



DATE: April 18, 2020

TO: All Eligible Qualified Health Plan (QHP) Issuers

SUBJECT: COVID-19 and Suspension of Certain Activities Related to the Health Insurance Exchange Quality Rating System, QHP Enrollee Experience Survey (QHP Enrollee Survey) and Quality Improvement Strategy Programs

CMS is announcing flexibility for Qualified Health Plan (QHP) issuers that are eligible to report for the Quality Rating System (QRS), the QHP Enrollee Survey and the Quality Improvement Strategy (QIS) programs for Plan Year (PY) 2021 QHP Certification Period, to suspend activities related to the collection and reporting of data for the QRS, QHP Enrollee Survey and QIS.¹

For federal quality ratings across all Health Insurance Exchanges, each year eligible QHP issuers collect audited clinical data including various Healthcare Effectiveness Data and Information Set (HEDIS[®]) and Pharmacy Quality Alliance (PQA) measures and report that information to CMS during the May and June timeframe. Many issuers who are eligible to submit quality improvement strategies, rely on clinical measure data when reporting on targets and measures in support of their strategy. Many of the HEDIS[®] and PQA measures, included in the QRS and submitted for the QIS, require issuers to perform reviews of patients' medical records or to obtain information directly from physician offices. In addition, each year QHP issuers contract with HHS- approved survey vendors to administer the QHP Enrollee Survey to assess experience of enrollees with their QHPs and submit the results to CMS.

Given the challenges healthcare providers are facing responding to the COVID-19 virus, we are not continuing with this year's data collection and reporting efforts as that may divert physician offices from caring for patients, as well as jeopardize the health and safety of QHP issuer staff and survey vendor staff. As a result, effective immediately, CMS is exercising enforcement discretion to adopt a temporary policy of relaxed enforcement and is directing all eligible QHP issuers to discontinue the collection of clinical quality measure data and survey measure data that would normally be reported between May and June 2020.² This enforcement discretion policy includes discontinuation of reporting for the QRS and QHP Enrollee Survey for display as quality ratings on Exchange websites beginning during the 2021 Open Enrollment period for the individual market. In addition, this enforcement discretion policy also extends to upcoming reporting of QIS data, such that issuers eligible to submit QIS submissions are no longer required to make such submissions for the PY 2021 QHP certification period for participation in the Federally-facilitated Exchanges. We encourage states with State-based Exchanges to adopt a similar approach for QIS submission requirements by their respective QHP issuers for the PY 2021 QHP

¹ Marketplace Quality Initiatives information available at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/ACA-MQI/ACA-MQI-Landing-Page>

² See the Quality Rating System and QHP Enrollee Experience Survey: Technical Guidance for 2020 available at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/ACA-MQI/ACA-MQI-Landing-Page>

certification period. CMS is quickly working to ensure that these changes do not affect QHP certification for PY2021 and will issue further guidance on the display of quality ratings beginning during the 2021 Open Enrollment period for the individual market. CMS encourages QHP issuers to continue to use quality measures, QIS information and survey measure data for internal quality improvement purposes.

We believe this guidance is a statement of agency policy not subject to the notice and comment requirements of the Administrative Procedure Act (APA).³ For the same reasons explained above, CMS additionally finds that, even if this guidance were subject to the public participation provisions of the APA, prior notice and comment for this guidance is impracticable and contrary to the public interest, and there is good cause to issue this guidance without prior public comment and without a delayed effective date.⁴

³ 5 U.S.C. § 553(b)(A).

⁴ 5 U.S.C. § 553(b)(B) & (d)(3).