

**Health Insurance Oversight System (HIOS)
Rate Review System
Technical Instructions for States and Health
Insurance Issuers**



Health Insurance Oversight System – Rate Review System Technical Instructions

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1 Introduction

Section 2794 of the Public Health Service Act (PHS Act), as added by the Patient Protection and Affordable Care Act (Affordable Care Act), establishes a process for the annual review of an unreasonable increase in premiums for health insurance coverage. On May 19, 2011, the Center for Medicaid and Medicare Services (CMS) issued a final rule, the “Rate Increase Disclosure and Review” (Rate Review rule) (codified at 45 C.F.R. §§ 154.101-154.301) implementing section 2794 of the PHS Act.

This Technical Instructions Manual explains how health insurance Issuers and States will use the Health Insurance Oversight System (HIOS) and Rate Review module to review and upload information related to the new rate review program. This manual provides systematic instructions for all of the issuer and state reviewer system features and functionalities available in the Rate Review System.

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2 Rate Review System Users

There are three user types in the scope of this manual that will access the Rate Review system with different functionalities associated to each user. These user types include Issuer users and State users. A user has access to functionality within the system based on the roles associated to the specific user name. Roles can be updated at any time by requesting additional access utilizing the Role Management feature within the HIOS Portal.

There are two roles associated to the Issuer user:

1. Rate Review Issuer Submitter – Permits the user to submit rate change data within the Rate Review System to HHS or the State for their review. In addition, Issuer Submitters may modify a submission, delete a submission, withdraw a submission, upload supplemental materials, and upload an unreasonable rate increase justification file.
2. Rate Review Issuer Attester– Permits the user to attest rate change data within the Rate Review System before submitting to HHS or the State for review. Additionally these users may modify a submission, delete a submission, withdraw a submission, and upload an unreasonable rate increase justification.

There is one role associated to the State user:

1. Rate Review State – Permits the user to view submitted data for all submissions within an associated state that the user has access. State Review users may also review submissions indicated as State Primary and provide comments for submitted data to which the user has access to review, if applicable.

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3 Access to the Rate Review Justification System

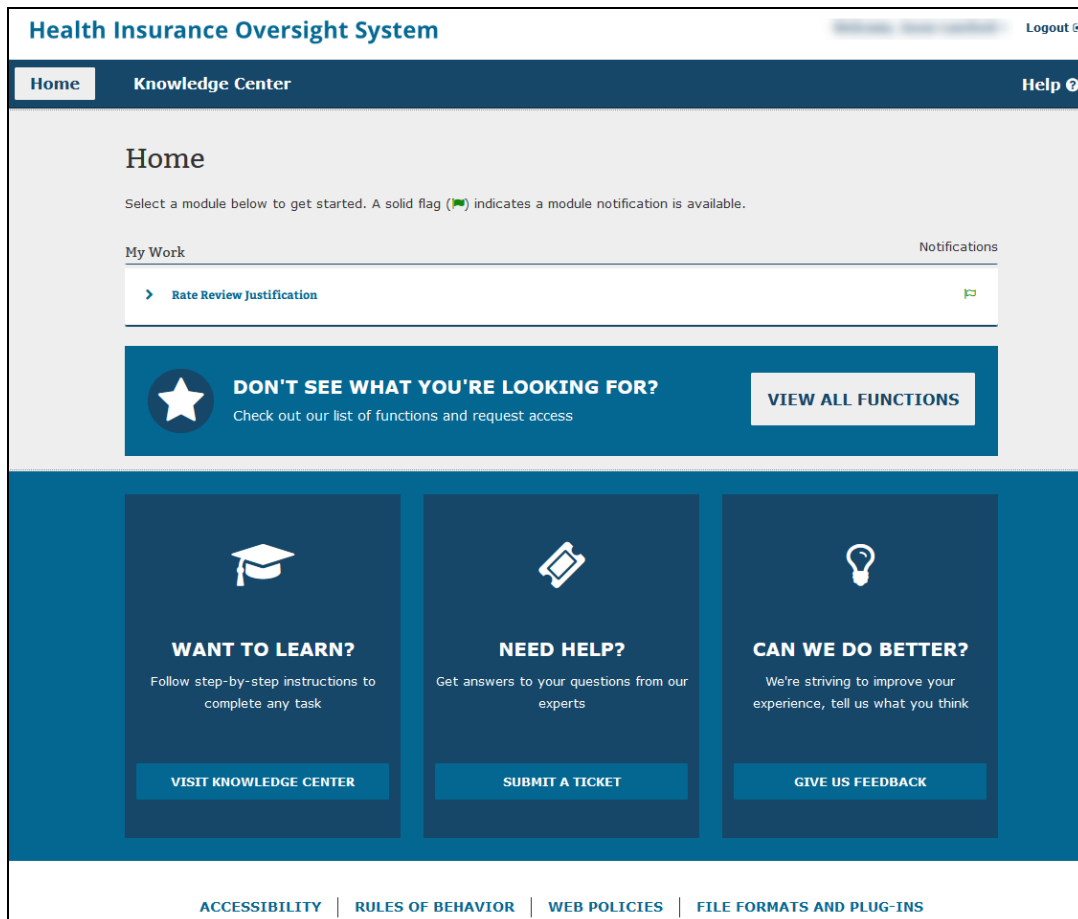
Users will access HIOS through the Enterprise Identity Management (EIDM) portal, also known as the CMS Portal. They will first obtain an EIDM account and subsequently request access to HIOS. The registration process is extensively covered in the training and user manuals specific to EIDM and HIOS Registration. This user manual will focus on the steps to take once a user gains access to HIOS and obtains a Rate Review Justification System user (RRJ) role.

3.1 HIOS Portal Home Page

The HIOS Portal Home Page serves as the central entry point for all HIOS modules. In order to access the Rate Review Justification (RRJ) module, the user will need to follow the instructions below:

1. Click on the **Rate Review Justification (RRJ)** link displayed in Figure 3-1, which will direct the user to a RRJ module homepage associated with the user's current access. Issuer users will be redirected to Figure 4-1 and State users will be directed to Figure 5-1.

Figure 3-1 HIOS Portal Home Page



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4 Issuer User

Within the Rate Review System, the Issuer user can access the following functionalities from the Issuer Rate Review Home Page:

- Upload Rate Increase Preliminary Justification
- Review the Rate Increase Data submitted
- Upload Supplemental Materials
- Perform Submission Modifications
- Enter Unreasonable Rate Increase Justification

The following sections provide a description of the pages for the Issuer Functionality.

Figure 4-1 depicts a screenshot of the Issuer's **Rate Review Home Page**. This page will display after the user logs into HIOS and clicks on the **Rate Review System** button.

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Figure 4-1 Issuer Rate Review Home

Health Insurance Oversight System Welcome, [User] Logout

Home Knowledge Center Help

Rate Review Justification

Welcome to the Rate Review Justification (RRJ) HIOS Module for non-single risk pool compliant plans (i.e. transitional policies and Student Health Insurance Plans).

ACA Compliant Plans: If you need to submit a Rate Filing Justification for an ACA single-risk pool compliant plan, please use the Unified Rate Review (URR) HIOS Module. The URR module is accessible from the Plan Management and Market Wide Functions portal after logging into the CMS Secure Portal.

What would you like to work on today?

Upload Preliminary Justification

Users can upload Preliminary Justification information for non-single risk pool compliant plans to be reviewed for a rate increase.

Submission Status Report

Users can search previously completed submissions to view current status and review submitted data.

Related Links

- [CMS Rate Review Page](#)
- [Healthcare.gov](#)
- [Preliminary Justification Instructions \[PDF, 359KB\]](#)
- [User Manual \[PDF, 4750KB\]](#)

Questions?

