

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Center for Consumer Information and Insurance Oversight  
200 Independence Avenue SW  
Washington, DC 20201



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**Date:** December 16, 2016

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**Title:** Insurance Standards Bulletin Series -- INFORMATION

**Subject:** Bulletin: Timing of Submission and Posting of Rate Filing Justifications for the 2017 Filing Year for Single Risk Pool Coverage

**I. Purpose**

The Centers for Medicare & Medicaid Services (CMS) is releasing this bulletin regarding the uniform timeline for submission and public release of information about rate filings for single risk pool coverage<sup>1</sup>, consistent with 45 CFR Part 154. The timelines specified below apply to the rate filings issuers will submit in 2017 (2017 filing year) for single risk pool coverage (including both qualified health plans (QHPs) and non-QHPs) with plan or policy years beginning on or after January 1, 2018.

**Rate Filing - Submissions**

This bulletin provides guidance for purposes of establishing the uniform deadline under 45 CFR 154.220(b) for health insurance issuers to submit Rate Filing Justifications for proposed rates for single risk pool coverage in the individual and small group markets.

**Rate Filing – Public Release of Information**

The bulletin provides guidance on the uniform posting deadline for a State with an Effective Rate Review program<sup>2</sup> to provide public access to information regarding single risk pool coverage proposed rate increases that are subject to review and for CMS to provide public access to information on all proposed rate filings for single risk pool coverage. It also identifies the uniform deadline for a State with an Effective Rate Review Program to post final rate increases (including those not subject to review) for single risk pool coverage and for CMS to post information on all final rate filings for single risk pool coverage. Finally, it provides the CMS web address to be used by States with an Effective Rate Review Program that elect to

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<sup>1</sup> 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 file rate information using the Unified Rate Review Template.

<sup>2</sup> See 45 CFR 154.301 for the list of criteria CMS considers when evaluating whether a State has an Effective Rate Review program.

provide public access from their website through a link to the CMS website.

In addition, 45 CFR 154.301(b)(3) requires that States with an Effective Rate Review Program post the required information on proposed rate increases subject to review and final rate increases (including those not subject to review) at a uniform time and not on a rolling basis. This requirement applies to rate increase information for all single risk pool coverage (including both QHP and non-QHPs) offered inside and outside of Marketplaces. The timelines below reflect this policy.

## **II. Uniform Rate Review Timelines for the 2017 filing year for single risk pool coverage effective on or after January 1, 2018**

### Uniform submission deadline

The uniform submission deadlines for a health insurance issuer to submit a Rate Filing Justification to CMS and the applicable State for single risk pool coverage are specified below.<sup>3</sup> Pursuant to 45 CFR 154.215, in addition to rate increases, these deadlines also apply to single risk pool coverage that experiences no rate changes, rate decreases and rates for new single risk pool coverage.

- Issuers in a State **without an Effective Rate Review Program** must submit proposed rate filings for single risk pool coverage (both QHPs and non-QHPs) by a date set by the State, as long as the date is not later than May 3, 2017.
- Issuers in a State **with an Effective Rate Review Program** must submit proposed rate filings for single risk pool coverage (both QHPs and non-QHPs) by a date set by the State, as long as the date is not later than July 17, 2017.

We recommend that States with Effective Rate Review Programs that are served by the HealthCare.gov platform set a date no later than the deadline of May 3, 2017, to align with the Federally-facilitated Marketplace QHP filing deadlines; however, we understand some States may face challenges in doing so.

Issuers submitting QHP applications to participate in Marketplaces served by the Health Care.gov platform must submit their QHP Rates Table Templates by May 3, 2017, even if their Unified Rate Review Template (URRT) is not due until a later date. The QHP Rates Table Template is required in order to comply with certification deadlines in the 2018 Letter to Issuers in the Federally-facilitated Marketplaces. We note that there will be multiple opportunities during the QHP certification process for the issuer to update, correct or change the QHP Rates Table Template (as may be necessary).

### Uniform posting deadlines

#### Proposed Rate Increases Subject to Review – Posting by States

The uniform posting deadline for a State with an Effective Rate Review Program to post on the

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<sup>3</sup> 45 CFR 154.220(b) requires issuers to submit rate information for single risk pool coverage by the earlier of: (a) the State's deadline or (b) the date specified by HHS in guidance.

