

**Key Dates for Calendar Year 2020¹:
Qualified Health Plan (QHP) Certification in the
Federally-facilitated Exchanges (FFEs)²;
Rate Review; and Risk Adjustment**

Table 1. QHP Certification in the FFEs³

Activity	Dates
Initial QHP application submission window opens	4/23/20
Optional Early Bird QHP Application submission deadline	5/19/20
CMS reviews Early Bird QHP Application data and releases results in the PM Community	5/20/20 – 6/10/20
Initial QHP application deadline	6/17/20
CMS reviews initial QHP application and releases results in the PM Community	6/18/20 – 8/12/20
Initial deadline QHP application Rates Table Template	7/22/20
Service area data change request deadline	8/11/20
Issuers complete final plan confirmation and submit final Plan ID Crosswalk Templates in the PM Community	8/12/20 – 8/26/20
Transparency in Coverage data submission deadline	8/26/20
Deadline for issuers to change QHP Applications	8/26/20
CMS reviews QHP Applications and releases results in the PM Community	8/27/20-9/16/20
CMS sends QHP Certification Agreements to issuers	9/15/20
Issuers return signed QHP Certification Agreements to CMS	9/15/20 – 9/23/20
States send CMS final plan recommendations	9/15/20 – 9/23/20
Limited data correction window	9/17/20 – 9/18/20

¹ This document summarizes key dates for calendar year 2020 regarding some activities and policies that are outlined in other documents. CMS is not soliciting additional comments on the substance of the underlying policies or key dates through release of this document.

² Includes QHPs in FFEs where states perform plan management functions.

³ As part of the Administration's efforts to combat COVID-19, CMS adopted a temporary policy of relaxed enforcement and directed QHP issuers to discontinue collection of clinical quality measure data and survey measure data for the 2020 QRS and 2020 QHP Enrollee Survey to calculate ratings for PY 2021. See <https://www.cms.gov/files/document/covid-grs-and-marketplace-quality-initiatives-memo-final.pdf>.

Activity	Dates
Machine Readable file posting deadline	9/18/20
Transparency in Coverage data resubmission deadline	9/18/20
CMS releases certification notices to states and issuers	10/5/20 – 10/6/20
Open Enrollment begins	11/1/20

Table 2. Rate Review for Single Risk Pool Coverage^{4 5}

Activity	Dates
Submission deadline for issuers in a state without an Effective Rate Review Program to submit proposed rate filing justifications into the Unified Rate Review (URR) module of HIOS.	6/3/20
Submission deadline for issuers in a state with an Effective Rate Review Program to submit proposed rate filing justifications into the URR module of HIOS. ^{6 7}	7/22/20
Target date on which CMS will post proposed rate changes. ⁸	8/14/20
Deadline for issuers in states with an Exchange served by the HealthCare.gov platform to submit final rate filing justifications <u>that include a QHP</u> in the URR module of HIOS. ⁹	8/26/20 ¹⁰
Deadline for issuers in states with a State-based Exchange that does not use the HealthCare.gov platform to submit final rate filing justifications <u>that include a QHP</u> to be in a final status in the URR module of HIOS.	10/15/20
Deadline for all issuers to submit final rate filing justification <u>that only contain non-QHPs</u> in the URR module of HIOS.	10/15/20 ¹¹
Target date on which CMS will post <u>all</u> final rate changes. ¹²	11/2/20

⁴ Rate review dates from the *Revised Bulletin: Timing of Submission of Rate Filing Justifications for the 2020 Filing Year for Single Risk Pool Coverage Effective on or after January 1, 2021* at <https://www.cms.gov/files/document/2020-revised-final-rate-review-timeline-bulletin.pdf>.

⁵ The term “single risk pool coverage” is used to describe non-grandfathered health insurance coverage in the individual or small group (or merged) market that is subject to the single risk pool provisions at 45 CFR 156.80 and required to submit rate information using the Unified Rate Review Template.

⁶ We recommend that States with Effective Rate Review Programs served by the HealthCare.gov platform set a submission deadline no later than the deadline of June 17, 2020, for submission of rate filings that include QHPs to align with the FFE QHP filing deadlines; however, we understand some States may face challenges in doing so, and they will not be bound by this recommendation.

⁷ States with Effective Rate Review Programs are permitted to establish different submission deadlines for non-QHP only rate filings as long as the deadline is no later than July 22, 2020.

⁸ CMS will post rate filing information for all single risk pool coverage proposed rate increases (not just those subject to review). CMS will not post information that is a trade secret or confidential commercial or financial information as defined in HHS’s Freedom of Information Act regulations at 45 CFR 5.31(d).

⁹ There are three final submission statuses in HIOS. All submissions that do not have any rate increases subject to review (rate increases less than 15%) must be in a state of “Rate Filing Accepted.” For a submission with a rate increase that is subject to review (rate increase of 15% or greater), the submission must be in a status of “Review Complete” if the rate increase received a determination of “not unreasonable” or in a status of “Final Justification Submitted” if the rate increase received a determination of “unreasonable” and the issuer has submitted the final justification.

¹⁰ These filings must be in final status by 3:00 p.m. EDT.

¹¹ These filings must be in final status by 3:00 p.m. EDT.

¹² CMS will post rate change information for all single risk pool coverage final rates. CMS will not post information that is trade secret or confidential commercial or financial information consistent with HHS’s Freedom of Information Act regulations at 45 CFR 5.31(d).

**Table 3. Risk Adjustment for Benefit Year 2019
and Risk Adjustment Data Validation for Benefit Year 2018**

Activity	Dates
Interim 2019 Benefit Year Risk Adjustment Report Released	March 2020
Deadline for Submission of Final 2019 Benefit Year Risk Adjustment Data	May 14, 2020 ^{13 14}
2018 Benefit Year -Risk Adjustment Data Validation Error Rates Released	Late May 2020
2019 Benefit Year Risk Adjustment Summary Report Released	No later than July 17, 2020 ¹⁵
Collection of 2019 Benefit Year Risk Adjustment Charges Begins	August 2020
Summary Report 2018 Benefit Year Risk Adjustment Data Validation Adjustments to 2019 Benefit Year Risk Adjustment Transfers Released	August 2020
2019 Benefit Year Risk Adjustment Payments Begin	September 2020
Collection and Payment of 2018 Benefit Year Risk Adjustment Data Validation Adjustments to 2019 Benefit Year Risk Adjustment Transfers Begin	Early 2022

¹³ These submissions must be completed by 4:00 p.m. EDT.

¹⁴ As part of the Administration’s efforts to combat COVID-19, CMS adopted a temporary policy of relaxed enforcement and updated the 2019 Benefit Year Risk Adjustment timeline for EDGE server data submissions. See https://www.regtap.info/ann_view.php?id=268.

¹⁵ The extension of the 2019 Benefit Year EDGE data submission deadline to May 14, 2020, shifted the timeline for release of the 2019 Benefit Year Summary Risk Adjustment report to no later than July 17, 2020. See https://www.regtap.info/ann_view.php?id=268.