



Key Dates for Calendar Year 2022:¹
Qualified Health Plan (QHP) Data Submission and Certification;²
Rate Review; and Risk Adjustment

Table 1. QHP Data Submission and Certification Timeline

Activity	Dates
QHP Application submission window opens	4/28/22
Early Bird Application Deadline: Optional Early Bird QHP Application submission deadline	5/18/22
CMS reviews Early Bird QHP Application data and releases results in the PM Community for issuers and states to review	5/19/22 – 6/10/22
HHS-approved QHP Enrollee Survey vendor securely submits the QHP Enrollee Survey response data to CMS on behalf of the QHP issuer ³	5/20/22
QHP issuer submits the validated QRS clinical measure data, with attestation, to CMS via NCQA's Interactive Data Submission System (IDSS) ⁴	6/15/22
Initial Application Deadline: Initial QHP Application deadline, including machine-readable index URLs and Plan ID Crosswalk data	6/15/22
CMS reviews initial QHP Applications and releases results in the PM Community for issuers and states to review	6/16/22 – 7/15/22
Secondary Application Deadline: Deadline for issuers to submit their QHP Application Rates Table Templates to CMS; optional deadline for issuers to submit corrected QHP Application data to CMS	7/20/22
CMS reviews Rates Table Template data and resubmitted QHP Application data, and releases results in the PM Community for issuers and states to review	7/21/22 – 8/12/22
QHP issuers, Exchange administrators, and CMS preview the 2022 QHP quality rating information	Aug./Sep. 2022
Issuer Plan Confirmation/Crosswalk Deadline: Issuers complete final plan confirmation and submit final Plan ID Crosswalk Templates in the PM Community	8/10/22 – 8/24/22
Final Application Deadline: Deadline for issuers to submit changes to their QHP Application and to submit marketing URL data in the HIOS Supplemental Submission Module (SSM)	8/17/22
CMS reviews QHP Applications and releases results in the PM Community for issuers and states to review	8/18/22 – 9/12/22
CMS sends QHP Certification Agreements to issuers	9/13/22

¹ These dates are subject to change. Dates are from *Bulletin: Timing of QHP Data Submission and Certification for the 2023 Plan Year for Issuers in the Federally-facilitated Exchanges* available at <https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/index#plan-management>.

² These dates apply to QHPs in states with Exchanges that use the federal platform. This includes QHPs in Federally-facilitated Exchanges (including where the state performs plan management functions), and State-based Exchanges on the Federal Platform.

³ QRS and QHP Enrollee Survey Technical Guidance for 2022, available at <https://www.cms.gov/files/document/2022-qrs-and-ghp-enrollee-survey-technical-guidance.pdf>.

⁴ Each QHP issuer must submit and plan-lock its QRS clinical measure data by June 1 to allow the HEDIS® Compliance Auditor sufficient time to review, approve, and audit-lock all submissions by the June 15 deadline. There are no fees for QHP issuers associated with accessing and using the IDSS.

Activity	Dates
QHP Agreement Signing Deadline: Issuers return signed QHP Certification Agreements to CMS	9/13/22 – 9/21/22
State Plan Confirmation Deadline: States complete final plan confirmation in the PM Community	9/13/22 – 9/21/22
Limited data correction window	9/15/22 – 9/16/22
Machine-Readable/URL Deadline: Deadline for issuers' machine-readable data to be posted and marketing URLs to be live and active	9/21/22
CMS releases certification notices to issuers and states	10/4/22 – 10/5/22
Anticipated public display of QHP quality rating information	11/1/22
Open Enrollment begins	11/1/22

