

CCHIO-Wide War Room 10.3.13 AM

Action Items

- **Abigail** to get verification from Carlos that a change in HIOS to the issuer phone number will be pushed by x date to the Exchange in order to announce approach on issuer call today- if they change it in HIOS Classic, when will it be pushed to Plan Compare?
- Raise whether or not assisters should use the paper application at the group directors' meeting.

Overview

- PM has identified that several issuers have service areas and rating tables that do not match, leaving some **service areas with no rates**. The consensus of this group is to allow these service areas to be removed in Year 1, and then to tighten the rules and language around this issue in Year 2.
- The **data correction window** change requests are due from issuers today with evidence from their states; however, some issuers may struggle to get evidence from their states on this time-frame, and those will be looked at on a case-by-case basis with OG.
- **Navigator issues**: they should not be told to use paper applications until there is approval from leadership, they should default to the most likely program based on income when deciding whether to start enrollment in Medicaid or Exchange, and CMS should. communicate with Navigators via one-off conversations, rather than email blasts, for now.
- **Issuer phone numbers** are not appearing correctly on the Pay Now page because it is pulling data from HIOS instead of the admin template. Waiting to ask OIS how long it would take for updated issuer data in HIOS to be pushed to the Exchange before advising issuers.
- As of yesterday, there were **248 enrollments**.

Ongoing issues

- Experian identify-proofing issue for consumers
- CMS Enterprise portal identity-proofing issue for agent-brokers
- SADPs do not have estimated or guaranteed markers on Plan Compare
- Fixes for the disappearing notices are being implemented
- Fixes in the works for: the income issue, SSN, incarceration inconsistencies, and notices for eligibility for Medicaid/CHIP
- EIDM servers may have software issue
- Eligibility results are breaking intermittently
- Issuers are not receiving 834s when they should be

CIRT

834 issue- Raised here as well- issuers not receiving 834s that they should be getting.

Identity-proofing- Affecting 5-6 states that are SBMs; haven't heard FFM issues, but think that it is because of lower capacity. It could be an FFM issue later as capacity grows. There will be a call with the Experian management team today.

States are asking about attestations or alternatives until Experian issue is fixed. There might be a push to implement changes soon or allow states to do something different for a period of time. There is pressure to get back to states as soon as possible. The CIRT is actively working this.

PM

Service area and rating table differences- We called issuers who had service areas and rating tables that didn't match. These only provided rating tables for a portion of large service areas.

FL Preferred- One issuer resisted finishing those rate tables because they did not want to offer in that portion of their service area. We didn't suppress based on this during the suppression window. We haven't been able to test to see if they appear as \$0 premium plans in Plan Compare, but they do show up as \$0 premium plans in the Landscape.

What should Lisa Ann tell these folks?

If we allow this to occur, we would need to clarify next year that this action is not permissible.

Losing all the issuers who have service area and rating tables discrepancies could remove plans where only a few plans exist- further analysis is needed. Coventry Health and Life is OK is one of these.

Proposal: Fix this situation in Year 1, and set stronger parameters in Year 2.

Why can't they eliminate the county from the service area? That would clean it up, but it would reduce service area, which we are trying not to allow during change window.

How does this service area with no rate show up in Plan Compare? Does it show up in a problematic way? If it does not find a rate, it does not return a rate, so you wouldn't see the plan; this is theoretically how it would work. We can find out, but either way, if we accept that they submitted the coverage area in error, including a county they didn't want to include, we should allow for a correction to avoid this problem, whether we are showing 0s or showing nothing.

This would take care of the second lowest cost silver issue as well? Yes.

Proposal: Tell them to submit a change request for a service area change to remove that county.

Data Correction Window- Today is the day for issuers to turn in petitions. They are required to have evidence of state approval, and issuers are concerned about getting it in time.

During the question on the issuer call yesterday, Lourdes told them to do their best; the plan is to look at it on a case by case basis. Some states want to be involved and would want us to have their approval, even for URL changes, while others are not involved.

PM will work with OG when these come in on which ones to accept.

SADP Estimated Rates- In testing, there is a marker for SADP saying that the rates are guaranteed or estimated. Sometime during the scramble, that indicator disappeared (no longer

says estimated) and it was identified yesterday. CGI says they are fixing it, but we don't have a time-frame on that fix.

E&E

Notice fixes- are being tested and seem effective. Not deployed yet.

Other fixes- are beginning to be tested: the income issue, SSN, incarceration inconsistencies (those who are not incarcerated are getting an inconsistency online- separate from paper issue), notices for eligibility for Medicaid/CHIP (doesn't say which you are eligible for).

