

CGI TECHNOLOGIES AND SOLUTIONS, INC.

Moderator: Andrew Adrian-Karlin
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Operator: Good afternoon. My name is (Jim) and I'll be your conference call operator (inaudible). I would like to welcome everyone to the Rate and Benefit Information System user training call. All lines have been placed on mute to prevent any background noise. After the speaker's remarks, there will be a question and answer session. If you would like to ask a question during this time (inaudible). If you would like to withdraw your question, press the pound key. Thank you.

(Mr. Marshall), you may begin your conference.

(Mr. Marshall): Good afternoon everyone and welcome to the Rate and Benefit Information System user with a special focus today on the small group submissions that are upcoming. I just want to thank everyone for joining us today and at this point, I would actually like to turn this over to Andrew Adrian-Karlin as he starts the training.

Andrew Adrian-Karlin: Hi everybody. The training is going to be two parts today. The first part we're going to go over the (highest) enhancements related to the rates and benefits information system and then we're going to get into what RBIS is and I'll be detailing the agenda for that when we get to that section. So, HIOS, the Health Insurance Oversight System has had a number of updates and enhancements that are going to be going live come Monday are related to the mini-window that starts on the 3rd. To accommodate our RBIS's needs and to help RBIS users.

The first enhancements are the addition of contacts, additional backup data contacts for both data submission and data validation as well as attestation user contact information. So, in addition to your normal two small group and individual market submission contacts, for each market you get a third in addition to your two small – your two data validation contacts for both small group and individual market. For each market you get a third. And then it's also collecting CEO and CFO contact information so they can log in to RBIS and attest to your products – or to your issuers.

Additionally, on the product level, HIOS will be collecting product effective start date, which will be a required field and product effective end date, which will be optional. That's instead of RBIS collecting those. HIOS has updated the way it's collecting contact information as well. The design has shifted from specific boxes to line items and the collection of contact information for the various roles is consolidated in this single chart. Your existing contact information will be pre-populated into the new format for editing. And, as you can see, there are second backup fields for each of those market types and the attestation contacts on the bottom.

One restriction that we'd like to point out is that at least one of the attestation contacts must be complete. You will be required to enter either your CEO or CFO's information. You may enter both, but you must enter at least one. The additional backups are optional fields.

You'll see these two new columns – the effective start and effective end date, the product information tab inside your HIOS issuer data form and you'll be able to identify each product's effective start and end date. Again, effective start date is required and effective end date is optional.

The database will not automatically process the product status changes closed if the refresh date is past the effective end date. You, as an issuer, will be responsible for making these edits and subsequent refresh windows. You'll need to mark your products as closed when they close.

And finally, HIOS is now accepting XML submissions. A HIOS XXD, XML (scheme of documents) will be available on the HIOS download page on

Monday and on October 3rd through 7th, (inaudible) accept submission window so it will accept both XML documents then as well as finalized data entry forms and then on October 11th through the 21st, the other window will open. That is the week immediately following the HIOS submission window.

So, with those brief HIOS updates, we have the rate and benefits information – rate and benefits information systems training. We will be covering a brief introduction. The log in home screens, submission materials including the templates, then upload and system validations, user validations, attestations and finally we'll go over health desk information and open it up for questions at the end.

So the Rate and Benefits Information System or RBIS, collects rate and benefit information for display on healthcare.gov. It'd be specifically benefit combinations for the small group data collection window. Access through RBIS will be granted through the HIOS home screen – through the HIOS portal. The first screen you see once you log in to HIOS – and you'll be able to use your HIOS user account to access RBIS. RBIS operates in a similar manner to HIOS – submission, validation and attestation must be completed during the submission window. They're much faster. You'll – I'll explain to you how RBIS automatically does system validations when you upload your files and then, you know, your validation – your user validations attesting the information are, you know, all available once the data is (inaudible) submission window.

So, some key take-aways from today's training. The use of RBIS will be necessary for small group products to display on healthcare.gov going forward. If you want your products to display after the 11-15 refresh, you must have uploaded the data into RBIS. The RBIS process involves three separate actions. So a successful submission, your submission users will be responsible for that. User validation, which your validation users are responsible for. And then attestation, which your CEO or CFO is responsible for.

RBIS has a number of improvements over the (inaudible) automated and when you submit some templates to RBIS, it returns all errors in that

submission. So as soon as the system is done processing the data, it will return an e-mail to you listing all errors that your submission has.

And then finally the finder verified period that you're used to now occurs during the window. This is the user validation that I've been referring to. You'll see that, you know, your validation users will be able to go in during the window and validate your products.

So, to access the RBIS log in screen, the RBIS log in screen will become active on the 11th of October. To access that screen, you'll log in to HIOS, select the rate and benefit information system button and then you'll see two tabs. The first tab will be submission materials and the second tab will be RBIS system. On the 11th of October, you'll select that – you can select that second tab and you'll be taken to their rate and benefits information system log in screen. Your user name will automatically pre-populate in the user name field. For security reasons, you'll have to re-enter your password and then you'll have to enter another (capital) at the bottom of the screen. Once you press log in, the system will verify your credentials and will you log you in to the RBIS home screen.

The RBIS home screen looks similar to the HIOS home screen. RBIS as a whole should look similar to HIOS. You'll see that on the home screen you have announcements with information that (inaudible) has for you as well as related links to take you quickly to useful information. And at the bottom of the screen, you'll see your user issuer association. This table provides you with information on what actions you're responsible for, for what issuers. So you can see that for the user that I've logged in with and it's (screen shop), (AJ issuer 3), I am a validation and submission user for and then ABCD of Oregon, I am a validation and submission user for as well. And you can see that my validation user for ABCD (inaudible) user.

On the top of the screen you'll see the various tabs to access the functionality within RBIS. The submission materials screen to download the submission templates; data upload screen to upload your templates; validation screen – validate data tab to perform user validations and then the attestation tab for your CEO or CFO to attest to your data.

Starting on the 26th, the RBIS templates will be available via the link off of the HIOS portal page. So starting on MONDAY, you'll be able to go in, select the rate and benefits information system link off the HIOS portal page and you will get to the first tab (inaudible) download RBIS templates. Starting on October 6th, so right on the Thursday of the HIOS submission window, you'll be able to download pre-populated RBIS templates from the system and this will be through HIOS and they'll be pre-populated with your HIOS data. All of the specifics about what in each of these templates – what each of these templates are and what information will be pre-populated in the templates when we cover the templates in the a second.

Just to cover the RBIS submission material's screen. This is where you'll come to download the user manual, which will be available on Monday as well, and then we provide both an XCEL format template similar to the HIOS XCEL format templates or HIOS – as well as XML (scheme of documents) for each of the templates. So if, you know, you have the technical capabilities to submit in XML, you can download an XSD and then generate your XML submission. That's slightly technical and out of scope for today's training. We can – if you want to call the help desk on Monday if you questions related to that, we can address those as well as if you have any questions in the Q&A following.