Table 2. Rate Review for Single Risk Pool Coverage^{5,6}

Activity	Dates
Submission deadline for proposed rate filing justifications into the Unified Rate Review (URR) module of HIOS in a state without an Effective Rate Review Program. ⁷	6/1/22
Submission deadline for proposed rate filing justifications into the URR module of HIOS in a state with an Effective Rate Review Program. ^{8,9}	7/20/22
Target date on which CMS will post proposed rate changes. ¹⁰	7/27/22
Deadline for rate filing justifications <u>that include a QHP</u> to be finalized in the URR module of HIOS in states with an Exchange served by the HealthCare.gov platform. ¹¹	8/17/22 ¹²
Deadline for rate filing justifications <u>that include a QHP</u> to be finalized in the URR module of HIOS in states with a State-based Exchange that does not use the HealthCare.gov platform.	10/17/22
Deadline for all rate filing justifications <u>that only contain non-QHPs</u> to be finalized in the URR module of HIOS.	10/17/22 ¹³
Target date on which CMS will post <u>all</u> final rate changes. ¹⁴	11/1/22

⁵ Rate review dates from the *Bulletin: Timing of Submission of Rate Filing Justifications for the 2022 Filing Year for Single Risk Pool Coverage Effective on or after January 1, 2023* available at <https://www.cms.gov/ccio/resources/Regulations-and-Guidance/index#Review-of-Insurance-Rates>.

⁶ The term “single risk pool coverage” is used to describe non-grandfathered health insurance coverage in the individual or small group (or merged) market that is subject to the single risk pool provisions at 45 CFR 156.80 and is required to submit rate information using the Unified Rate Review Template. It does not include dental plans.

⁷ A rate filing or determination that is filed through the NAIC’s System For Electronic Rates & Forms Filing (SERFF) and automatically uploaded to the URR module of HIOS will be considered as filed with CMS

⁸ We recommend that States with Effective Rate Review Programs and Exchanges served by the HealthCare.gov platform set a submission deadline no later than the federal deadline (July 20, 2022) for submission of rate filings that include QHPs, to align with the FFE QHP filing deadlines; however, we understand some States may face challenges in doing so, and they will not be bound by this recommendation.

⁹ States with Effective Rate Review Programs are permitted to establish different submission deadlines for non-QHP-only rate filings as long as the deadline is no later than the federal deadline (July 20, 2022).

¹⁰ CMS will post rate filing information for all single risk pool coverage with rate changes (including both QHPs and non-QHPs), regardless of whether the product includes a plan with a rate increase that is subject to review under 45 CFR 154.210. CMS will not post information that is a trade secret or confidential commercial or financial information as defined in HHS’s Freedom of Information Act regulations at 45 CFR 5.31(d).

¹¹ There are three final submission statuses in HIOS. All submissions that do not have any rate increases subject to review (rate increases less than 15%) must be in a state of “Rate Filing Accepted.” For submissions with rate increases that are subject to review (rate increase of 15% or greater), the submission must be in a status of “Review Complete” if the rate increase received a determination of “not unreasonable” or in a status of “Final Justification Submitted” if the rate increase received a determination of “unreasonable” and the issuer has submitted the final justification.

¹² These filings must be in final status by 11:59 p.m. EDT.

¹³ These filings must be in final status by 11:59 p.m. EDT.

¹⁴ CMS will post rate change information for all single risk pool coverage final rate filings. CMS will not post information that is a trade secret or confidential commercial or financial information, consistent with HHS’s Freedom of Information Act regulations at 45 CFR 5.31(d).

Table 3. Risk Adjustment for Benefit Year 2021
and Risk Adjustment Data Validation for Benefit Years 2018, 2019, 2020 and 2021