EDI dashboard- Yesterday got through 248 enrollments.

XOC Report-Out

834 issues- We think we sent 834s over but issuers did not receive them- trouble-shooting that problem. This problem surfaced at an XOC call this morning.

EIDM- Added server capacity but there are software configuration issues- trouble-shooting that problem.

Agent-broker Identity-Proofing- They are also having issues, but their process goes through the CMS Enterprise portal, not Experian, so these are two separate issues.

Eligibility results- Showing break intermittently. It also came up in the CIRT list.

OG

None.

SEG

Just identity-proofing issue.

CSG

Navigators and Paper Application- Given the computer system issues, should we be saying that paper is better for now? Should assisters who are sitting with consumers use paper?

Proposal: Raise the paper application issue at the group director meeting.

They are not supposed to retain any PII- how should they handle that with paper? They rely on the consumer to send in the application.

Medicaid and the Marketplace- HRSA grantees are reporting issues with interactions between Medicaid and the Marketplace.

Is it better to start the process entering through Medicaid and the Marketplace? Start where you think you will land. If the household income is sufficiently low, start in Medicaid.

Communications with Navigators- Stick with one-off conversations for now, and move to email blasts/other large communications in a week or two with approval.

Privacy and Security Group

MA pre-launch issue- SEG is already on top of this and all steps that need to be taken have been taken.

Issuer Phone Number Issue- Jeanette said that the customer service number on the Pay Now page is pulling from the HIOS template not the Administrative template.

Can issuers go into HIOS and put the right number there? They can do that, but it will affect what appears for their non-QHPs as well. It feeds Plan Finder; on the admin template, some have phone number specifically for QHPs.

We will want to ask OIS to fix this and feed from the admin template instead of the HIOS template. In the meantime, if issuers want to adjust HIOS, they can and it should feed forward to the change.

Brian's group will feed it to the Exchange via the service. *But will OIS feed it real-time?* When would the next refresh be- a question for Carlos.

Decision: Brian is OK with this, but need an answer from OIS to clarify when it would actually be finished in the system.

Action Item: Abigail to get verification from Carlos that a change in HIOS to the issuer phone number will be pushed by x date to the Exchange in order to announce approach on issuer call today- if they change it in HIOS Classic, when will it be pushed to Plan Compare?

Next Steps

Please share any agenda items for this afternoon with Natalie.

CCIIO Wide War Room Notes 10.11.13

Action Items

- **Raj** wants to take this as the first piece of business requirements for CNSI to work on building this report.
- **E&E and PM** chatting about who PM can have as a rep for clean-up team.

Takeaways

- **Weekend fixes** will be occurring, including defect fixes and the Spanish website. An EIDM alternative will be considered for implementation as well.
- **Red box errors** are being identified- once someone has a red box error, nothing inputted into the system is saved after that error. This errors impacts all applications, as even paper applications need to be inputted into this part of the system.
- Regarding **paper applications**, 1200 envelopes to the mailroom and 800+ paper applications and 50 SHOP applications (maybe 40+ in production). As we identify trends in the paper application issues, we can come up with training for Navigators to prevent those errors.
- The **Veterans Affairs data issue** (75% of their pings coming back as deceased) is still being investigated.
- **PM data changes** are being carried out in the system by issuers starting today, as **SERFF and HIOS are open**. About 250 changes requests were made and most were approved; a few one-off conversations are still occurring regarding complicated asks.
- A **data-cleaning team** is being put together to help solve data issues, both by solving the technical problem to prevent future challenges, and by anticipating and solving the impacts to issuers and consumers of the problems.

CIRT

Account transfer- CMCS says there are no account transfers yet. That service isn't supposed to have gone live yet. Outbound account transfer is planned for 11/1 and inbound for 11/15 and an interim direction where a slap file is used for statistical purposes for the Medicaid/CHIP agencies. It would just tell them which people to expect, not details.

Weekend Fixes- OIS talked about changes for the weekend: fixing defects tonight and then determine on Saturday if they are switching to the EIDM alternative- decision based on stability in the system and Spanish website go-live on Monday.

E&E

Spanish build- A few things in testing environment to be promoted on Sunday morning. We will be able to work on clean-ups after that.

Red-box errors- 8-10 other things in development for a subsequent build, but there is no timeline for a subsequent build. Now that many of the front-end log-in errors are cleared up, more attention is being paid to sign up errors or "red box errors." Once you get a red box error, nothing after that is saved. It is in diagnosis, and it is a technical issue.

