PLAN PREVIEW DISPLAY LOGIC

Centers for Medicare & Medicaid Services
Center for Consumer Information and Insurance Oversight
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1. Purpose

The Plan Preview module (https://portal.cms.gov) in the Health Insurance Oversight System (HIOS), enables issuers and states to preview their plan benefit displays and confirm that accurate plan data will display on HealthCare.gov. All Federally-facilitated Exchange (FFE), State performing plan management functions, State based Exchange on the Federal platform (SBE-FP) issuers and stand-alone dental plans (SADP) who apply for QHP certification have access to Plan Preview. The purpose of this document is to provide a description of the logic that determines how maximum out-of-pocket (MOOP), deductible, copay, and coinsurance values are displayed in Plan Preview.

Issuers submitting in HIOS can view their plan data in Plan Preview after their Issuer and Benefits & Service Area Modules are validated, and their Business Rules template is submitted. Issuers submitting in the System for Electronic Rates & Forms Filing (SERFF) can view their plan data once all templates except for the Rates Table Template are transferred into HIOS.

2. Plan Preview Maximum Out-of-pocket and Deductible Display Logic

The MOOP and deductible fields will show data for enrollment groups of one person or multiple people. Figure 1 shows the logic that determines how the MOOP and deductible fields display in the plan overview section of Plan Preview.

- If medical and prescription drug MOOP and deductible amounts are integrated, then the combined medical and prescription drug values will display in the plan overview section of Plan Preview. The prescription drug coverage details section will display “Included in plan’s out-of-pocket maximum” and “Included in plan’s deductible.”

- If medical and prescription drug MOOP and deductible amounts are not integrated, only the medical amount will display in the plan overview section of Plan Preview. The prescription drug MOOP and deductible will display in the prescription drug coverage details section.

- MOOP and deductible values for stand-alone dental plans will display “See plan brochure.”

- In-network Tier 2 and out-of-network MOOP values do not display in Plan Preview or Plan Compare.
### Figure 1. Plan Preview Maximum Out-of-pocket and Deductible Display Logic*

<table>
<thead>
<tr>
<th>Enrollment Group Size</th>
<th>Individual In-network</th>
<th>Individual Combined In/Out-network</th>
<th>Family In-network per Group</th>
<th>Family Combined In/Out-network per Group</th>
<th>Family In-network per Person</th>
<th>Family Combined In/Out-network per Person</th>
<th>Maximum Out-of-Pocket Display in the Plan Overview Section of Plan Preview</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$X</td>
<td>Any</td>
<td>Any</td>
<td>Any</td>
<td>Any</td>
<td>Any</td>
<td>$X Individual Total</td>
</tr>
<tr>
<td>1</td>
<td>Not Applicable</td>
<td>$X</td>
<td>Any</td>
<td>Any</td>
<td>Any</td>
<td>Any</td>
<td>$X Individual Total</td>
</tr>
<tr>
<td>1</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>Any</td>
<td>Any</td>
<td>Any</td>
<td>Any</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>2</td>
<td>Any</td>
<td>Any</td>
<td>$X</td>
<td>Any</td>
<td>$Y</td>
<td>Any</td>
<td>$X Family Total; $Y Individual Total</td>
</tr>
<tr>
<td>2</td>
<td>Any</td>
<td>Any</td>
<td>Not Applicable</td>
<td>$X</td>
<td>$Y</td>
<td>Any</td>
<td>$X Family Total; $Y Individual Total</td>
</tr>
<tr>
<td>2</td>
<td>Any</td>
<td>Any</td>
<td>Not Applicable</td>
<td>$X</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>$X Family Total</td>
</tr>
<tr>
<td>2</td>
<td>Any</td>
<td>Any</td>
<td>Not Applicable</td>
<td>$Y</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>$Y Family Total</td>
</tr>
<tr>
<td>2</td>
<td>Any</td>
<td>Any</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>$X</td>
<td>Not Applicable</td>
<td>$X Individual Total</td>
</tr>
<tr>
<td>2</td>
<td>Any</td>
<td>Any</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>$Y Individual Total</td>
</tr>
<tr>
<td>2</td>
<td>Any</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
</tr>
</tbody>
</table>

* SX and SY are mock MOOP values; actual MOOP values will be numerical. X= variable for dollar amount MOOP value; Y= variable for dollar amount MOOP value.
3. Plan Preview Coinsurance and Copay Display Logic

Plan Preview displays Tier 1 in-network, Tier 2 in-network, and out-of-network cost sharing information. Cost sharing information includes values from the copayment and coinsurance fields in the Plans and Benefits template. The process flow shown in Figure 2 provides steps to follow that will help identify how the coinsurance and copay information will display in Plan Preview. Figures 3–8 describe the display results for each of these steps.

Figure 2: Coinsurance and Copay Display Logic Process Flow

1. Is Coinsurance equal to 100%? [Yes]
   - Yes: Copay Value
   - No: 2

2. Is Copay greater than $0? [Yes]
   - Yes: Coinsurance Value
   - No: 3

3. Is Coinsurance greater than 0%? [Yes]
   - Yes: Copay Value
   - No: 4

4. Is Coinsurance 0% Coinsurance After Deductible or No Charge After Deductible? [Yes]
   - Yes: Copay Value
   - No: 5

5. Is Coinsurance equal to 0% or No Charge? [Yes]
   - Yes: Copay Value
   - No: 6

6. Coinsurance is Not Applicable
   - Copay Value
Figure 7: Copay and Coinsurance Display Process Flow Step 5

5. Is Coinsurance equal to 0% or No Charge?
   - Yes: Copay Value
     - Is Copay Not Applicable, No Charge, $0, or $0 With Deductible?
       - Yes: Display "No Charge"
       - No: Proceed to step 6
     - No: Copay is No Charge After Deductible or $0 After Deductible

Figure 8: Copay and Coinsurance Display Process Flow Step 6

6. Coinsurance is Not Applicable
   - Yes: Copay Value
     - Is Copay No Charge, $0, or $0 With Deductible?
       - Yes: Display "No Charge"
       - No: Copay is No Charge After Deductible or $0 After Deductible
         - Yes: Display "No Charge After Deductible"
         - No: Copay is Not Applicable
       - No: Display "Not Applicable"