If you have policy questions regarding the ratereview.HealthCare.gov, please e-mail ratereview@cms.hhs.gov

If you need technical assistance regarding product-level data submissions, please contact the Marketplace Service Desk (MSD) at CMS_FEPS@cms.hhs.gov or 1-855-267-1515.

Submissions In-Progress

Showing 1-10 of 29 records Records per page 10

| ID | Issuer - State | Product | Effective Date |
|---------------------------|----------------|---|----------------|
| 937870065 | AAA - CO | 93787CO009 - AAA Idemnity 9 - Individual - Indemnity | 04/15/2021 |
| 937870042 | AAA - CO | 93787CO041 - AAA Idemnity 41 - Individual - Indemnity | 08/19/2020 |

First Previous 1 2 3 Next Last

VISIT KNOWLEDGE CENTER SUBMIT A TICKET GIVE US FEEDBACK

Select the **Upload Preliminary Justification** link to reach the Upload Preliminary Justification page. Alternatively, Issuer’s may resume previously saved and incomplete submissions by selecting previously saved submission within the **Submission In Progress table**. Please refer to Figure 4-2.

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Figure 4-2 Submission In Progress

| Submissions In-Progress | | | |
|----------------------------|------------------|---|------------------|
| Showing 1-10 of 29 records | | Records per page 10 | |
| ID ↕ | Issuer - State ↕ | Product ↕ | Effective Date ↕ |
| 937870065 | AAA - CO | 93787CO009 - AAA Idemnity 9 - Individual - Indemnity | 04/15/2021 |
| 937870063 | AAA - CO | 93787CO041 - AAA Idemnity 41 - Individual - Indemnity | 03/20/2021 |
| 937870056 | AAA - CO | 93787CO009 - AAA Idemnity 9 - Individual - Indemnity | 01/01/2021 |
| 937870055 | AAA - CO | 93787CO041 - AAA Idemnity 41 - Individual - Indemnity | 01/30/2021 |
| 563020022 | AAA - DE | 56302DE059 - AAA Idemnity 59 - Individual - Indemnity | 12/26/2020 |
| 937870052 | AAA - CO | 93787CO041 - AAA Idemnity 41 - Individual - Indemnity | 01/31/2021 |
| 937870046 | AAA - CO | 93787CO013 - AAA Idemnity 13 - Individual - Indemnity | 12/08/2020 |
| 563020021 | AAA - DE | 56302DE045 - AAA Idemnity 45 - Individual - Indemnity | 12/05/2020 |
| 937870043 | AAA - CO | 93787CO033 - AAA Idemnity 33 - Small Group - Indemnity | 08/27/2020 |
| 937870042 | AAA - CO | 93787CO041 - AAA Idemnity 41 - Individual - Indemnity | 08/19/2020 |

First
Previous
1
2
3
Next
Last

4.1 Upload Preliminary Justification

The Upload Preliminary Justification page is accessible by selecting the **Upload Preliminary Justification** link on the **Rate Review System Home Page**. Only Rate Review Issuer Submitter users will be able to access this page.

On **Step 1 of the Upload Preliminary Justification**, the user will select the ‘Issuer/State’, ‘Market Type’ and ‘Association Type’ relevant to the submission and select the **Get Products** button to retrieve all eligible products. For Product selection, the Issuer may select

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one or more products and add them to the ‘Selected Products’ table by pressing the ‘Add Products’ button once at least one product within the ‘Available Products’ table has been selected. To move multiple products at once, the Issuer may hold the ‘Ctrl’ button while selecting eligible products and pressing the ‘Add Products’ button or select the ‘Add All Products’ button to move all eligible products from the ‘Available Products’ table to the ‘Selected Products’ table.

Figure 4-3 Part 1: Issuer Information, Products and Effective Date

1

Part 1 : Issuer Information, Product(s) and Effective Date

Please provide the issuer information below.

* Issuer/State

AAA-CO

* Market Type

Individual

* Association Type

Non-Association Product

Get products

Product(s) and Effective Date

One or more products can be selected to be added or removed. To add a product, please select the product from the 'Available Products' list and then select the 'Add Products' button. To remove a product, please select the product from the 'Selected Products' list and then select the 'Remove Products' button. Please use the shift or control key to select multiple products.

* **Available Products**

93787CO043 - AAA Idemnity 43 - Individual - Indemnity

93787CO044 - AAA Idemnity 44 - Individual - Indemnity

93787CO045 - AAA Idemnity 45 - Individual - Indemnity

93787CO046 - AAA Idemnity 46 - Individual - Indemnity

93787CO047 - AAA Idemnity 47 - Individual - Indemnity

93787CO048 - AAA Idemnity 48 - Individual - Indemnity

93787CO049 - AAA Idemnity 49 - Individual - Indemnity

Add Products

Add All Products

Remove Products

Remove All Products

* **Selected Products**

93787CO041 - AAA Idemnity 41 - Individual - Indemnity

93787CO042 - AAA Idemnity 42 - Individual - Indemnity

* **Effective Date**

(MM/DD/YYYY)

CREATE SUBMISSION AND CONTINUE

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After Products have been selected and the Effective Date of the Rate Increase has been provided, the Create Submission and Continue button will become active. Once the **Create Submission and Continue** button has been pressed, the system will save the submission and proceed to **Step 2: Part 1: Policy Form IDs & Tracking Number**. At this time, the submission will now display on the RRJ Homepage within the ‘Submission in Progress’ table. In addition, the system will now display the ‘RRJ Sticky Bar’ that will provide additional actions that may be performed during the submission creation. From the Sticky bar, the Issuer may ‘Return to Rate Review Justification’ which will send the Issuer back to the system Homepage. Additionally, the user may ‘Save’ the submission to record all currently submitted data within all steps or ‘Delete Submission’ to delete the active submission permitting a resubmission utilizing the same Issuer, Products and effective date.

Figure 4-4 Part 1: RRJ Sticky Bar



Note: The Save Submission button will only be active if new data is present since the last save action. The system will automatically save data between steps which will disable the save feature until new data has been entered.

Additionally, as the user moves forward into new steps they may revisit previously submitted steps by selecting the **Revisit this Step** button that will appear on the Summary of the previous step.

Figure 4-5 Revisit this Step



Within **Step 2 – Part 1: Policy Form IDs & Tracking Number** the Issuer will enter the ‘Policy Form ID(s)’ that apply to the submission. Lastly, the user has the option to enter in a

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'Filing Tracking Number', which is a number that may be utilized in SERFF or other applicable state systems. All fields with the exception of the 'Filing Tracking Number' field are mandatory. Once the user completes this section, the user may select the **Save and Continue** button to navigate to **Step 3 – Part 1: Rate Summary Form**.

Figure 4-6 Part 1: Policy Form IDs & Tracking Number

2 Part 1: Policy Form IDs & Tracking Number

To add a policy form ID, please enter the policy form ID in the textbox below and select the 'Add Policy Form ID' button. To remove a policy form ID, please select the policy form ID from the 'Selected Policy IDs' list below and select the 'Remove Policy Form ID' button. Please use the shift or control key to select multiple Policy IDs.

Enter Policy Form IDs

Add Policy Form ID ▾

* Selected Policy IDs

12345

Remove Policy Form IDs

Filing Tracking Number (SERFF or State ID if no SERFF ID exists for this filing)

12345

SAVE AND CONTINUE

On **Step 3 – Part 1: Rate Summary Form**, the user will be presented with the ability to submit the data for the Preliminary Justification. The information in this section will be captured within 8 parts starting with Base Period Data and ending with Range and Scope of Proposed Increase. During data entry, the system will perform automatic calculations and validation checks that will appear on the screen once all required data has been entered for the calculations.