So there are three templates that RBIS requires: the benefits template, the regions template and product availability template. The benefits template has the core of the data of the you'll be submitting. So pre-populated from HIOS on the 6th, the first three columns that you see on the screen (inaudible) smart id as well as the doctor choice or what will be considered in HIOS the product type. This has a large number of columns where you fill in detailed benefits information about your product. These are – this data is being collected for the small group market on the product level. So for each product, you'll need to enter the benefits information here and then upload it. Templates internally require upload on the issuer level so you'll need to enter all products for an issuer on a single template. As well – in data and validate and finalize button for those of you familiar with HIOS, you'll need to save this document when you download it. You'll need to enable macros so you can use validate and

validate and finalize because once you are done completing this template, you'll need to select validate and finalize and it will generate a finalized file that does not have any macros after confirming that the data – confirming a number of initial checks, the data is accurate. That finalized file will be what you upload into RBIS.

As you can see on the screen or I should point out that copying and pasting is available within this template. The first row, product 12345, Virginia 001, has the exact same information for the most part as issuer 12346's information and I carry that out just by highlighting that data, copying and pasting it below. (Inaudible) we suggest you use anything to save yourself time and reduced burden in the (inaudible).

The second template this has is the regions template. Attempting to reduce the amount of data entry that you have to carry out both by pre-populating this and by allowing you to define your own regions. Regions are defined on an issuer basis. So for each issuer, you'll have to define a separate set of regions. A region is the area – region gets defined by the area that it covers. So you can define a region by just an entire state like you see on the bottom, 12346, region one, by a state, by a – and we also allow (inaudible) codes for those of you who are familiar with them, feel free to enter them. For those of you who aren't, feel free to ignore them.

The regions themselves can involve multiple lines. So I can define a region as, you know, two different zip codes and a county or two different counties or any combination thereof. HIOS will be pre-populating your issuer id. It will be creating region numbers based on the (inaudible) within HIOS and the geographic coverage that you specify. So for those of you who had issues in HIOS where you have, you know, all of your products cover a number of zip codes, but they're all the same zip codes, and you've had to put in those zip codes for, you know, six different products, you know, a 100 lines. What you'll see is that they'll all be defined (inaudible) and then on the next template on the product availability template, HIOS will tie them together.

The required fields inside the regions template are the state field, the issuer id and the region number. The rest of the fields are optional and they get down

to how granular and in what way you're defining your regions. We recommend that you do not enter both a (fifths) code and a county code because if you have a data entry error and one of the (fifths) code and the county code do not match, what the system will do is that it will favor the (fifths) code over the county code – upload that.

An additional item of note about the pre-populated zip codes, HIOS currently only validates zip codes that there's a correct format so they're a five-digit number whereas RBIS has the functionality to actually validate that a zip code or county is within the state and that it's a real zip code or county. So, what you'll see if, you know, at some point your geographic coverage areas inside of HIOS were entered incorrectly, is you'll see an error return from RBIS that you have an incorrect zip code. If you only correct this data inside RBIS, your RBIS and HIOS data will be out of sync. That is, RBIS – once you submit regions data into RBIS, RBIS will not go back and update HIOS. You'll need to make a note to correct your HIOS data at a later date and window so that they're both back in sync and the next time you download a pre-populated regions template, your data is accurate.

Finally, the product availability template ties together your regions and your products so as to adhere I populated this with, you know, issuer id 12345, you know, I populated it with two of its products. As you see, it's the first product is defined by, you know, the first four regions that I showed on my regions template and then, you know, my second product for that issuer is defined by regions two and five. Regions are on the issuer level. So while region 1 for issuer id 12345 here means one thing, region one for issuer id 12346 means something different. Referring to our previous slide, if we would to go off of this, you know, region one for issuer 12345 would be Fairfax County inside zip code 22030 and region one for issuer id 12346 would be the entire state of Virginia. There is a slight difference. The entire product availability template will be pre-populated by HIOS based on the geographic coverage data that (inaudible) listed there.

Again, for both regions and product availability, inside the XLS document, you'll need to validate the data and then validate and finalize and it will generate a final (inaudible) should be submitted that can be free of macros. If

you upload your working file (inaudible) files with macros still in them, the system will reject them.

Once you, as a submission user, have finalized your templates, you can go to the data upload screen and specifically the upload files small group page. This screen outlines what the system accepts so it accepts uploads in XML, XL972003, so finalized files in dot XLS format, a (pipe delimited CSV) so a delimited file using (pipes) as opposed to commas. If you were to save in a conventional XCEL dot CSV format, it would save it with commas and the system will reject that.

If you are interested in pursuing a (pipe limited CSV), we recommend that you refer to the user manual, which will be available on Monday, and that you call the help desk to help walk you through the process. Additionally the system will accept zip files. Two caveats on zip files, please make sure that when you zip up your templates, you zip the templates themselves and not the templates inside a folder. When the system unzips, if it just sees a folder, it will reject it. And most importantly, please make sure that all the templates inside a zip file are of the same type so they're all regions templates, all product availability templates or all benefits templates. As you'll see in a second, you have to indicate what template type you're uploading and so the system sees a product availability template that it thinks should be a benefits template, it will reject them.

So, at the meat of this page is the upload files for small group market section. RBIS requires that you have all your products present inside HIOS before you submit to RBIS and RBIS will be actively checking for that. Additionally RBIS requires that you make positive confirmation that your HIOS product data has already been uploaded for the products. So, you'll need to check the box that you see, just buttons, and then press the upload (inaudible) apologizes. You then browse and select your files and then you select what template type the file is. We recommend that you upload all three templates at once for an issuer. The system can accept if you upload just one template type at a time, but you'll receive a number of messages that I'll go over when I discuss system validations. Once you selected your templates to upload, then please press the upload button. You'll see a confirmation message, top

of the screen, that says that your files have been upload successfully or, alternatively, if your file has failed to upload, then you'll receive an error message. Please pay attention to the bottom of your browser especially if you're uploading large files. Large files can take a reasonable amount of time to upload and make sure that you don't close your browser window before you see either that confirmation or that error message. The system accepts files up to 30 megabytes in size. If your file is over 30 megs, we recommend that you zip it up or that you turn it into a (pipes delimited CSV), potentially both. If you have any issues here you have a template that is above that or templates that are above 30 megabyte, please contact us and we'll help you work through those issues.

Upon upload, the system also is checking that the file has the appropriate file type – that it's XML, XCEL 972033, (pipe delimited CSV) or zip. The rest of the system validations will occur in a second – I'll go over those. But those are the initial checks that's when it's uploading. When it's uploaded, it has not passed system validations and it will not be ready for user validations yet. You will receive an e-mail about that and I'll be discussing that right after I discuss the (inaudible) uploaded files small group page.

The second page in the data upload tab is a history of all your uploaded files for the small group market type and it's actually all files that have been uploaded or all issuers that you have access to. On the far left side what is actually beyond the scroll bar that you see here, is the name of the user that uploaded the file. Then you see the file name, the template type and the submission date. A quick word about the file name. In order to differentiate between different files that are named the same, the system automatically assigns a random number to the file name. If you look at one these file names, you'll see this big long string of characters. If you look over at the right side, the file name will be just past that last dash right there. And so this screen will always be available for you to review on your newest files uploaded.

