

Number	Requirements	Comment	Response	Category	Commenter
BR8	The CalHEERS System shall provide the functionality to obtain a unique Client Identification Number (CIN) from the Statewide Client Index (SCI) in real-time for each family member listed on the application (using required application data such as SSN, date of birth, address, and complete name).	Anthem will need better understanding of the unique (CIN) and how it will be assigned and used. 1. Will this be assigned once for a consumer, and never re-assigned or reused by another person? 2. Will this number displayed to consumer and will it be passed to insurer. 3. Will it be a unique identifier that will not be reused/re-assigned to a different consumer at a later date?	CalHEERS is being designed to reduce or eliminate the assignment of duplicate CINs. The CIN will be the unique identification number that will track an individual's application and enrollment data. It will not be re-assigned or reused by another person. The number will be used internally, and not displayed to the consumer or passed on to the insurer. Issuers will receive appropriate data via an 834 transaction for their confirmed enrollments.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
BR18	The CalHEERS System shall provide the functionality to allow Assisters to submit an application on behalf of the consumer and the consumer's attestation of information provided.	Will this preference be passed to issuer with the expectation the issuer will communicate with consumer based on preferred method selected? (Note: HIPAA 834 may only allow up to 3 contact method/preferences.)	The consumer can choose multiple methods for communication, but only one preferred method. The Issuer interface design will determine what information is passed.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
BR23	The CalHEERS System shall provide the functionality for a family to apply for different Health Insurance Affordability Programs for different family members.	Anthem would like to review scenarios that outline actions if every member of the family picks a different product? Assumption: if they can each have their own plan, then each person is set up as individual subscribers with their own unique identifier.	Yes, it is possible that each family member can pick their own plan and be individual subscribers.	Q&A	Francene Mori Anthem Blue Cross
BR38	The CalHEERS System shall provide a statement that the optional voluntary demographic and any health status information are collected to improve the quality of care.	Will this information be passed to issuers, or could CalHEERS provide a link to issuers Health Risk Assessment? This information can support QHPs in providing the consumer appropriate care management.	See advocates recommendations to not pass optional data to issuers. Optional data not passed to issuers.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations

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BR47	The CalHEERS System shall provide the functionality to track the status of citizenship or lawful presence verification.	As noted in BR 37 comments above, this information should not be provided to any issuer/QHP prior to enrollment in a QHP.	The issuers will only be provided enrollment data necessary to enroll the individual in their plans.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
BR49	The CalHEERS System shall provide the functionality to notify the individual of all verified information in real-time via the Web Portal.	The functionality should allow applicants to view and make edits/corrections to the "verified and retrieved" data (this phrase should be added to clarify that this is also retrieved data) that is available.	Applicants will be able to edit and correct verification information. They will be allowed to modify their application data.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
BR74	The CalHEERS System shall provide the functionality to notify the applicant that they may be eligible for other State programs and direct them to the appropriate links (Cal Works, CalFresh, etc.)	We appreciate this functionality for consumers and encourage that notifications and links a) be tailored to individual applicants based on the information they provided (for example, all individuals below identified income thresholds receive CalFresh link; families with children with qualifying incomes receive WIC and CalWORKs links) and b), wherever made possible by the other State program, lead to on-line applications (i.e. the appropriate SAWS on-line app for the applicant's county of residence) and not just text or off-line contact information.	If the consumer wants a referral, and agrees to send application data elements, they are forwarded to the applicable county SAWS. A link to the SAWS online application will also be provided.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations

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BR75	The CalHEERS System shall provide the functionality to send basic application information, upon consumer request and or consent, to the appropriate SAWS in order to process for other non-health services.	We appreciate this requirement of functionality to send application information to SAWS for other non-health services, and encourage the system to proactively prompt consumers to continue with other non-health human services, with their consent. To get the consumers' consent the system will need a pop-up or alert that appears in real-time that provides the consumer the ability to consent. That should be specified in this provision (or should be added as BR 75.1). See our comments on "just in time" consent in BR 24.	If the consumer wants a referral, and agrees to send application data elements, they are forwarded to the applicable county SAWS. A link to the SAWS online application will also be provided.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
BR76	The CalHEERS System shall provide the functionality to create and maintain eligibility qualifying events (e.g. pregnancy, recently unemployed, turned 65, etc.) by program.	In the situation where a woman at 200% or below FPL becomes pregnant while enrolled in an Exchange plan (an eligibility qualifying event), CalHEERS should have the functionality to provide notice of her options (i.e., remain in the Exchange or transfer to Medi-Cal) and the implications of those options, so that the woman can make an informed choice. The system must be able to receive and effectuate the woman's choice, and, if it involves changing programs, make sure there is no break in coverage caused by the switch.	Any change in the applicant's information will be processed through the business rules engine. The applicant will be notified of any changes in eligibility, including eligibility for new programs based on the data from the change in circumstance.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations

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BR82	The CalHEERS System shall provide the functionality to qualify individual for an enrollment period.	Enrollment periods are only relevant for Covered California products and these requirements should specify that this function will only need to apply to Exchange-eligible applicants. Additionally, "change in immigration status" should be added to the list of specified criteria for special enrollment periods.	The business rules engine will contain all the enrollment rules, including those for Medi-Cal. Change in immigration status is one of the enrollment rules.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
BR83	The CalHEERS System shall provide the functionality for special enrollment periods based on specified criteria (birth, death, change in address, change in household, laid off, etc.).	Enrollment periods are only relevant for Covered California products and these requirements should specify that this function will only need to apply to Exchange-eligible applicants. Additionally, "change in immigration status" should be added to the list of specified criteria for special enrollment periods.	The business rules engine will contain all the enrollment rules, including those for Medi-Cal. Change in immigration status is one of the enrollment rules.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
BR92	The CalHEERS provide the functionality to display for each plan selected, the plan quality rating, and one or more quality indicators and one or more customer service indicators, as determined by the Exchange.	While Covered California should determine the quality indicators for QHPs, DHCS and MRMIB should identify the indicators for Medi-Cal, AIM, and BHP (if enacted) plans.	The quality indicators currently used by DHCS and MRMIB will be shown for those plans.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
BR94	The CalHEERS System shall show a range (low, medium, high) of estimated annual cost based on consumer's possible or actual health conditions (from consumer provided or pre-defined utilization scenarios) for each plan selected for comparison.	As noted in BR 37 comments above, this information should not be provided to any issuer/QHP prior to enrollment in a QHP.	Only necessary enrollment data will be submitted to the issuers.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations

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BR96	The CalHEERS System shall provide the functionality for the consumer to provide known current or future medical usage (Dr. visits, prescriptions, surgeries, etc.) and disease scenarios to dynamically and real-time adjust the estimated annual out of pocket costs for each plan selected for comparison.	As noted in BR 37 comments above, this information should not be provided to any issuer/QHP prior to enrollment in a QHP.	Only necessary enrollment data will be submitted to the issuers.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
BR165	The CalHEERS System shall provide the functionality to uniquely record and track individuals and have the ability to associate individuals with one or more cases in a manner that facilitates case management yet allow for both duplicated and unduplicated caseload counts.	In general for case management, it is unclear whether the system is being built to provide an audit trail, tracking each user who makes changes in an individual's account during the case management process. See general comments above.	All changes are logged for audit purposes, including the source of the change (person or system).	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
BR310	The CalHEERS System shall provide the functionality to allow a person acting on behalf of an applicant/recipient to have the same access as the applicant/recipient, but with their own log on. For example, a guardian or responsible person can complete an application and check benefits.	We appreciate the recognition that family members and others who will be acting on behalf of an applicant or recipient will have their own separate log-on, an important feature. What appears to be missing is the same separate log-on functionality for assisters. The system should ensure that assisters have their own separate log-on identification number, distinct from applicants/recipients who they are assisting, to help with tracking, audit trails, and other accountability measures, etc.	Assisters will have their own login ID.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations

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BR311	The CalHEERS System shall provide the functionality to show the consumer the progress in the application process as the application is being completed by the consumer.	It would be helpful to be more specific about the provision for aids, such as a progress bar that will show a consumer how far s/he has moved through the application and/or how much more information is needed before the process is completed. This refers to the functionality, but doesn't define what that functionality will be specifically. We think a progress bar would be helpful for consumers to be able to gauge their progress and estimate how much more time is needed to complete the process. If needed, they can be prepared to stop, save and return to the application at a later time. (BR 25.1 tracks the progress of documentation received, but a more general progress bar would be helpful that measures progress throughout the entire process.)	There will be a progress bar as well as written instructions that let the applicant know where they are in the process of enrolling in a health plan.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations

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BR322	The CalHEERS System shall provide the functionality to save consumer information while consumer is logged on, and notify consumer of timeout expiration for saving data.	We appreciate the various save functions that will allow consumers to save their information while they are logged on as well as to save their information and access their saved work at a later date (BR 322/323). We also appreciate the functionality to delete an account that did not result in an enrollment within 120 days (BR 324). In this instance the consumer should be notified by a pop-up window that their data will be saved for 120 days, after which time it will be deleted if the account is inactive. Additionally, if the consumer has entered a way to communicate with her, she should be notified before her account is deleted.	The system will notify the consumer in their preferred communication method that they have not completed the enrollment process. This notice will state the implications of their actions (missed open enrollment, new coverage effective date, etc.), including the timeframe for their account deletion.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
BR324	The CalHEERS System shall automatically delete any consumer account or application information that did not result in an enrollment within 120 days of last activity.	We appreciate the various save functions that will allow consumers to save their information while they are logged on as well as to save their information and access their saved work at a later date (BR 322/323). We also appreciate the functionality to delete an account that did not result in an enrollment within 120 days (BR 324). In this instance the consumer should be notified by a pop-up window that their data will be saved for 120 days, after which time it will be deleted if the account is inactive. Additionally, if the consumer has entered a way to communicate with her, she should be notified before her account is deleted.	The system will notify the consumer in their preferred communication method that they have not completed the enrollment process. This notice will state the implications of their actions (missed open enrollment, new coverage effective date, etc.), including the timeframe for their account deletion.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations

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BR330	The CalHEERS System shall provide the functionality for a single sign-on (SSO) option for Assisters with access to multiple applications.	Individual assisters must be provided with individual authentication identities, which will limit their access and monitor their activity across the CalHEERS ecosystem. A hierarchy of access should be built into the system to allow differing levels of access to information (e.g. supervisors can see all applications in-progress or submitted by all their assisters vs. assisters' access to applications they have initiated/ completed). It would be helpful if the hierarchy also allowed supervisors/ managers to temporarily grant access to different assisters. For example, if an assister is on vacation, a manager can provide another assister with temporary access to certain files for follow-up and support to consumers. The system should provide the functionality to allow certified assister entities to query and produce their own internal reports on assister activity.	Response requires additional follow-up by Covered California.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
BR331	The CalHEERS System shall provide the functionality record and track Assister training, education, and languages spoken.	In addition to tracking information about assister training, it would be helpful if the system could also track and report assister location, contact information, and business hours. This will allow consumers to search for assisters based on their individual/ family needs	Response requires additional follow-up by Covered California.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations

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UR5	The Vendor shall report its compliance with Section 508 of the Federal Rehabilitation Act and the World Wide Web Consortium (W3C) Web Accessibility Initiative, Section 508, (a)(1)(A)	Reporting is an excellent and necessary requirement to ensure compliance with accessibility and usability, but this requirement will benefit greatly from clarification. It should be clear that the reporting process will be ongoing, that reporting will include the compiling of public complaints about web accessibility, and it should identify to whom reports will be made.	Reporting is an ongoing task for CalHEERS and is currently in design. CalHEERS will have a complaint process which includes gathering information about web accessibility. Processes are currently being defined.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
UR6	The Vendor shall report compliance with California policy regarding accessibility per Cal Gov Code 11135: Accessibility requirements of Section 508 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Sec 794d), and regulations implementing that act as set forth in Part 1194 of Title 36 of the Federal Code of Regulations.	Reporting is an excellent and necessary requirement to ensure compliance with accessibility and usability, but this requirement will benefit greatly from clarification. It should be clear that the reporting process will be ongoing, that reporting will include the compiling of public complaints about web accessibility, and it should identify to whom reports will be made.	Reporting is an ongoing task for CalHEERS and is currently in design. CalHEERS will have a complaint process which includes gathering information about web accessibility. Processes are currently being defined.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
UR17	CalHEERS shall enable the customer to download forms and notices from the Web Portal.	Downloaded forms should be in PDF format to minimize falsification and fraud. Please confirm that CalHEERS will enable the consumer to download forms and notices (including written translated notices in the Medi-Cal Managed Care Threshold languages) from the Web Portal.	Forms will be downloaded in PDF or other non-modifiable format.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
UR18	The CalHEERS System shall allow navigation between multiple, related input screens without losing information input from the original screen and consumer to print each screen with a print layout that is formatting for printing.	The CalHEERS System shall allow navigation between multiple, related input screens without losing information input from the original screen and consumer to print each screen with a print layout that is formatting for printing.	CalHEERS will be developed in compliance with ADA and W3C regulations.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations

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UR19	The CalHEERS System shall provide print options to format for printing the application, correspondence, notices and any stored images.	Individuals who require large font print must have an alternative that will enable them to magnify and print documents without encountering print formats and images that simply cannot be enlarged without become incomprehensible.	CalHEERS will be in compliance with ADA and W3C regulations.	Q&A	Julie Silas and Elizabeth Landsberg on behalf of the named organizations
BR 12	The CalHEERS System shall provide the functionality to track the source of the application (e.g. CalHEERS WEB Portal, SAWS, Service Center mail or phone, efax, email, in-person), including the geographic location of the in-person contact.	Can an application be accepted via fax?	Yes, the service center will accept faxed applications.	Q&A	Chris Dingley - CIGNA
BR 13	The CalHEERS System shall provide the functionality to notify an individual / consumer if an account already exists in real-time.	Should also allow for customer to retrieve their password somehow if it is forgotten.	CalHEERS will have the functionality to reset a password if the User forgets their password.	Q&A	Chris Dingley - CIGNA
BR14	The CalHEERS System shall provide the functionality to communicate to consumer / applicant the ability to or need to correct or complete their online application via online portal.	Communication should also be sent to assisters, navigators, and/or brokers.	If the assister is entering the application information, they will see the notices that shown to the consumers.	Q&A	Chris Dingley - CIGNA
BR15	The CalHEERS System shall provide the functionality to notify the consumer / applicant in writing to correct or complete their mailed application.	Communication should also be sent to assistors, navigators, and/or brokers.	If the assister is entering the application information, they will see the notices that are shown to the consumers.	Q&A	Chris Dingley - CIGNA
BR17	The CalHEERS System shall provide the functionality for users to update the consumer's account / application with initial / updated application data.	Communication should also be sent to assistors, navigators, and/or brokers.	If the assister is entering the application information, they will see the notices that are shown to the consumers.	Q&A	Chris Dingley - CIGNA

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BR25.1	The CalHEERS System shall provide the functionality to track the progress / status of the receipt of documentation received with the initial application or after the initial application date.	Assistors, navigators, and brokers should also be notified of deadlines.	An associated assister, agent or navigator will be notified of deadlines.	Q&A	Chris Dingley - CIGNA
BR 33	The CalHEERS System shall provide the functionality to allow applicants and Assistors to view the status of their application via the Web Portal when additional verification is necessary.	Navigators and brokers should also be able to track the status of an application.	Navigators, agents and assistors will be able to track the status of an application.	Q&A	Chris Dingley - CIGNA
BR 106	The CalHEERS System shall provide the functionality for an online calculator to calculate the net premium of selected plans based on eligibility for Advanced Premium Tax Credit (APTC), the impact of Cost Sharing Reductions (CSR) for subsidized out-of-pocket costs, and also show the consumer the gross premium with the net savings.	Advanced Premium Tax Credit (APTC) and Cost-Sharing Reduction (CSR) should be separate calculators.	CalHEERS will contain this functionality.	Q&A	Chris Dingley - CIGNA
BR 129	The CalHEERS System shall provide the functionality to receive individual enrollment renewal responses / updates through CalHEERS Web Portal, Mail, Phone, Fax, and Secure e-mail.	Can enrollment information be received via fax? The final regulation on Exchanges does not list facsimile as a means of submitting an application.	Consumers may submit their renewal information via fax.	Q&A	Chris Dingley - CIGNA
BR 138 – 142	Various	Is this an eligibility determination? Please clarify that the appeals being referenced is applicable only to eligibility determinations.	Yes, the referenced appeals are only applicable to eligibility determinations.	Q&A	Chris Dingley - CIGNA