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Figure 4-7 Step 3: Validations and Calculated Values

Service Category: Inpatient

| | | |
|---|--|---|
| <p>* Member Months</p> <input style="width: 90%; border: 1px solid #ccc;" type="text" value="60"/> | <p>* Net Claims</p> <div style="border: 1px solid #ccc; padding: 2px;"> \$ 756841 </div> <div style="border: 1px solid #ccc; background-color: #f8d7da; padding: 5px; margin-top: 5px;"> <p style="font-size: small; color: #7b172c; margin: 0;"> Error: The text entered in the "Net Claims" field is invalid. Please enter a value less than or equal to its associated "Total Allowed" value given a certain Service Category. </p> </div> | <p>* Total Allowed</p> <div style="border: 1px solid #ccc; padding: 2px;"> \$ 654789 </div> |
|---|--|---|

Service Category: Outpatient

| | | |
|---|---|---|
| <p>* Member Months</p> <input style="width: 90%; border: 1px solid #ccc;" type="text" value="60"/> | <p>* Net Claims</p> <div style="border: 1px solid #ccc; padding: 2px;"> \$ 12345 </div> | <p>* Total Allowed</p> <div style="border: 1px solid #ccc; padding: 2px;"> \$ 67894 ↑ ↓ </div> |
|---|---|---|

Data Calculation

| | | |
|-----------------------------|--------------------------|--------------------------|
| Cost Sharing | Cost Sharing PMPM | Net PMPM |
| \$55,549.000000000000000000 | \$925.816666666666700 | \$205.750000000000000000 |
| | | |
| Allowed PMPM | | |
| \$1,131.566666666666600 | | |

Once Step 3 has been completed, **Step 4 – Part 2: Upload Part 2 of the Preliminary Justification, the Written Description Justifying the Rate Increase** will become enabled. Within the written description the user will be required to enter a Justification if the requested rate increase is greater than 10%. If less than 10%, “N/A” may be entered as the written description is not required.

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Figure 4-8 Step 4: Written Description

4

Part 2: Upload Part 2 of the Preliminary Justification, the Written Description Justifying the Rate Increase

Please note that there is 16000-character limit. If this submission does not meet the 'subject to review' threshold of an increase of 10% of greater, please enter N/A in the field below.

*** Written Description**
15997 characters left

N/A

SAVE AND CONTINUE

For submissions being reviewed by HHS, they will be navigated to **Step 5 – Part 3: Upload Part 3 of the Preliminary Justification, the Rate Filing Documentation**. In this section, the user will be permitted to upload up to 10 documents pertaining to the Public Rate Filing and HHS Review Only Documentation. Once a file has been selected, the user may select the 'Add' button to associate the file to the submission. As a note, documents provided within the Public Rate Filing section will become available for public consumption once the submission has been reviewed by HHS and deemed appropriate for public dissemination.

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Figure 4-9 Step 5: HHS Documentation

5

Part 3: Upload Part 3 of the Preliminary Justification, the Rate Filing documentation

Please note that more than one file is accepted. File(s) must be in .xls, .xlsx, .doc, .docx, .pdf or .txt format and cannot exceed 10MB

*** Public Rate Filing Documentation**

BROWSE

No Files selected

Add

Please note that more than one file is accepted. File(s) must be in .xls, .xlsx, .doc, .docx, .pdf or .txt format and cannot exceed 20MB

*** HHS Review Only Documentation**

BROWSE

No Files selected

Add

SAVE AND CONTINUE

On **Step 6 – Submission Review (Step 5 – Submission Review for State Primary Submissions)**, the user can review the data and files that were submitted to the system. If edits are needed, the user may revisit a previous step and alter the previously entered data. Once the review is complete, the user may press the ‘Submit’ button to complete the submission. Once submitted, the user will be directed back to the RRJ Homepage and both the Issuer-Submitter and Attester of the submission will receive an e-mail notification stating that the submission is now ready for Attestation by the identified Issuer Attester.

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Figure 4-10 Step 5: HHS Documentation

6 Submission Review

Southern Farm Bureau Life Insurance Company-TX

| | |
|--|--|
| Submission Products: 10011TX023 - New Product 32 | Total Number of Products: 1 |
| Effective Date: 01/01/2021 | Filing Tracking Number: |
| Policy Form ID(s): 9999 | Total Number of Policy Form IDs: 1 |
| Submission ID: 100110110 | |

A. Base Period Data:

| | |
|----------------------------------|--------------------------------|
| Start Date: 12/31/2020 | End Date: 01/02/2021 |
|----------------------------------|--------------------------------|

Service Category: Inpatient

| | | |
|-------------------------------|---------------------------------|----------------------------------|
| Member Months: 100 | Net Claims: \$1000 | Total Allowed: \$10000 |
| Cost Sharing: \$100 | Cost Share PMPM: \$90 | Net PMPM: \$10 |
| Allowed PMPM: \$100 | | |

4.1.1 Issuer Choice

HHS has deemed that associated products within select states as eligible for Issuer Choice review submissions. A Rate Review Issuer Submitter can select which entity (their state or HHS) he/she wants to review the submission as seen in Figure 4-11. This functionality is only activated when an Issuer-Submitter’s submission meets the following criteria:

- The Issuer resides in a state that allows for issuer choice of the submission reviewer.
- The products selected for the submission belong to the correct Market Type.
- The products selected for the submission are Association products.

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Figure 4-11 Submission Reviewer controls

Submission Reviewer

You have selected an association product in a market where the State only conducts reviews on some types of association products (for example only sitused products). Please consult HHS' effective rate review program guidance and select either HHS or the State as the reviewer https://www.cms.gov/CCIIO/Resources/Fact-Sheets-and-FAQs/rate_review_fact_sheet.

*** Select Reviewer**

HHS

State

CREATE SUBMISSION AND CONTINUE

After selecting products in Step 1 of the Upload Preliminary Justification that are relevant for an Issuer Choice submission, the Preliminary Justification page will display the Issuer Choice selection as shown in Figure 4-11.

Once activated, an Issuer-Submitter must select either the HHS or State radio button to choose their Submission Reviewer. Once completed, the Issuer-Submitter can complete the rest of the Upload Preliminary Justification page as they would in the steps outlined above.

4.2 Submission Status Report

The **Submission Status Report** page allows Issuers to quickly search and select submissions within the Rate Review System. This page is the primary way to locate submission records and access them on the **Review Rate Data** page. The Submission Status Report page is accessible by selecting the **Submission Status Report** link on the **Rate Review System Home Page**.

Upon entering the Submission Status Report page, the user is provided with the option of the following search filters:

- Submission Type
- State
- Issuer / State
- Effective Date
- Submission ID
- Status field
- Submitted Date
- Attested Date

When defining the search criteria, multiple fields may be selected or have data entered. Once the user has defined the desired search criteria, the results will be provided after clicking the **Search** button.

