

PLAN YEAR 2025 CERTIFICATION APPLICATION
PUBLIC COMMENT SUMMARY

Issue #	Application (QHP IND /QHP CCSB / QDP IND /QDP CCSB)	Section Name / Attachment Name	Page Number	Question #	Comment	Covered California Response	Application Change (Yes / No)
1	QHP CCSB	14 ECP	34-36	General	Questions should be waived like other sections that state, "This section not required if Applicant has completed the Certification Application Qualified Health Plan Application Individual Marketplace Plan Year 2025"	Section 14 Essential Community Providers (ECP) questions will not be waived due to completion of Certification Application Qualified Health Plan Application Individual Marketplace Plan Year 2025, but are only required for new applicant entrants and are not activated or disabled in the online application portal if Applicant indicates "Currently operating in Covered California" in Section 2.1, row 11.	No
2	QHP CCSB	15 Health Equity and Quality Transformation	36-39	General	Questions should be waived like other sections that state, "This section not required if Applicant has completed the Certification Application Qualified Health Plan Application Individual Marketplace Plan Year 2025"	Section 15 is required for CCSB Applicants. Covered California recognizes the responses may be the same or similar for both markets.	No
3	QHP CCSB	QHP CCSB Submission Guidelines		N/A	<p>The current naming convention for the EOC and SBC's is "[Issuer Name] [Network Marketing Name] [Metal Tier Name] [AV] [Product Type] [deductible-primary care office visit cost share] [+Child Dental if applicable] [ALT, if applicable] [INF, if applicable] [SPN, if applicable]".</p> <p>Per discussions/emails with CCSB for 2024, NBBP made QHP name changes that were not implemented for 2024 and we would look at again for 2025. There is no mention to naming convention changes for 2025 in this document, nor were any other documents provided, so we would like to know if naming convention will be changed for 2025 to the example provided below from 2024? The naming convention example we were provided last year was: What that means for CCSB QHP Partners: Per Covered CA legal review, below are the prescribed changes that will satisfy the updated rule: 2023 Plan Naming Convention example: Silver 70 HMO 2500/55 + Child Dental 2024 Plan Naming Convention example: Silver 70 HMO 2500/55 PCP + Child Dental</p>	<p>For Plan Year 2025, the naming convention for the Evidence of Coverage (EOC) and Summary of Benefits and Coverage (SBC) will be changed for Plan Year 2025 for QHP CCSB.</p> <p>The naming convention should include PCP after the deductible and office visit (2500/55). <u>PY 2025 Plan Naming Convention Example:</u> Silver 70 HMO 2500/55 PCP + Child Dental</p>	No
4	QHP IND	16 Health Equity and Quality Transformation	47-48, 58	General	In 16.1, URAC and AAAHC are crossed out. However, they are still mentioned in 16.1.1 - the certificate file name advice as well as the checkbox list. They are also mentioned in 16.1.2. and 16.3.1 Please clarify if they are still options.	Given the timing of the NCQA Accreditation requirement, Covered California acknowledges that there may be circumstances where applicants demonstrate current accreditation with the other entities. Confirming compliance may require case by case evaluation.	No
5	QHP CCSB	15 Health Equity and Quality Transformation	37-38, 49	General	In 15.1, URAC and AAAHC are crossed out. However, they are still mentioned in 15.1.1 - the certificate file name advice as well as the checkbox list. They are also mentioned in 15.1.2. Please clarify if they are still options.	Given the timing of the NCQA Accreditation requirement, Covered California acknowledges that there may be circumstances where applicants demonstrate current accreditation with the other entities. Confirming compliance may require case by case evaluation.	No
6	QHP IND	16 Health Equity and Quality Transformation	49 (redline)	16.1.6	The question asks for indication if any penalties have been incurred. It states the timeframe as Measurement Year 2023. In 2024, we are expecting to receive the performance report for PY 2022. Is the question asking regarding the report that will be received in 2024 (MY 2022) or the report received in 2023 (MY 2021)?	Covered California will remove this question for Plan Year 2025.	Yes