State's website at least the information contained in Parts I, II, and III of the Rate Filing Justification that CMS makes available on its website (or provide CMS's web address for such information) for proposed rate increases that are subject to review for single risk pool coverage (including both QHPs and non-QHPs) is no later than August 1, 2017. Information on proposed rate increases subject to review must be made available to the public at a uniform time for the relevant market segment<sup>4</sup>, and not on a rolling basis, including publication of proposed rate increases on a State's website, in SERFF (System for Electronic Rate and Form Filing), and/or issued through press release. We encourage States with an Effective Rate Review Program to post at an earlier date if possible, to allow for robust public comments on proposed rate increases subject to review.

#### Proposed Rate Filings – Posting by CMS

For all single risk pool coverage (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 post all applicable parts of the Rate Filing Justification.<sup>5</sup> CMS will conduct a data refresh prior to posting, in order to capture the most recent rate filing information, and then will post proposed rate information for all issuers at one time. The data will not be refreshed again until the final rate posting timeframe.

- Issuers must complete all changes to proposed rate filings in the Health Insurance Oversight System Unified Rate Review (HIOS URR) module by 3:00 p.m. EST on July 25, 2017.
- CMS intends to post information on proposed rate filings for consumers to review on <https://ratereview.healthcare.gov> on August 1, 2017.

#### Final Rate Increases – Posting by States

A State with an Effective Rate Review Program must post at least the information contained in Parts I, II, and III of the Rate Filing Justification that CMS makes available on its website (or provide CMS's web address for such information) for all single risk pool coverage final rate increases (including those not subject to review) no later than November 1, 2017.<sup>6</sup> Final rate increases for single risk pool coverage (including both QHPs and non-QHPs) for the relevant market segment must be posted at a uniform time<sup>7</sup>, and not on a rolling basis, including publication on a State's website, in SERFF (System for Electronic Rate and Form Filing), and/or issued through press release. The requirement to uniformly post final rate increases (including those not subject to review) does not prevent a State from reviewing and finalizing rates for single risk pool coverage before the prescribed deadline, but States cannot post that information until all final rate increases can be posted uniformly for the entire single risk pool.

#### Final Rate Filings – Posting by CMS

For all single risk pool coverage (including both QHP and non-QHPs), CMS will post all applicable parts of the Rate Filing Justification for all final rate filings, regardless of whether the product includes a plan with a rate increase that is subject to review under 45 CFR 154.210.

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<sup>4</sup> 45 CFR 154.301(b)(3).

<sup>5</sup> CMS will not post information that is a trade secret or confidential commercial or financial information consistent with HHS' Freedom of Information Act regulations at 45 CFR 5.31(d).

<sup>6</sup> 45 CFR 154.301(b)(1)(ii).

<sup>7</sup> 45 CFR 154.301(b)(3).

CMS will conduct a data refresh prior to posting, in order to capture the most recent rate filing information, and then will post final rate filing information for all issuers at one time.

- Issuers must finalize all rate filings that contain QHPs in the URR module of HIOS by August 21, 2017.
- Issuers must finalize all rate filings that only contain non-QHPs in the URR module of HIOS by 3:00 p.m. EST by October 6, 2017.
- CMS will post final rate information for single risk pool coverage (including both QHPs and non-QHPs) on November 1, 2017.

**CMS Web Address:**

States with an Effective Rate Review Program that elect to provide public access via a link to the rate information made available on the CMS web site should use:

<https://ratereview.healthcare.gov>.

**Notification to CMS:**

Earlier Deadlines

Pursuant to 45 CFR 154.301(b)(2), if a State intends to release information about proposed rate increases subject to review or final rate increases (including those not subject to review) on a timeframe earlier than specified in this Bulletin, the State must notify CMS in writing at least 30 days prior to making the information public. The State should notify CMS by sending an email to [RateReview@cms.hhs.gov](mailto:RateReview@cms.hhs.gov). The e-mail must indicate the date that the State intends to make the information public.

**IV. Where to get more information and submit comments**

If you have questions about this Bulletin, please contact CCIIO at [RateReview@cms.hhs.gov](mailto:RateReview@cms.hhs.gov).