

# Health Insurance Oversight System (HIOS)

## RBIS Data Extract ICD



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## Revision Log

Version #	Revision Date	Approved by	Approval Date	Description of Changes
00.00.01	07/06/2015	Mithouna Mounkhaty		Rebranded to SBD2 and baselined.
00.00.02	07/06/2015	Sreedhar Tummala Danielle Cox		Updated Section 5.2.2.2 and Section 5.2.2.11 based on MIDAS comments.
00.00.03	07/06/2015	HIOS QA Team		QA Team Review.
00.01.00	07/06/2015	Sreedhar Tummala Danielle Cox		Delivered to MIDAS.
01.00.00		HIOS QA Team		Baselined.
01.00.01	09/08/2015	Danielle Cox		Updates for 2016 Data Collection changes.
01.00.02	09/18/2015	HIOS QA Team		QA review and 508 validation.
01.01.00	09/21/2015	Danielle Cox		Delivered to MIDAS.
01.01.01	09/24/2015	Danielle Cox		Updates based on internal testing results.
01.01.02	10/01/2015	HIOS QA Team		QA Review and 508 Validation.
02.00.00	10/01/2015	HIOS QA Team		Rebaselined.
02.00.00	10/05/2015	Danielle Cox		Delivered to MIDAS.

## 1 Purpose of Interface Control

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This Interface Control Document (ICD) documents and tracks the necessary information required to effectively define the Rate and Benefits Information System's (RBIS) interface for consuming RBIS Data.

The purpose of this ICD is to allow external sources to consume RBIS Data.

## 2 Introduction

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This Interface Control Document (ICD) describes the available RBIS data files, the structures surrounding the files, and the consumers of the files.

This ICD specifies the interface requirements to be met by the participating systems. It describes the concept of operations for the interface, defines the message structure and protocols that govern the interchange of data, and identifies the communication paths along which the data are expected to flow.

## 3 Overview

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The extract is scheduled to run after the completion of each Interim and Final Refresh. RBIS will extract all of the data from the tables and generate one file for the data from each table. The data extract contains no personal identification information (PII) requiring special handling.

The Interim Refresh files will only contain plans that have been published and are available on Finder.Healthcare.gov. A subset of the plans published may be removed as part of Final Refresh if they are determined to no longer meet the criteria for publication.

The Final Refresh files will contain all plans regardless of whether they were published or not. These files represent the final picture of RBIS after the submission period has ended.

The following RBIS data will be available for external partners to consume:

- State Rating Areas
- Rates
- Business Rules
- Service Area
- Insurance Plan
- Insurance Plan Benefits
- Insurance Plan Variant
- Insurance Plan Variant SBC Scenario
- Insurance Plan Variant Deductible/Maximum Out of Pocket Limit
- Insurance Plan Benefit Cost Share

## 4 Assumptions/Constraints/Risks

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### 4.1 Assumptions

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The structure and content of the interface is not specific to any one external partner.

### 4.2 Constraints

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The files will be generated only at the completion of each Interim and Final Refresh to provide CCIIO with a better understanding of the plan data available to be published to Finder.Healthcare.gov.

### 4.3 Risks

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N/A

## 5 Interface Requirements

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### 5.1 Interface Overview

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RBIS will create the data files with a complete data set. One file will be sent for each type of data. A single zip file containing the data files will be used as the delivery method.

The following interface guidelines apply:

- RBIS will create one data file for each data table included in RBIS Data.
- Records are in Pipe-delimited format (Insurance Plan and Rates files will be zipped before being included in the final zip file).
- The files delivered will include a refresh of RBIS data.

### 5.2 Requirements for RBIS Data Files

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RBIS will deliver the following files in pipe-delimited format:

Table Name	Table Description
State Rating Areas	This includes information about rating areas.
Rates	This includes information about rates for various subscriber types.
Business Rules	This includes information about business rules used to determine rates and eligibility.
Service Area	This includes information about service areas.
Insurance Plan	This includes information about the plan.
Insurance Plan Benefits	This includes information about benefits associated with the plan.
Insurance Plan Variant	This includes information about the plan's cost sharing.
Insurance Plan Variant SBC Scenario	This includes information about the plan's coverage for certain scenarios.

Table Name	Table Description
Insurance Plan Variant Deductible/Maximum Out of Pocket Limit	This includes information about the plan's deductibles and maximum out of pocket limits.
Insurance Plan Benefit Cost Share	This includes information about the plan's cost sharing for each specific benefit.