Risk Adjustment Activity	Dates
Collection of 2018 Benefit Year Risk Adjustment Data Validation Adjustments to Transfers Begins	February 2022
2019 Benefit Year Risk Adjustment Data Validation Error Rates Released	February 2022 ¹⁵
Interim 2021 Benefit Year Risk Adjustment Report Released	March 2022
Payment of 2018 Benefit Year Risk Adjustment Data Validation Adjustments to Transfers Begins	April 2022
Deadline for Submission of Final 2021 Benefit Year Risk Adjustment Data	5/02/22 ¹⁶
2020 Benefit Year Risk Adjustment Data Validation Error Rates Released	May 2022
2021 Benefit Year Risk Adjustment Data Validation Samples Released	May 2022
Summary Report of 2021 Benefit Year Risk Adjustment Transfers Released	6/30/22
Combined Summary Report of 2019 and 2020 Benefit Years Risk Adjustment Data Validation Adjustments to Transfers Released ¹⁷	Summer 2022
Collection of 2021 Benefit Year Risk Adjustment Charges Begins	August 2022
Collection and Payment of 2019 and 2020 Benefit Year Risk Adjustment Data Validation Adjustments to Transfers and Default Data Validation Charges Begins	Summer/Fall 2022
2021 Benefit Year Risk Adjustment Payments Begin	September 2022

¹⁵ Due to the delay in commencing 2019 benefit year HHS-RADV as a result of the COVID-19 public health emergency, the 2019 benefit year HHS-RADV timeframes are later than usual. For more information on the updated 2019 benefit year HHS-RADV timeline, please see: https://www.hhs.gov/guidance/sites/default/files/hhs-guidance-documents/HRADV_Timeline_073120_5CR_073120.pdf.

¹⁶ Since April 30, 2022, falls on a weekend, CMS will exercise enforcement discretion to shift the deadline for submission of final 2021 benefit year risk adjustment data to the next business day (May 2, 2022). See 45 CFR 153.730.

¹⁷ CMS finalized a policy to combine and apply 2019 and 2020 benefit year HHS-RADV results for non-exiting issuers as a single adjustment that will be applied and collected on the 2020 benefit year HHS-RADV timeline. See Amendments to the HHS-Operated Risk Adjustment Data Validation (HHS-RADV) Under the Patient Protection and Affordable Care Act's HHS-Operated Risk Adjustment Program (85 FR 76979) (December 1, 2020). As such, information on the 2019 benefit year HHS-RADV adjustments to transfers for most issuers will not be announced until later in 2022. In the 2022 Payment Notice (86 FR 24140) (May 5, 2021), CMS also updated the timeline of the publication of HHS-RADV results and the collection and disbursement of HHS-RADV transfers and payments. As such, HHS-RADV results for non-exiting issuers participating in the 2019 and 2020 benefit years of HHS-RADV and exiting issuers participating in 2020 benefit year HHS-RADV will be released no later than early summer 2022. CMS will begin collecting and disbursing these amounts in summer or fall of 2022.

Table 4. Consolidated CY2022 Key Dates in Chronological Order

Table 4 below consolidates the dates provided in Tables 1-3 and does not contain any additional information beyond that which has been provided above.