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BR 159	The CalHEERS System shall provide the functionality for consumers, Assisters and Eligibility Administrators to view an applicant or enrollee account information including the household members and their respective health coverage and eligibility status. This will include household members that are / may be eligible for non-MAGI Medi-Cal.	Please include navigators and brokers.	Navigators and brokers are considered Assisters.	Q&A	Chris Dingley - CIGNA
BR 174, 175	Various	Is there a conflict here with California's prompt pay law? Some state prompt pay laws do not permit pending a claim for non-payment of premium.	The federal regulations state the grace periods for APTC eligible consumers. State law dictates the grace period for other health insurance.	Q&A	Chris Dingley - CIGNA
BR 182, BR 183	Various	Will the system have the ability to load rate tables from insurers?	CalHEERS will use the SERFF rate table templates for loading the data. They are currently being modified by NAIC due to the recent proposed federal rate calculations.	Q&A	Chris Dingley - CIGNA
BR 194	The CalHEERS System shall provide the functionality to notify enrollees of nonpayment of premium, the amount past due, and the coverage termination date if payment is not received.	There needs to be a letter generation for disenrollment and/or termination as well	These notices will be sent by the Issuer.	Q&A	Chris Dingley - CIGNA
BR 205	The CalHEERS System accounts payable functionality shall allow for automated and manual reconciliation of premium refunds and Assister fee balances.	Will the system also be issuing broker commissions as well?	Issuers will be paying agent commissions in SHOP.	Q&A	Chris Dingley - CIGNA

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BR 253	The CalHEERS System shall provide written notices to the consumers in their preferred written language.	<p>There should be an English copy in addition to the in the preferred written language Anthem would like clarification on the type of communication and language requirements. Anthem expects the Exchange to work closely with QHP issuers on all communication to their memberships to reduce confusion among the customers.</p> <p>The provision should be amended to state that the CalHEERS system shall provide "ALL" notices to individuals in their preferred written language and their preferred communication channel/s.</p>	CalHEERS will store an English version of the Notice.	Q&A	<p>Chris Dingley - CIGNA</p> <p>Francine Mori - Anthem</p> <p>Julie Silas and Elizabeth Landsberg on behalf of the named organizations</p>
BR 335	The CalHEERS System shall provide the functionality to produce annual 1099s for Assister payments.	Are brokers and navigators included in this as well? How will broker commissions be handled?	Assister Entities or SHOP agents will be sent 1099s from CalHEERS for payments made by Covered California .	Q&A	Chris Dingley - CIGNA
BR 351	The CalHEERS System shall provide the functionality to allow for tracking assister activities to ensure compliance with program requirements	Brokers and navigators should also be included	Navigators and brokers are considered Assisters.	Q&A	Chris Dingley - CIGNA
Missing Requirements	N/A	Current applications allow for a mailing and billing address as some individuals will have two. This is especially true in instance where the non-custodial parent is required to provide health coverage.	The Issuer will be responsible for obtaining the billing address as Covered California is not collecting premiums from the Individual Market.	Q&A	Chris Dingley - CIGNA

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BR8	The CalHEERS System shall provide the functionality to obtain a unique Client Identification Number (CIN) from the Statewide Client Index (SCI) in real-time for each family member listed on the application (using required application data such as SSN, date of birth, address, and complete name).	<p>It will be helpful to know how the Exchange plans to communicate the CIN and the format.</p> <p>We would like to obtain further information about the unique Client Identification Number (CIN) from the Statewide Client Index (SCI) to better understand how personal information will be tracked. CalHEERS should provide more information on the process that will be used to achieve accuracy in matching individuals to their right data. In addition, CalHEERS must develop and implement policies to discover and remedy false positive and false negative matches.</p>	Response requires additional follow-up by Covered California.	Q&A	<p>James Mullen - Delta Dental</p> <p>Julie Silas and Elizabeth Landsberg on behalf of the named organizations</p>
BR18	The CalHEERS System shall provide the functionality for consumers to select and update their account preferences for communication methods (mail, email, online chat, telephone, IVR, text, and FAX) and plan selection criteria (providers, networks, costs, etc.).	<p>Will these account changes be communicated to the carrier? Or is this restricted to communication between the Exchange and the consumer?</p> <p>We support having consumers able to specify their preferred method of communication but this requirement should specify that a consumer can choose more than one method, e.g. text and mail - not just one. Additionally, consumers should be able to update desired language for written and spoken communication. Functionality should be developed to ensure that consumers are notified that oral interpretation is available in any language at no cost to the consumer through the Service Center.</p>	This requirement speaks to the consumer's CalHEERS account and the dialog is between CalHEERS and the Consumer. The consumer can always update their preferred method of communication as well as their desired written and spoken language. Information regarding interpretation services will be provided to the consumer. The method of communicating this information is currently being designed.	Q&A	<p>James Mullen - Delta Dental</p> <p>Julie Silas and Elizabeth Landsberg on behalf of the named organizations</p>