## 5.2.1 Field Type Formats

### 5.2.1.1 Field Types

Data Type	Length
Varchar	Variable Character Field
Date	Date/Time Field
Money	Currency Field
Int	Integer (Number) Field

### 5.2.1.2 Character Based Fields

Data Type	Length	Storage Size	Max Characters	Unicode
char	Fixed	Always <i>n</i> bytes	8,000	No; each character requires 1 byte
varchar	Variable	Actual length of entry in bytes	8,000	No; each character requires 1 byte
nchar	Fixed	Twice <i>n</i> bytes	4,000	Yes; each character requires 2 bytes
nvarchar	Variable	Twice actual length of entry in bytes	4,000	Yes; each character requires 2 bytes

### 5.2.1.3 Numbers Based Fields

Data Type	Length	Storage Size	Max Characters	Unicode
tinyint	0	255	1 byte	tinyint
smallint	-32,768	32,767	2 bytes	smallint
int	-2,147,483,648	2,147,483,647	4 bytes	int
bigint	-9,223,372,036,854,775,808	9,223,372,036,854,775,807	8 bytes	bigint

### 5.2.1.4 Date/Time Based Fields

Data Type	Description
2014-05-28 10:43:04.810	Date/Time

Data Type	Description
2014-05-28 10:43:04.8110704	Precise Date/Time

### 5.2.1.5 Money Based Fields

Data Type	Length	Storage Size	Max Characters	Unicode
smallmoney	-214,748,3647	214,748,3647	4 bytes	smallmoney
money	-922,337,203.685,477.5807	922,337,203.685,477.5807	8 bytes	money

## 5.2.2 Record Layout

### 5.2.2.1 Control File

Field Name	Field Description	Field Type	Field Length
Filename	A field that lists the file name of the data file that is included in the feed.	Varchar	20
Records	A field that lists the number of records included in the data file.	Int	
Fieldname	A field that is included in the data file that will be summation (non-monetary integer) or a hash (monetary integer) total.	Varchar	100
Hash	The summation or hash total for the field that was included in the control file record.	Int	

### 5.2.2.2 Hash Value Definitions

File Name	Hash Value Field
RBIS.INSURANCE_PLAN	HPID
RBIS.INSURANCE_PLAN_BENEFITS	LIMIT_QUANTITY
RBIS.INSURANCE_PLAN_BENEFIT_COST_SHARE	MULTIPLE_IN_NETWORK_TIERS_CODE
RBIS.INSURANCE_PLAN_VARIANT	AV_CALCULATOR_OUTPUT_NUMBER
RBIS.INSURANCE_PLAN_VARIANT_DDCTBL_MOOP	LEVEL_OF_COVERAGE_TYPE_CODE
RBIS.INSURANCE_PLAN_VARIANT_SBC_SCENARIO	SBC_COVERAGE_DEDUCTIBLE_AMOUNT
RBIS.INSURANCE_PLAN_BASE_RATE_FILE1	HIOS_ISSUER_ID
RBIS.INSURANCE_PLAN_BASE_RATE_FILE_20_21_22_24_25_26	HIOS_ISSUER_ID
RBIS.INSURANCE_PLAN_BASE_RATE_FILE23	HIOS_ISSUER_ID
RBIS.INSURANCE_PLAN_BASE_RATE_FILE_27_28	HIOS_ISSUER_ID
RBIS.INSURANCE_PLAN_BASE_RATE_FILE29	HIOS_ISSUER_ID

File Name	Hash Value Field
RBIS.INSURANCE_PLAN_BASE_RATE_FILE3	HIOS_ISSUER_ID
RBIS.INSURANCE_PLAN_BASE_RATE_FILE4	HIOS_ISSUER_ID
RBIS.INSURANCE_PLAN_BASE_RATE_FILE5	HIOS_ISSUER_ID
RBIS.INSURANCE_PLAN_BASE_RATE_FILE6	HIOS_ISSUER_ID
RBIS.INSURANCE_PLAN_BASE_RATE_FILE7	HIOS_ISSUER_ID
RBIS.INSURANCE_PLAN_BASE_RATE_FILE8	HIOS_ISSUER_ID
RBIS.INSURANCE_PLAN_BASE_RATE_FILE9	HIOS_ISSUER_ID
RBIS.ISSUER_BUSINESS_RULE	HIOS_ISSUER_ID
RBIS.ISSUER_SERVICE_AREA	HIOS_ISSUER_ID
RBIS.STATE_RATING_AREA	RATING_AREA_ID

### 5.2.2.3 State Rating Areas

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
State	A specific designation for identification purposes assigned to a specific state within a sovereign nation.	Varchar	100	N	Y
Rating Area ID	Displays a rating area ID for a specific plan.	Number		N	Y
Market	A code conveying an understanding of identification of a kind of insurance risk pool. Individual Small Group	Varchar	20	N	Y
County	Name of county found in the U.S.	Varchar	256	Y	One of the following fields marked in conjunction with above columns labeled 'Y' makes a record unique: County MSA Three Digit Zip FIPS

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
MSA	A specific value representing a metropolitan statistical geographic area.	Varchar	3	Y	One of the following fields marked in conjunction with above columns labeled 'Y' makes a record unique: County MSA Three Digit Zip FIPS
Three Digit Zip	A destination Sectional Center Facility (SCF) is a Processing and Distribution Center (P&DC) of the United States Postal Service (USPS) that serves a designated geographical area defined by one or more three-digit ZIP Code prefixes.	Varchar	3	Y	One of the following fields marked in conjunction with above columns labeled 'Y' makes a record unique: County MSA Three Digit Zip FIPS
FIPS	A 5 digit code that identifies counties in the U.S.	Varchar	5	Y	One of the following fields marked in conjunction with above columns labeled 'Y' makes a record unique: County MSA Three Digit Zip FIPS

