



Frequently Asked Questions (FAQs) for Federally Facilitated Exchange (FFE) 2015 Benefit Year and State-Based Exchanges (SBEs) 2014 Benefit Year CMS Desk Audits

FAQ #1

Category: Desk Audit File

Question: Should the data reported in the desk audit file reflect what is in the issuers' systems today (i.e., reflect current information) or should it reflect data as of the date of the final, restated Enrollment and Payment Data Workbook (EPDW) (e.g., November 2016)?

Answer: The enrollment and payment data reported in the desk audit file should be a current snapshot of what is in the issuer's systems today (i.e., the current, most accurate effectuated enrollment and payment data, inclusive of any changes such as Health Insurance Caseworker System (HICS) case IDs, retroactive adjustments, etc.).

FAQ #2

Category: Desk Audit File

Question: Should the enrollment and payment data reported in the desk audit file be prorated?

Answer: 2014 benefit year audits: There were no proration requirements for the 2014 benefit year; therefore, the premium and Advanced Payments of the Premium Tax Credit (APTC) amounts reported in the desk audit file should only be prorated if the data reported in the final, restated 2014 benefit year EPDW was prorated. The count of members in the policy reported in the desk audit file should not be prorated.

2015 benefit year audits: There were proration requirements for the 2015 benefit year; therefore, the premium and APTC amounts reported in the desk audit file should be prorated. The count of members in the policy reported in the desk audit file should not be prorated.

FAQ #3

Category: Desk Audit File

Question: Should the benefit year start date (field 10) and benefit year end date (field 11) reported in the desk audit file be the same for each 01 record or should the dates reflect the month of coverage associated with each 01 record?

Answer: The benefit year start and end dates reported for each 01 record reported in the desk audit file should reflect the entire period of coverage associated with the subscriber's enrollment in the qualified health plan (QHP). The dates should be the same for each 01 record associated with the enrollment. For example, if a subscriber's enrollment in the QHP is effective from 01/01/2015 through 09/30/2015, there should be nine 01 records and each 01 record should have a benefit year begin date of 20150101 and a benefit year end date of 20150930.

FAQ #4

Category: Desk Audit File

Question: Can the issuer-assigned subscriber ID (field 6) be reported in the issuer-assigned policy ID (field 8) of the desk audit file if issuer-assigned policy IDs were not maintained in the issuer's systems?

Answer: Issuers can report the issuer-assigned subscriber ID in the issuer-assigned policy ID field of the desk audit file if a separate policy ID was not maintained in the system.

FAQ #5

Category: Desk Audit File

Question: How should grace periods be reported in the desk audit file?

Answer: The desk audit file should only include enrollment and payment data for the first month of an exhausted grace period. For example, if a subscriber's enrollment was effectuated in January, but they did not submit payment for February through April, the desk audit file should only include enrollment and payment data for January and February.

FAQ #6

Category: Electronic File Transfer (EFT) Process

Question: What is the file naming convention used for submitting audit documentation via EFT?

Answer: The file naming convention that should be used to send files is the following:

File Name:

<TPID>.OPR.AUDIPD.DYYMMDD.THHMMSSmmm.P.IN

Example:

123456789. OPR.AUDIPD.D180430.T123450000.P.IN

Note: The issuer documentation should be added to a zip file and the zip file should be renamed with a .IN file extension using the file naming convention show above where YYMMDD (YY=Year, MM=Month, DD=Day) is the current date and HHMMSSmmm (HH=Hour, MM=Minute, SS=Second, mmm=Millisecond where Milliseconds can be entered as "000") is the time.

FAQ #7

Category: EFT Process

Question: During the EFT testing process, are we required to submit the test APTC/Cost-sharing Reduction (CSR) Desk Audit File in a zip file? During the audit process, are we required to submit the audit documentation outlined in Attachment A (Documentation Request List) in a zip file?

Answer: In both the EFT testing process and the audit file transmission process, we recommend and prefer that the documentation be submitted in a zip file using the predefined file naming convention (<TPID>.OPR.AUDIPD.DYYMMDD.THHMMSSmmm.P.IN). However, if this is not possible, unzipped files using the same pre-defined file naming convention will be accepted.

FAQ #8

Category: EFT Process

Question: What EFT user ID should be used for purposes of EFT testing and audit documentation submissions?

Answer: Issuers should use their existing Marketplace EFT user ID that has been used in the past for submitting documentation such as CSR reconciliation files, 1A files and reconciliation inbound (RCNI) files. A new EFT user ID will not be required for purposes of EFT testing or audit documentation submissions.

FAQ #9

Category: EFT Process

Question: Will issuer receive notification once a file is successfully transmitted via EFT?

Answer: Issuers will not receive summary reports and/or error logs in their EFT folder. Issuers should send an email containing the name of the submitted file to the auditor's designated email inbox, so they can verify and confirm receipt. Issuers will receive an email from the auditor once the file has successfully been received.

FAQ #10

Category: EFT Process

Question: Who should issuers contact for help if experiencing technical difficulties with the EFT submission process?

Answer: Issuers should send an email to the auditor's designated email inbox, and they will coordinate internally and/or with CMS to resolve any technical issues or difficulties.

FAQ #11

Category: Documentation Requests

Question: For the policy level documentation (documentation request no. 4), should proof of payment for every month of enrollment be submitted?

Answer: For documentation request no. 4a, issuers should submit de-identified policy level documentation that supports the premium and APTC amounts for each month of enrollment during the benefit year. This could include screenshots from the enrollment system, actual monthly invoices that are sent to the subscriber, or any other documentation that includes, at a minimum, information about the period of coverage and the corresponding premium and APTC amounts. For documentation request no. 4b, issuers should submit de-identified documentation that shows that the enrollment for the subscriber was actually effectuated (i.e., that the subscriber paid the full amount of the total premium for which they were responsible during the first month of enrollment). This could include documentation such as a payment receipt, paid invoice, screenshot of a check, billing statement, etc. Proof of payment for the first month of enrollment only is required. Documentation submitted to fulfill request 4a may be sufficient to fulfill request 4b so long as it includes information that substantiates the receipt of the initial, full premium payment.

FAQ #12

Category: State-based Exchange (SBE) 2014 Benefit Year Audits

Question: For 2014 benefit year audits of SBE issuer submitters (i.e., issuers that submitted on their own behalf) and issuers in SBE submitter states (i.e., states that submitted the EPDW on behalf of the issuers), should the desk audit file be created based on data from the issuer's systems or based on data from the SBE's systems?

Answer: For both SBE issuer submitters and issuers in SBE submitter states, the data reported in the desk audit file should be an extract of the current, effectuated enrollment and payment data from the issuer's systems of record. The issuer can coordinate with the SBE as needed on this data submission. This audit is the first opportunity to review the issuer's data in SBE submitter states. We understand there may be discrepancies between the SBE data and issuer data and coordination with the SBE and issuer may be required to determine root causes and resolution.

FAQ #13

Category: SBE 2014 Benefit Year Audits

Question: For 2014 benefit year audits of SBE issuer submitters and issuers in SBE submitter states, should the Attestation (documentation request no. 3) be completed and signed by the SBE or the issuer?

Answer: For both SBE issuer submitter states and issuers in SBE submitter states, the Attestation should be completed and signed by the issuer.
