

Plan Management: Preparing for State-Based Exchange Certification



DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS for MEDICARE & MEDICAID SERVICES
Center for Consumer Information and Insurance Oversight



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The material in this presentation should not be viewed as having any independent legal effect, or relied upon as an interpretation or modification of the related proposed rule or statute. Not all issues or exceptions are fully addressed.

Agenda

- Plan Management core area
- Activities for State-based Exchange certification
- A State-based Exchange's Plan Management interactions

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Plan Management Core Area: Certification of Qualified Health Plans (QHPs)

Initial QHP Certification and Agreement

- Develop and issue a QHP application
- Evaluate responses to the application submitted by the issuers
- Conduct negotiations with issuers, if applicable
- Approve issuer's application and generate a QHP certification agreement

Plan Management Core Area: Certification of QHPs

Rate and Benefit Data Collection

- Receive rate and benefit data during the QHP certification process
- Utilize rate and benefit information to support State-based Exchange operations
- Analyze the rates and benefits during the recertification and renewal process

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Plan Management Core Area: Certification of QHPs

Issuer Account Management

- Receive updates to plan and issuer information
- Analyze account changes such as provider network, complaint information, marketing materials/member notifications, and enrollment availability

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Plan Management Core Area: Certification of QHPs

Issuer Monitoring and Compliance

- Review data received from the issuers and monitor plan performance
- Monitor issuer operations and financial reporting in accordance with the QHP certification agreement
- Provide issuer and plan data to CMS

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Plan Management Core Area: Certification of QHPs

Issuer and Plan Renewal and Recertification

- Recertify Qualified Health Plans (QHPs) annually or periodically (TBD by State-based Exchange). May use a renewal process for the annual analysis of rates and benefits.
- Request QHP issuers to notify the State-based Exchange of their intent to recertify, renew, or discontinue offering the QHPs
- Evaluate issuer information for recertification or renewal to ensure compliance with the QHP certification agreement
- Update the issuer and plan information in State-based Exchange plan management system

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Plan Management Core Area: Certification of QHPs

QHP Certification Two-Pronged Test:

- Meet proposed standards outlined in the Affordable Care Act and in rulemaking:
 - Accreditation, State licensure, transparency data reporting;
 - Plan benefit design (essential health benefits, cost-sharing limits, and actuarial value); and
 - Other applicable standards (e.g., essential community providers)
- Ensure that QHPs are in the “interest of the consumers:”
 - State flexibility in setting these criteria
 - State-specific standards or any standards that go beyond the Federal minimum

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Activities for State-based Exchange Certification: Plan Management Key Decisions

- **What are the roles of the State-based Exchange and the Department of Insurance?** States will decide which entity certifies and monitors the QHPs offered in the State-based Exchange.
- **What are the State standards beyond the minimum QHP certification standards?** States can choose the number of, type of, and standards for QHPs participating in their State-based Exchange.
- **What is the State-based Exchange's strategy for the QHP certification process?** States can decide whether their State-based Exchange will be an active purchaser, accept “any willing plan,” or include other strategies it determines are in the “interest of the consumers.”

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Activities for State-based Exchange Certification: Plan Management Key Decisions

Exchanges NPRM (CMS-9989-P)	State Flexibility	State Flexibility with a Federal Floor
QHP Selection Process	X	
Network Adequacy Standards	X	
Marketing Standards	X	
Agent and Broker Role in State-based Exchange	X	
Accountability and Governance Structure		X
QHP Offerings		X
QHP Accreditation		X
Essential Community Providers		X

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Proposed Activities for State-Based Exchange Certification: Certification of QHPs

2011 - 2012

- Begin designing and developing State-based Exchange health plan management system
- Determine resource needs to support the QHP certification process
- Develop and complete a strategy for the certification process
- Complete standards for certification of a QHP
- Draft QHP certification documents
- Provide technical assistance to health plan issuers

2013

- Launch State-based Exchange health plan management system
- Release the QHP certification application
- Collect and evaluate application submissions, rates, and benefit information
- Complete the certification of QHPs
- Conduct QHP plan preview on State-based Exchange website

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A State-Based Exchange's Plan Management Interactions

Primary Data Collector

- Financial Management
- Quality
- Eligibility & Enrollment
- Customer Service (Call Center/Website)
- Small Business Health Options Program (SHOP)

State-Federal Interactions

- State-level: Department of Insurance, Medicaid and CHIP Programs, Consumer Assistance Programs & other State agencies
- Federal-level: CMS, OPM multi-state plans

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