



## Summary of CMS Final Rules for Aspects of Quality Rating System (QRS) and Covered California Comments for QHPs- as of July 21, 2014

### I. CAHPS based QHP Enrollee Experience Survey (EES) available for Fall 2015 Open Enrollment

HHS will provide the full EES results to the State Based Marketplace (SBM) beginning with the Fall 2015 beta test reporting. Presumably, “full EES results” will have three major components:

- results at the QHP product type level (PPO, HMO, EPO)
- results at the all-QHP metal tier levels
- survey topics that are included in the QRS and other topics that are not included in the QRS

For the EES beta test survey, each Issuer/QHP is responsible for selecting a certified CAHPS vendor, creating its EES samples, having the samples audited by a certified auditor, and once the vendor has administered the survey, submitting the survey responses dataset to HHS. HHS will release final regulations in September and Issuers/QHPs should have vendor agreements in place shortly thereafter. HHS plans to require a single, common protocol to be used by all survey vendors, which includes English, Spanish, and Chinese versions of the questionnaire.

HHS will report the EES results at the QHP product type level for the Federally Facilitated Marketplace (FFM) beginning Fall 2016. Specifically, the HHS reported QRS will contain those components of the EES (primarily CAHPS) to be included in the QRS along with the clinical measures (primarily HEDIS).

It’s likely that the metal tier level results will have too few respondents to publicly report and Covered California does not intend to report QRS information at the metal tier level; rather these data will be for internal purposes only. HHS will use the beta test results to assess any future reporting of the EES results at the metal tier level.

### II. EES Sampling Methodology

HHS requires Issuer/QHP to include EES samples for each QHP with more than 500 enrollees in the previous year. This minimum enrollment threshold differs from the target number of members to be included in the survey solicitation – it’s likely that the outgoing sample size will be about 1,000 members. A 1,000 member outgoing sample is expected to yield 300 completed surveys assuming a 30% response rate. The EES includes all of the CAHPS Health Plan 5.0 (Adult Medicaid) items.

Covered California had recommended that the Issuer minimum enrollment for submission of an EES sample be increased from 500 to 1,000 enrollees given typical 25-30% response rates. We also recommended that HHS distinguish between the Issuer minimum enrollment standard for ESS participation and the outgoing sample size requirements.

### **III. Sampling of Members Inside/Outside the Exchange for QRS**

For the 2015 beta test work, HHS may require that the EES survey and QRS measure samples be drawn from individual enrollees covered **both inside and outside** of the Exchange for Issuers/QHPs that offer the same product inside and outside the Exchange. HHS anticipates issuing future guidance on this issue in Fall 2014.

Covered California had recommended a careful evaluation be conducted of QRS results for members enrolled in exchanges and those enrolled in non-exchange individual products to assess any population impact on quality performance

### **IV. State Based Marketplace (SBM) Reporting of CAHPS Beta Test Results Fall 2015**

HHS will permit the use of the CAHPS QHP Enrollee Experience Survey (EES) beta test results for SBM public reporting in the Fall 2015 as Covered California requested. HHS encourages the use of appropriate disclaimers re the nature of the beta test survey and results. HHS will not publish beta test results on the Federally Facilitated Marketplace (FFM) website.

For the beta test reporting, HHS will calculate EES survey question and composite scores and provide these to the SBM. The SBM, in turn, can apply its scoring formula to produce QHP quality ratings (e.g., star ratings).

### **V. Standard, Nationwide QRS Measures Set for Fall 2016**

HHS confirmed that for Fall 2016\* it will calculate quality ratings for all QHPs using a standard methodology – HHS will score all QHPs and provide a state’s results to the SBM beginning Fall 2016.\* HHS will provide the QHP quality ratings to the SBMs and the SBM shall integrate the results into its health plan choice information presentations and materials for consumer use. SBMs have the option to display additional quality measures (presumably as separate information that is an adjunct to the HHS standard 5-star performance indicator schema).

These Fall 2016 QRS ratings include the clinical (HEDIS) and member survey (EES-CAHPS) measures. As such, the HHS produced ratings will replace any SBM quality ratings (clinical or member survey) used prior to Fall 2016.

Covered California had recommended that SBM use of the Federal QRS be optional or at least transitioned – in this scenario the SBM could opt-in in full or part to the HHS standard QRS in favor of a regional benchmark. Covered California also recommended that SBMs have the option to expand the HHS core measures set to address any local interests.

Prior to Fall 2016, SBM’s are responsible for determining their own rating methodology and presentation strategy if they choose to present QRS information to enrollees.

\*HHS, in late 2015, will provide the SBMs with the beta test results for those clinical measures that can be scored for the single measurement year 2014. These results are not public reportable; for internal use only.

### **VI. QRS Alignment with Accreditation Requirements**

HHS will seek additional comment per future rulemaking on alignment of QRS with Issuer/QHP accreditation programs. HHS is considering new standards to recognize accrediting entities and QHP accreditation and the potential to deem QHP issuers and recognized accrediting entities in

compliance with the quality measures accreditation requirements by meeting the EES/QRS requirements.

Covered California had recommended that the QRS measures should be aligned with the accreditation programs and the leading health plan reporting programs.

### **VII. Health Plan Preview of QRS (Including EES)**

HHS will host a plan preview period of the QRS and EES data for all QHPs (FFE and SBM plans). HHS did not establish a requirement for SBMs to conduct plan QRS review processes. Covered California, which has a health plan preview process in place, did not comment.

### **VIII. SBM Performance Ratings Presentation Directly on SBM Website**

HHS confirmed that for the HHS calculated QRS ratings in Fall 2016, it will “provide [QRS ratings] for display to State Exchanges on their websites.” HHS will provide details regarding display requirements in future technical guidance and will work with SBMs that do not have the technical capacity to display QRS data initially.

Covered California had recommended that the SBMs adhere to the “prominent display” presentation standard for the QRS ratings and integrate the QRS ratings into the SBM consumer plan choice service, and, that HHS not allow SBMs the option of satisfying the QRS rating presentation requirement by providing the consumer with a link to the FFM website to view the QRS ratings.

### **IX. Issuer Marketing Materials**

HHS will issue future technical guidance regarding Issuer use and display of QRS and EES results in Issuer/QHP marketing materials. HHS encourages SBMs to implement a streamlined approach of incorporating review of Issuer marketing materials that reference QRS ratings into the SBM’s general oversight activities.

Covered California had recommend that SBMs have the authority to review and approve QHP proposed uses of QRS rating in the plan’s marketing materials.

### **X. Marketplace Survey-Distinct from EES and not Issuer/QHP Specific**

HHS will administer its Marketplace Survey (experiences of consumers using the FFM and SBMs; distinct from the QHP specific EES survey) beginning Q1 2015. HHS is requesting each SBM to supply a sample of consumers/enrollees, who contacted the SBM during Fall 2014 open enrollment, to HHS in January 2015 to administer the Marketplace Survey. HHS will provide SBM Marketplace Survey results to the SBM. HHS will consider ways to provide these survey results to the public – presumably for future Marketplace Survey work not the Fall 2014 open enrollment results.

Covered California had recommended that HHS provide SBMs with a Marketplace Survey online survey option that can generate real-time information. Covered California had recommended that the Marketplace applicant/enrollee sampling include consumers who: i) established an account but did not enroll, ii) those who enrolled but did not pay the premium, and iii) those who effectuated enrollment through an initial premium payment. Survey samples should include stratification by various person attributes to ensure a diversity of consumer input.