



DATE: September 30, 2010

TO: Issuers of Health Insurance

FROM: Teresa DeCaro
Web Portal Team Lead

SUBJECT: November 2010 Web Portal Refresh – Data Submission Schedule

As you know, the October 1, 2010 HealthCare.gov web portal will display benefits and pricing data for open products sold by Issuers of major medical insurance in the individual market who complied with federal regulations to submit complete and accurate data as outlined by the Office of Consumer Information and Insurance Oversight (OCIO).

My thanks goes out to all of you for the efforts of your organization to comply with the data collection and processing requirements that support the October 1 launch of the web portal. I know that the timelines and challenges of providing and processing the required data were at times trying. Your participation and cooperation have been and will continue to be critical to successful launches and refreshes of the web portal. We have accumulated your comments on the challenges you faced and will be making continuous improvements over time. We will be discussing these further in our weekly Issuer user group calls.

The remainder of this notice outlines the submission windows and deadlines for insurers to submit new and updated data for the November refresh. The next portal refresh will be on November 15, 2010. All Issuers with products that are open for enrollment on November 15 who are submitting new and revised product-level data are required to enter it into the Health Insurance Oversight System (HIOS) for the individual and small group markets. In addition, Issuers are required to submit new and revised plan-level data into the Content Management Portal (CMP) for the individual market.

October 4 – 12: HIOS data submission window for all Issuers: Issuers that need to submit new or updated product data in HIOS will be able to do so beginning on Monday, October 4, 2010 and ending on Tuesday, October 12, 2010.

Issuers New to HIOS: Issuers not already identified in HIOS should contact the HIOS Help Desk at either 1-877-343-6507 or insuranceoversight@hhs.gov. The Help Desk will provide new Issuers with access and instructions on how to submit product data. Note that Issuers must obtain a HIOS Issuer ID before submitting plan data into CMP.

Denial and Up-Rate data required: As outlined in a notice sent September 2, 2010, all products submitted to HIOS must include the number of applications received, number of

applications denied, and number of up-rated applications. Submissions will be suppressed if denial and up-rate data are not reported.

October 12th Deadline: Issuers are strongly advised that it is the sole responsibility of each Issuer to have submitted complete and error-free submissions in accordance with the instructions provided to Issuers to HIOS by October 12, 2010. All new and existing product data for HIOS must be submitted by 11:59 p.m. ET on Tuesday, October 12, 2010. Any data submitted after October 12th will not be displayed on Healthcare.gov in the November 15th refresh.

October 4 – 15: CMP data submission window for all Issuers: Issuers that need to submit new or updated plan data will be able to do so beginning on Monday, October 4, 2010. Issuers are required for the November refresh of the web portal to attest that submissions are accurate in order for their plans to be displayed.

Issuers submitting new plans: Issuers must obtain a HIOS Issuer ID before submitting plan data into CMP if they have not already done so. In addition, Issuers with new products must obtain a HIOS Product ID for those products before submitting plans for those products into CMP. Issuers should be aware that these HIOS ID's must be obtained before the HIOS submission window closes on October 12, 2010. As outlined in this memo, trainings to both new and existing CMP users will be provided on Tuesday, October 5, 2010.

Issuers modifying existing plans: Issuers should update existing CMP plans where changes made to benefits or rates have gone into effect prior to the opening of the CMP submission window. Issuers can modify existing plans by updating their CMP plan templates and resubmitting during the CMP submission window.

Existing eHealth customers who have not yet transferred plans to CMP: Issuers who had approved transfer of their data from the eHealthInsurance.com commercial inventory that did not successfully transfer data to the CMP site for October 1 can do so during the CMP submission window. It is the responsibility of Issuers whose data was transferred from eHealthInsurance.com to update those plans in CMP by Friday, October 15, 2010 to reflect any changes required by the provisions under the Affordable Care Act that went into effect on September 23, 2010.

CEO / CFO Attestation for all Issuers: In the previous October 1 submission process, the requirement to attest to the completeness of the submission was made optional, in recognition that Issuers experienced difficulty submitting plan benefit and pricing information to the CMP. We are going to continue this policy for the November refresh. Issuers are still required to attest to the accuracy of the data submitted. This attestation applies only to the data submitted, and not to the subsequent display of that data. As outlined in this memo, there will also be an opportunity for Issuers to review and approve their plans prior to display on the web portal through the Finder Verify site. Please note that OCIO reserves the right to display plans without Issuer approval.