So, once you've uploaded your templates on the upload screen as a submitted, the templates will enter a cue to pass file format system validations. File format system validation is very similar to the validations you might be familiar with in HIOS. It goes into that specific template so (inaudible)

benefits template, it looks at just the benefits template. We're going into a product availability template, it looks at just the product availability template and it verifies that for the fields inside that template, the data you have entered there is correct. So, when we're looking for a number, you (aren't) entering letters. When you're looking for a zip code, you're entering a zip code and that's it valid for the state. If you get an error – so assuming that the templates pass that, that check should happen relatively quickly after you upload. It's an immediate process and once a template is uploaded and there's the cue to pass file format system validation.

Once it's passed that, then your template enters a holding area to pass cross-check validation. These validations are scheduled to run a few times each day and what the cross-check validation does is it looks for data of other template types. So for an issuer that's listed in a benefits template, it looks for regions data for that issuer, it's for product availability data for that issuer and it looks to make sure that they match.

Finally, assuming that your issuer has passed those checks, then your issuer – that issuer will (inaudible) if your templates or if your issuer does not pass file format or cross-check validation, you'll receive an error e-mail similar to the one that you'll see in a second. It lists – it's sent out to all submission users for an issuer. It lists the issuer name, the issuer id, the submission time and date as well as the market type and this is an example of the template validation and we only have one error on this, but the system should provide you with all errors inside that validation.

So, we see that our error details for template one dot XLS is that the zip code 22033 was not a valid zip code for the state of that issuer. So these validations are done on an issuer by issuer basis. So if you have two or three issuers inside a template and just one issuer like, let's say you have 32725 and 32724 inside a single template and 32725 got this error. So 32725 would not have any products data uploaded at all, but 32724, assuming that it was successful, would have product data uploaded and assuming that you don't receive for an error for your issuer. If you're issuer successful, you'll receive a validation successful e-mail like the following. It lists the issuer name, the issuer id. This e-mail goes out to all submission users and all validation users

– the success e-mail. It informs the validation users that the issuer's data is ready for – the products within the issuer are ready for user validation and that submission user has successfully uploaded for the issuer.

Error e-mails go out to only a submission users for an issuer to inform you that you need to resubmit the – correct and resubmit the data. I pointed out that we recommend that you upload three templates – template types of data at once for a single issuer and that's because of those cross-check validations that I mentioned. (Inaudible) options data or only regions and benefits data then it's going to send you an error saying there's no product availability data for this issuer.

So that concludes what your submission users are responsible for inside RBIS. And we move on to user validations, which should be similar to the finder verified process that you've experienced inside CMP. There are two pages inside the validate data tab on RBIS to go and validate your data from. The first is the view all products validate data page and on this page, the product id's validation status and a number of other benefits information here.

They're viewable by selecting an issuer id or issuer ids from the multi-select box on the screen and pressing enter and it lists all of the products for those issuers – all the products currently in the system. You can go ahead and – by default, the validation is set to not approved. So if your validation users do not come in and do not positively validate them, the products will not be marked as approved and will not pass to healthcare.gov. On this screen, your validation users can view a benefits detailed data (dump). You can select it. It's up at the top and download (inaudible) text to columns inside XCEL to go and make it a nice XCEL format. If you have any questions about that, please reach out to the help desk so that we can help you through that.

Additionally, to check individual products – individual products benefit data – if you want more detailed information that you'll see in this table, you can select the view product benefit information link which you see on the far right side of the table and a pop-up will appear that has all of the detailed benefits information that was entered. So for this product, this shows all the benefits information that we've provided.

So that – I explained that that was the first screen review viewing all products at once. The second screen is the search by scenario screen. So at the top of the screen you will get issuer ids to select inside a multi-select box so you can select and then you can enter the parameters that a consumer is looking for small group products (inaudible) will be entering on healthcare.gov. So it's a simulation event. So you enter the number of employees, you enter the effective date and then you want coverage to start, you enter the zip code and then you'll have to verify the zip code.

Please press the verify zip code button. It'll pull up counties and you'll need to do that for (each submit). Once you press verify zip, below the zip code a business box or zip code or business title, you'll see radio buttons with what county you're in appear. Once you – you can press submit and a table very similar to the table that we saw on the previous screen populates the bottom. You'll again select that they're approved or not approved, basically validated or not validated, and for both these screens, you need to commit to your validation decision by pressing that save button at the bottom. If you don't press that save button – if a product is not marked as validated – if you don't select the save button, any product you've marked as validated won't be saved as validated. They'll remain in their current status of not approved. Products that are in not approved status at the end of the submission window will not be passed to healthcare.gov.

A brief note about resubmission in the system. Resubmissions and the validations for submissions are at the issuer level. So when we were talking about (inaudible) populating your template, you have to populate product data for an issuer and, like I mentioned, the product data for an issuer can't be split over multiple templates. That's because each time a submitted uploads a template with an issuer's data, so I upload a regions template with a (inaudible) 12345's data on it, every time I upload that, the system overwrites the previous data. So, if I have one zip code listed, you know, now zip code 97212 and I upload 12345 with zip code 22033, it will not be in addition to that region's data, it will override that region's data.

Some more with benefits data. If I uploaded new benefits data for 12345 in a template without the current benefits data, the system overwrites it and the current benefits data in the system is gone. So this is at the issuer level. Validation, as we've seen, is at the product level. So I select a product under an issuer to validate (inaudible) or even if I select all products for the issuer, I'm selecting products. What that means is that any time you resubmit data as a submitted, any time that system validation passed successfully e-mail goes out to your validators, they must go in and revalidate all products. So, if your validators sees an issue with, you know, a few of their products, you can – if you resubmit just those few (inaudible) then what will happen is the system will overwrite the data and what will only be available are those couple products that you've updated. You need to resubmit all the data – all the products for an issuer and your validators will need to revalidate all the products once a resubmission has occurred.

Attestation, which we'll be discussing in a moment, will only need to be completed once per submission window. So, once you've attested even if you resubmit, you will not need to attest again. It should be simple to – once that's taken care. So once your validation users have completed validation on your product, then they're done. They're process is complete. In parallel to your validation users, your CEO or CFO (inaudible) that they are associated with have either have data uploaded or have had data marked as not being uploaded. (Inaudible) section of the validate data screen where you can mark that for issuers. If you have questions about that, please call the help desk, but until all of the issuers listed with a CEO or a CFO have been uploaded, have had submission complete, they don't have to have been validated by your users, just that the systems completed submission.

Your CEO or CFO will see this screen saying that there's no data available (inaudible) attestation is unavailable and will show the status of their issuer ids. So, you can see that for this CFO, for issuer id 74330, submission is complete, but they cannot attest to data because their other issuer 87629 has not successfully uploaded. Once all of their issuers have successfully had data uploaded, the attestation user will receive an e-mail that evening informing that attestation is available, please come into RBIS, instructions for logging into RBIS and then choose select the attestation tab. They'll need to review

the attestation agreement at the top of the screen. If they'd like to check what issuer ids they're attesting to, data for, they can at the bottom of the screen. They'll need to enter their electronic signature in the box on the right side that's above those tables that you see and then press the attest button. Once they've rendered their signature and press the attest button, they'll receive a tab. The tab will change to show the data attestation is complete and congratulations the day of successfully completed it. For the rest of that submission window, the data attestation tab will remain like this once the attestation is complete once, attestation is complete for that submission window. There will be no need to (re attest). We're making this very easy or as easy as we can.