Category	Activity	Dates
Risk Adjustment	Collection of 2018 Benefit Year Risk Adjustment Data Validation Adjustments to Transfers Begins	February 2022
Risk Adjustment	2019 Benefit Year Risk Adjustment Data Validation Error Rates Released	February 2022
Risk Adjustment	Interim 2021 Benefit Year Risk Adjustment Report Released	March 2022
Risk Adjustment	Payment of 2018 Benefit Year Risk Adjustment Data Validation Adjustments to Transfers Begins	April 2022
QHP Certification	QHP Application submission window opens	4/28/22
Risk Adjustment	2020 Benefit Year Risk Adjustment Data Validation Error Rates Released	May 2022
Risk Adjustment	2021 Benefit Year Risk Adjustment Data Validation Samples Released	May 2022
Risk Adjustment	Deadline for Submission of Final 2021 Benefit Year Risk Adjustment Data	5/02/22
QHP Certification	Early Bird Application Deadline: Optional Early Bird QHP Application submission deadline	5/18/22
QHP Certification	CMS reviews Early Bird QHP Application data and releases results in the PM Community for issuers and states to review	5/19/22 – 6/10/22
QHP Certification	HHS-approved QHP Enrollee Survey vendor securely submits the QHP Enrollee Survey response data to CMS on behalf of the QHP issuer	5/20/22
Rate Review	Submission deadline for proposed rate filing justifications into the URR module of HIOS in a state without an Effective Rate Review Program.	6/1/22
QHP Certification	QHP issuer submits the validated QRS clinical measure data, with attestation, to CMS via NCQA's Interactive Data Submission System (IDSS)	6/15/22
QHP Certification	Initial Application Deadline: Initial QHP Application deadline, including machine-readable index URLs and Plan ID Crosswalk data	6/15/22
QHP Certification	CMS reviews initial QHP Applications and releases results in the PM Community for issuers and states to review	6/16/22 – 7/15/22
Risk Adjustment	Summary Report of 2021 Benefit Year Risk Adjustment Transfers Released	6/30/22
Risk Adjustment	Combined Summary Report of 2019 and 2020 Benefit Years Risk Adjustment Data Validation Adjustments to Transfers Released	Summer 2022
Rate Review	Submission deadline for proposed rate filing justifications into the URR module of HIOS in a state with an Effective Rate Review Program.	7/20/22
QHP Certification	Secondary Application Deadline: Deadline for issuers to submit their QHP Application Rates Table Templates to CMS; optional deadline for issuers to submit corrected QHP Application data to CMS	7/20/22
QHP Certification	CMS reviews Rates Table Template data and resubmitted QHP Application data, and releases results in the PM Community for issuers and states to review	7/21/22 – 8/12/22
Rate Review	Target date on which CMS will post proposed rate changes.	7/27/22
QHP Certification	QHP issuers, Exchange administrators, and CMS preview the 2022 QHP quality rating information	Aug./Sep. 2022

Category	Activity	Dates
Risk Adjustment	Collection of 2021 Benefit Year Risk Adjustment Charges Begins	August 2022
QHP Certification	Issuer Plan Confirmation/Crosswalk Deadline: Issuers complete final plan confirmation and submit final Plan ID Crosswalk Templates in the PM Community	8/10/22 – 8/24/22
Rate Review	Deadline for rate filing justifications <u>that include a QHP</u> to be finalized in the URR module of HIOS in states with an Exchange served by the HealthCare.gov platform.	8/17/22
QHP Certification	Final Application Deadline: Deadline for issuers to submit changes to their QHP Application and to submit marketing URL data in the HIOS Supplemental Submission Module (SSM)	8/17/22
Risk Adjustment	Collection and Payment of 2019 and 2020 Benefit Year Risk Adjustment Data Validation Adjustments to Transfers and Default Data Validation Charges Begins	Summer/Fall 2022
QHP Certification	CMS reviews QHP Applications and releases results in the PM Community for issuers and states to review	8/18/22 – 9/12/22
Risk Adjustment	2021 Benefit Year Risk Adjustment Payments Begin	September 2022
QHP Certification	CMS sends QHP Certification Agreements to issuers	9/13/22
QHP Certification	QHP Agreement Signing Deadline: Issuers return signed QHP Certification Agreements to CMS	9/13/22 – 9/21/22
QHP Certification	State Plan Confirmation Deadline: States complete final plan confirmation in the PM Community	9/13/22 – 9/21/22
QHP Certification	Limited data correction window	9/15/22 – 9/16/22
QHP Certification	Machine-Readable/URL Deadline: Deadline for issuers' machine-readable data to be posted and marketing URLs to be live and active	9/21/22
QHP Certification	CMS releases certification notice to issuers and states	10/4/22 – 10/5/22
Rate Review	Deadline for rate filing justifications <u>that include a QHP</u> to be finalized in the URR module of HIOS in states with a State-based Exchange that does not use the HealthCare.gov platform.	10/17/22
Rate Review	Deadline for all rate filing justifications <u>that only contain non-QHPs</u> to be finalized in the URR module of HIOS.	10/17/22
QHP Certification	Anticipated public display of QHP quality rating information	11/1/22
Rate Review	Target date on which CMS will post <u>all</u> final rate changes.	11/1/22
QHP Certification	Open Enrollment begins	11/1/22