#### 5.2.2.4 Rates

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
Plan ID	A specific value conveying an understanding of identification of an insurance plan within the RBIS database.	Varchar	14	N	Y
Rate Effective Date	Date when a rate goes into effect for a plan.	Date		N	Y
Rate Expiration Date	Date when a rate is no longer available for a plan.	Date		N	Y
Age	Displays the age groups for Individual rates.	Varchar	20	N	Y
Tobacco	A specific value conveying an understanding of identification of a smoking (tobacco use) category of an individual person.	Varchar	50	N	
Rating Area ID	Displays a rating area ID for a specific plan.	Varchar	100	N	Y

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
Individual Rate	Displays the dollar amount rate for an individual.	Money	8	N	
Individual Tobacco Rate	Displays the tobacco dollar amount rate for an individual.	Money	8	Y	
Couple	Displays the dollar amount rate for a couple.	Money	8	Y	
Primary Subscriber and One Dependent	Displays the dollar amount rate for a primary subscriber and one dependent.	Money	8	Y	
Primary Subscriber and Two Dependents	Displays the dollar amount rate for a primary subscriber and two dependents.	Money	8	Y	
Primary Subscriber and Three Dependents	Displays the dollar amount rate for a primary subscriber and three dependents	Money	8	Y	
Couple and One Dependent	Displays the dollar amount rate for a couple and one dependent.	Money	8	Y	
Couple and Two Dependents	Displays the dollar amount rate for a couple and two dependent.	Money	8	Y	
Couple and Three Dependents	Displays the dollar amount rate for a couple and three dependent.	Money	8	Y	
HIOS Issuer ID	System Identifier used to signify an insurance company providing insurance in a specific state.	Number	5	N	
Market Coverage	A specific value conveying an understanding of identification of a kind of insurance marketplace. Individual Small Group	Varchar	20	N	

### 5.2.2.5 Business Rules

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
HIOS Issuer ID	System Identifier used to signify an insurance company providing insurance in a specific state.	Number	5	N	Y
Market	A specific value conveying an understanding of identification of a kind of insurance marketplace. Individual Small Group	Varchar	20	N	Y

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
Product ID	10 digit alphanumeric that identifies a product.	Varchar	10	Y	One of the following fields marked in conjunction with above columns labeled 'Y' makes a record unique: Product ID Plan ID Standard Component
Plan ID Standard Component	A specific value conveying an understanding of identification of an insurance plan within the RBIS database.	Varchar	14	Y	One of the following fields marked in conjunction with above columns labeled 'Y' makes a record unique: Product ID Plan ID Standard Component
How are rates for contracts covering two or more enrollees calculated	Determines if a returned rate is the sum of individual rates or if a group rate is available.	Varchar	256	N	
Number of underage dependents used to quote a two parent family	A specific value conveying an understanding of the maximum number of children used to rate a policy.	Varchar	256	N	
Number of underage dependents used to quote a single parent family	A specific value conveying an understanding of the maximum number of children used to rate a policy.	Varchar	256	N	
Is there a maximum age for a dependent	A specific value conveying an understanding of the maximum age for which an insurance plan could be issued for a child.	Varchar	2	N	
Number of children used to quote a children only contract	A specific value conveying an understanding of the maximum number of children used to rate a policy.	Varchar	256	N	
Are domestic partners treated the same as secondary subscribers	Defines the rules for treating a domestic partner when determining if a couple is eligible for a rate.	Varchar	256	N	

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
Are same sex partners treated the same as secondary subscribers	Defines the rules for treating a same sex partner when determining if a couple is eligible for a rate.	Varchar	256	N	
How is age determined for rating and eligibility purposes	A specific value conveying an understanding of identification of the method used to determine the person's age at the time of an application.	Varchar	256	N	
How is tobacco status determined for subscribers and dependents	A specific value conveying an understanding of identification of the method used to determine the tobacco status for subscribers and dependents.	Varchar	20	N	
Allowed relationships between primary and dependent	Displays allowed relationships between a primary and a dependent.	Varchar	4000	N	

### 5.2.2.6 Service Area

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
HIOS Issuer ID	System Identifier used to signify an insurance company providing insurance in a specific state.	Number	5	N	Y
Service Area ID	A string that establishes an external label for a service area. Formatted as a state abbreviation followed by a set of values making the label unique across the states.	Varchar	20	N	Y
Service Area Name	The Name given to a Service Area.	Varchar	256	N	
State	A specific designation for identification purposes assigned to a specific state within a sovereign nation.	Varchar	2	N	One of the following fields marked in conjunction with above columns labeled 'Y' makes a record unique: State County Name Partial County Service Area Zip Code(s)

