

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
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STAND ALONE DENTAL PLANS (SADPS): PLAN PREVIEW TIPS

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

Table of Contents

1. Purpose.....	3
2. Accessing Plan Preview	3
3. Creating a Rating Scenario for SADPs	3
4. Plan Display Results: Available Plans	5
5. Plan Display Results: Unavailable Plans	6
6. Selecting a Plan.....	7
7. Deductible and Maximum Out-of-Pocket (MOOP) Display Logic for SADPs Plan Details Page	8

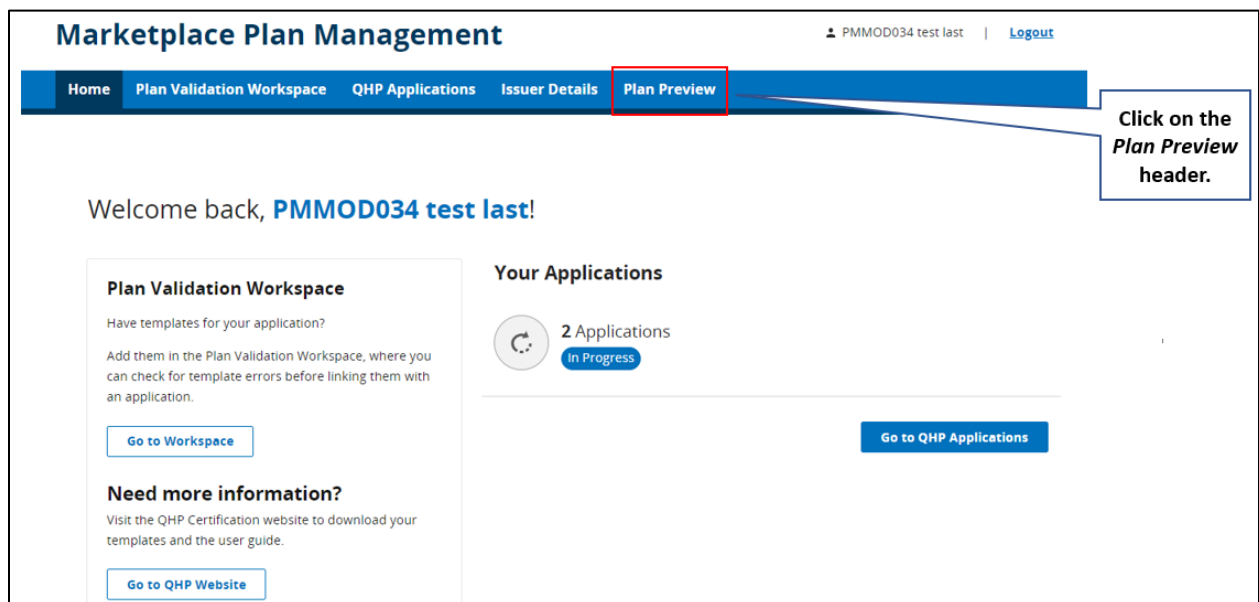
1. Purpose

The purpose of this document is to provide SADPs guidance on how to access Plan Preview, create rating scenarios (including how to choose the correct cost sharing reduction (CSR) variant), and view pediatric-only SADPs.

2. Accessing Plan Preview

Access the Plan Preview Module through the Marketplace Plan Management System (MPMS) by going to www.portal.cms.gov and logging into the system using your Enterprise Portal username and password. After logging into the Portal, you will be directed to the *My Portal* homepage. Click on the HIOS icon and then click on *Overview*. This will direct you to the HIOS Plan Management and Market Wide Functions homepage. Click on the *Access Plan Management and Market Wide Functions* hyperlink and a new tab will open on your web browser. Next, click on the *Marketplace Plan Management System* hyperlink and a new tab will open on your browser. You will then be taken to the *Marketplace Plan Management System* landing page. The *Plan Preview* header will be next to the *Issuer Details* header as seen in **Figure 1**.