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When a user requests a search, information will be provided in the Search Results table. By clicking the Submission ID link within the first column the system will allow the user to navigate directly to the **Review Rate Data** page displaying additional information on the selected submission. The following fields are presented within the search functionality:

- **Submission ID** – The system-wide unique ID for the submission is displayed. The Submission ID number provides a link that will navigate the user to the referenced submission.
- **State** - The State for the submission is displayed.
- **Issuer / State** - The Issuer/State for the submission is displayed.
- **Effective Date** - A date is provided in the MM/DD/YYYY format when the submission takes effect.
- **Submitted Date / Time** - The date and time the submission was received, is displayed in the ‘MM/DD/YYYY HH:MM:SS’ format.
- **Status** – Displays the current status of the submission as one of the following status indicators:
 - Deleted By CMS
 - Modified
 - New Submission in Progress
 - Not Compliant
 - Not Unreasonable
 - Not Unreasonable (Modified)
 - Pending Supplemental Submission
 - Pre-Attestation
 - Pre-Attestation Deleted
 - Rate Filing Accepted
 - Rate Filing Accepted (Modified)
 - Record Attested
 - Review Complete
 - Review in Progress
 - Supplemental Materials Received
 - Unreasonable (Rejected by State)
 - Unreasonable Final Justification Submitted
 - Unreasonable Final Justification Submitted (Modified)
 - Unreasonable Pre-Final Justification
 - Unreasonable Pre-Final Justification (Modified)
 - Withdrawn – Not Compliant
 - Withdrawn – Not Unreasonable
 - Withdrawn – Not Unreasonable (Modified)
 - Withdrawn - Prior to Determination

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- Withdrawn – Rate Filing Accepted
- Withdrawn – Rate Filing Accepted (Modified)
- Withdrawn – Unreasonable Final Justification Submitted
- Withdrawn – Unreasonable Final Justification Submitted (Modified)
- Withdrawn – Unreasonable Pre-Final Justification
- Withdrawn – Unreasonable Pre-Final Justification (Modified)
- **Days in Status** - A number will appear providing the length of time in days since the submission has been placed in its status.
- **Submission Type** - The type of submission will be identified as a HHS Primary or State Primary type.

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Figure 4-12 Submission Status Report

Submission Status Report

Please utilize the filters below to return specific submissions based on selected criteria. In order to return all submissions, please select the Search button without selecting any filters.


[◀ Return to Rate Review Justification](#)

Submission Type

State

Issuer/State

Effective Date



(MM/DD/YYYY)

Submission ID


Status (Select multiple statuses by holding down the CTRL key)

- Deleted By CMS
- Modified
- New Submission in Progress
- Not Compliant
- Not Unreasonable


Submitted Date From


(MM/DD/YYYY)


Submitted Date To


(MM/DD/YYYY)

Attested Date From


(MM/DD/YYYY)

Attested Date To


(MM/DD/YYYY)

SEARCH **RESET**

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Figure 4-13 Submission Status Report example: Submission ID sorted within State

| Submission ID | ST | Issuer/ST | Effective Date | Submitted Date/Time | Status | Web | Days in Status | Contractor Assigned | Sub Type |
|---------------------------|----|---|----------------|---------------------|----------------------------|-----|----------------|---------------------|-------------|
| 383440012 | AK | Premera Blue Cross Blue Shield of Alaska - AK | 02/13/2021 | | New Submission in Progress | N/A | 8 | | State Prima |
| 903510004 | AK | AFSTestPE Org 4 - AK | 10/03/2020 | | New Submission in Progress | N/A | 110 | | HHS F |
| 791650006 | AK | AFSTestPE Org 2 - AK | 03/20/2021 | | New Submission in Progress | N/A | 116 | | HHS F |
| 110820034 | AK | DO NOT USE RBIS ONLY - Aetna Life AK - AK | 11/01/2020 | | New Submission in Progress | N/A | 125 | | HHS F |
| 110820035 | AK | DO NOT USE RBIS ONLY - Aetna Life AK - AK | 05/15/2021 | | New Submission in Progress | N/A | 125 | | HHS F |

Note: The user may sort any column returned within the Submission Status Results. In addition, the table may be scrolled to the right or left to reveal hidden data due to space limitations.

4.3 Review Rate Data

The Issuer view of the Review Rate Data page is accessed by clicking the **Submission ID** link on the **Submission Status Report** page. The **Review Rate Data** page serves as the primary way to view submission summaries and submitted documentation within the Rate Review System.

Issuer users accessing this page will be provided the ability to review previously entered submission data and files. In addition, Issuer’s will be provided with the ability to modify or delete submissions which have not been attested. For Attester users, they may use this page to attest to the completeness and accuracy of the submitted data.

Once the submission has been attested, Issuer’s may utilize this page to provide supplemental or modification materials as requested by state or CMS reviewers. Additionally, the Review Rate Data page provides Issuers with the option to submit Unreasonable Justification comments if the submission has been deemed Unreasonable by the reviewing authority.

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Once on the Review Rate Data page, the user can view the Submission Summary. The displaying the following data regarding the selected submission:

- Date/Time Submitted for Review
- Submission ID
- Status
- Submitter
- Attester
- Date/Time Attested
- NAIC Company Code
- Submission Type
- Market Type
- Association Type
- Submission Products
- Total Number of Products
- Policy Form ID(s)
- Total Number of Policy Form IDs
- Filing Tracking Number
- Effective Date

The user can view or download applicable files within the following submission parts:

- Rate Summary Form (via the **View Submission Data** button)
- Written Description Justifying the Rate Increase
- Public Rate Filing (HHS Primary submissions only)
- HHS Review Only (HHS Primary submissions only)
- Supplemental Material(s) (HHS Primary submissions only, upon HHS Request)
- Modification Material(s) (Upon Reviewer Approval/Request)
- Issuer Final Justification for an Unreasonable Rate Increase (if applicable)

The user is able to delete the submission when it is in the Pre-Attestation status by selecting the **Delete Submission** button provided within the Action bar.

NOTE: This is the only point in the submission process where an Issuer may suppress information from being posted on the HealthCare.gov. Following attestation, HHS reviewers will determine if a submission is deemed suitable for web posting, regardless of the final disposition of the rate review.

Once deleted, the submission will be in the **Pre-Attestation Deleted** status. The Rate Review Issuer Attester user also has the ability to attest to the submission by selecting the **Attestation** button and selecting the **Save** button. Once attested, the submission will be

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placed in **Record Attested** status. The system will display the user who attested the submission and the date/time the attestation took place. In the event that a submission modification is needed, the Issuer user may request their HHS or State Reviewer to **Unlock** the submission. By unlocking a submission, a Rate Review Issuer Submitter may modify previously entered data and upload Modification files to further assist with the review process.

Figure 4-14 Submission Action Bar with Attest and Delete buttons

Review Rate Data for Southern Farm Bureau Life Insurance Company-TX

Select the Save button to submit the updates made to this Submission.
Please note, a field with an asterisk (*) before it is a required field.

◀ Return to Submission Status Report
Attest Submission
Delete Submission

Save Submission

Submission Summary

| | |
|---------------------------------------|--|
| Date/Time Submitted for Review | Submission ID |
| 01/26/2021 09:09:55 AM | 100110113 |
| Status | Submitter |
| Pre-Attestation | ***** |
| Attester | Date/Time Attested |
| N/A | null |
| NAIC Company Code | Submission Type |
| 68896 | HHS Primary |
| Market Type | Association Type |
| Individual | Non-Association Product |
| Submission Products | Total Number of Products |
| 10011TX022 - New Product 31 | 1 |
| Policy Form ID(s) | Total Number of Policy Form IDs |
| 79797979 | 1 |
| Filing Tracking Number | Effective Date |
| N/A | 01/27/2021 |

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The submission summary also provides links to the following pages:

- Submission Data
- Modification Materials (if applicable)
- Upload Supplemental Materials (if applicable)
- Submission Status Report

Figure 4-15 Record Materials

Record Materials

Written Description Justifying the Rate Increase

[Redacted]

| | |
|---|--|
| Public Rate Filing 508checklist.pdf | HHS Review Only 508checklist.pdf |
|---|--|

| | |
|-----------------------------|--------------------------|
| View Submission Data | Modify Submission |
|-----------------------------|--------------------------|

