



Distributed Data Collection (DDC) for Reinsurance and Risk Adjustment Webinar Series Frequently Asked Questions

Frequently Asked Questions (FAQs) #2

Released Date: July 15, 2013

Data Submission

Enrollment

Q1. When will CMS provide the file layouts and specifications for the inbound enrollment, medical claim, and pharmacy claim files?

A1. The webinar scheduled for May 8 included information on the enrollment submission file layout and specifications, while the webinar held on May 22 included information on the medical and pharmacy submission layouts.

Q2. If there are any rejected records in Enrollee, Medical Claims, or Pharmacy claims files, does the whole file reject or only those records reject?

A2. In accordance with Interface Control Document, an entire file will be rejected only if the header fails or if all issuer level sections fail. If a single record fails verification, then only that record would be rejected. For further clarification on rejections, see the Business Rules document related to hierarchical rules (available in the REGTAP library).

Q3. Please describe the Plan ID used for Edge Server submissions?

A3. Both a HIOS (Health Insurance Oversight System) ID and Plan ID are required Edge Server data elements. The HIOS ID identifies the issuer and the Plan ID is an enumerator for each plan that is tied to the HIOS ID. Plan IDs will be assigned in HIOS.

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Q4. For members with Cost Sharing Reductions (CSRs) that change month-to-month, how is that reflected in the Edge Server submission?

A4. Only the CSR level will be captured in the Edge Server data collection. CSR amount is not a data element. A change in CSR level is reflected in the Plan ID. Therefore, if the Plan ID changes, then an update to the enrollment file must be submitted. Remember, the enrollment file is a full replacement.

Q5. Is the Rating Area an enrollee-level attribute?

A5. The Rating Area Identifier is included in the enrollment period category of the Edge Server Enrollment Submission. [Reference: Interface Control Document (ICD), Enrollment Section (Table 9)]

Q6. When sending the same enrollee information with no modifications (no adds/drops/changes), what is expected on the enrollment period activity column?

A6. Enrollment files are complete replacement files. Therefore, all information needs to appear each time the file is submitted regardless of modifications, or the record will be inactivated and will not be included for risk adjustment and reinsurance. If there is no change to the enrollment from the original submission, then the enrollment period activity indicator would remain consistent with the original submission along with all the other data elements. If there is a change to the enrollee, and thereby the enrollment status, a new enrollment period would need to be included on the enrollment file. For example: In January, an enrollee is submitted with enrollment period activity indicator 021028 (initial issuance of policy). In February, if there was no change to the enrollee, the same enrollment period information would be submitted, including the enrollment period indicator 021028. If in July, a dependent was added, a second enrollment period would be added to the subscriber enrollee and would include the enrollment activity indicator 021EC (addition of member to existing plan).

Q7. Can you provide more information on the 'rating area' data element?

A7. States determine the number of rating areas. Therefore, the rating area data element must be consistent with the rating area assigned for the Plan ID within a State.

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- Q8. Please provide additional clarification regarding the Premium Amount such as is this the amount the member pays per month or the amount the plan collects per month (including any subsidy)?**
- A8. The premium amount is the total premium for the policy, including the amount of premium charged to the enrollee or other responsible party and the APTC amount. If the monthly premium amount changes, then a new enrollment period should be included when the next replacement enrollment file is submitted.
- Q9. Does the order of the Enrollee coverage segment matter (for instance, must 1/1/14 - 3/31/14 be submitted before 4/1/14 - 5/31/14)?**
- A9. No. The order in which the enrollment periods appear on the file is not significant.
- Q10. How will CMS determine that a member is enrolled in a plan on the individual or SHOP market versus some other non-exchange (marketplace) health plan?**
- A10. The plan ID identifies the plan in which an individual is enrolled. The last two positions of that identifier will indicate whether the plan is offered on or off the Exchange (marketplace). In either case, the plan must be registered in HIOS and have a HIOS-assigned ID.
- Q11. During the April 8 webinar on Slide 29, is the unique issuer ID assigned by HIOS referring to the Health Plan ID (HPID)?**
- A11. No, HPID is a Health Plan Identifier and is different than the HIOS (Health Insurance Oversight System) ID. HIOS IDs and Plan IDs are required Edge Server data elements. The HIOS ID identifies the issuer and the Plan ID is an enumerator for each plan that is tied to the HIOS ID. Plan IDs will be assigned in HIOS.
- Q12. Regarding the enrollee file, what is the time period for enrollment data and do issuers reset every January and stop submitting the previous year's enrollment periods, or does the file keep growing year after year?**
- A12. HHS/CMS plans to evaluate the cut off period for submission of enrollment period data related to each calendar year. HHS/CMS does anticipate that, at least through the data submission deadline in 2015, 2014 enrollments will be required to be submitted. We will determine whether further submission of that data would be necessary after that deadline.