Serco- E&E has been talking with the call center and Serco to get a heads up about what to do about “red box” situations. E&E can see back-end and Serco can see front-end, so joint feedback is beneficial.

APTC Errors- APTC eligible people getting benchmark plans of 0 and therefore, APTC’s of 0. It tries to call the benchmark plan and can’t, so provides a 0 to people who would have APTC.

Paper Application Statistics- 1200 envelopes to the mailroom and 800+ paper applications and 50 SHOP applications (maybe 40+ in production).

More than we expected on the SHOP side.

2 phenomena:

- 1) Consumers have paper applications with many supplemental documents (sending copies of documents rather than just pulling the information from them for their application) and;
- 2) There are envelopes that only contain supplemental documents.

Working to figure out what people are struggling with and how to improve the consumer experience. The call center is getting many fillable PDFs and the Serco workforce will be working on the fillable PDFs.

The call center has daily requests for paper applications upwards of 30,000. The same portal is used to determine eligibility no matter how the application is submitted (paper, online), so improving that experience for everyone matters and there is coordination to improve that experience.

Also, paper applications are coming in with the Navigators. If we see trends in errors, we can train on them to fix it.

Chris emailed Alissa about a Blue plan in the state of Michigan. Their coverage in the individual market terminates at year end. They want to learn about paper applications, and they have customer concerns about the website. Thoughts? The paper applications allow people to feel like they are moving forward in the process and provides another option; at the end of the day, we are all stuck in the same queue.

Verifications- Tickets open for the VA security issues mentioned yesterday (75% of pings showing deceased persons). Sorting through those right now and waiting to hear an update on it.

Information production data quality team- They were invited into process with OIS yesterday to look at enrollment data issues with CGI and QSSI. Folks are aware of a cancelations problem → they are not getting out of CGI and the HUB. The fix was supposed to be active on Oct. 6th, but now there is another problem that is preventing initial enrollments and cancelations through the HUB and to the issuer. About 1000 of the transactions did not make it; that’s about 15% of transactions early on. Trying to track this problem with the data quality team.

Daily Snapshot- About 800 were sent out last night. Failed 999s- 2 of them, but others are unaccounted for by the snapshot report. This captures traffic flow at a point in time. Also, new was 834 inbound traffic from Coventry yesterday. We might be getting confirmation transactions already from people already paying or having 100% APTC and not owing anything.

What does an inbound failed 999 mean? It could be a success or a failure. It is from the issuer back to us. It is the issuer reporting whether or not they could process the 834.

Action Item: Raj wants to take this as the first piece of business requirements for CNSI to work on building this report.

Agent/Brokers completing EIDM- Working on an outreach plan with a listserv, Booz Allen outbound calling and email desk. Next week we will attempting to stoke the furnace of agent brokers again and get more of them in; contingent on EIDM function. Trying to bring in 60,000 more.

PM

Data changes- Emails are out to issues letting them know SERFF and HIOS are open for resubmitting changes. We had 250 requests for data changes, small number not approved, but most were. Still working through a few one-off issues, like MetLife who put in all the coinsurance incorrectly and some plans in OK with EHB issues and rate issues. Working on the one-offs today as we receive changes.

SHOP

Testing- Begins next week on the soon to be implemented SHOP applications.

OG

PM and OG are working on the Oklahoma issues.

SEG

None.

CSG

None.

FM

None.

Others

Data clean-up needs for PM- Pulling together how to identify enrollees who are in plans that are not good → need names, HIOS IDs, etc. Going to have CGI pull the data; MIDAS not ready to pull the data. Share with Monique and share it with the data clean-up team. PM needs a rep on the clean-up team.

Action Item: E&E and PM chatting about who PM can have as a rep for clean-up team.

LMI 0000327

Data issues are happening that will need to be cleaned up and make sure that the data that needs to be cleaned is pushed to our business partners. Need repeatable processes for fixing data. Rules of the road for issuer and CMS actions.

Need to be able to understand downstream impacts or impacts on other services. Looking at data problems that come out of software problems → fix the problem and push out the correct data to get system back in sync when it is out of sync. We are already out of sync with what our system has and what our partners' systems have.

This group might overlap with Premium Discrepancies- need to see how it coordinates. Tie the groups closely together. CNSI can have a process, but CMS oversight needs to exist, and this group would coordinate that oversight.

This would be a joint OIS-CCIIO group. OIS calls out the issues and CCIIO identifies the implications.

