

New Mexico Health Insurance Marketplace Affordability Program FAQ for Issuers

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Please note: this document will be continuously updated and posted on OSI's website.

1. Which variant IDs does OSI expect issuers to use in the proposed supplemental Plans and Benefits Template (PBT) in place of the federal variant IDs (00-06)?

The tables below show the SOPA variant IDs that should replace federal variants.

SILVER PLANS			
Income Range	Current Federal Variant ID	Does SOPA apply to Silver?	New Turquoise Variant ID
Under 150% FPL	- 06	Yes	- 99
150-200% FPL	- 05	Yes	- 95
200-250% FPL	- 04	No	N/A
250-300% FPL	- 01	No	N/A

GOLD PLANS			
Income Range	Current Federal Variant ID	Does SOPA apply to Gold?	New Turquoise Variant ID
Under 150% FPL	- 01	No	N/A
150-200% FPL	- 01	No	N/A
200-250% FPL	- 01	Yes	- 90
250-300% FPL	- 01	Yes	- 85

Issuers should not file any federal variants on the supplemental PBT. The federal variants should be filed in the federal PBT. Additional details are provided in the draft of OSI's policy manual.

2. If these alternate variants are used, how will this data be accommodated for the required annual RBIS filing with CMS? As the RBIS submission requires issuer CEO or CFO to attest that the RBIS submission 'completely and accurately represents the required product/plan benefit and estimated pricing data based on current template parameters', how will issuers submit the new silver/gold plan variant data to CMS to ensure that issuer CFO or CEO can complete the attestation?

The federal PBT must still be completed and be accompanied by an attestation of accuracy. OSI has requested input from CMS and will inform issuers when we have received a response. Issuers should submit an attestation of accuracy for the Turquoise variants to OSI with its Supplemental Turquoise Plan and Benefits Template.

3. Will the 73% AV (-04) Federal Silver variant continue, or will it be fully replaced by the 90% AV gold variant and the -04 silver will not exist (even though it will be in the federal PBT)?

The Silver CSR73 variant will still be available on beWellnm and the cost sharing design should be included in the federal PBT. The state out-of-pocket assistance will only apply to Gold plans in this income range.

4. Will the OSI expect that issuers produce and file multiple versions of the Plan ID crosswalk?

The Crosswalk should not differ based on the federal scenario and therefore OSI does not currently anticipate the need to file multiple versions of the Plan ID crosswalk.

5. Will the OSI expect that issuers crosswalk members in -04 73% AV silver plans to the 90% AV Gold SOPA variant?

The NBPP appears to create a pathway to achieve this type of crosswalk. After the rule is finalized, OSI will ensure that beWellnm’s technology platform can accommodate CMS’s methodology. If it is feasible to implement the policy this year, OSI will share guidance with issuers.

6. Will the OSI publish guidance regarding plan mapping rules for PY23?

OSI will update guidance if the NBPP creates a pathway for a more sophisticated plan mapping methodology that beWellnm is confident it can implement.

7. We want to confirm that the SOPA variations (State CSR) are meant to replace the current federal CSR plans as shown in the tables below. If this is correct, we also want to confirm that though the federal CSR plans will still be submitted in the federal Plans and Benefits template (in order for the federal template to validate), these plans will not actually be sold on the market and no SBCs must be created for them. Please confirm.

Income	Federal CSR (what it is now)	State CSR (what it will become)
Up to 150% FPL	94%	99%
150-200% FPL	87%	95%
200-250% FPL	73%	90%
250-300% FPL	N/A	85%

PLEASE NOTE THAT THIS TABLE WAS INCLUDED IN A QUESTION AND DO NOT FULLY REFLECT WHICH SOPA VARIANTS CORRESPOND TO FEDERAL VARIANTS. OSI ADDED RED TO THE INCORRECT LINE. Please see the table below for an accurate representation.

While federal CSR plans will still be submitted in the federal PBT, most of these plans will not be sold on the market. While these tables are correct, it is important to note that the 73% AV Silver Variant will not be directly replaced by the 90% AV plan for the 200-250% FPL income group. Instead, the enrollee will need to enroll in a Gold plan to receive the 90% AV variant. While the 73% AV Silver variant will be available, OSI is urging beWellnm to de-emphasize the variant on its platform. OSI has reached out to CMS for input on SBCs and will inform issuers when we receive a response.

Below is an accurate representation of how SOPA variants will correspond with federal CSR variants.