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
County Name	Name of county found in the U.S.	Varchar	256	N	One of the following fields marked in conjunction with above columns labeled 'Y' makes a record unique: State County Name Partial County Service Area Zip Code(s)
Partial County	An indicator of whether the service area covers a partial county. Yes No	Varchar	20	N	One of the following fields marked in conjunction with above columns labeled 'Y' makes a record unique: State County Name Partial County Service Area Zip Code(s)
Service Area Zip Code(s)	A specific value intended to capture the USPS identifier for a geographic area within a state.	Varchar	MAX	Y	One of the following fields marked in conjunction with above columns labeled 'Y' makes a record unique: State County Name Partial County Service Area Zip Code(s)
Partial County Justification	The justification given for creating a partial-county region for inclusion in a Service Area.	Varchar	4000	Y	

### 5.2.2.7 Insurance Plan

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
HIOS Plan ID	A specific value conveying an understanding of identification of an insurance plan within the RBIS database.	Varchar	14	N	Y
Plan Marketing Name	Name of Plan seen by the public.	Varchar	256	N	

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
HIOS Product ID	A specific value intended to capture business meaning, but having no computational value. Identifies an insurance plan within the HIOS system.	Varchar	10	N	
Market Coverage	A specific value conveying an understanding of identification of a kind of insurance marketplace. Individual Small Group	Varchar	20	N	
Dental Only Plan	An indicator that determines if the plan is dental only. Yes No	Varchar	20	N	
HPID	The Health Plan Identifier (HPID) assigned to the insurance plan.	Number	10	Y	
Network ID	A physical designation of a health care provider network organization that is universal across the states, for identification purposes.	Varchar	6	N	
Service Area ID	A string that establishes an external label for a service area. Formatted as a state abbreviation followed by a set of values making the label unique.	Varchar	6	N	
Formulary ID	An identification of a formulary.	Varchar	6	N	
New\Existing Plan	An indicator that determines if the plan is new or already exists in the database. New Existing	Varchar	50	N	
Plan Type	A specific value conveying an understanding of identification of a kind of provider group is providing healthcare service for the insurance product. Indemnity HMO PPO EPO POS Other/Describe Dental Association	Varchar	20	N	

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
Level of Coverage	A specific value conveying an understanding of the number and quality of the benefits offered by a health insurance plan. Platinum Gold Silver Bronze Catastrophic	Varchar	256	N	
Unique Plan Design	An Indicator that displays if the plan has a unique plan design. Yes No	Varchar	20	N	
QHP\Non QHP	A specific value that identifies the exchange market type (On the Exchange, Off the Exchange) of health insurance plans. On the Exchange Off the Exchange Both	Varchar	256	N	
Notice Required for Pregnancy	Indicator to store yes/no for whether a pregnancy notice is required. Yes No	Varchar	20	N	
Is a Referral Required for Specialist	Indicates whether a referral to see a Specialist is required or not. Yes No	Varchar	20	N	
Specialist(s) Requiring a Referral	Contains the list of specialists requiring referrals.	Varchar	1000	Y	
Plan Level Exclusions	The list of exclusions to the insurance plan at the plan level, applies to all benefits.	Varchar	Max	Y	
Limited Cost Sharing Plan Variation Est Advanced Payment	Estimated amount of cost sharing reductions for eligible enrollees to be provided in the form of an advance payment to the issuer. This amount is estimated by the issuer. Applies to Indian plan variations described in Section 156.420(b)(2).	Money		Y	
Child Only Offering	A specific code conveying the Child only offering for a plan. Allows Adult and Child-Only Allows Adult-Only Allows Child-Only	Varchar	256	N	

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
Child Only Plan ID	The Plan Identifier for the child-only insurance plan that corresponds to this insurance plan.	Varchar	14	Y	
Wellness Program Offered	An indication of whether an insurance plan offers wellness programs according to Section 2705 of the Public Health Service Act. Yes No	Varchar	20	N	
Disease Management Programs Offered	The kinds of health maintenance or disease management programs (Asthma, heart disease, depression, diabetes, high blood pressure, high cholesterol, pain management, pregnancy) offered by an insurance. Asthma Heart Disease Depression Diabetes High Blood Pressure High Cholesterol Pain Management Pregnancy High Blood Pressure & High Cholesterol Low Back Pain	Varchar	4000	Y	
EHB Apportionment for Pediatric Dental	The EHB Apportionment for Pediatric Dental.	Money	8	Y	
Guaranteed vs Estimated Rate	An indication of whether the rates for the insurance plan are guaranteed (True) or estimated (False). Guaranteed Rate Estimated Rate	Varchar	256	Y	
Maximum Coinsurance for Specialty Drugs	The maximum dollar value of coinsurance for specialty high-cost drugs.	Money	8	Y	
Maximum Number of Days for Charging an Inpatient Copay	The maximum number of days on which a patient can be charged a co-payment for an inpatient stay, if the insurance plan design charges inpatient stays by day.	Tinyint		Y	
Begin Primary Care Cost Sharing After a Set Number of Visits	The number of fully covered visits after which primary care cost sharing will begin.	Tinyint		Y	