To view the data captured from the Rate Summary Form, the user will select the View Submission Data link. The Submission Data – Rate Increase Summary page will display the following fields:

- Issuer/State
- Product
- Effective Date
- Date/Time Submitted for Review

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Figure 4-16 Submission Data

| Submission Details | | |
|---|---|--|
| Issuer/State Southern Farm Bureau Life Insurance Company-TX | Submission Products 10011TX022 - New Product 31 | |
| Effective Date 01/27/2021 | Date/Time Submitted for Review 2021-01-26 09:09:55.06 | |

| A. Base Period Data | | |
|--|---|---|
| Start Date 01/27/2021 | End Date 02/01/2021 | |
| Inpatient Member Months 100 | Inpatient Net Claims \$100 | Inpatient Total Allowed \$100 |
| Inpatient Cost Sharing \$100 | Inpatient Cost Share PMPM \$0 | Inpatient Net PMPM \$1 |
| Inpatient Allowed PMPM \$1 | | |

The page will also display the Rate Summary Form data, collected at the time of submission creation. The Rate Review Issuer Attester user will have access to attest the submission from the Submission Data page if the submission has not yet been attested. The user will select the Return to Rate Review Data to navigate back to the Submission Summary page.

4.4 Upload Supplemental Materials

The Upload Supplemental Materials feature is provided for Issuer users to respond to requests from HHS Reviewers for additional information needed to complete a review. The Upload Supplemental Materials feature is accessible on the **Review Rate Data** page once a request has been made. Only users with the role of Submitter will be able to access this functionality.

Upon entering the Review Rate Data page, the submitter user will be able to view the **Supplemental Material Information** section displaying the requested Supplemental Material comments from the HHS reviewer as shown below:

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Figure 4-17 Submission Data

Supplemental Material Information

To Request Supplemental Materials from the Issuer, please select the Request Supplemental Materials button below.

Supplemental Comments/Materials

Supplemental Material Request Comments

The following additional information is needed to assist in determining your review: 1) File A 2) File B

[Request Supplemental Materials](#)

[Upload Supplemental Files](#)

To complete the Supplemental Materials Request, the Issuer may select the **Upload Supplemental Files** button which will prompt the Upload Supplemental Materials page.

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Figure 4-18 Upload Supplemental Materials Page

Upload Supplemental Materials

Review Rate Data for AAA-CO

| | |
|--|--|
| Submission Products: AAA Idemnity 1 | Total Number of Products: 1 |
| Filing Tracking Number: | Effective Date: 04/01/2021 |
| Policy Form ID(s): dfgdgf | Total Number of Policy Form IDs: 1 |
| Date/Time Submitted for Review: 01/19/2021 14:24:42 PM | Submission ID: 937870059 |
| Status: Pending Supplemental Submission | |

Submission Summary

| | |
|--|---|
| HHS Request Date: 01/26/2021 14:14:21 PM | Submission Deadline: 02/09/2021 |
| HHS Comments: Test to request supplemental materials with emails | |

Please note that more than one file is accepted. File(s) must be in .xls, .xlsx, .doc, .docx, .pdf or .txt format and cannot exceed 20MB

***Upload Supplemental Materials**

BROWSE No Files selected **Add**

Submit **Cancel**

On the Upload Supplemental Materials page, the Issuer will be able to view comments made by a HHS Reviewer for the selected submission and be provided the ability to upload one or multiple supplemental documents meeting the required criteria. The required criteria for supplemental uploads restrict the document(s) to .xls, .xlsx, .doc, .docx, .pdf, or .txt formats with file sizes smaller than 20 megabytes. When the user has selected the supplemental materials, they may press the **Add** button to upload the document to the submission. In the event that an incorrect file has been uploaded, the user may select the **Remove** button to

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remove the file from the submission. Once all files have been uploaded, the user may select the **Submit** button to upload the files to the system or the **Cancel** button to leave the page.

Figure 4-19 Upload Supplemental Materials Document Display

The screenshot displays the 'Upload Supplemental Materials' interface. At the top, there is a header '*Upload Supplemental Materials'. Below this, there is a 'BROWSE' button on the left and an 'Add' button on the right. A dashed box highlights the 'File(s) to Upload' section. This section contains three file entries: 'Test2.doc', 'Test5.docx', and 'Test6.docx'. Each file entry has a red 'REMOVE' button to its right. At the bottom of the interface, there is a blue 'Submit' button on the left and a red 'Cancel' button on the right.

4.5 Modify Submission

The Modify Submission feature allows Issuer users to edit previously provided submission information that was submitted as part of the Preliminary Justification. To Modify a submission, a, Issuer must request the ability to modify from a State or HHS representative who is responsible for the review of the submission in question. Once the submission has been approved for Modification, the Issuer Submitter may select the **Modify Submission** button within the Record Materials section of the Review Rate Data page to edit existing information.

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Figure 4-20 Modify Submission Selection

Record Materials

Written Description Justifying the Rate Increase

The requested average rate increase for our Nevada Small Group business is 19.2%. There are 150 covered lives who will be impacted by this rate increase. Depending on the group's network and deductible, the increase will range from 11.0% to 41.9%. Below is the 2011 experience for this product. Premium Revenue 16,168,131 Claims Expense 13,893,615 85.9% General & Administrative Expense 4,352,030 26.9% Gain/Loss -2,077,514 -12.8% This rate increase is needed to keep up with the increasing costs of major medical insurance. Medical trend is assumed to continue at an annual rate of 13%. This is driven by increases in unit cost, utilization and benefit leveraging. We use a target loss ratio approach to determine the needed rate change. The loss ratio is the ratio of incurred claims to earned premium. In Nevada, the target loss ratio is 77.0%, which equates to the 80.0% Medical Loss Ratio under the Patient Protection and Affordable Care Act. In 2011 we were in an underwriting loss position in Nevada. Experience in the state of Nevada is not credible on its own. With the 19.2% rate increase, we are expecting to be in an underwriting loss position for 2013 in the state of Nevada when credibility weighted with nationwide premium. The main drivers of our administrative expenses are employee salaries and benefits, agent commissions, and premium taxes, licenses and fees. We are working to lower our administrative expenses to improve our profitability.

Public Rate Filing

HHS Review Only

[View Submission Data](#)

[Modify Submission](#)

After accessing the Modify Submission page, Issuers will be provided the ability to Revisit the individual sections of data provided within the Upload Preliminary Justification upload. This feature will permit the edit of all submission data with the exception of Step 1 information pertaining to the Issuer/State, Market Type and Association Type.

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Figure 4-21 Modify Submission – Revisiting a previous Step – Part A

RRJ Upload Preliminary Justification

Please note a field with an asterisk (*) indicates a required field.

[Cancel Modification](#)

1 Part 1 : Issuer Information, Product(s) and Effective Date [Revisit this step](#)

Issuer Name: AAA-CO

Market Type: Individual

Association Type: Non-Association Product

Effective Date: 01/29/2021

1 Product(s) have been added.

Reviewer: HHS

2 Part 1: Policy Form IDs & Tracking Number [Revisit this step](#)

1 Policy Form ID(s) have been added.

3 Part 1: Rate Summary Form [Revisit this step](#)

Table A through F complete.

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Figure 4-22 Modify Submission – Revisiting a previous Step – Part B

[Cancel Modification](#)

1

Part 1 : Issuer Information, Product(s) and Effective Date

Please provide the issuer information below.

