

OSI Responses to Carrier Questions Following Jan 2023 SOPA Reconciliation Training

April 5, 2023

Q1. Is there an issuer id/name OSI is using for sending SOPA related info?

A.1. The naming convention included in the SOPA Reconciliation Guidance is similar to the naming convention used for all QHP files submitted to OSI. Please use the same issuer identifier as you would use for the QHP files.

Q2. Is OSI expecting one or two files for submitting final report for SOPA reconciliation? Reference: Final SOPA Reconciliation Guidance file – Section- Standard File naming convention- Page 15

A2. All issuers are required to submit two files for SOPA reconciliation – Template A and Template B. Templated C is not required to be submitted unless there is a subsequent need to report a discrepancy or to submit a request for reconsideration.

Q3. How will the issuer receive monthly SOPA advance payment?

A.3 Advance SOPA payments will be made to issuers according to the process and timeline spelled out in [Bulletin 2022-022](#). Issuers have already submitted the necessary documentation to receive payments.

Q4. Is QHP Plan ID same as Subscriber ID? If not, is there a typo in the definition? Page 31: QHP Plan ID, Page 32: QHP ID and Subscriber ID

A4. Reference: [SOPA Reconciliation Guidance- 2023 Plan Year -Version 2](#), Appendix B, 32. QHP Plan ID and QHP ID are equivalent. This is the HIOS Plan ID (standard component + variant). The subscriber ID is the unique identifier provided by the carrier and attributed to the insured/contract holder. There was an error in the definition of for the Subscriber ID in the guidance.

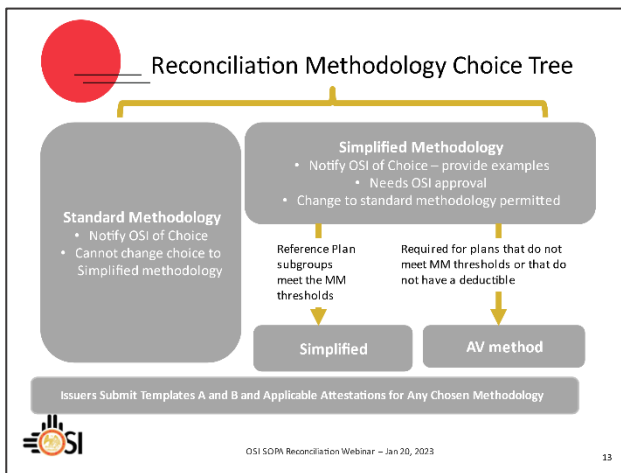
Q5. In the list of data elements that are needed to be part of the report are some data elements which are needed only for Simplified/AV methodology. Examples are Self Only/Other than self Only, Annual Limitations on Cost Sharing for the Reference Plan Actuarial Value of the Reference Plan. If an issuer is adopting the Standard methodology, which of the following is expected? 1) Create a report without the above- mentioned data elements at all; or create a report with the


data elements- but value can be left blank or “not applicable” or something similar.

A5. If an issuer chooses to use the standard methodology, the issuer should leave blank all fields that are not applicable to the standard methodology.

Q6. Related to the AV methodology for the SOPA reconciliation. The guidance indicates that the AV method is an option if the member months are less than 12,000. Does this mean 12,000 SOPA member months or 12,000 total Plan Exchange member months?

A6. The threshold for enrollment in the reference plan at each of the subgroups is 12,000 member months. The purpose of this methodology is to estimate the effective parameters for SOPA utilization under the reference plan so that OSI knows what an enrollee would have paid, on average, without SOPA. This will be compared with what the enrollee actually paid, as reported in the required templates (aggregated payments for claims for services utilized) in order to estimate the correct SOPA amount, without requiring a direct re-adjudication of individual claims. If **any** of the subgroups for the reference plan don't meet the 12,000-month threshold, then the AV method must be used for that reference plan.






The Simplified Methodology

Reference Plan Subgroups and Effective Cost Parameters

- **Reference Plan subgroups can be:**
 - Individual (self-only) medical
 - Individual (self-only) pharmacy
 - Enrollment group (other than self-only) medical
 - Enrollment group (other than self-only) pharmacy
- **Effective cost parameters that must be calculated for subgroups under the reference plan are:**
 - Average deductible
 - Effective deductible
 - Effective pre-deductible coinsurance rate
 - Effective post-deductible coinsurance rate
 - Effective non-deductible cost sharing
 - Effective claims ceiling



OSI SOPA Reconciliation Webinar – Jan 20, 2023 17

Q7. Is there a grace period for adjusting claim status after individual termination of enrollee(s)' policy (30-day grace period) that can happen any time during the year?

A7. The SOPA reconciliation process should have no impact on a carrier's claim adjudication process. A claim that has been adjusted since the initial adjudication would be reported with the adjusted amount in either the initial reconciliation submission window or a subsequent reconciliation submission window. For example, for 2023 Plan Year claims, issuers have two submission windows during 2024 to accurately represent the final claim status of all 2023 Plan year claims, as well as the opportunity to make additional corrections again during 2025 (or beyond) submission windows.