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7	QHP IND	All instructions		General	It's a little bit challenging distinguishing which questions will be open to just new entrants and which will be required for returning applicants as well. Can language be updated at the beginning of each section to bring back "only" verbiage, as some statements say "all questions required for new entrants" rather than "only new entrants" so it's not clear if it also applies to returning applicants. The "only" verbiage would help clarify.	No, language will be not be updated at the beginning of each section to include "only". "All questions are required for all Applicants" refers to currently contracted Applicants and new entrant Applicants. "All questions are required for new entrant Applicants" refers to new entrant Applicants. Specifically numbered questions required by either currently contracted Applicants or new entrant Applicants will be stated in the instructions. In addition, the online application portal activates and/or disables sections and questions per application's specific instructions. (e.g., Sections with instructions, "All questions required for new entrants", will be open for new entrants and not available for returning applicants.)	No
8	QHP IND	General		General	Some questions are not open to returning applicants within the application but we assume they will still be required as part of the decoupled effort first implemented in 2023. Will a separate updated schedule and chart be provided to indicate which sections will be required on a different timeline in 2024?	Yes, Covered California will provide an updated contract compliance schedule.	No
9	QHP IND	16 Health Equity and Quality Transformation	59	16.3.6	Question #7- QHPs have little to no influence or ability to steer order sets in hospitals or clinics. These are developed by hospital or clinic organization medical executive committees and not by health plans.	The Smart Care California opioid guideline acknowledges the point made in this comment. Question 7 is looking for plan engagement with the inpatient and outpatient provider network.	No
10	QHP IND	16 Health Equity and Quality Transformation	64	16.3.7	Question needs clarification. Suggest instead of stating "in the past year" to state "within the previous 12 months of receiving a claim or encounter or notification that the enrollee has received SUD or MH services"	Question will be updated to clarify measurement period.	Yes
11	QHP IND	10 Fraud, Waste, and Abuse Detection	32	10.9	Question 10.9 is not noted as required for currently contracted applicants, please confirm it is being removed for this certification.	Section 10 Fraud, Waste, and Abuse Detection question 10.9 is required for currently contracted Applicants. The instructions have been updated.	Yes
12	QHP IND	16 Health Equity and Quality Transformation	51-55	16.2.2	Please confirm that for the Tables for Race/Ethnicity; Preferred Language; Sexual Orientation and Gender Identity: 1) this section is being removed for currently contracted applicants, will it be part of the decoupled templates 2) when completing these tables applicants do not need to include a response for the Covered Ca Exchange Business - only CalPERS, Medi-Cal and Off Exchange Commercial IND/Group	(1) Yes. These questions are removed from the application for currently contracted applicants and are expected to be completed as contract compliance templates. (2) Yes. Responses are only required for CalPERS, Medi-Cal and Off Exchange IND lines of business.	No
13	QHP IND	16 Health Equity and Quality Transformation	59-60	16.3.3&16.3.4	Please confirm that returning applicants are not required to answer these questions, and if they are being moved to the decoupled templates?	Yes, these questions have been moved to ongoing contract compliance processes for returning applicants.	No
14	QHP CCSB	15 Health Equity and Quality Transformation	41-46	15.2.2	Please confirm that for the Tables for Race/Ethnicity; Preferred Language; Sexual Orientation and Gender Identity: 1) this section is being removed for currently contracted applicants, will it be part of the decoupled templates 2) when completing these tables applicants do not need to include a response for the Covered Ca Exchange Business - only CalPERS, Medi-Cal and Off Exchange Commercial IND/Group	(1) Yes. These questions are removed from the application for currently contracted applicants and are expected to be completed as contract compliance templates. (2) Yes. Responses are only required for CalPERS, Medi-Cal and Off Exchange IND lines of business.	No
15	QHP CCSB	15 Health Equity and Quality Transformation	49-50	15.3.3 & 15.3.4	Please confirm that returning applicants are not required to answer these questions, and if they are being moved to the decoupled templates?	Yes, these questions have been moved to ongoing contract compliance processes for returning applicants.	No

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16	QDP IND	10 Fraud, Waste, and Abuse Detection	28/29	10.9	Question 10.9 is not required for Current Applicants, please confirm that it is being removed this year.	Section 10 Fraud, Waste, and Abuse Detection question 10.9 is required for currently contracted Applicants. The instructions have been updated.	Yes
17	QHP IND	Attachment C		N/A	<ul style="list-style-type: none"> •Attachment C does not include other deviations (i.e. wellness programs) that may be offered by a plan. Can Covered CA confirm the process for requesting these types of benefit deviations if they are not included in the Attachment C? •The data format for Column AE is currently set to a date format (rather than a \$\$ format). This should be updated. 	<ul style="list-style-type: none"> • Refer to Attachment C's instructions and note in Step 1. <i>"Note: If the benefit in question is NOT an EHB, do not include it in this document. Email QHPCertification@covered.ca.gov for more information."</i> • Per instructions, "Step 7 (Column AE): If the request is identified as "ongoing" from step 6, indicate the plan year of the original request and approval date." The format has been updated to the general format to allow applicant to enter in a four digits for plan year and an approval date (e.g., PY2025; 11/1/2023). 	No
18	QHP IND			N/A	NCQA has also updated their Hemoglobin A1c from < 8.0% to > 9.0%. Will Covered CA make the corresponding changes in the certification application?	Covered California cannot find reference to Hemoglobin A1c in the PY25 Certification Application.	No