Issuer/State
AAA-CO

Market Type
Individual

Association Type
Non-Association Product

Get products

Product(s) and Effective Date

One or more products can be selected to be added or removed. To add a product, please select the product from the 'Available Products' list and then select the 'Add Products' button. To remove a product, please select the product from the 'Selected Products' list and then select the 'Remove Products' button. Please use the shift or control key to select multiple products.

*** Available Products**

93787CO041 - AAA Idemnity 41 - Individual - Indemnity
93787CO042 - AAA Idemnity 42 - Individual - Indemnity
93787CO043 - AAA Idemnity 43 - Individual - Indemnity
93787CO045 - AAA Idemnity 45 - Individual - Indemnity
93787CO046 - AAA Idemnity 46 - Individual - Indemnity
93787CO047 - AAA Idemnity 47 - Individual - Indemnity

Add Products ▾

Add All Products +

Remove Products ▴

Remove All Products -

*** Selected Products**

93787CO044 - AAA Idemnity 44 - Individual - Indemnity

Effective Date
01/29/2021

Submission Reviewer

You have selected an association product in a market where the State only conducts reviews on some types of association products (for example only sitused products). Please consult HHS' effective rate review program guidance and select either HHS or the State as the reviewer https://www.cms.gov/CCIIO/Resources/Fact-Sheets-and-FAQs/rate_review_fact_sheet.

*** Select Reviewer**

HHS

State

NEXT

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Once the user has completed modifying submission data, they must explain the modification within the comments box and describe any attached files. The user may upload files providing detailed information or exhibits related to the modification and these documents should provide information that would have a material impact of the CMS review of the rate increase. The system will allow multiple files to be uploaded and the total file size of the modification materials may not exceed 20MB. The required criteria for Modification Files restrict the document(s) to the following formats:

- .xls
- .xlsx
- .doc
- .docx
- .pdf
- .txt

Figure 4-23 Modify Submission – Revisiting a previous Step – Part B

6 Explanation of Modification

* Explanation of Modification
2000 characters left

Error: The "Explanation of Modification" is a required field. Please enter the "Explanation of Modification".

Please note that more than one file is accepted. File(s) must be in .xls, .xlsx, .doc, .docx, .pdf or .txt format and cannot exceed 20MB

* Upload Modification Materials

BROWSE No Files selected Add

NEXT

When the Issuer is ready to submit their modification, they will select the **Submit Modification** button displayed after the Submission Review section. The modification will then be displayed in the View Modification Materials section with new data displayed within the View Submission Data section.

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4.6 Enter Unreasonable Rate Increase Final Justification

The Enter Unreasonable Rate Increase Final Justification feature is accessible on the Review Rate Data page for submissions determined to be unreasonable. The Issuer user will use this feature to submit an unreasonable rate increase justification or will be provided the option to withdraw their rate review submission within the action bar.

Once on the Review Rate Data page Issuer users accessing a submission with an Unreasonable status will be able to view the **Final Justification Comments** feature. Within this section, Issuer users may select the **Upload Final Justification Comments** to enter their Submission Justification comments.

Figure 4-24 Final Justification Comments

Final Justification Comments

This submission has been found unreasonable and the option to provide an Unreasonable Final Justification comment is now available. Please select the Upload Unreasonable Final Justification button below to provide a Final Justification for the submission. Alternatively, you may withdraw your submission by selecting the Withdraw button available below.

| Issuer Response Submitter | Issuer Response Date |
|---------------------------|----------------------|
| N/A | null |

Issuer Final Justification for Unreasonable Rate Increase Justification
N/A

Upload Final Justification Comments

Once on the Enter Unreasonable Rate Increase Justification page, the user can review Submission information and Comments provided from the Reviewer. Within the text field, Issuer users can enter the Unreasonable Rate Increase Justification comments (fewer than 16000 characters) to be submitted for the associated submission. Once complete, the Issuer may select the Submit button to complete the submission of Justification comments or Cancel button to return to the Review Rate Data page.

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Figure 4-25 Final Justification Comments

Enter Unreasonable Rate Increase ✕

Review Rate Data for AAA-CO

| | |
|--|--|
| Submission Products: AAA Idemnity 44 | Total Number of Products: 1 |
| Filing Tracking Number: | Effective Date: 01/29/2021 |
| Policy Form ID(s): 12345 | Total Number of Policy Form IDs: 1 |
| Date/Time Submitted for Review: 01/28/2021 08:29:29 AM | Submission ID: 937870064 |
| Status: Unreasonable Pre-Final Justification | |

Submission Summary

| | |
|--|---|
| Review Date: 01/28/2021 09:42:39 AM | Submission Deadline: 02/11/2021 |
| Reviewer Comments: Unreasonable Rate Increase - HHS Comments | |

Insert comments to respond to Unreasonable status. There is a 16000 character limit.

*** Unreasonable Rate Increase Justification**
15972 characters left

Final Justification Comments

SubmitCancel

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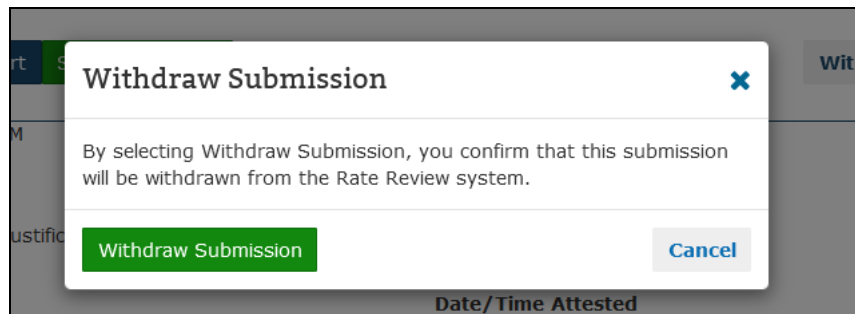
Alternatively, Issuer users may opt to **Withdraw** their submission from the Rate Review process. To perform this action the Issuer may select the **Withdraw** button within the Submission Action Bar on the Review Rate Data page.

Figure 4-26 Withdraw Submission



Once the Withdraw Submission button has been selected, the Issuer will need to confirm their action by selecting **Withdraw Submission** on the system notification prior to any action being performed.

Figure 4-27 Withdraw Submission Notification



Additionally, the Withdraw functionality may also be performed once a Final Justification has been performed by following the steps provided previously provided.

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5 State User

Within the Rate Review System, the State user can review submission data and make determinations on a submission, if applicable. Furthermore, they can search for submissions using the Submission Status Report. Below is a screenshot of the State Rate Review Home Page in Figure 5-1. This page will display after the State Reviewer user logs into HIOS and clicks on the **Rate Review System** button.

Figure 5-1 State Rate Review Home Page

The screenshot shows the 'Health Insurance Oversight System' interface. At the top, there is a navigation bar with 'Home', 'Knowledge Center', and 'Help' links. The main content area is titled 'Rate Review Justification' and includes a welcome message, a note about ACA Compliant Plans, and a section titled 'What would you like to work on today?'. This section contains a 'Submission Status Report' box and a 'Related Links' box. The 'Submission Status Report' box states: 'Users can search previously completed submissions to view current status and review submitted data.' The 'Related Links' box lists: 'CMS Rate Review Page', 'Healthcare.gov', 'Preliminary Justification Instructions [PDF, 359KB]', and 'User Manual [PDF, 4750KB]'. Below the 'Related Links' box is a 'Questions?' section with contact information for policy questions (ratereview@cms.hhs.gov) and technical assistance (CMS_FEPS@cms.hhs.gov or 1-855-267-1515). At the bottom, there is a dark blue bar with icons and text for 'VISIT KNOWLEDGE CENTER', 'SUBMIT A TICKET', and 'GIVE US FEEDBACK'. Below this bar are links for 'ACCESSIBILITY', 'RULES OF BEHAVIOR', 'WEB POLICIES', and 'FILE FORMATS AND PLUG-INS'. The footer includes the CMS logo, the text 'A federal government website managed by the Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore, MD 21244', and the Department of Health & Human Services logo.