Many people involved in this group have a history of success in trouble-shooting technical issues during their Part D work.

Cognosante will be involved in this effort.

Purposes: Diagnose issues going forward and clean-up data issues both from the technical side and the issuers/consumer side.

Next Steps: Slides being prepared to show with leadership. Raj needs support in building business requirements.

CCIIO Wide War Room 10.15.13

Action Items

- Joy to send names for the agent broker team to Natalie.
- Lourdes to share Kirk's call center segmented list with the group.
- Donna and Starr to take Meritas in AZ offline to solve.

Takeaways

- The **CIRT will not meet regularly** or develop reports anymore; they will continue to discuss urgent topics via an email thread.
- **CGI, OIS, and Red Hat split into two troubleshooting teams:** one for service operation errors and one for data clean-up.
- **3 issues with CHIP** registration have been identified and fixes are hoped to be in on Friday.
- **Navigators are using paper applications** in order to move applications forward; thus, we can expect an influx of paper aps this week.
- **Issuers who are frustrated** with their challenges in signing up enrollees are being encouraged to **three-way call the helpdesk** to register them, rather than referring them to the paper application.
- Decisions about **closing HIOS and SERFF** will be made between PM and OIS staff this morning in light of the data correction window.
- **All issuers (except one) are in cross-v** at the end of the data correction window; however, PM and OIS need to verify that all who needed to make changes made them.

CIRT

CIRT decided as of Friday that they did not need to meet anymore on the phone and they will not continue to send out their reports; however, they will continue to use email to discuss pertinent issues.

Ben's Update

Production deployment occurred over the weekend.

Upcoming Technical Fixes and the Process behind Them

OIS working with CGI bringing in folks from Red Hat and they split into two teams; one for service operation errors like 404s, and another for data clean-up.

Three Fixes Are Being Prepped for Friday

- 1) Kids weren't able to get CHIP; elements of the issue include a noticing issue, where kids are disappearing from the notice- that is handled and will be in production on Friday.
- 2) Not seeing the right questions in the application as they go through it in order to get CHIP- trying for a Friday fix.

- 3) When people answer questions about income discrepancies, they end up not getting the right answer (pushing into QHP when they should be in Medicaid/CHIP)- that is still being worked on and a data clean-up will go with it. Hoping for Friday as well.

Clean-up for those who got 0 max APTC's but shouldn't have- two groups of people: those who have picked plans already and those who have not picked plans yet.

E&E

Serco Update- FFPS needs to have data come out for Serco in order to continue simultaneous work streams.

At about 1,000 paper applications; volume up at the end of last week.

Working to share with leadership that Serco and call center are entering the same portal as consumers, so all are having problems. The number leadership is interested in is the number that have been entered and processed.

Navigators and Paper Applications- Navigators are seeing people very frustrated and walking away, so they are turning to paper applications to protect their reputations as people in the communities who can help, even though paper applications will not have a quicker result necessarily.

PM

Issuer Call Today- Dan Miller and OIS are leading an Issuer call today; direct enrollment 834 fixes for next week, housekeeping reminders, Q&A. The business and system integration meeting discussed these fixes last Friday.

Recommendation for Issuers Unable to Get Enrollees in the System- Mike and Alissa talked to the Blues on Friday about turning customers away; told them to three-way call the call center, rather than losing the customer on the phone and having them use paper. Alissa and Mike are working on a communications strategy. There is an issuer call on Thursday from 1-2:30pm; they are interested in 834 and enrollment topics. Mike and Alissa will work to make sure there is appropriate staffing at that call.

1200 enrollments last night.

Agent broker related working sessions?- Monique wants to put together a team to trouble-shoot issues. Doing so makes sense; Alissa to work on next steps.

Action Item: Joy to send names for the agent broker team to Natalie.

Deadline for HIOS Issuers to Complete Submissions was last night- everyone is in cross-v this morning, but we're not sure that everyone actually made the changes. We won't know if issuers have problems until we get the helpdesk tickets from the weekend through.

SERFF transfer ends at 5pm this evening- talking with NAIC today. Lourdes has from Kirk a call center list segmented by who called in, like agent broker, and a breakdown of issues like 834.

Action Item: Lourdes to share Kirk's call center segmented list with the group.

Remedy training is occurring this week- We want a report out on business requirements for our Remedy use by the end of the week.

Closing HIOS- Carlos says people want to close HIOS before the noon time that was planned. We would need another Ops Report to see if people are in cross-v, if we don't want to go with the 8:30 Ops Report in case anyone went out of cross-v since then. Lourdes and Starr called issuers yesterday to see how it was going, and all were in cross-v.