So, once you've completed attestation and validation for your data attestation and validation for your products which both, after (inaudible) at that point, the three key tasks for RBIS are done and you are all set for the next data refresh. RBIS will have a separate help desk from HIOS and will be available from 8:30 a.m. to 7:30 p.m. eastern time Monday through Friday starting this next Monday, the next business day from now, the 26th. We are available via phone at 1-888-380-2107.

That'll be listed in the user manual and, again, let me repeat that, that's 1-888-380-2107 and we're available via e-mail at insuranceoversight@hhs.gov. We're showing the same e-mail address as the HIOS help desk and we'd actually appreciate it if you could mark e-mails directed at as being RBIS specific so put an RBIS in the subject line. If you don't, we should still get it, but we'd just appreciate it. It makes our lives a bit easier.

And then, I'd like to circle back and say please get in touch with the help desk if you need any help or have any issues with RBIS. One of our key measures for success as technical support for you is your ability to successfully get data into RBIS and data available on healthcare.gov after the refresh. So, any issues, please get in touch with us. We will be happy to help you through.

As a recap, inside RBIS you must submit, validate and attest to data to the healthcare.gov refresh. All actions must be completed during the submission window so the RBIS submission window goes live on the 11th of October,

that would be Tuesday the 11th, and that will be when you can start submitting your completed templates and once those templates have been uploaded successfully, you can attest and you can validate. You must submit to HIOS before submitting to RBIS and your RBIS users are your HIOS users. So, as a benefit, we are checking to – the products are corresponding to a correct product id so data entry errors should be prevented related to that. But, if your product is not in HIOS, you will not be able to submit to – that product to RBIS.

And to recap the users that you submit to HIOS this coming submission window will be the users that you will have available for RBIS. So, you know, your submitted in HIOS will be your submitted in RBIS. Your validator in HIOS will be your validator in RBIS.

And finally related to attestation, it's not available until all issuers for an attester has submitted. RBIS does the ability on the validation screen to mark that an issuer won't be submitting data and if you have questions about that or you know some of your issuers will not have data submitted like your CEO's responsible for a company in Virginia and Maryland and you know that the Maryland company will not have data submitted, then have your validator go to the validation screen, mark (inaudible) and press (inaudible) submit. If you have questions about that, please reach out to us, but if possible, you know, we'd like to get your data on healthcare.gov so please strive to get the data submitted.

And with that, we're opening it up for questions.

(Brian James): (Inaudible) and this is (Brian James) and thank you Andrew. That was terrifically thorough and I think covers essentially all (inaudible). I also appreciate the recap to kind of talk people through things orientated on where they can get additional information, but I'd also like to just very quickly kind of run through the steps so that people don't get lost in the details.

You are – everyone will need for this one time to go into HIOS in, you know, in addition to what you've entered in the past. This is really just to make sure we capture the contact information so if you are going to have someone

handling small group separately from what you've entered in the – before, you have an opportunity to add those names. To add the e-mail addresses and contact information for the CEO/CFO, in the past we've occasionally had issues where you weren't able to contact the CEO, so this is another way for us to just make sure we're keeping them informed of the process and adding another contact so that there's additional ways to get into the system and get the job done.

And, finally, to enter those effective dates. Again, this is the only time you'll have to do that separately from the process. Those fields are being added to the template so that we can control whether something should display or not. The other piece of this though is that you'll be able to download the pre-populated templates for RBIS, right? And there'll be three of those. There'll be a benefits (inaudible) a regions template and then another template that links the regions together to your products.

The only one of those that you will need to edit for the submission window is the benefits template. The other two will be pre-populated for you and the benefits template will have the list of all of your products already in there so you'll simply need to go in and, you know, if you do it beforehand, you can simply paste in the benefits or you can go in and enter them at that time. Then you load the templates into RBIS. You'll be access RBIS through HIOS. It's very direct and when you take, you know, a significant period of time to go through the process (inaudible) being done automatically and up-front. That's why these windows haven't been extended to allow for, you know, significant edits and back and forth. We're doing all the checks up-front. If you fail some of those, you receive a notice and you just reload, you know, go into your template, make an edit, reload it. Once that loading has happened, two things follow. You get an e-mail that you can go in and validate and an e-mail goes forward so that they can attest. That e-mail will go to the CEO to the address provided for the CEO and to the address – the e-mail address provided for the validator. OK? That way if the CEO misses it, you have the ability to work with him to help him or her get the (inaudible) and done. You can go into validate. If you want, look it over – you should look it over – and then at that point, if you (inaudible) single click of our mouse to validate everything

or you can, you know, select and chose certain things that are actuate and other things that are not.

And similarly, the person who is attesting, will be able to go in. There's a screen. The e-mail contains a link. They click on it. They log in and at that point, they're able to go ahead and mark that yes, the submission is what we intended to submit and is accurate and complete.

And that's essentially the process. When things are validated and attested at the close of the window will be – you'll be able to look at your materials as you're going the process. There's status codes entered in the process and really it's as simple as that. OK?

Andrew had mentioned that the materials are going to be available on Monday for you to look over. (Inaudible) most of the materials are already available on the (sea sio) Web site. They were loaded up earlier today. If you go to (sea sio.cms.gov) they're on the resources page and you can scroll down to see that we've added the user manual and templates as well we've got the slide deck (inaudible) presentation today. By Monday, we will also be adding a – it's a simplified data dictionary, a glossary, that provides definitions for the different categories of coverage. YOU'LL note that these are very simple. We are not trying to over-complicate the process. We are not trying to force you to represent benefits in a way that is not consistent with the way that you structured your benefits, but they are simple guidelines (inaudible). Those fields should be entered in. OK?

And so, you know, I – and if you've been following the discussion of the summary of benefits and coverage which has essentially been finalized with very small changes, I think, over the last six months, it, you know, the fields are all very consistent. That is the approach we've taken, but for small groups, since you're doing (inter-product) level, we've simplified it so that you would simply enter covered, not covered, covered with limitations or covered at additional cost. All right?

And so, at that point, you know, I think we've covered all the main bases. I think Andrew's covered a lot of the detail and the user manual will be

available for you to download if you have additional questions on specific details, but we would be happy to entertain those now as well. And so with that, Operator, if you wouldn't mind going ahead and opening things up for questions, we'd appreciate it.

Operator: I would like to remind everyone, in order to ask a question, please press star and then the number one on your telephone keypad. Once again, that is star and then the number one.

Your first question is from (Mary Blair).

(Mary Blair): Hi, Andrew. It's (Mary Blair) from Aetna.

Andrew Adrian-Karlin: Hi, Mary.

(Mary Blair): I have a quick question. When we are going to expire per se some benefits on a plan that we're providing information for a small group, the end date you said is optional. If we know that that's forthcoming when we do the submission available come 1/1/2012, what would we put the end date as? Would that be the last date that that benefit is available?

Andrew Adrian-Karlin: Yes. The end date would be the last day that it's available.

(Mary Blair): OK. Wonderful. Thank you.

Andrew Adrian-Karlin: Not a problem.

Operator: Your next question comes from (Brad Johnson).