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
Begin Primary Care Deductible\ Coinsurance After a Set Number of Copays	The number of primary care visits with co-payment after which all primary care visits will be subject to the deductible or maximum out of pocket limits.	Tinyint		Y	
Plan Effective Date	Date that a plan becomes open for enrollment.	Date		N	
Plan Expiration Date	Date that a plan becomes closed and no longer accepts new enrollments.	Date		N	
Out of Country Coverage	Indicates whether out of country coverage is provided for health services. Yes No	Varchar	20	N	
Out of Country Coverage Description	A descriptive text of various conditions under which out of country health services are provided.	Varchar	Max	Y	
Out of Service Area Coverage	Indicates whether out of service area coverage is provided. Yes No	Varchar	20	N	
Out of Service Area Coverage (Description)	A descriptive text of various conditions under which out of service area health services are provided.	Varchar	Max	Y	
National Network	Indicates whether the insurance plan is supported by a national network of health service provider companies. Yes No	Varchar	20	N	
Enrollment Payment URL	Displays the URL for site where payment can be made.	Varchar	256	Y	
Life Cycle Status Name	A specific name that conveys the current status of the plan. Example statuses are System Validated, Issuer Validated, Published, and Issuer Rejected.	Varchar	256	Y	
EHB Percent of Total Premium	Percentage from 0 to 100	Numeric	5, 2	N	
Does this plan offer Composite Rating	Yes No	Varchar	20	N	

### 5.2.2.8 Insurance Plan Benefits

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
HIOS Plan ID	A specific value conveying an understanding of identification of an insurance plan within the RBIS database.	Varchar	14	N	Y
Benefit	A specific name conveying an understanding of identification of a kind of health coverage.	Varchar	256	N	Y
EHB	An indicator of whether this is a federally mandated Essential health benefit. Yes No	Varchar	20	N	
State Mandate	An indicator of whether this is a state mandated health benefit. Yes No	Varchar	20	N	
Is This Benefit Covered	A specific name conveying an understanding of identification of a kind of insurance coverage for an insurance plan. Covered Not Covered	Varchar	256	N	
Quantitative Limit On Service	An indicator of whether there is a quantitative limit on the service provided by a health benefit. Yes No	Varchar	20	Y	
Limit Quantity	The numerical limit on the benefit (e.g., day or visit limits, dollar limits on services other than essential health benefits.).	Number	5	Y	
Limit Unit	A specific value conveying an understanding of identification of a kind of health care coverage of a benefit which has benefit limit cap.	Varchar	256	Y	
Minimum Stay	The minimum stay in hours for this benefit, if there is a limit.	Number	5	Y	
Exclusions	The list of services or diagnoses that are excluded from the benefit.	Varchar	Max	Y	
Explanation	Free text field to list any notes related to Benefit Explanation.	Varchar	Max	Y	

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
EHB Variance Reason	A specific value conveying an understanding of the explanation or justification for not using the EHB benefit, or for adding a new benefit, or for substituting another benefit for the EHB benefit. Asthma Heart Disease Depression Diabetes High Blood Pressure High Cholesterol Pain Management Pregnancy High Blood Pressure & High Cholesterol Low Back Pain	Varchar	256	Y	
Excluded from In Network MOOP	An indication whether the insurance plan health benefit cost share amount is excluded from the maximum out-of-pocket payment total. Yes No	Varchar	20	N	
Excluded from Out Of Network MOOP	An indication whether the insurance plan health benefit cost share amount is excluded from the maximum out-of-pocket payment total. Yes No	Varchar	20	N	

### 5.2.2.9 Insurance Plan Variant

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
HIOS Plan ID	A specific value conveying an understanding of identification of an insurance plan within the RBIS database.	Varchar	14	N	Y
Level of Coverage	A specific value conveying an understanding of the number and quality of the benefits offered by a health insurance plan. Platinum Gold Silver Bronze Catastrophic	Varchar	256	N	

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
CSR Variation Type	A specific value conveying an understanding of variations of the cost sharing options offered by a health insurance plan. Non-Exchange variant Exchange variant (no CSR) Zero Cost Sharing Plan Variation Limited Cost Sharing Plan Variation 73% AV Level Silver Plan CSR 87% AV Level Silver Plan CSR 94% AV Level Silver Plan CSR	Varchar	256	N	Y
Issuer Actuarial Value	The actuarial value (AV Value) generated manually for an insurance plan by the issuer. It is the percentage of total claims cost that the issuer will pay based on claims data and claims experience.	Varchar	256	Y	
AV Calculator Output Number	The actuarial value (AV Value) generated by the issuer via the AV Calculator for each applicable variant of the insurance plan. It is the percentage of total claims cost that the issuer will pay based on claims data and claims experience.	Decimal	5, 2	N	
Medical & Drug Deductibles Integrated	An indication of whether the insurance plan specifies that the medical and drug deductibles are combined into one deductible. Yes No	Varchar	20	N	
Medical & Drug Maximum Out Of Pocket Integrated	An indication of whether the insurance plan specifies that the medical and drug maximum out of pocket limits are combined into one limit. Yes No	Varchar	20	N	
Multiple In Network Tiers	An indicator of whether multiple tiers exist for In-Network (Tier1, Tier 2 etc...) in terms of cost share information. Yes No	Varchar	20	N	
1st Tier Utilization	The percentage value of the cost share amount that applies to Tier 1 level in a multi tiers In-Network cost share structure.	Varchar	256	Y	
2nd Tier Utilization	The percentage value of the cost share amount that applies to Tier 1 level in a multi tiers In-Network cost share structure.	Varchar	256	Y	
Plan Brochure	Displays the URL for a plan brochure.	Varchar	256	Y	