SILVER PLANS			
Income Range	Current Federal Variant AV	Does SOPA apply to Silver?	New Variant AV with SOPA Applied
Under 150% FPL	94% AV	Yes	99% AV
150-200% FPL	87% AV	Yes	95% AV
200-250% FPL	73% AV	No	N/A
250-300% FPL	70% AV	No	N/A

GOLD PLANS			
Income Range	Current Federal AV for Gold Plans	Does SOPA apply to Gold?	New Variant AV with SOPA Applied
Under 150% FPL	80% AV	No	N/A
150-200% FPL	80% AV	No	N/A
200-250% FPL	80% AV	Yes	90% AV
250-300% FPL	80% AV	Yes	85% AV

8. Will the federal CSR plans be listed on finder.healthcare.gov after the plans are approved by the state and certified as accurate by the issuer? If so, is there a way to suppress them from the website since they will not actually be sold on the market?

Based on OSI’s review of the tool, finder.healthcare.gov appears to only display unsubsidized plans and therefore does not include information about CSR variants. The base plans displayed on this website should still be an accurate reflection of the standard plan variant. OSI has reached out to CMS for input on this question and will inform issuers when we receive a response.

9. The 85% State SOPA plan does not have a corresponding federal CSR plan. Is this plan solely funded by the state?

Yes, the out-of-pocket assistance will be solely funded by the state, as will the 90% AV SOPA variant.

10. Is it expected that every Silver plan offered must have corresponding 99% and 95% SOPA plans, and every Gold plan offered must have corresponding 90% and 85% SOPA plans?

Every Silver plan offered must have corresponding 99% AV and 95% AV SOPA variants and every Gold plan offered must have corresponding 90% AV and 85% AV SOPA variants.

11. If it is expected that each issuer complete the federal Plans and Benefits template with federal CSR plans that will not be sold on the market, will OSI run analyses to determine whether these federal CSR plans are compliant with the non-discrimination rules, mental health parity, and the other federal data integrity tools listed on the QHP Certification website? Additionally, will OSI have tools available for issuers to help check for non-discrimination, mental health parity, etc. on the SOPA plan templates?

OSI will use the federal tools to ensure that the federal CSR plans are compliant with all federal laws. OSI expects issuers to replicate the general design features of their CSR variants when creating SOPA variants, meaning that there should not be significant deviations from the relative cost sharing structure of the standard version or federal variants of the plan. If OSI detects significant changes from the relative cost sharing structure, it will be flagged during the rate review period.

12. Will the standard benefit designs for the proposed Turquoise plans from OSI's prior proposal still apply for plan year 2023? Based on our interpretation of the latest proposal, it appears that the AVs on these plans would be mandated, but the plan designs would no longer be standardized. Please confirm.

beWellnm will not require standardized plan designs during Plan Year 2023.

13. How will the risk adjustment model be adapted for SOPA?

The Risk Adjustment Program is operated at the federal level. OSI has requested flexibility from CCIIO and will inform issuers when a response is received

14. For Silver plans, we assume the state intends to fund the difference between the SOPA CSR level (e.g. 99% for <=150% FPL, assuming ARP subsidies are extended) and the federal CSR level (e.g. 94% for <=150% FPL). Is this interpretation correct? Or does the state intend to cover the value of both the federal CSR subsidy and the increased SOPA CSR level (e.g. the difference between 70% and 99% AVs in the example above)?

OSI will fund the difference between the SOPA level and the federal CSR level. The state will not cover the value of the federal CSR.

15. How will the additional CSR liability between the current and proposed CSR variant plans be funded? Will the state reimburse payers for this difference? What happens in the event of a shortfall?

OSI will use funds from the HCAF to make advance payments to issuers throughout the year and will initiate a reconciliation process during the following year. The table below shows the multipliers for each SOPA variant. The SOPA Variant Multiplier will be multiplied by the enrollee's gross premium to determine the advance payment amount. OSI would seek authorization to reserves in the Fund in the event that program costs exceed projections.

2023 SOPA Variant Multiplier

Income Tier	Turquoise Variant	SOPA Metal Tier	SOPA AV	SOPA Variant Multiplier
Up to 150% FPL	Turquoise 1	Silver	99%	.042
150-200% FPL	Turquoise 2	Silver	95%	.066
200-250% FPL	Turquoise 3	Gold	90%	.079
250-300% FPL	Turquoise 4	Gold	85%	.04

16. Would the mandated 44% Silver CSR load still apply in 2023? In addition, will there be a corresponding mandated load to account for the Gold CSR plans, or do we assume that the out-of-pocket assistance beyond the base Gold plan will be fully covered by the state?

OSI will release information about the CSR Defunding Adjustment for Silver plans in the "2023 Plan Year Rate Guide." In no foreseeable circumstance, absent major changes to federal law, will the CSR Defunding Adjustment apply to Gold plans, as issuers will be reimbursed for the AV enhancements related to SOPA variants.