(Brad Johnson): Oh, sorry. I kept pressing start one because I – it wasn't asking me for my name like it normally does. So, I'm probably in the cue ten times now.

So, one of the things I noticed on the benefits templates screen shot that you shared was the addition of columns related to same-sex partners and domestic partners (inaudible) and also only other reference in the TRA appendix under as relating to the individual market under the eligibility and rating information section. I'm just (inaudible) those two fields are going to be required for the small group market because that would be new as of an hour ago?

(Brian James): They are going to be required. It is my understanding that the PRA makes it clear that it is for all products being submitted and, yes, I mean, I'd have to go back and review the PRA package, but it's, you know, that's something that we've communicated, is important. It is important and they are included on the templates.

(Brad Johnson): OK. Then my second question is related to the new regions template and product availability. It sounds like we're continue to have the geographic availability tab in HIOS, but they, you know, in that templates will be pre-populated as what we've provided in HIOS before, but that it doesn't sound like that tab is going away from the HIOS template. Can you just explain why we're collecting the same information in two places?

(Brian James): We won't be. It's going away on the HIOS.

(Brad Johnson): It will be after this little next HIOS refresh.

(Brian James): (Inaudible). So we are taking information from HIOS. We are pre-populating the templates that you would send to RBIS. At the end of this period, we will be updating the HIOS, but give us a little bit of time because it's a technical issue, the database isn't structured that way. Feeding that information back into HIOS and in the future you will be entering the geographic availability through the RBIS templates.

(Brad Johnson): OK. And then, finally, you said – you referenced I think three documents that eventually will be available on the (sea sio Web site) two of which would have been available starting today. I think one you said there's a power point that was just shared, correct?

(Brian James): Correct.

(Brad Johnson): And then – was the second one the user manual you were talking about?

(Brian James): Yes. So the small group templates are available on the Web site. OK? So, blanks and we don't recommend that you use them for an actual submission (inaudible) but if you want to go out and look at the templates, see what they

look like, they are available for download at this time. Then there is a user manual which goes into significant detail not only about the things covered today, but a number of things that weren't covered today, including XSD files, including how to do (pipe delimited) files and going over significant details. The only thing really that is not available today is a high-level glossary of the specific categories of coverage, right? And if you've been involved with the NAIC, I think those are pretty clear. I know there's always a little bit of questioning regarding how you would report in those fields. This will provide some additional guidance. But, again, generally we're allowing for a fair amount of flexibility in terms of how you would report your structure of categories of coverage.

(Brad Johnson): OK. So, I found the user manual under the other resources page and I found the power point under the training resources page. Which page has the blank templates?

(Brian James): My understanding was that it had been included with the user manual and so if it's not there, I'll go back and make sure we get it up. If it's not there right now, because I haven't gone out there to download it – if it's not there right now, then I cannot commit to getting it up before Monday. But it was our intent to have it there and (Rusty) is looking to me to say something.

(Rusty): There should be a subheading on that page called forms and actually the templates are under that forms subheading – I think dated today or yes, I believe –

(Brian James): And at this point, we'll go ahead on Monday when all the materials are available, we'll be able to send, you know, we'll be able to notify people. If you're not able to find the materials on the Web site, you can also e-mail us and we'll get through to them. But, for now, let's go ahead and make sure (inaudible). OK?

(Brad Johnson): OK. Yes, that's fine. I just – that's why I – there's nothing under forms dated or related or RBIS currently on that page, but we can wait until Monday.

(Brian James): Yes. As soon as we get off the call, I'll check into what's going on and make sure we get it up as soon as we can.

(Brad Johnson): OK. And then the Operator can skip over my name in the cue all the other times.

(Brian James): Thanks (Brad).

Operator: Your next question comes from (Deb Trost).

(Deb Trost): Hi. Thank you. I think you've answered my first question, which was are you going to (inaudible) CMP into RBIS, but it sounds like the answer to that is no (inaudible) HIOS.

Question for you then on the effective dates. Should we be entering them on closed products as well as open?

(Brian James): The start dates and generally I think we, for closed products I'm not sure that we would really need to collect that information, but there may be a data artifact where we are requiring the start date, but you do not need to enter the end date for them and not entering either date would not effect what's displays on healthcare.gov.

(Deb Trost): OK. For open products then, what date should we use if we have a product that's been around since say 1990?

(Brian James): If you know that it's been around from 1990 – 1990.

(Deb Trost): OK.

(Brian James): If, you know, if – right.

(Deb Trost): Good enough. Thank you.

(Brian James): Thank you.

(Deb Trost): Oh. I have one more.

(Brian James): OK.

- (Jamie): Hi. This is (Jamie). I had a question about the user manual that's going to be available (inaudible) answering technical questions because we had some questions about filling out the benefits template, specific things like, you know, is the deductible that you want individual only or do you want individual slash family, things like that. Will it be that much detailed in the user manual?
- (Brian James): Yes. I'm not sure we'll have enough detail to answer all your questions from the user manual. Some of those issues may be covered, but probably not a lot of them. We are going to continue to have the user calls every week and we will, I think for some of those questions, you know, the glossary should be of assistance. And then as we get questions, we'll compile answers and do FAQs to make sure that we're getting that out to people.
- (Jamie): OK. And with questions like that, would it be appropriate to call the help desk, the RBIS help desk?
- (Brian James): (Inaudible) probably do is end up passing you through the (see sio) plan finder. We've tried to divide things into, you know, technical questions versus policy questions. Most questions on how to fill out the data, well, some of those fall into either, you should feel free at any point for any questions, to send questions to that e-mail address and they'll route it to the appropriate place. If they don't know the answer, they'll reach out to us and we'll make sure we get back to you.
- (Jamie): OK. Thank you.
- Operator: Your next question comes from (Janet Cole).
- (Janet Cole): Yes. Thank you for taking our questions today. I have a question regarding the attestation. Will we be receiving an e-mail (inaudible) is within the RBIS system. I might have missed this, but do I need to submit all of the users that would need to go in to validate data? So, do they need to get an id to – into the system?
- (Brian James): Yes. And as a default, what would happen is whoever is set as your validator in HIOS, we'll be able to go in and validate. If you have – if you've divided

your labor so that somebody else does that, then you would want to enter that information into HIOS during that open window.

(Janet Cole): I guess – let me just clarify – so in the CMP system we had a link where we would look at the data that was going to be uploaded. Is that the same as the validation or is the validation just clearly looking at our XCEL template that we presented?

(Brian James): That's – that's what we mean by validation and so given, you know, particularly given small group, I mean, while there's more elements, the data structure is a lot more simplified, but you could go in, look – you get an initial, high-level view and if – you can then go through and look at each product individually by clicking on the link to the right side of the screen for it and it will list all of the data that was submitted for that in a layout, you know, similar to what you were seeing in the old finder verify. OK? You also have a separate page that you can go to and, again, since we're not calculating out rates for small group, these – of that other page – is if you want to make sure that your regions are working properly, you can enter in your zip code, enter in the effective dates and see if the proper list of plans populates. OK?

When you've looked things over, your satisfaction, you can click on validate all or you can click on the individual ones as you go through to validate them. YOU would then click on the save button and essentially they're validated.