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BR172	The CalHEERS System shall provide the functionality to notify CMS Federal Data Hub of an individual's disenrollment from a Qualified Health Plan.	<p>Insert corresponding reference to qualified stand-alone dental plans.</p> <p>The system should only notify the QHP, stand-alone dental/vision plan, and CMS Federal Data Hub of a disenrollment in cases where the disenrollment is actually completed. In other words, there will be no communication to these entities in instances where an individual who initiates a disenrollment does not complete it or cancels it.</p>	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	<p>James Mullen - Delta Dental</p> <p>Julie Silas and Elizabeth Landsberg on behalf of the named organizations</p>
BR182	The CalHEERS System shall invoice individual enrollees monthly for premiums due, with instructions to send payments to a designated payment processing center/address.	<p>We assume these are placeholder business requirements to enable the Exchange to aggregate premiums in the Individual Exchange in the future, as the Board approved the recommendation that carriers conduct premium collection in the initial year(s) of the Exchange.</p> <p>We applaud the decision to build into CalHEERS the functionality to invoice individual enrollees; aggregate individual premium payments, including Medi-Cal premiums, for all family members in a single invoice; and receive payments from enrollees so that future policy decisions of CalHEERS to accept such payments from Exchange-eligible individuals will be functional. It should be clarified that CalHEERS functionality will include premium collection for Medi-Cal coordinated with SAWs, where relevant.</p>	The requirements are being modified as the Issuers will be billing and collecting individual premium.	Q&A	<p>James Mullen - Delta Dental</p> <p>Julie Silas and Elizabeth Landsberg on behalf of the named organizations</p>

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BR183	The CalHEERS System shall provide the functionality to aggregate the individual premiums for all family members into a single monthly invoice, including any subsidized healthcare plan.	<p>We assume these are placeholder business requirements to enable the Exchange to aggregate premiums in the Individual Exchange in the future, as the Board approved the recommendation that carriers conduct premium collection in the initial year(s) of the Exchange.</p> <p>We very much appreciate and applaud the decision to design and build the system to allow for premium aggregation, in order to provide the technical capabilities in the future for CalHEERS to undertake premium aggregation, which we believe would be in the best interests of consumers.</p>	The requirements are being modified as the Issuers will be billing and collecting individual premium.	Q&A	<p>James Mullen - Delta Dental</p> <p>Julie Silas and Elizabeth Landsberg on behalf of the named organizations</p>
BR184	The CalHEERS System shall provide the functionality to electronically receive and record premium payment details (warrant number, date) from the designated financial institution.	We assume these are placeholder business requirements to enable the Exchange to aggregate premiums in the Individual Exchange in the future, as the Board approved the recommendation that carriers conduct premium collection in the initial year(s) of the Exchange.	The requirements are being modified as the Issuers will be billing and collecting individual premium.	Q&A	James Mullen - Delta Dental

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BR185	The CalHEERS System shall provide the functionality to automatically and manually reconcile individual premium payments with CalHEERS enrollment data.	<p>We assume these are placeholder business requirements to enable the Exchange to aggregate premiums in the Individual Exchange in the future, as the Board approved the recommendation that carriers conduct premium collection in the initial year(s) of the Exchange.</p> <p>We applaud the decision to build into CalHEERS the functionality to invoice individual enrollees; aggregate individual premium payments, including Medi-Cal premiums, for all family members in a single invoice; and receive payments from enrollees so that future policy decisions of CalHEERS to accept such payments from Exchange-eligible individuals will be functional. It should be clarified that CalHEERS functionality will include premium collection for Medi-Cal coordinated with SAWs, where relevant.</p>	The requirements are being modified as the Issuers will be billing and collecting individual premium.	Q&A	<p>James Mullen - Delta Dental</p> <p>Julie Silas and Elizabeth Landsberg on behalf of the named organizations</p>

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BR186	The CalHEERS System shall provide the functionality to receive individual premium payments via credit card, debit card, ACH, Vendor POS device, cash and checks.	<p>We assume these are placeholder business requirements to enable the Exchange to aggregate premiums in the Individual Exchange in the future, as the Board approved the recommendation that carriers conduct premium collection in the initial year(s) of the Exchange.</p> <p>We applaud the decision to build into CalHEERS the functionality to invoice individual enrollees; aggregate individual premium payments, including Medi-Cal premiums, for all family members in a single invoice; and receive payments from enrollees so that future policy decisions of CalHEERS to accept such payments from Exchange-eligible individuals will be functional. It should be clarified that CalHEERS functionality will include premium collection for Medi-Cal coordinated with SAWs, where relevant.</p>	The requirements are being modified as the Issuers will be billing and collecting individual premium.	Q&A	<p>James Mullen - Delta Dental</p> <p>Julie Silas and Elizabeth Landsberg on behalf of the named organizations</p>
SR17	The CalHEERS System shall provide a single, online employer application for the SHOP Exchange.	It will be important for carriers to have input on the content of the small employer application when developed.	Dental Requirements are being developed and Carriers have been encouraged to participate in conference calls to solicit input to the application process.	Q&A	James Mullen - Delta Dental
SR89.1	The CalHEERS System shall provide the functionality for applicants to select available QHPs and sort the results by premium, quality rating, deductible amount, out of pocket limits, quality indicators, and customer service	Insert corresponding reference to qualified stand-alone dental plans.	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental

