 2021

The timelines specified below apply to the rate filings issuers will submit in 2020 (2020 filing year) for single risk pool coverage (including both qualified health plans (QHPs) and non-QHPs) in the individual and small group (or merged) markets for plan or policy years beginning on or after January 1, 2021.

<u>Proposed Rate Filings – Issuer Submission Deadlines</u>

The submission deadlines for a health insurance issuer to submit a proposed Rate Filing Justification to CMS and the applicable State for single risk pool coverage are listed below. These submission deadlines are unchanged from those issued in the March 27, 2020 bulletin. Pursuant to 45 CFR 154.215, in addition to rate increases, these deadlines also apply to single risk pool coverage that experience no rate changes, rate decreases, and rates for new single risk pool coverage.

- Issuers in a State *without an Effective Rate Review Program* must submit proposed rate filings for all single risk pool coverage, regardless of whether or not the filing contains a QHP, to CMS for review by June 3, 2020.
- Issuers in a State *with an Effective Rate Review Program* must submit proposed rate filings for all single risk pool coverage, regardless of whether or not the filing contains a QHP, to both CMS and the State by a date set by the State, as long as the date is no later than July 22, 2020.⁶

As outlined in Table 1 of the Key Dates for Calendar Year 2020 document, ⁷ issuers submitting QHP applications to participate in Exchanges served by the HealthCare.gov platform must submit their QHP Rates Table Templates by July 22, 2020. The QHP Rates Table Template is required in order to comply with certification deadlines included in the 2021 Letter to Issuers. ⁸ We note that there will be opportunities during the QHP certification process for the issuer to update, correct or change the QHP Rates Table Template (as may be necessary).

⁵ 45 CFR 154.220(b) requires issuers to submit rate information for single risk pool coverage by the earlier of: (a) the State's deadline for the submission of a rate filing, or (b) the date specified by the Secretary of the Department of Health and Human Services (HHS) in guidance.

⁶ States with an Effective Rate Review Program are permitted to establish different submission deadlines for non-QHP only rate filings as long as that deadline is no later than July 22, 2020.

⁷ The Key Dates for Calendar Year 2020: Qualified Health Plan (QHP) Certification in the Federally-facilitated Exchanges (FFEs); Rate Review; and Risk Adjustment document is available at: https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance# Affordable Care Act.

⁸ The 2021 Letter to Issuers in the Federally-facilitated Exchanges is available at: https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance#Health-Insurance-Marketplaces.

<u>Proposed Rate Filings – Posting by CMS</u>

CMS will post all applicable parts of the Rate Filing Justification for all single risk pool coverage (including both QHPs and non-QHPs), regardless of whether the product includes a plan with a rate increase that is subject to review under 45 CFR 154.210.9 CMS will conduct a data refresh prior to posting, in order to capture the most recent rate filing information, and then will post proposed rate information for all issuers at one time. ¹⁰ The data will not be refreshed again until final rate information is posted.

- Issuers must complete all changes to proposed rate filings in the Health Insurance Oversight System Unified Rate Review (HIOS URR) module by 5:00 p.m. EDT on August 7, 2020.*
- CMS intends to post information on proposed rate filings for consumers to review on August 14, 2020* at https://ratereview.healthcare.gov.¹¹

Final Rate Filings – Posting by CMS

For all single risk pool coverage (including both QHP and non-QHPs), CMS will post all applicable parts of the Rate Filing Justification for all final rate filings, regardless of whether the product includes a plan with a rate increase that is subject to review under 45 CFR 154.210.¹² CMS will conduct a data refresh prior to posting, in order to capture the most recent rate filing information, and then will post final rate filing information for all issuers at one time.¹³

- Issuers in States with Exchanges served by the HealthCare.gov platform must finalize all rate filings *that contain a QHP* in the HIOS URR module by 3:00 p.m. EDT on August 26, 2020.*
- Issuers in States with a State-based Exchange that does not use the HealthCare.gov platform must submit final rate filings *that contain a QHP* to both CMS and the State by a date set by the State, as long as the date is no later than October 15, 2020.
- All issuers must finalize all rate filings *that only contain non-QHPs* in the HIOS URR module by 3:00 p.m. EDT on October 15, 2020.
- CMS intends to post final rate information for single risk pool coverage (including both QHPs and non-QHPs) no later than November 2, 2020.

⁹ CMS will not post information that is a trade secret, or privileged or confidential commercial or financial information pursuant to HHS' Freedom of Information Act regulations at 45 CFR 5.31(d). ¹⁰ States with an Effective Rate Review Program must post the required rate filing information at a uniform time and not on a rolling basis. This applies to rate information for all single risk pool coverage (including both QHP and non-QHPs) offered inside and outside of Exchanges. See 45 CFR 154.301(b)(3).

¹¹ Consistent with 45 CFR 154.301(b)(1)(i), States with an Effective Rate Review Program must post proposed rate increases subject to review by August 14, 2020.*

¹² See, supra note 9.

¹³ See, supra note 10.

III. CMS Web Address

States with an Effective Rate Review Program that elect to provide public access via a link to the rate information made available on the CMS website should use: https://ratereview.healthcare.gov.

IV. Notification to CMS

Pursuant to 45 CFR 154.301(b)(2), if a State intends to release information about proposed rate increases subject to review *earlier* than the date on which CMS will be posting information publically or to release information about final rate increases (including those not subject to review) prior to the first day of the annual open enrollment period in the individual market for the applicable calendar year, the State must notify CMS in writing at least 5 business days prior to making the information public. The State should notify CMS by sending an email to RateReview@cms.hhs.gov. The email must indicate the date that the State intends to make the information public.