(Janet Cole): OK. So if we have teams that are submitting data and we want them to review that the data is accurate, they would be the ids.

(Brian James): Yes. If you're going to have different individuals doing those roles, looking at different things, you'll want to make sure that each one of them has an id in HIOS as a validation contact and we set it up for three. We hadn't encountered any requests for more than three. If that's going to be problematic, let us know. But, you know, we've set it up so you can enter into three different validators all of whom would have access to the system to go in and validate.

(Janet Cole): And then, could you help me to understand the pre-populated templates. So, I'm trying to picture in my head from the HIOS –

(Brian James): Right.

(Janet Cole): – templates that are completed because some of our issuers for our particulars has individual and small group on the same issuer.

(Brian James): Right.

(Janet Cole): But, so, like we submitted templates by date so we would have, let's say, Arizona and then Arizona (inaudible) feed over.

(Brian James): Right. So, what we're talking about currently is the small group and so what you'll get when you go out to HIOS for the pre-populated templates are three documents, one of which is, you know, in HIOS for small group, you entered all of the zip codes for which that product that can be sold. That information is going to pre-populate into the region template. There will be a second template that links products to regions. Right? And that will be pre-populated. So, if you have a set of zip codes, you know, zip code 20001 through 2000, I don't know, whatever. In HIOS, you were having to go in and enter that every time. Any time you had a new product, (inaudible) and you can simply link to them using that second template. OK? So all of that geography is going to be handled and pre-populated in those two templates. Quite honestly, you've probably gone through and validated that information when you entered it into HIOS and so you shouldn't actually have to do anything with those two templates. OK?

The third template will take your small group open products. It will populate in one row for each product and so the first column will have your issuer id. The second column will have the, I believe it's the product id. And the third column will have (inaudible) and that's the only pre-population that will be done on that because that's the only information we can really pull from HIOS. OK?

But beyond that, are all the (inaudible) you would simply go in and enter the benefits into each of those cells. And it's, you know, it's as simple as that. Click on validate and finalize and then upload that file to RBIS.

Still with me?

(Janet Cole): Yes. Thank you.

(Brian James): Absolutely.

Operator: Your next question comes from (Dorothy Sackett).

(Dorothy Sackett): Yes. Thank you. Two quick questions and then a third question. The attestation process, does it require that validation take place first?

(Brian James): No. What we are validating is that you had submitted the complete and accurate information to the best of your ability. We recognize that at times errors creep into the process and validation allows you to create those errors or in a situation where something has happened and you do not wish the data to display, you would have the ability to indicate that there. OK? But they are concurrent.

(Dorothy Sackett): OK. So the attester can actually attest once the templates are there error-free?

(Brian James): Right. And so the only thing that we do is, you know, we accept that the uploaded templates are free of errors and let's say that you – the company you are with operates in multiple states and you only have one CEO so he attests to everything. If that's the case, then what we'll do is check to make sure that you have uploaded information for each of those issuers and if you've uploaded for, you know, let's say it's five states, we'll check and if you've uploaded for all five states, then he'll get an e-mail (inaudible) and your validator will get an e-mail letting them know that it is now time to attest.

If you're doing it – the process in stages and you only upload three of the issuers, you'll actually be able to see in the system that there's three that have uploaded. That the other two have not. And it will still wait before it sends an attestation notification. If you're removing yourself from the market so that you used to operate in five states and from now on you're only updating information for four, you can actually go in and indicate, yes, I know I didn't upload for everything, but I'm not going to. This submission is complete and if you click on that box it'll go ahead and generate the attestation notification.

(Dorothy Sackett): Great. OK. And then I had a question about if one of the three templates has an error and you need to reupload it, do you to reupload all three all over again or just the one that had an error?

(Brian James): I believe the answer is no, you can do the one. But I'm going to toss this to Andrew because he may have specific recommendations on how you should go through this.

Andrew Adrian-Karlin: Yes. So, you only need to upload just the one and, in fact, you know, if you (inaudible) template that has multiple issuers on it, say I have two issuers and I have both of them on a template, and only one of those issuers has an error, I don't even need to reupload that whole benefits template. I just need to reupload the benefits data for that specific issuer. Does that clear it up?

(Dorothy Sackett): I think so.

(Brian James): Yes. And so, we've tried to make it easy and flexible. My recommendation would be if you have a spreadsheet containing all of the benefits information, you like everything, but there's an error in one row, (inaudible) that row and resubmit everything, but then you need to make sure that if you do that, that you revalidate everything. OK? Because while attestation is a one-time thing and nobody ever has to go back in and (re attest), validation, if you submit things and then overwrite your data, it'll then mark things as (inaudible) yet approved and you'll need to go back in and click on the approve all button. OK? But –

(Dorothy Sackett): So the safest thing is to just resubmit the entire benefit template workbook?

(Brian James): I think so and, I mean, you know, it does depend on circumstance, right? Because you may have different people working with different issuers. But as a general rule, I think that's the safest bet. Yes.

(Dorothy Sackett): OK. And then, thank you so much. And then my last question is where the screen we're looking at the benefits template and this is at the major product line level, not the individual little plans within the product, correct?

(Brian James): Correct.

(Dorothy Sackett): So, how is this going to relate to the rates when we get to that (inaudible)?

(Brian James): Right. And so –

(Dorothy Sackett): We'll have to break this out further.

(Brian James): Right. And so, you know, again I want to – keep in mind that the way we're going to do individual will be different. The – when we get to the individual submissions, you will be submitting plans and we will be doing a base rate calculation, but for the small group, it really is just because we know employers are going out and they (inaudible) basically as a set of ranges or a set of options. Right? So you can enter multiple deductible levels. When it comes to the costs, we are not going to represent in any way, shape or form a monthly premium or even a monthly-based rate. What we're going to do is demonstrate an average cost per enrollee. OK? So, one of the fields on that benefits template is for your total written premiums for the quarter that – which is the same reporting quarter for which you entered our enrollment. OK? And we'll use those two numbers to do an average monthly cost or an average cost that will be comparable across issuers, but we're not going to represent it as, hey, this is what your premium is going to be under this product.

(Dorothy Sackett): And at (inaudible) cost is going to be at the major product level not at the plan level, correct?

(Brian James): That is correct.

(Dorothy Sackett): OK. Thank you so much.

(Brian James): Of course. Thank you.

Operator: Next question comes from (Rosa Norman).

(Rosa Norman): Yes. On the attestation, if you send – if I submit both the CEO and the CFO's contact information, will be sending the e-mail to both of them at the same time?

(Brian James): That's a good question and I believe the current structure would be to do so. Yes.

(Rosa Norman): OK. Thank you.

(Brian James): OK.

(Rosa Norman): Thank you.

Operator: Next question comes from (Rachel Adamcheck).

(Rachel Adamcheck): Yes. Hi. I was going to ask what the same person asked a couple questions about (inaudible) base rates. When will we hear more detail about that calculation?

(Brian James): The calculation on our end and bear in mind, you know, so what we'll be collecting is that quarterly plan is going to be to, you know, use those two numbers to calculate what looks more similarly to an average monthly cost. OK? It is not going – you know, and the reason I'm kind of hesitating on giving more detail is that with all sort of presentation issues, those are things that we may look at it and decide well, no, this isn't exactly what we want to do and we may make changes to it. So, what we're requiring to be recorded is the total written premium for the quarter for the reference quarter, enrollment at the last day of that period.