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
URL for Summary of Benefits and Coverage	Displays the URL for issuers SBC report.	Varchar	256	Y	
HSA Eligible	An indication that the insurance plan qualifies for a health savings account. Yes No	Varchar	20	N	
HSA\HRA Employer Contribution	An indication that the employer makes an HSA contribution to the employee's insurance savings account. Yes No	Varchar	20	Y	
HSA\HRA Employer Contribution Amount	The amount of money per employee that the employer organization contributes to the employee insurance coverage.	Money	8	Y	

### 5.2.2.10 Insurance Plan Variant SBC Scenario

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
Insurance Plan Identifier	A specific value conveying an understanding of identification of an insurance plan within the RBIS database.	Varchar	14	N	Y
Insurance Plan Variant Component Type Name	A specific name conveying an understanding of variations of the cost sharing options offered by a health insurance plan. Non-Exchange variant Exchange variant (no CSR) Zero Cost Sharing Plan Variation Limited Cost Sharing Plan Variation 73% AV Level Silver Plan CSR 87% AV Level Silver Plan CSR 94% AV Level Silver Plan CSR	Varchar	256	N	Y
SBC Coverage Name	A specific name conveying the type of coverage being considered for the SBC scenario. Maternity Diabetes	Varchar	256	N	Y
SBC Coverage Deductible Amount	The deductible amount due from the insured for SBC Coverage.	Money	8	N	

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
SBC Coverage Copayment Amount	The copayment amount due from the insured for SBC Coverage.	Money	8	N	
SBC Coverage Coinsurance Amount	The coinsurance amount due from the insured for SBC Coverage.	Money	8	N	
SBC Coverage Limit Amount	The maximum amount the insured would be liable for, for SBC Coverage.	Money	8	N	

### 5.2.2.11 Insurance Plan Variant Deductible/Maximum Out of Pocket Limit

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
Insurance Plan Identifier	A specific value conveying an understanding of identification of an insurance plan within the RBIS database.	Varchar	14	N	Y
Insurance Plan Benefit Metal Tier Type Name	A specific name conveying an understanding of the number and quality of the benefits offered by a health insurance plan. Platinum Gold Silver Bronze Catastrophic	Varchar	256	N	
Insurance Plan Variant Component Type Name	A specific name conveying an understanding of variations of the cost sharing options offered by a health insurance plan. Non-Exchange variant Exchange variant (no CSR) Zero Cost Sharing Plan Variation Limited Cost Sharing Plan Variation 73% AV Level Silver Plan CSR 87% AV Level Silver Plan CSR 94% AV Level Silver Plan CSR	Varchar	256	N	Y
Medical And Drug Deductibles Integrated	An indication of whether the insurance plan specifies that the medical and drug deductibles are combined into one deductible. Yes No	Varchar	20	N	
Maximum Out of Pocket \ Deductible Type	A specific name conveying the type of maximum out of pocket limit or the type of deductible.	Varchar	256	N	

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
Network Category Type Code	A specific value conveying an understanding of identification of a kind of cost to the insured. In Network Out-of-Network	Varchar	256	N	Y
Insurance Plan Individual Deductible Amount /Insurance Plan Annual Out Of Pocket Limit Amount	The amount of money allocated for the specific category of deductible.	Varchar	256	Y	
Insurance Plan Family Deductible Amount /Insurance Plan Annual Out Of Pocket Limit Amount Per Person	The amount of money allocated for the specific category of deductible. Family deductible and Maximum Out of Pocket Limit reported at a “Per Person” level.	Varchar	256	Y	
Insurance Plan Family Deductible Amount /Insurance Plan Annual Out Of Pocket Limit Amount Per Group	The amount of money allocated for the specific category of deductible. Family deductible and Maximum Out of Pocket Limit reported at a “Per Group” level.	Varchar	256	Y	
Insurance Plan Default Co-Insurance Amount	The default co-insurance amount.	Money	8	Y	
Level of Coverage Type Code	A specific name conveying an understanding of the number and quality of the benefits offered by a health insurance plan.	Tinyint		N	