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	indicators.				
SR89.2	The CalHEERS System shall provide the functionality for applicants to select available QHPs and sort the results by average monthly or annual costs.	Insert corresponding reference to qualified stand-alone dental plans.	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental
SR92	The CalHEERS System shall provide the maximum out-of-pocket costs for each plan selected for comparison.	Add after the word comparison the following: "including the separately allocated out-of-pocket maximum that applies for qualified stand-alone dental plans."	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental
SR103	The CalHEERS System shall provide the functionality to present the employer or employee the detailed comparisons of qualified health plans filtered on their plan preferences.	Insert corresponding reference to qualified stand-alone dental plans.	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental
SR112	The CalHEERS System shall provide provider directories for each plan selected for comparison and to search for a specific doctor or facility.	Recommend adding reference to dentists or using more generic descriptor "provider."	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental
SR114	The CalHEERS System shall provide provider directories for each plan selected for comparison and to search for a specific doctor or facility.	Recommend adding reference to dentists or using more generic descriptor "provider."	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental

Number	Requirements	Comment	Response	Category	Commenter
SR138	The CalHEERS System shall provide the functionality to direct an employer to select a new qualified health plan if the current QHP will not be available. If the qualified health plan will be available in the coming year, the Exchange will provide the employer with the opportunity.	Insert corresponding reference to qualified stand-alone dental plans.	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental
SR139	The CalHEERS System shall provide the functionality for an enrollee to either stay in his or her current qualified health plan (if available) or select a new available qualified health plan.	Insert corresponding reference to qualified stand-alone dental plans.	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental
SR140	The CalHEERS System shall provide the functionality to process any qualified health plan enrollment changes.	Insert corresponding reference to qualified stand-alone dental plans.	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental
SR148	Provide the capability for an employer to request a voluntary termination from QHP(s) at any time.	Insert corresponding reference to qualified stand-alone dental plans.	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental
SR149	The CalHEERS System shall provide the functionality to process disenrollment of an employee from a QHP from a request received from the Issuer, employee, or employer.	Insert corresponding reference to qualified stand-alone dental plans.	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental
SR207	The CalHEERS System shall provide the functionality to set up qualified health plan issuer agreement information regarding the SHOP issuer and the qualified health plan(s). The CalHEERS may direct the Issuer to upload the information into the System (either at the time of application or at agreement signing).	Insert corresponding reference to qualified stand-alone dental plans.	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental

Number	Requirements	Comment	Response	Category	Commenter
SR223	The CalHEERS System shall provide functionality to send an electronic, real-time or batch transmission of information necessary for the qualified health plan issuer to provide a welcome package and identification card to the employee.	Insert corresponding reference to qualified stand-alone dental plans.	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental
SR225	The CalHEERS System shall provide functionality to prepare a notice to CMS with information regarding employee disenrollment from a qualified health plan through the Exchange.	Insert corresponding reference to qualified stand-alone dental plans.	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental
SR235	The CalHEERS System shall provide functionality to generate reports and data on the consumer experience related to average elapsed time for application completion, application withdrawals, page review timeframes, QHP evaluation, etc.	Insert corresponding reference to qualified stand-alone dental plans (see BR266). In addition to notifying all the identified agencies and individual enrollees of QHP and qualified stand-alone dental/vision plan non-renewal or decertification, the CalHEERS functionality should also build in notification to the public on the CalHEERS website. This is particularly important so that potential enrollees and the public are made aware that an issuer has not renewed a QHP or that one of its QHPs has been decertified.	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental Julie Silas and Elizabeth Landsberg on behalf of the named organizations
SR253	Provide the capability to determine participation and report rates of an employer's employees by city, county, region and SIC code. Provide the capability to share this information with the State, Exchange, Issuers and employers.	If the SIC code is not allowed as a rating factor, will this data still be collected and/or made available?	SIC code is not required. If provided, then SIC code can be reflected on reports	Q&A	James Mullen - Delta Dental

Number	Requirements	Comment	Response	Category	Commenter
TR108	The CalHEERS System shall provide the QHP Issuers ability to upload plan and premium data.	Insert corresponding reference to qualified stand-alone dental plans.	Issuer includes all types of Issuers, which includes dental, medical, vision, etc.	Q&A	James Mullen - Delta Dental
BR37	The CalHEERS System shall provide the functionality to collect optional voluntary demographic data categories such as ethnicity, primary language, disability status, and other categories recognized by Secretary of Health and Human Services and as determined by the Exchange or program policies.	Health Access supports this functionality but notes that this information should not be provided to any issuer in order to protect consumer privacy and minimize risk selection by issuers	The Issuers will only be provided the data necessary to effectuate enrollment in their plans.	Q&A	Anthony Wright, Beth Capell - Health Access California
BR38	The CalHEERS System shall provide a statement that the optional voluntary demographic and any health status information are collected to improve the quality of care.	Health Access supports this functionality but notes that this information should not be provided to any issuer in order to protect consumer privacy and minimize risk selection by issuers.	The Issuers will only be provided the data necessary to effectuate enrollment in their plans.	Q&A	Anthony Wright, Beth Capell - Health Access California
BR43	The CalHEERS System shall provide the functionality to verify initial applicant citizenship or status as a national or lawful presence, and income in real-time via external interface with the Federal Data Services Hub.	Health Access supports this functionality but notes that this information should not be provided to any issuer in order to protect consumer privacy and minimize risk selection by issuers.	The Issuers will only be provided the data necessary to effectuate enrollment in their plans.	Q&A	Anthony Wright, Beth Capell - Health Access California
BR44	The CalHEERS System shall provide the functionality to verify residency, incarceration in real-time via external interface with various State Systems and/or federal Systems.	Health Access supports this functionality but notes that this information should not be provided to any issuer in order to protect consumer privacy and minimize risk selection by issuers.	The Issuers will only be provided the data necessary to effectuate enrollment in their plans.	Q&A	Anthony Wright, Beth Capell - Health Access California
BR47	The CalHEERS System shall provide the functionality to track the status of citizenship or lawful presence verification.	Health Access supports this functionality but notes that this information should not be provided to any issuer in order to protect consumer privacy and minimize risk selection	The Issuers will only be provided the data necessary to effectuate enrollment in their plans.	Q&A	Anthony Wright, Beth Capell - Health Access California