(Rachel Adamcheck): OK. All right. I will stay tuned. Thank you.

(Brian James): Thank you. And, by all means, ask on, you know, feel free to ask on any of those issuer calls on Wednesdays and as that situation changes, we'll go ahead and try to keep you guys as up-to-date as possible.

(Rachel Adamcheck): OK.

Operator: Your next question comes from (Gail Keane).

(Gail Keane): Hi. Andrew, I believe that you had said earlier that we don't need to enter an end date for closed products, but we do need to enter a start date, but then later on I thought I heard you say, (Brian) that we didn't need to enter start or end dates for closed products. Can you just confirm which it is, please?

(Brian James): Yes. I'm going to ask Andrew to confirm since he's much more familiar with the data structure and honestly, I think you are going to have to, but Andrew, can you field this?

Andrew Adrian-Karlin: Yes. My understanding (Brian) is that, you know, for closed products, you will have to enter a start date because that field is just universally required. It's not a conditionally required field. Just because of the structure of it, you know, the start date is always required for the product no matter if it's open or closed.

(Gail Keane): Great. Thank you.

Operator: Your next question comes from (Anna Valaska).

(Anna Valaska): Hi. You've already touched on this a little bit, but I just am wondering in the manual that is coming out on Monday, is there more information about this total written premium?

(Brian James): There's really nothing in the manual on how the data is going to be displayed at all. OK? I understand people's trepanation, you know, because everybody wants to know how is my information going to be displayed. We will talk about it on Wednesday, but again, it's, you know, it's a display issue and so I, you know, it's not something that I really want to go into here.

(Anna Valaska): That's fine. I'm just wondering where we derive that number. We just look at the most recent quarter that we submitted information on HIOS for you and then add up all the premium for that (inaudible).

(Brian James): I mean, that's similar to the concept. What we may be doing is actually something like because enrollment at this point in time, premium is over a period – is across the quarter, we may actually make adjustments for that. OK? So, on Wednesday, we'll try to go into it in a little more detail.

(Anna Valaska): OK. Thank you.

Operator: Your next question comes from (Jean Sing).

(Jean Sing): Hi. I think my question was already answered. Thank you.

Operator: Next question comes from (Karen Emery).

(Karen Emery): Yes. Hi. I have a question about the pre-population of templates. Are they always going to be pre-populated going forward so we can decrease the amount of time it takes to fill them out?

(Brian James): Andrew, do you want to take this one?

Andrew Adrian-Karlin: Yes. There will be pre-populated going forward.

(Karen Emery): All right. And (inaudible) follow-up on that, and the only things we'll have to watch out for is if we make changes in RBIS after we've already submitted our HIOS data?

Andrew Adrian-Karlin: Yes. As for regions, that's (made) to watch out for as you make changes in RBIS that aren't synced up with HIOS.

(Karen Emery): OK. Thank you.

Operator: Your next question comes from (Brad Carter).

(Brad Carter): Hello. Hey, (Brian). Question for you. From the previous HIOS submittal, if a carrier has a number of products that they've requested to be deleted, when in this process since the (inaudible) for the (inaudible) October 3rd, when in that process will they actually get notification that all of those products have been deleted so they can start with a clean slate?

(Brian James): OK. I'm actually – and I think it's a great question (Brad). My understanding is that once that processing has happened, you should actually be able to see in the HIOS system what the active products are, you know, it should be anything that was done in the prior data submission period. Should actually

be handled before that next HIOS window opens up. In fact, my understanding was that those changes had been made, but since we have one of the experts online, let me go ahead and ask Andrew, have – I mean, we're taking care of those as they happened?

Andrew Adrian-Karlin: For the most part. So deletions that get entered and I'll be honest (Brad) I'm not as familiar with the current HIOS processes within the last few weeks, but deletions that have been entered should be – should occur like upon the start of the next submission window or right beforehand. So, you should have – you should be receiving those soon or have received notice. I'd recommend that you reach out to the HIOS help desk, specifically about your specific deletion requests and just check with them if they have carried them out yet and if they haven't, ask them what date they plan on carrying those out because they're pre-populated templates will be available come MONDAY and you should have a clean slate at that point.

(Brian James): Right. And the only reason (Brad) that you wouldn't kind of see that immediately is that we actually at the end of the submission window, send a flat file containing all the information to be processed for the Web site. So if something happens between refresh windows, unless we generated a new file for the Web site, it doesn't necessarily get loaded up.

(Brad Carter): Right. Yes. I expected it pretty close, but since everything is sort of changing, I wanted to make sure I understood and it didn't somehow get delayed and use up some of the window time.

(Brian James): Yes. It shouldn't and if you keep in touch with the help desk and let us know if there are any issues, we'll be proactive at getting them taken care of.

(Brad Carter): OK. Great. Let me see. Another question now I have for you is during our Wednesday calls, you know, there's been a lot of discussion about the premium field. There was also discussion about the ability of carriers to designate certain data elements as confidential information or at least indicate their desire for that information to not be shared.

(Brian James): Yes.

(Brad Carter): Obviously, written premiums if combined with enrollment is not a, you know, a highly desirable value for all the carriers to want to share with one another, so –

(Brian James): Absolutely.

(Brad Carter): So is that already earmarked as not to be shared with the public or what has to happen?

(Brian James): Well, we haven't already earmarked it that way, but you can be very, very aware that that is a field that you will not released. We have no plans of releasing that data. We anticipate that it will be included among the list of elements that people do not want to be displayed and we will have on RBIS, when it goes live, there will be a template available for you to indicate which fields you feel are confidential and does allow for you to put in the reasons why you feel it should be confidential. That information will be forwarded to the (FOIA) office here at CMS. They take it very seriously and I am – I have absolute confidence that that information will not be released unless you guys tell us you want it to be.

(Brad Carter): OK. One last question. In terms of – this should be a simple question, but I'm not confident of the answer. Can validators submit or do validators have to also be labeled as submitters in order to submit?

(Brian James): I'm sorry (Brad). I didn't quite follow the question,

(Brad Carter): OK. So, when you're working RBIS, well even HIOS before that, you'd designate who can submit your data and who can validate it.

(Brian James): Correct.

(Brad Carter): And then according to that, that's kind of the defaults as you go into the RBIS system in terms of who can submit and who can validate. My question is do you have to indicate in HIOS – can a validator in HIOS also submit in both HIOS and RBIS or they have to be designated as both? The reason is, I'm trying to figure out if we're using up all of our submitters. In other words it would be convenient if validators could also submit.

(Brian James): That – OK – you are correct that they – the name – so let's say it's Bob. You would want under the current design to go ahead and enter Bob as both a submitted and a validator if Bob is going to be serving both those rolls. That is something that I'm willing to take under advisement, but access controls are something that are deeply embedded in this. It's easier to add slots then it is to change roll definitions and so it's something that I would need to explore (Brad) (inaudible) and this applies both for (Brad) and anyone else on the phone, by all means, let us know and it's something we'll take into advisement and we'll come up with a solution for it.