Meritas in AZ submitted somewhere else, not in HIOS. Starr will try to get them in before noon.

Action Item: Donna and Starr to take Meritas in AZ offline to solve.

Decision: PM will try to wrap up in HIOS before noon, but would like Carlos to wait until noon to shut down HIOS unless there is conversation around the decision first.

CCIIO Wide War Room Notes 10.21.13

Action Items

- **Beth** to invite Milan and Michael to the QHP War Room today to talk about URRT issues.
- **CSG** needs to update **SEG** on the Navigators' possible switch to paper applications after that decision is confirmed.

Takeaways

- Regarding the data correction window, **a dozen issuers have URRT issues** that would lead to APTC issues; **PM** will work on this topic with **OIS** during their QHP War Room.
- **No outbound 834s have went out since Thursday**; they were being held to prevent errors as changes were made over the weekend to the system and should be send out Monday night. Issuers have been informed of this process via email.
- Tomorrow's CCIIO Wide War Room will include **a tutorial on using the EDI dashboard**.
- There is an issuer call today from 12-2pm.
- The **VIA service is back up** and working appropriately.
- **CSG** received instruction that **Navigators are to complete paper applications** going forward. This instruction will be verified today, and as soon as it is verified, **SEG needs to know the outcome**, as states have asked questions about this topic.

PM

Data Correction Window Update- Data file sent to **OIS** on Friday with the statuses of all issuers that were overwritten with data correction window. A dozen issuers having issues with URRT that would cause APTC issues- that is a work in progress.

Aiming for an update to the data on the consumer-facing portal on the 23rd, but could be impacted by URRT issues.

A dozen plans have something missing in their URRT that is creating an issue. This impacts a dozen different issuers- unsure about how many plans it impacts.

Have Milan and Michael been engaged on this issue? Will invite them to the QHP War Room and flag it.

Action Item: Beth to invite Milan and Michael to the QHP War Room today to talk about URRT issues.

There is no update on the timeline for implementing these changes yet because of the URRT issues.

No update on the verification/certification portion of the data correction process.

E&E

Serco- They had over 3,000 applications submitted by the end of last week in paper form.

They can only get through the paper applications and can't get into the online system, correct?
Some have been able to get through; others cannot. Others still have issues with the paper ap and have to go back and request more information, so they are not there yet.

834s- No 834s have went out since Thursday night. Communications have went out from the CMS issuer communications email address to notify them that Friday 834s would go out over the weekend; then, they were informed that they would be tallied up for Monday night (tonight). They are trying to avoid replicating errors as fixes were going in over the weekend.

Dashboard- Received one on Saturday evening reflecting inbound activity. Tomorrow, there will be a presentation during the CCIIO Wide War Room on using the EDI Dashboard.

Today's Issuer Call- 12-2pm issuer call today. Dean will talk about a rating/premium issue to lead off; Jim will follow up on comments on the enrollment manual. Then, it is Q&A.

Do we have OIS representation at this one? Mary Kay and Mike typically attend.

If there are questions about stopping the outbound 834s, what are we telling them? If OIS there, they will share that information. Issuers have been receiving updates via email. Regarding why they are held up, if we don't have OIS on the line, we will say we will follow-up with a definitive answer.

VHA service- Taken down last week because it was creating delays, but it was put back up Saturday night and hasn't had any issues yet.

CSG

Navigators- Per Jim's request, we are to instruct Navigators to use paper applications rather than go through the call center. Need to make sure that paper aps are completed accurately to limit the work Serco has to do to follow up on inadequate information.

Confirm at the Jim/Gary meeting this morning.

Amanda would like an update on the outcome of this meeting, so that she can inform Idaho.

HRSA Question- *HRSA says that when the premium displays, it is only one set of figures, and they don't know if it is before or after APTC?* If there is only one figure, there is no APTC. If there are two figures, one is with APTC and one is the original.

If the person thinks they should have APTC, there may be glitches that are not providing APTC, so it doesn't necessarily mean they don't get it.

If provided the info, we can spot-check if we have application IDs to see if the person requested financial assistance, and therefore, whether or not they should have seen the message.

SEG

Action Item: CSG needs to update SEG on the Navigators' possible switch to paper applications after that decision is confirmed.

Agent-Broker

Agent-Broker incident- Agent reported getting eligibility information for someone who wasn't his customer. Working with OIS to look at it.

Has this been reported formally? Yes, through OIS channels.