Number	Requirements	Comment	Response	Category	Commenter
		by issuers.			
BR94	The CalHEERS System shall show a range (low, medium, high) of estimated annual cost based on consumer's possible or actual health conditions (from consumer provided or pre-defined utilization scenarios) for each plan selected for comparison.	Health Access supports this functionality but notes that this information should not be provided to any issuer in order to protect consumer privacy and minimize risk selection by issuers.	The Issuers will only be provided the data necessary to effectuate enrollment in their plans.	Q&A	Anthony Wright, Beth Capell - Health Access California
BR96	The CalHEERS System shall provide the functionality for the consumer to provide known current or future medical usage (Dr. visits, prescriptions, surgeries, etc.) and disease scenarios to dynamically and real-time adjust the estimated annual out of pocket costs for each plan selected for comparison.	Health Access supports this functionality but notes that this information should not be provided to any issuer in order to protect consumer privacy and minimize risk selection by issuers.	The Issuers will only be provided the data necessary to effectuate enrollment in their plans.	Q&A	Anthony Wright, Beth Capell - Health Access California
BR102	The CalHEERS System shall provide easily understood descriptions and quality ratings of the various aspects of each plan's care and service quality, including summary measures and convenient ways for the use to drill down to what interests the consumer (by disease, type of service, etc.) for each plan selected for comparison.	Health Access supports this functionality but notes that this information should not be provided to any issuer in order to protect consumer privacy and minimize risk selection by issuers	The Issuers will only be provided the data necessary to effectuate enrollment in their plans.	Q&A	Anthony Wright, Beth Capell - Health Access California

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BR103	The CalHEERS System shall provide summary information on each plan's programs to foster healthy living, care coordination, case management, shared decision-making, patient safety, and other ways to promote health and wellness for each plan selected for comparison.	Health Access supports this functionality but notes that this information should not be provided to any issuer in order to protect consumer privacy and minimize risk selection by issuers.	The Issuers will only be provided the data necessary to effectuate enrollment in their plans.	Q&A	Anthony Wright, Beth Capell - Health Access California
BR104	The CalHEERS System shall allow the consumer to assign their own weights to different types of quality measures that contribute to the overall plan rating, such as the availability of quality doctors, wellness resources offered, customer service, claims handling, etc. for each plan selected for comparison.	Health Access supports this functionality but notes that this information should not be provided to any issuer in order to protect consumer privacy and minimize risk selection by issuers.	The Issuers will only be provided the data necessary to effectuate enrollment in their plans.	Q&A	Anthony Wright, Beth Capell - Health Access California
BR106	The CalHEERS System shall provide the functionality for an online calculator to calculate the net premium of selected plans based on eligibility for Advanced Premium Tax Credit (APTC), the impact of Cost Sharing Reductions (CSR) for subsidized out-of-pocket costs, and also show the consumer the gross premium with the net savings.	Health Access supports this functionality but notes that this information should not be provided to any issuer in order to protect consumer privacy and minimize risk selection by issuers.	The Issuers will only be provided the data necessary to effectuate enrollment in their plans.	Q&A	Anthony Wright, Beth Capell - Health Access California
SR107	The CalHEERS System shall show a range (low, medium, high) of estimated annual cost based on the employee's possible or actual health conditions for each plan selected for comparison.	Are the costs provided to the consumer or the employer? Or both?	Both.	Q&A	Anthony Wright, Beth Capell - Health Access California
SR108	The CalHEERS System shall provide the maximum out-of-pocket costs for each	Are the costs provided to the consumer or the employer? Or both?	Both.	Q&A	Anthony Wright, Beth Capell - Health Access

Number	Requirements	Comment	Response	Category	Commenter
	plan selected for comparison.				California
SR278	The Vendor shall provide the demonstration videos used in the Web Portal (in English and Spanish) to assist employers and employees and update such videos as needed.	Is this functionality available for both employers and workers? Will other languages be available in the future?	Yes, the Videos will be available to Employers and Employees. Additional languages may be evaluated after the Jan 2014 release.	Q&A	Anthony Wright, Beth Capell - Health Access California
SR282	The CalHEERS System shall provide the functionality to email or text employers or employees when they have a new notification in their secure mailbox.	Will other modes of communication be added to this functionality as technology changes?	New requirements can be introduced as technology changes.	Q&A	Anthony Wright, Beth Capell - Health Access California
BR56	The CalHEERS System shall provide the functionality to notify the applicant that they may be eligible for other State programs and directing them to the appropriate links (e.g., CalWORKs and CalFresh).	CalHEERS should have functionality calculate household size and income for both California programs and federal considerations.	The CalHEERS System determines eligibility for multiple health care programs as a result of individual eligibility.	Q&A	Kate Burch, California LGBT Health and Human Services Network
SR2	The CalHEERS System shall provide the functionality to create an employer account for employers new to the SHOP Exchange, or locate an existing account.	The CalHEERS System should also provide the functionality to provide employees, agents and assisters with an individual online account.	Employers, Agents, Employees and Assisters will all have individual online accounts.	Q&A	Carla Sapoprtta and Julie Silas on behalf of named organizations
SR7	The CalHEERS System shall provide the functionality to allow a person acting on behalf of an employer (e.g. SHOP Assister, employer administrative staff, etc.) to have the same access as the employer but with their own log on.	The system should ensure that SHOP Assisters, including brokers/agents, have their own separate log-on identification number, distinct from users that they are assisting, to help with tracking, audit trails, and other accountability measures, etc.	Employers, Agents, Employees and Assisters will all have individual online accounts	Q&A	Carla Sapoprtta and Julie Silas on behalf of named organizations