(Brad Carter): OK. And then my last question for you. It goes back really to searching to find out when products started. In many cases, it may not be really clear, I mean, we could have some (inaudible) in 1913 the way that we've categorized them. So I'm trying to figure out, you had spoken on a Wednesday call about using, if we wanted, a default start date which would be the date of the submittal. Is that the case that – I understand that it's a required field, but can it be a default date?

(Brian James): It is a required field, but it can be a default date. You can set the start date as the submission date for example.

(Brad Carter): And would that be November 15th or what actual date will this be considered?

(Brian James): Well, I would go ahead and if you are submitting on November 15th, you can just make sure you set it to a date before, you know, the submission window. So you can set it for November 15th. You can set it for the day before. Our guidance makes clear that we understand that that is not necessarily the date that it started because we anticipated the situation that you're describing.

(Brad Carter): Right. And I don't see a lot of value in trying to figure out products that started in 1913 that exactly when they started. So. OK. Thank you very much.

(Brian James): Thank you, (Brad).

Operator: Your next question comes from (Lynn Tag).

(Lynn Tag): Have a couple questions. You talked about how (inaudible) template and then if we discovered that there's a change that we need to make to that, we can resubmit it and it will over-ride the previously submitted one. And then I think I heard you say that the attestation process that e-mail gets generated at the same time that the e-mail goes out to the validators that they can validate. So, what happens if your CFO or CEO attests to that before you are able to go and make your change that you need to make to one of the templates and resubmit it?

(Brian James): Right. And so the attestation is that you have (inaudible) best of your ability gone through and submitted complete and accurate information. Again, and so that is what that attestation is for, right, that's separate from saying that hey, the data we have submitted is clear of any datas and completely represents the way we want that information to be represented on the Web site. OK?

So validation and attestation are separate. Now, I would strongly recommend that you avoid errors in your submission and in part, for this reason because if you do submit information that passes all of the automated checks, but is inaccurate, the CEO/CFO will have an opportunity when they go in to attest to see that data that's been submitted and you want it to represent what your lines of business are. But we do give – we wanted to make sure that we clarified that we're not trying to attest for everything in absolute accuracy which is why we separated those two things apparent. And, you know, and so it really is an issue of you need to attest that you're trying to do your best job and then the validator needs to make sure that that data really does represent what it is you want moving forward on to healthcare.gov.

(Lynn Tag): OK. So it sounds like there's really going to have to be an internal process that the issuers to perhaps ensure that their attestors don't attest too quickly in that submission window.

(Brian James): Yes. Actually I would agree.

(Lynn Tag): OK.

(Brian James): But the internal control is really, do you – before you hit the submit button (inaudible). Become effective until, you know, October 17th. That field will get compared for those purposes.

(Lynn Tag): OK. All right. And then one final question. On the PMPM or the average premium calculation, I'm assuming since that's written premium over that three month period, that when you divide that by enrollment, you're going to divide that by three as well to get that monthly calculation?

(Brian James): Yes. That is exactly where things are currently leading, but, again, we will not – you know, that's not the intent here. But, yes. We will try to reflect it so that – the current thinking is that we will try to reflect it so it would look more like an average monthly cost then some sort of quarterly, you know, number.

(Lynn Tag): OK. That's all my questions. Thanks (Brian).

(Brian James): Perfect. Thank you.

Operator: Your next question comes from (Vicky Foster).

(Vicky Foster): Hi. I have a couple of questions. One of them is that being that you're sending out pre-populated small group templates, I'm wondering if you're intending or do you have a sense that most issuers are using the small group information (inaudible) into HIOS from the initial set-up and, I mean, of course, (inaudible) I'm the one that always asks those questions.

(Brian James): I think the answer to that is yes. Particularly now that rate review is going to be utilizing HIOS for its tracking, my understanding is that there, you now, a variety of things are moving forward where you really should make sure that you – any products that you are currently representing in the marketplace probably should be in the HIOS. You – if there is an issue where you have a product that is open, but it has no plans that represent one percent of the enrollment in any zip code, you would not technically need to provide us with the benefit information for that product. That is not something that we have really designed for.

It's – but technically that is true, but it would mean that you're not displaying and given the data structure, I'm – it's hard for me to imagine why that would be desirable, but technically, if you have a product that does not represent one percent of enrollment in any given zip code, you would not need to report the benefit structure. It is an association product, then you mark it as association. Right? So, if you have something that has – and generally, you know, well, you'd mark it as association and it will not display, so it is not something where we would enter the benefits for it. We will not be displaying association products at this time. Now, if you have a particular product that you are selling both as an association product and as – as a general small group product, yes, which isn't –

(Vicky Foster): Yes. That's what we have. We have both.

(Brian James): OK. I would go ahead and say – and ask you to send us an e-mail identifying kind of what those – what that product is and we'll work with you to make sure that things are accurately represented on the Web site and for purposes of rate review.

(Vicky Foster): OK. Thanks.

(Brian James): Thank you. Seriously. That's a great question.

Operator: Our next question comes from (Diane Franklin).

(Diane Franklin): Yes. Thank you. I have two actual clarifications and one goes back to product start date. I want to make sure I'm understanding that correctly. Is that referring to the effective date of the product or the date that we're marketing it? For example, if we have a product that we're starting to quote in October for a January date, that would not show on the November refresh, is that correct?

(Brian James): Well, and so, there is flexibility in that field. OK? If you have products coming online that you are not making available to the general public yet, but you will be making available to the public during that – during the, you know, refresh period if you will, over the next quarter, you would want to use the

date you intend to start marketing because that way we will be reflecting it appropriately on the Web site. What's the limiter on that?

Andrew Adrian-Karlin: One of the other things that (Brian) has indicated, they'll be up, at the latest on MONDAY, September 26th. On the 28th, we have our back-up training. It's going to be the same exact training we went over today so more questions also on the 28th. We have our next small group specific user call, now getting into things that I believe you're asking before. Between October 3rd and October 7th, we have small HIOS open window for you all to provide any submissions that you haven't provided for small group or maybe in changes in HIOS about your small group submissions. After that's provided, on October 7th, we will the on October 11th, the RBIS data commission will open.

That will be open until October 21st, that is a Friday. So that's – I'm sorry, that would be October 18th, the Tuesday, is the last day to submit new and updated small group date. The 21st, that Friday, is the last day for issuers to provide CEO or CFO – now, I had it right – I'm sorry – my original thing was right, (Brian) was trying to confuse me. The 21st is the last day for the submission. That submission as we talked about earlier in the call, that 21st is the last day for validation. It's the last day for attestation. It's the last day for submission. That's all the window of now for with the RBIS system. It all occurs the same time. (Inaudible) a little further if you like or if that's all pretty much all the important information for now.

(Brian James): All right. At this point, I'd to thank Andrew for presenting the tool for us. I'd like to thank everyone for participating. I do anticipate that we will, you know, if there are any clarifications that are needed, will be reaching out to people by memo, but by all means, if you have any questions, please go ahead and send to one of our e-mail addresses or tune in for the Wednesday call. Thank you. And at this point, Operator, I'll turn this back over to you.

Operator: Thank you for participating in today's conference. You may now disconnect.

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