17. The HCAF proposal only includes information on Silver and Gold plans. Are issuers still permitted to offer Bronze and Platinum plans as well?

Yes. Bronze and Platinum plans can still be offered. Currently, no platinum-level plans are offered on the Marketplace. Please note that SOPA only applies to Silver plans for those under 200% FPL and Gold for those between 200-300% FPL. Under Federal Scenario 1, state-funded premium assistance will apply to any metal tier other than catastrophic. Under Federal Scenario 2, state-funded premium assistance will only apply to Silver plans for those under 200% FPL and Gold plans for those between 200-400% FPL.

18. Does the +1/0 AV de minimis also apply to the Gold CSR plans being proposed?

Yes.

19. Has OSI considered how the magnitude of APTC subsidies will be impacted as a result of these proposed changes?

Modeling indicates that aggregate federal APTCs will increase as a result of increased enrollment. Under scenario 1 (no ARP extension) Wakely estimates that federal subsidies will increase from \$168 million to \$174 million due to enrollment and premium shifts related to the state's Marketplace Affordability Program. Under federal scenario 2 (ARP is extended), Wakely estimates that federal subsidies will increase from \$239 million to \$245 million due to enrollment and premium shifts related to the state's Marketplace Affordability Program. All figures compare the baseline scenario with the programs under Marketplace Affordability Fund. Please note that Wakely's analysis did not consider the exact SOPA design that OSI ultimately adopted for scenario 1.

20. Since the proposal states that "SOPA will be applied to all plans in the applicable metal level", does this mean the current CSR variant plans will no longer be offered?

Yes. Current CSR variants that the SOPA is built on top of will not be offered for purchase. Please note that OSI is not building on top of the 73% Silver variant and therefore this variant will continue to be available for purchase.

21. Are issuers still required to submit the federal plans and benefits templates, including the standard CSR plans, even though these plans would no longer represent what is actually being offered with the proposed SOPA plans?

Yes.

22. Will plans be required to develop and submit Silver 73 CSR plan designs?

Yes.

23. Will all of the SOPA plans be considered Turquoise plans, even though the proposal includes CSR plans tied to both Silver and Gold metal tiers? If so, how will consumers be able to differentiate between the CSR plans that are tied to Silver vs Gold plans?

Yes. beWellnm will display Silver plans as "Turquoise" for individuals whose household income is under 200% FPL and will display Gold plans as "Turquoise" for eligible individuals whose household income is over 200% FPL. The system will automatically apply the correct variant based on the individual's income and therefore the consumer will not need to take any additional steps to identify which plans qualify for SOPA. Those plans will simply be marked as "Turquoise."

24. Please confirm that the state premium and cost-sharing subsidies apply only to plans sold on-exchange.

Under the Marketplace Affordability Program, state-funded premium and out-of-pocket assistance will only apply to plans sold on-exchange

25. Does OSI expect that issuers will define a single Turquoise variant for each SOPA actuarial value that will apply regardless of which base plan is selected? Or, is the expectation that distinct Turquoise variants will be defined for each base plan, similar to how silver CSR variants are defined in the federal PBT?

No. A Turquoise variant will be required for each base plan, similar to how federal Silver CSR variants are required in the federal Plan and Benefits Template.

26. Will SOPA plans be displayed alongside Federal CSR plans?

The only plans with reduced cost sharing that will be displayed for individuals under 200% FPL are SOPA variants. They will not see federal CSR variants. With the exception of -04 (73% AV) variants, no federal CSR variants will be displayed. Consumers in this income range (200-250% FPL) will need to enroll in a Gold-level plan to access SOPA. Consumers with income between 250-300% FPL will need to enroll in a Gold-level plan to access SOPA. All SOPA plans will be labeled as Turquoise on the beWellnm platform.

Federal variants will not be displayed on beWellnm.com if a state variant exists. However, issuers do still need to submit the variants for federal validation using the federal Plan Benefits Template.

27. Will the state need to pursue a 1332 waiver to require new AV levels under the intended Turquoise plans?

No, the state will not need to pursue a 1332 waiver to require new AV levels because the SOPA is financed by state funds. In addition, OSI has confirmed with CCIIO that that labeling SOPA plans as “Turquoise” will not require a 1332 Waiver. Turquoise is simply a label for SOPA plan variants when displayed to consumers and it will not change the metal tier of the underlying plan in any way.

28. Will OSI be sending a completed Plan and Benefit demonstrating how validation will be completed for the embedded AV calculator? Will the supplemental plan and benefit be utilizing an excel document that is not encrypted or macro intense so we can add in rows as required?