October 15th deadline for all Issuers: All new and existing plan data for CMP must be submitted by 11:59 p.m. ET on Friday, October 15, 2010. Any data submitted after October 15th will not be displayed in the November 15th refresh.

Error-free submissions: Issuers are strongly advised that it is the sole responsibility of each Issuer to have submitted to CMP by the submission deadline, complete and error free plan data in accordance with the instructions provided to Issuers. While plan submissions are required to be accurate and complete, we will be reviewing submissions for errors. All CMP plan data on a submission provided by October 15th must be free of the following errors or the entire submission will fail. Errors of the following types will result in the plans associated with these submissions not being displayed on November 15, 2010:

- Alteration of the benefits and/or rate templates
- Submission of multiple benefits and/or rate templates for a single plan
- Missing benefits and/or rate templates for a plan

Note: We strongly advise that Issuers begin their process immediately and not wait until the end of the submission window to allow enough time for data entry, CEO/CFO attestation, QA, corrections of minor errors, and processing.

October 15 – 22: CMP data quality processing:

Issuers are strongly advised that it is the sole responsibility of each Issuer to have submitted to HIOS and CMP, by the submission deadlines, complete and error free plan data in accordance with the instructions provided to Issuers. We will conduct quality assurance reviews on a rolling basis for all CMP plans submitted by Friday, October 15th, and will notify your organization of any errors we find by 11:59 p.m. on Friday, October 22, 2010.

Unacceptable errors: All CMP plan data on a submission provided by October 15th must be free of the following errors or the entire submission will fail:

- Alteration of the benefits and/or rate templates
- Submission of multiple benefits and/or rate templates for a single plan
- Missing benefits and/or rate templates for a plan

Notification of errors by October 22nd: For all other errors found, Issuers will be given 48 hours upon notification to make corrections. Issuers will receive notification by 11:59 p.m. on Friday, October 22 if their plans are found to contain such errors. Submissions that are not corrected within 48 hours of notification will not be displayed on November 15, 2010.

October 16 – November 5: Issuer review and final validation: Plans that have been submitted by October 15th and have passed all the quality review checks will be uploaded to <https://finderverify.healthcare.gov> between October 16 – November 1 on a rolling basis so that Issuers can preview and validate their data to be displayed in the November web portal refresh.

Final Approval Required by November 5: All Issuers' plans will be displayed on the Finder Verify site by November 2. Issuers will be permitted to review and approve their plans by 11:59 p.m. on November 5, prior to displaying plans on the web portal. OCIO reserves the right to display plans that have not been approved by the organization.

Issuer Group Calls and Trainings:

Weekly Issuer user group calls: Weekly calls with the HIOS/CMP Issuer user group will continue to be held Wednesdays at 2:00 p.m. ET until the November launch is completed to provide guidance and answer questions.

CMP trainings: In addition, training for Issuers new to CMP and for Issuers whose submissions were not completely processed due to errors will be provided. The first CMP training will be scheduled on Tuesday, October 5th; a separate memo with time and participation instructions will be provided soon.

Summary of Key Dates

October 4	HIOS and CMP submission window opens for all Issuers to submit new and revised product and plan data.
October 12	Last day for all Issuers to submit new and updated product data into HIOS.
October 15	Last day for all Issuers to submit new and updated plan data into CMP, inclusive of CEO/CFO attestation as to the accuracy of the data submitted.
October 22	Last day by which Issuers will be notified of errors found in their plans. Quality reviews and error notification will occur on a rolling basis starting on October 16 for all plans submitted by October 15. Issuers who have minor errors will have 48 hours to correct data upon receipt of notification. Issuers who have major errors will not be displayed in the November refresh.
November 2	Last day by which all plans that have passed the quality review process will be displayed on the CMP Finder Verify site.
November 5	Last day by which Issuers may approve plans for display on the web portal. OCIO reserves the right to display unapproved plans.
November 15	Healthcare.gov web portal will display new and updated plans.

For technical assistance regarding HIOS, please contact the HIOS Help Desk at either 1-877-343-6507 or insuranceoversight@hhs.gov.

For technical assistance regarding the portal plan submissions, please contact the CMP Help Desk at either 1-877-425-3708 or cmp-support@ehealth.com.