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Q13. Can an enrollee be the subscriber for the first half of the year and then a member under their spouse's plan for the remainder of the year under the same masked enrollee identifier?

A13. Yes. The change for the enrollee would be at the enrollment period level.

Q14. In previous webinars that discussed Edge Server performance, HHS indicated that large issuers should upload files more frequently than quarterly. What is the performance concern with the enrollment file since this is a full replacement file?

A14. Issuers may wish to maintain the most current statement of enrollment on their Edge Servers, and therefore may wish to use a monthly submission. Regardless of the enrollment file decision, good data management would suggest that large issuers should submit claims data more frequently.

Q15. Will the enrollment period activity definitions change over time (additional values added)?

A15. There is currently no plan to change the definitions of these values. If the definitions of the Enrollment Period Activity values change, then guidance will be provided to issuers.

Q16. What coverage end date should issuers use for enrollees who have not terminated?

A16. In accordance with the Edge Server Business Rules, Section 5.5 (available in the REGTAP library), the Edge Server will accept open ended enrollment periods. However, CMS recommends using the last date a premium rate is effective for a policy when developing enrollment period end dates.

Q17. Do issuers include null enrollments where Effective Date equals Termination Date in Edge Server Enrollment Submissions?

A17. Issuers do not need to include null enrollments where the start and end dates of enrollment are equal.

Q18. Can an individual be enrolled in a small group plan and an individual plan at the same time?

A18. Yes. Enrollment in a small group plan and an individual plan at the same time is a condition in which enrollment periods could overlap.

Q19. Do issuers exclude enrollees who are age 65 or over who are covered by Medicare?

A19. There is no requirement to exclude enrollees from Edge Server data submission who are age 65 or over. Medicare eligible individuals may choose to have coverage in either the individual or small group market.

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Edge Server Operations

Roles and Responsibilities

- Q20. Are Edge Servers required for issuers in states that are not Federally-Facilitated Exchanges (FFE)s, but rather State-Based Exchanges (SBE)s such as New York?**
- A20. The Edge Server supports the reinsurance and risk adjustment programs which are both inside and outside of the Exchange (now referred to as the Marketplace). If HHS/CMS operates either the risk adjustment or reinsurance programs, or both for a state, then an Edge Server is required.

Edge Server Specifications

Hardware

- Q21. Is it required to use Red Hat Enterprise Linux, or can an issuer use a Microsoft Windows Server?**
- A21. Currently, the Edge Server only supports Red Hat Enterprise Linux.

Data Maintenance

- Q22. What is the expected SLA for the Edge Server, the OLA for the combined software and hardware stack, and does CMS have guidelines around response times and potential down time escalations?**
- A22. Requirements regarding maintenance windows have not been determined at this time.

Other

- Q23. Does HHS plan to conduct a webinar to demonstrate how the Edge Server application works and how it will be managed?**
- A23. During provisioning, set-up and during submission of test data, the issuer will have the opportunity to better understand how the software operates. HHS/CMS is not planning a separate demo at this time.



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Q24. Are the questions documented during the webinars available with other materials?

A24. Yes, questions and answers are being documented. You may find the documented questions and associated responses in the REGTAP Library.

Q25. How will the operating system be distributed?

A25. The operating system will be distributed as part of the provisioning process. As indicated in the Welcome Packet on page 2 (available in the REGTAP Library), provisioning is the process of overlaying the server operating system and deploying HHS/CMS software, database tables, reference tables and proper server configurations.

Q26. Will there be any further guidance or instructions on the Edge Server Storage Calculator or can additional questions be submitted?

A26. At this time, HHS/CMS does not plan to provide additional instructions on the Edge Server Storage Calculator. Questions can be submitted to registrar@REGTAP.info.

Q27. Why are the minimum requirements for an Edge Server so much for a small issuer (1TB for data and 200GB for operating system)?

A27. The recommended minimum requirement for the Edge Server provides for sufficient data storage for three (3) years of production data.