OSI provided issuers with a demonstration on March 31. A sample template that is filled out is available on the HCAF webpage. OSI will manually validate AV calculator outputs. Issuers are responsible for running the AV calculator and then manually populating the “AV Calculator Output” cell in the supplemental template. The Supplemental Turquoise Plan and Benefit Template will use an excel format that is not encrypted or macro intense. This will allow issuers to manually populate the template as needed. There will be no restrictions on the number of cells can be populated.

29. The review tools may not work with the supplemental plan and benefit template. What is the direction with the usage of the review tools?

While the review tools will not work for SOPA variants, OSI will still use review tools for federal variants and base plans. SOPA variants will be reviewed for reasonableness and consistency with base plans and federal variants.

30. Please clarify the responsive measures to be taken by the OSI in the event that the state budget runs low or OSI is unable to make advance payments to the issuers. For instance, will the OSI be granted emergency BAR authority to access health care affordability funds for individual or small business subsidization if future risks arise to adversely impact rate adequacy or solvency (the ability to pay claims). Examples of potential future risks would include one or more the following factors: federal premium and cost-sharing assistance adjustments, diminished health insurance surtax revenues, medical inflation, increased utilization, lower enrollment trends, anti-selection, market competition variances, volatility in oil and gas revenues impacting the state budget, and other economic impacts.

OSI understands the importance of securing adequate program funding and will take any action necessary to ensure that consumers are protected and that issuers are reimbursed for the benefits they provide. Consistent monitoring, analysis, and evaluation will be in effect for all HCAF programs so that the agency can request a budget that cover program costs each year.

The HCAF was designed to build up substantial reserves to bolster program solvency, particularly in the early years of the programs when the full effects of the programs may be hard to predict. OSI works closely with the Department of Finance and Administration, Legislative Finance Committee, Tax and Revenue Department, and Human Services Department to coordinate program implementation, track trends in state revenue, and, once the programs are in effect, evaluate their impact and needs. Should additional resources be necessary, OSI will request supplemental appropriations from the Fund during interim or future legislative sessions.

31. How will IU factors relate to the non-Turquoise plans?

All plans, including non-Turquoise plans will be subject to the induced utilization factors described in OSI's Rate Guidance.

32. Does OSI expect meaningful enrollment in state-subsidized plans?

OSI anticipates plans that qualify for state premium and out-of-pocket assistance will account for a significant portion of enrollment because of the income distribution of the state's Marketplace-eligible population and meaningful cost reductions that these plans offer. Some consumers are likely to enroll in other plan types.

33. Will OSI give issuers flexibility in the SOPA reconciliation process, specifically as to the calculation of the base standard plan where the federal and state SOPA are not applied?

OSI will determine allowable reconciliation methodologies and a timetable for reporting in separate guidance. These methodologies will be based on CCIIO's "[Manual for Reconciliation of the Cost Sharing Reduction Component of Advance Payments for Benefit Year 2016.](#)"

34. Can issuers vary administrative load by plan to influence the price slope?

No, this is not allowed. Please refer to OSI's Rate Guidance.

35. Will the OSI permit changes or amendments to the initial filing to address uncertainty with current program parameters? For instance, it is our understanding that the OSI is asking for issuer input on the prospect of submitting two sets of rates to prepare for both scenarios described in the Manual. If there is no clear direction on final parameters given by mid-April, we would respectfully ask for flexibility to file with the set of assumptions we have in place and address any changes during the objection period?

OSI will only permit revisions of rate filing submissions for risk adjustment after CMS issues the annual Risk Adjustment Report. Unless Congress extends the federal ARP subsidies prior to the rate filing deadline, issuers will need to submit only one set of rates based on scenario 1. Issuers will have the opportunity to submit a new set of rates based on scenario 2 if there are legislative changes that reinstate the ARP-level subsidies. OSI may allow for exceptions only under extenuating circumstances as determined by OSI.

OSI will review these changes to verify that they are justified and comply with the narrow scope of allowed changes. The window for submitting these revisions is July 8 - 15, 2022. Issuers must include supporting documentation as identified under Tab #9, Risk Adjustment, in the Rates Template. Any other revisions will be at the discretion, and written direction of OSI and must relate to (1) correcting clearly inadvertent errors, (2) unforeseen circumstances that impact the industry, (3) risk adjustment after the CMS Risk Adjustment Report, or (4) adjustments necessitated by Health Care Affordability Fund directives issued after the initial rate filing deadline. The revised filing must clearly state the reason(s) for the revision.