Health Insurance Oversight System – Rate Review System Technical Instructions

5.1 Submission Status Report

The **Submission Status Report** Page allows States to quickly search and select submitted data within the Rate Review System and should be used primarily to locate all associated submissions. The Submission Status Report page is accessible by selecting the **Submission Status Report** link on the Rate Review System Home Page. Only users with the appropriate State user role will be able to access this view of the page.

Upon entering the Submission Status Report page, the user is provided with the option of the following search filters:

- Submission Type
- State
- Issuer / State
- Effective Date
- Submission ID
- Status field
- Submitted Date
- Attested Date information.

One or multiple fields may be selected or have data entered when defining search criteria. Once the user has defined the desired search criteria, results will be provided after clicking the **Search** button.

When a user requests a search, the following information will be provided in the Search Results table. A link is provided within the Submission ID column that will allow the user to navigate directly to the Rate Review page displaying additional information on the selected submission. The following fields are presented within the search functionality:

- **Submission ID** - Provides information regarding the Identification number of the submission. The Submission ID number provides a link that will navigate the user to the referenced submission.
- **State** - The State for the Rate Review submission is displayed.
- **Issuer / State** - The requesting Issuer name and providing state is displayed.
- **Effective Date** - A date will be provided in the Month/Day/Year format designating the date the submission is to take effect.
- **Submitted Date / Time** - The date and time when the submission was received, displayed in the 'MM/DD/YYYY HH:MM:SS' format.
- **Status** – Displays the current status of the submission as one of the following status indicators:
 - Deleted by CMS
 - Modified

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- Not Compliant
- Not Unreasonable
- Not Unreasonable (Modified)
- Pending Supplemental Submission
- Pre-Attestation
- Pre-Attestation Deleted
- Rate Filing Accepted
- Rate Filing Accepted (Modified)
- Record Attested
- Review Complete
- Review in Progress
- Supplemental Materials Received
- Unreasonable (Rejected by State)
- Unreasonable Final Justification Submitted
- Unreasonable Final Justification Submitted (Modified)
- Unreasonable Pre-Final Justification
- Unreasonable Pre-Final Justification (Modified)
- Withdrawn – Not Compliant
- Withdrawn – Not Unreasonable
- Withdrawn – Not Unreasonable (Modified)
- Withdrawn - Prior to Determination
- Withdrawn – Rate Filing Accepted
- Withdrawn – Rate Filing Accepted (Modified)
- Withdrawn – Unreasonable Final Justification Submitted
- Withdrawn – Unreasonable Final Justification Submitted (Modified)
- Withdrawn – Unreasonable Pre-Final Justification
- Withdrawn – Unreasonable Pre-Final Justification (Modified)
-
- **Web** – A Y or N will appear depending on if the Preliminary Justification has been web posted on HealthCare.gov or not.
- **Days in Status** - A number will appear providing the length of time in days since the submission has been placed in its status.
- **Contractor Assigned** - A Y or N will appear depending on if the submission has been assigned to a contractor organization.
- **Submission Type** - The type of submission will be identified as a HHS Primary or State Primary type.

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Figure 5-2 Submission Status Report Search Filters

Submission Status Report

Please utilize the filters below to return specific submissions based on selected criteria. In order to return all submissions, please select the Search button without selecting any filters.

[◀ Return to Rate Review Justification](#)

Submission Type

State Primary

State

Issuer/State

Effective Date

Submission ID

Status (Select multiple statuses by holding down the CTRL key)

Deleted By CMS
Modified
Not Compliant
Not Unreasonable
Not Unreasonable (Modified)

Submitted Date From

Submitted Date To

Attested Date From

Attested Date To

SEARCH **RESET**

Health Insurance Oversight System – Rate Review System Technical Instructions

Figure 5-3 Submission Status Report Data Table

(Select a Submission below to access the appropriate review page for more information on the rate submission. Search results may be sorted by selecting the column headings. Sorting options may be reset by selecting the Search button.)

Showing results for Submission Type: State Primary

Showing 1-10 of 68 records **Records per page** 10 ▾

| Submission | ST | Issuer/ST | Effective Date | Submitted Date/Time | Status | Web | Days in Status | Contractor Assigned | Submission Type |
|----------------------|----|-------------------------------------|----------------|---------------------|--------------------------------------|-----|----------------|---------------------|-----------------|
| 0023 | DE | AAA - DE | 04/10/2021 | 01/21/2021 03:46:59 | Modified | N/A | 2 | N | State Primary |
| 0011 | NJ | Aetna Health Inc. (a NJ corp.) - NJ | 04/01/2021 | 01/12/2021 08:40:05 | Unreasonable Pre-Final Justification | Y | 3 | N | State Primary |
| 0021 | CO | AAA - CO | 07/29/2019 | 01/28/2021 02:49:32 | Pending State Decision | Y | 0 | N | State Primary |
| 0002 | CO | Aetna Health Inc. (a PA corp.) - CO | 07/26/2019 | 09/24/2020 11:25:45 | Modified | N/A | 50 | N | State Primary |
| 0020 | CO | AAA - CO | 07/26/2019 | 01/28/2021 02:50:29 | Pending State Decision | Y | 0 | N | State Primary |
| 0019 | CO | AAA - CO | 07/26/2019 | 01/28/2021 03:17:55 | Rate Filing Accepted (Modified) | N/A | 0 | N | State Primary |
| 0018 | CO | AAA - CO | 07/24/2019 | 09/24/2020 11:25:04 | Modified | N/A | 51 | N | State Primary |
| 0003 | CO | Aetna Life Insurance Company - CO | 06/20/2019 | 06/06/2019 04:56:36 | Modified | Y | 51 | N | State Primary |
| 0016 | CO | AAA - CO | 06/05/2019 | 09/29/2020 01:27:55 | Withdrawn - Not Unreasonable | N/A | 24 | N | State Primary |
| 0015 | CO | AAA - CO | 06/06/2019 | 06/06/2019 03:41:23 | Pre-Attestation Deleted | N/A | 35 | N | State Primary |

<
First
Previous
1
2
3
4
5
Next
Last
>

As an additional feature, each column of the returned results may be sorted in ascending or descending order to help categorize specific submissions.

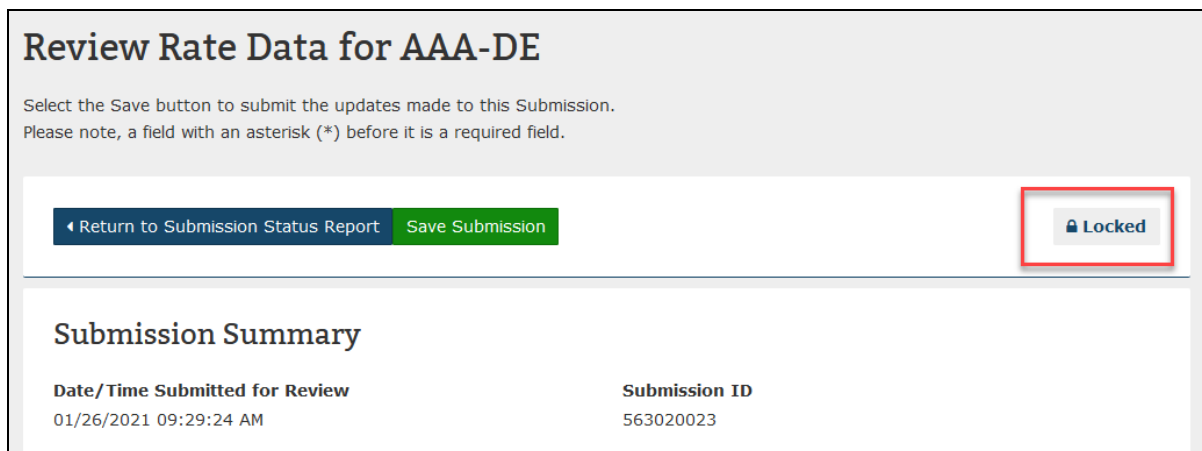
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5.2 State Rate Review Page

The user can navigate to the State Rate Review page by selecting a submission on **the Submission Status Report**. From the Review Rate Data page, the user can view, review and download the record materials. In addition, the user may view modification materials (for State Primary submissions only) if present, and set a determination to submissions in which the State is the primary reviewer.