### 5.2.2.12 Insurance Plan Benefit Cost Share

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
HIOS Plan ID	A specific value conveying an understanding of identification of an insurance plan within the RBIS database.	Varchar	14	N	Y
CSR Variation Type	A specific value conveying an understanding of variations of the cost sharing options offered by a health insurance plan.	Varchar	256	N	Y

Field Name	Field Description	Field Type	Field Length	Allows Null?	Key Field
Benefit	A specific name conveying an understanding of identification of a kind of health coverage.	Varchar	256	N	Y
Multiple In Network Tiers	An indicator of whether multiple tiers exist for In-Network (Tier1, Tier 2 etc...) in terms of cost share information. Yes No	Varchar	20	N	
Network Type	A specific value conveying an understanding of identification of a kind of cost to the insured. In Network In-Network Tier 2 Out-of-Network Combined In-Out of Network	Varchar	256	N	Y
Co payment	The copay amount for the health benefit tier interval.	Varchar	256	Y	
Co Insurance	The coinsurance amount for the health benefit tier interval.	Varchar	256	Y	
Multiple In Network Tiers Code	An indicator of whether multiple tiers exist for In-Network (Tier1, Tier 2 etc...) in terms of cost share information. 1 2	Tinyint		N	

## 6 Integrated Partner Requirements

This section details requirements based on each external partner that is accessing the RBIS data files.

### 6.1 CCIIO

#### 6.1.1 Constraints

RBIS’s responsibilities regarding this interface end upon delivering the file to CALT and notifying CCIIO.

#### 6.1.2 Functional Allocation

The following table describes the functional allocation for the RBIS-CCIIO data transfer.

RBIS-CCIIO	Functional Allocation
Owner	Function
RBIS/CGI	RBIS will create an extract upon completion of each Interim and Final Refresh. Files will be zipped into a single zip file and copied to the CMS approved location (CALT).
RBIS/CGI	RBIS will provide a timestamp on each record for each table so that new and/or changed records can be identified.
CCIIO	CCIIO will retrieve files from the CMS approved location (CALT).

#### 6.1.3 Data Transfer

RBIS will generate the data files using an automated process. RBIS will upload the files to the necessary location in CALT for CCIIO to access.

The files will be delivered in a .ZIP file that will include the data files.

#### 6.1.4 Security and Integrity

This integration does not require any security measures.

#### 6.1.5 Data Assembly Characteristics

The following table outlines the data assembly characteristics.

File	Description
Zip File	CCIIO will receive a zipped file containing the data files via CALT. The file naming standard for the zip file shall be the following:  The file naming format is FunctionCode.SourceCode.DXXXXXX.TXXXXXXXXX.  For example: CCIIO.RBIS.D141014.T123456789.P  “P” at the end identifies Production File and if it is “T” then it is a test file.

File	Description
	The datetime stamp refers to the Date and Time when the file was created and sent to CCIIO.
Data Files	<p>The naming standard for the pipe-delimited data file inside the zip file shall contain the table name concatenated with a timestamp value.</p> <p>FunctionCode.TABLENAME.datetime.dat</p> <p>For example, data source for the table RBIS.INSURANCE_PLAN, file name will be as follows:</p> <p>RBIS.INSURANCE_PLAN_yyyymmddhhmmss.dat</p> <p>.dat refers to the data file</p> <p>“yyymmddhhmmss” is the date timestamp when the file was created and sent to CCIIO.</p>

## 6.2 MIDAS

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### 6.2.1 Constraints

RBIS’s responsibilities regarding this interface end upon delivery of the file to the HP MFT process.

### 6.2.2 Functional Allocation

The following table describes the functional allocation for the RBIS-MIDAS data transfer.

RBIS-MIDAS	Functional Allocation
Owner	Function
RBIS/CGI	RBIS will create an extract upon completion of each Final Refresh. Files will be zipped into a single zip file and copied to the agreed upon location.
RBIS/CGI	RBIS will provide a timestamp on each record for each table so that new and/or changed records can be identified.
MFT/XOC	Setup transfer files to the agreed upon location in the HP/MFT server.
MIDAS/CACI	The files will be dropped in the agreed upon location in the HP/MFT server for MIDAS to consume.

### 6.2.3 Data Transfer

RBIS will generate the data files using an automated process. RBIS will use the HP MFT to transfer the files to MIDAS.

MIDAS will look for the files in the following location:

**Server:** CMSNAS\_CL01FS

**Directory: HIOOUT**

The files will be delivered in a .ZIP file that will include the data files and a control file.

**6.2.4 Security and Integrity**

This list provides RBIS-MIDAS data transfer security and integrity information:

- MFT will be responsible for handling all the security verification and the integrity for the data coming from RBIS.
- This integration does not require any additional security measures.

**6.2.5 Data Assembly Characteristics**

The following table outlines the data assembly characteristics. MIDAS should expect to receive 21 data files and one Control File.