Number	Requirements	Comment	Response	Category	Commenter
SR13	The CalHEERS System shall provide the functionality to allow an employer access to and to report changes to their account information through multiple service channels (e.g. online, telephone, email, fax, etc.).	CalHEERS should provide the same functionality for employees, agents and assisters.	The functionality is available to employers, agents, assisters and employees.	Q&A	Carla Sapoprta and Julie Silas on behalf of named organizations
SR61 AND 71-111, AND 116-125	Various requirements are bundled with this comment.	The SHOP system functionality should provide an employee with the same access as their employer to find a SHOP Assister to help them with their enrollment.	Employers and Employees will have the same access to Assisters.	Q&A	Carla Sapoprta and Julie Silas on behalf of named organizations
BR8	The CalHEERS System shall provide the functionality to obtain a unique Client Identification Number (CIN) from the Statewide Client Index (SCI) in real-time for each family member listed on the application (using required application data such as SSN, date of birth, address, and complete name).	Anthem will need better understanding of the unique (CIN) and how it will be assigned and used. 1. Will this be assigned once for a consumer, and never re-assigned or reused by another person? 2. Will this number displayed to consumer and will it be passed to insurer. 3. Will it be a unique identifier that will not be reused/re-assigned to a different consumer at a later date?	CalHEERS is being designed to reduce or eliminate the assignment of duplicate CINs. The CIN will be the unique identification number that will track an individual's application and enrollment data. It will not be re-assigned or reused by another person. The number will be used internally, and not displayed to the consumer or passed on to the insurer. Issuers will receive appropriate data via an 834 transaction for their confirmed enrollments.	Q&A	Anthem Blue Cross
BR23	The CalHEERS System shall provide the functionality for a family to apply for different Health Insurance Affordability Programs for different family members.	Anthem would like to review scenarios that outline actions if every member of the family picks a different product? Assumption: if they can each have their own plan, then each person is set up as individual subscribers with their own unique identifier.	Yes, it is possible that each family member can pick their own plan and be individual subscribers.	Q&A	Anthem Blue Cross

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BR319	The CalHEERS System shall be compatible with Windows functionality allowing the Consumer to print, save to file, send information via email, or use any additional browser functionality.	This functionality indicates "Window" compatibility. Will the system exclude Apple Computers?	The reference to "Window" is an error as the functionality discussed is not referring to Microsoft or Apple, but simply the functionality to print, save, etc.	Q&A	Anthem Blue Cross
SR22	The CalHEERS System shall track Assister submitted applications and enrollments.	Anthem assumes QHPs will not be required to track Assister's information including their book of business.	Yes, this is correct.	Q&A	Anthem Blue Cross
SR69, SR70.1 SR70.2	SR69 The CalHEERS System shall provide the functionality to record the detailed results and supporting documentation that result from or support an appeals decision.	Anthem would require clarification on the term "Appeals":	Appeals within CalHEERS is referring to Appeals of the eligibility determination.	Q&A	Anthem Blue Cross
SR162	The CalHEERS System shall provide the functionality to reconcile premium payments to Issuers and allow authorized users to make manual adjustments.	Anthem assumes this function applies to SHOP.	Payment reconciliation with bank accounts will only occur for SHOP.	Q&A	Anthem Blue Cross
SR163	The CalHEERS System shall provide the functionality to submit a payment request to the designated financial institution of net premiums due to the SHOP Issuers.	Anthem recommends that data file transmissions will provide member details including premium payment	Data files to the State Controller's Office will not contain any member details.	Q&A	Anthem Blue Cross
TR106	The CalHEERS System shall interface with a designated financial institution or other payment issuers for the issuance of payments and receipt of payment information for reconciliations.	Anthem assumes this requirement is for the SHOP	Yes, this is for SHOP.	Q&A	Anthem Blue Cross

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TR108	The CalHEERS System shall provide the QHP Issuers ability to upload plan and premium data.	Will SERFF be used?	Yes, we will be using SERFF templates.	Q&A	Anthem Blue Cross
TR198, TR199	<p>TR198 The Vendor shall obtain authorization appeals and claim appeals data from each issuer for each Qualified Health Plan (QHP), Healthy Families plan and Access for Infants and Mothers (AIM) plan offered by CalHEERS on a monthly basis.</p> <p>TR199 The Vendor shall require issuers of Qualified Health Plan's (QHP's), Healthy Families plans and Access for Infants and Mothers (AIM) plans to submit claims and encounter information to CalHEERS. The Vendor shall ensure that a quality assessment (e.g., proper format and content) of the submission is conducted by the Vendor or by a State-Confirmed TBD third party at the direction of the State prior to forwarding the data to DHCS' Paid Claims and Encounter System (PCES).</p>	Additional detail will need to be provided in order to provide the appropriate comment.	These requirements are being deferred to after January 2014	Q&A	Anthem Blue Cross