State users also maintain the ability to **Unlock** State Primary submissions for their associated state. The Lock button is located on the right side of the Rate Review Action bar and by selecting it will unlock a submission for Issuer modification. Issuers may modify previously submitted Preliminary Justification Data, Products or uploaded documents during this time. Once the Issuer has completed modifications or in the event that the Reviewer modifies the system status the submission will become locked preventing any further edits without reviewer permission.

Figure 5-4 State Submission Lock Button



The screenshot shows the 'Review Rate Data for AAA-DE' page. At the top, there is a title and a note: 'Select the Save button to submit the updates made to this Submission. Please note, a field with an asterisk (*) before it is a required field.' Below this, there is a navigation bar with two buttons: 'Return to Submission Status Report' (blue) and 'Save Submission' (green). On the right side of this bar, there is a 'Locked' button with a lock icon, which is highlighted with a red rectangular box. Below the navigation bar, there is a 'Submission Summary' section with two columns: 'Date/Time Submitted for Review' (01/26/2021 09:29:24 AM) and 'Submission ID' (563020023).

In the event that the Submission should be re-locked prior to an Issuer completing modifications. The Reviewer may select the Unlocked button to re-lock the submission preventing any further modifications.

The State user will be allowed to make a determination on submissions that are a State Primary Submission Type and have been attested by the Issuer. The State user can also view submission documents for submissions that have yet to be attested, have been deleted or withdrawn, or are an HHS Primary submission within their state. In these cases, the State user will not be able to make a final determination.

In order to set a determination to any of the below statuses, external comments must be entered:

- Submissions with Threshold Rate Increases or Modified Rate Change % at 10% or above:
 - Not Unreasonable

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- Not Unreasonable (Modified)
- Unreasonable (Rejected by State)
- Unreasonable Pre-Final Justification
- Unreasonable Pre-Final Justification (Modified)
- Submissions with Threshold Rate Increases or Modified Rate Change % below 10%:
 - Not Compliant
 - Rate Filing Accepted
 - Rate Filing Accepted (Modified)

The external comments will be displayed on the public facing HealthCare.gov. Both the State and HHS reviewers will also be provided an internal comments box that will display comments from both user types. The Modified Rate Change field will require a numeric value if a manual adjustment to the rate increase is needed.

Note: In order to validate the Modified Rate and display the applicable statuses the state user must press the **Apply Modified Rate** button and select **Save Submission**. Once the Modified Rate has been applied the page will refresh and display any applicable statuses based on if the modified rate is at 10% and above or below 10%.

When the user is ready to assign a determination to the submission, the reviewer will select the determination using the values in the status dropdown menu, provide a modified rate change value and apply (if applicable), provide external comments (if required), and click on the **Save** button. A confirmation message will display stating that the changes have been made for this submission.

If an error is made in entering in any internal or external comments, the user can change the status to **Review in Progress**, then select the **Save** button. The comments boxes will be editable again and any changes may be made. Once the reviewer makes provides any requested changes, they may change the status to the appropriate determination and select the **Save** button again. The status dropdown will always remain enabled for the State Reviewer unless the submission is a HHS primary submission, is in Pre-Attestation status, or has been deleted or withdrawn.

To return to the Rate Review Home Page from the State Rate Review page, select the **Home** button in the top left hand corner of the page. To return to the Submission Status Report, select the **Return to Submission Status Report** link. The most recent search criteria used in the Submission Status Report will display.

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Figure 5-5 State Rate Review Page - Part A

Review Rate Data for AAA-DE

Select the Save button to submit the updates made to this Submission.
Please note, a field with an asterisk (*) before it is a required field.

◀ Return to Submission Status Report
Save Submission
🔒 Locked

Submission Summary

| | |
|---------------------------------------|--|
| Date/Time Submitted for Review | Submission ID |
| 01/26/2021 09:29:24 AM | 563020023 |
| Status | Submitter |
| Modified | Mooru Naama |
| Attester | Date/Time Attested |
| Mooru Naama | 01/21/2021 15:46:59 PM |
| NAIC Company Code | Submission Type |
| N/A | State Primary |
| Market Type | Association Type |
| Individual | Association Product |
| Submission Products | Total Number of Products |
| 56302DE030 - AAA Idemnity 30 | 1 |
| Policy Form ID(s) | Total Number of Policy Form IDs |
| sdfsdf | 1 |
| Filing Tracking Number | Effective Date |
| N/A | 04/10/2021 |

Record Materials

Written Description Justifying the Rate Increase
erwerewrwerew ewrwerwer erwerewrwr

View Submission Data

Submission Web Data Release

The following options will permit CMS users to release Submission information for Public Dissemination. By Selecting Yes for the Release Submission for Public Dissemination field all Submission data and Public Rate Review files will become available for Public Review. If No is selected, External comments will be required, and the Submission will be placed in the status of CMS Deleted and prevent any future updates.

Once a Justification for an Unreasonable Rate Increase has been provided, a CMS user may select Yes within the Release Issuer Final Justification for Unreasonable Rate Increase Justification for Public Dissemination to release the Justification for Public Review.

Release Status
Suppressed

Release Submission Information for Public Dissemination

Yes
 No

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Figure 5-6 State Rate Review Page – Part B

View Modification Materials

Please select the Modifications Submitted link to view the previously submitted Explanation of Modification.

| | |
|---|---|
| Date of Modification 01/26/2021 09:29:24 AM | File Names(s) TEst1@#\$%^&.docx (11 KB) |
|---|---|

Explanation of Modification
[Redacted]

Submission Review

Status
[Dropdown menu]

Modified Rate Change %
[Input field]

State Internal Comments
N/A

Public comments on review findings and determination.
External Comments (Required for Final Disposition)
5000 characters left
[Text area]

State Internal Comments
8000 characters left
[Text area]

Attested by
Mooru Naama on 01/21/2021 15:46:59 PM

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In addition to the features mentioned previously, State users will be able to view if a Submission has been released for public dissemination by an HHS Reviewer. This is performed by viewing the **Submission Web Release** section. If the Release Status is displayed as Available, the submission is being provided to RateReview.Healthcare.gov. If the system shows as Suppressed, the submission has yet to be released for Public display.

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6 Contact Us/Support

The following section captures support information for questions specifically related to policy, technical installation and downloads.

6.1 Contact Us/ Support Details

If you have questions related to using the application installation or need technical support, please contact the help desk at CMS_FEPS@cms.hhs.gov or at 1-855-267-1515.

- The help desk hours of operation currently are 7:45 AM to 1 AM EST, seven days a week (not including federal government observed holidays or closures).

If you have, questions related to Rate Review Justification policy, please contact ratereview@cms.hhs.gov.