File	Description
Zip File	<p>MIDAS will receive a zipped file containing RBIS data files and a control file upon completion of each Final Refresh. The file naming standard for the zip file shall be the following:</p> <p>The file naming format is FunctionCode.SourceCode.DXXXXXX.TXXXXXXXXX.</p> <p>For example: MID.RBIS.D141014.T123456789.P</p> <p>“P” at the end identifies Production File and if it is “T” then it is a test file.</p> <p>The datetime stamp refers to the Date and Time when the file was created and sent to MIDAS.</p>
Data Files	<p>The naming standard for the pipe-delimited data files inside the zip file shall contain the table name concatenated with a timestamp value.</p> <p>FunctionCode.TABLENAME.datetime.dat</p> <p>.dat refers to the data file. MIDAS should expect to receive three Data Files that have not been zipped:</p> <p>RBIS.STATE_RATING_AREA_yyyymmddhhmmss.dat                      RBIS.ISSUER_BUSINESS_RULE_yyyymmddhhmmss.dat                      RBIS.ISSUER_SERVICE_AREA_yyyymmddhhmmss.dat</p> <p>“yyymmddhhmmss” is the date timestamp when the file was created and sent to MIDAS.</p>
Insurance Plan and Rate Zip File	<p>The Insurance Plan and Rate files will be zipped within the Zip File due to size limits. The file naming standard for this Zip Files shall be the following;</p> <p>FunctionCode.TABLENAME.datetime.zip</p> <p>MIDAS should expect to receive two Zip Files;</p> <p>INSURANCE_PLAN_BASE_RATE_yyyymmddhhmmss.zip                      INSURANCE_PLAN_yyyymmddhhmmss.zip</p>
Insurance Plan Files	<p>The zipped Insurance Plan file will contain multiple Insurance Plan data files. The file naming standard for these files shall be the following:</p> <p>FunctionCode.TABLENAME.datetime.dat</p> <p>MIDAS should expect to receive six Insurance Plan data files.</p>

File	Description
	<p>RBIS.INSURANCE_PLAN_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_BENEFITS_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_VARIANT_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_VARIANT_SBC_SCENARIO_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_VARIANT_DDCTBL_MOOP_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_BENEFIT_COST_SHARE_YYYYMMDDHHMMSS.DAT</p>
Rate Files	<p>The zipped Rate file will contain multiple Rate data files. The file naming standard for these files shall be the following:</p> <p>FunctionCode.TABLENAME.FileNumber.datetime.dat</p> <p>The FileNumber indicates the first number of the Issuer ID, for example, File1 would include all Issuers with an Issuer ID starting with "1".</p> <p>MIDAS should expect to receive 12 Rate data files:</p> <p>RBIS.INSURANCE_PLAN_BASE_RATE_FILE1_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_BASE_RATE_FILE3_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_BASE_RATE_FILE4_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_BASE_RATE_FILE5_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_BASE_RATE_FILE6_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_BASE_RATE_FILE7_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_BASE_RATE_FILE8_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_BASE_RATE_FILE9_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_BASE_RATE_FILE_20_21_22_24_25_26_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_BASE_RATE_FILE23_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_BASE_RATE_FILE_27_28_YYYYMMDDHHMMSS.DAT</p> <p>RBIS.INSURANCE_PLAN_BASE_RATE_FILE29_YYYYMMDDHHMMSS.DAT</p>
Control File	<p>The Zip File will also contain one Control file. The file naming standard for this file shall be the following:</p> <p>FunctionCode.control.datetime.txt</p> <p>For example, RBIS.control.YYYYMMDDHHMMSS.TXT</p>

## 7 Acronyms

Table 7-1: Acronyms

Acronym	Literal Translation
<b>AV</b>	Actuarial Value
<b>CCIIO</b>	Center for Consumer Information and Insurance Oversight
<b>CMS</b>	Centers for Medicare & Medicaid Services
<b>CSR</b>	Cost Sharing Reduction
<b>EHB</b>	Essential Health Benefit
<b>FIPS</b>	Federal Information Processing Standards
<b>HIOS</b>	Health Insurance Oversight System
<b>HPID</b>	Health Plan Identifier
<b>HRA</b>	Health Reimbursement Account
<b>HSA</b>	Health Savings Account
<b>ICD</b>	Interface Control Document
<b>MSA</b>	Metropolitan Statistical Area
<b>P&amp;DC</b>	Processing and Distribution Center
<b>PII</b>	Personal Identification Information
<b>QHP</b>	Qualified Health Plan
<b>RBIS</b>	Rate and Benefits Information System
<b>SBC</b>	Summary of Benefits and Coverage
<b>SCF</b>	Sectional Center Facility
<b>URL</b>	Uniform Resource Locator
<b>USPS</b>	United States Postal Service



## 9 Referenced Documents

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Table 9-1: Referenced Documents

Document Name	Document Number and/or URL	Issuance Date

## 10 Approvals

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The undersigned acknowledge that they have reviewed the Interface Control Document and agree with the information presented within this document. Changes to this Interface Control Document will be coordinated with, and approved by, the undersigned, or their designated representatives.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Role: Submitting Organization’s Approving Authority

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Role: CMS’ Approving Authority

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Role: CMS Business Owner