Figure 1. Accessing Plan Preview



Click on the *Plan Preview* header to be taken to the Plan Preview Rating Scenario screen.

3. Creating a Rating Scenario for SADPs

On the Plan Preview Rating Scenario screen, you will need to complete the following to view SADPs:

- Choose Plan Year 2024
- Choose State, if not already populated

- Choose Issuer, if not already populated
- Choose the Market Type by selecting either:
 - Individual
 - Small Group (SHOP)
- Enter the Effective Date (*Plans will not display when effective date is the same as the rate expiration date. Please do not use rate expiration date for effective date.*)
- Enter the Cost Sharing Reduction (CSR) Variant, which are shown in **Figure 2 (Select ‘Exchange Variant (no CSR)’ to display SADPs as seen in Figure 2.)**

Figure 2. Exchange Variant (No CSR)

The screenshot shows a web form titled "Rating Scenario" with a "Reset Rating Scenario" link in the top right. The form contains several input fields and dropdown menus:

- Plan Year:** 2024
- State:** Texas
- Issuer:** 16675 - Marketplace
- Market Type:** Individual
- Effective Date:** 01/01/2024
- Cost Sharing Reduction (CSR) Variant:** A dropdown menu is open, showing options: "-Select-", "Exchange Variant (no CSR)" (highlighted), "Zero Cost Sharing Plan Variation", "Limited Cost Sharing Plan Variation", "73% AV Level Silver Plan CSR", "87% AV Level Silver Plan CSR", and "94% AV Level Silver Plan CSR".
- Return Catastrophic Plans:** An unchecked checkbox.
- Primary Subscriber Information:** A tab labeled "Primary" is active. Fields include:
 - Date of Birth:** MM/DD/YYYY
 - Months Since Last Tobacco Use:** Leave blank if no tobacco use
 - Gender:** Optional, dropdown menu
 - Zip Code:** XXXXX
 - County:** dropdown menu

At the bottom of the form are three buttons: "Add Spouse/Life Partner", "Add Dependent", and "Show Plan Results".

After selecting the CSR Variant, the Primary Subscriber tab will appear.

- Primary Subscriber¹:
 - Date of Birth (*To view child-only dental plans, all enrollees must be under 21 years of age, and any dependents must have the ‘brother or sister’ relationship type. This group cannot include child, ward, spouse or life partner relationship types.*)
 - Gender
 - # of months since last tobacco use
 - Zip code
 - County
- Spouse/Life Partner
 - DOB

¹ Gender and # of months since last tobacco use are optional fields for primary subscriber, spouse/life partner and dependents.

- Gender
- # of months since last tobacco use
- Relationship to primary subscriber (i.e., spouse, life partner, ex-spouse)
- Same address as primary subscriber
- Dependent: (the maximum number of dependents is five)²
 - DOB
 - # of months since last tobacco use
 - Relationship to primary subscriber (i.e., child, ward, brother/sister, etc.)
 - Same address as primary subscriber

Once the rating scenario has been created, click on the **Show Plan Results** button and a list of available plans based on the rating scenario will display.

4. Plan Display Results: Available Plans

The Plan Results page will default to the Available Plans table shown in **Figure 3**. On this table, as seen in **Figure 3**, you can view all available plans based on the rating scenario that was created. In addition, the **Contact Info** hyperlink can be clicked to see additional information for each plan.

Figure 3. Available Plans

Plan Results

View available or unavailable plans?
 Available Unavailable

Search

Plan ID	Plan Name	Product Type	Plan Type	Metal Level	SPO	View
13574NJ0010001	Med Ind PPO Plan 1	PPO	HEALTHCARE	BRONZE	SPO	Contact Info Plan Card
13574NJ0110001	Dental Ind PPO High Plan 1	PPO	DENTAL	HIGH	Non-SPO	Contact Info Plan Card

Show 5 plans per page

Showing 1-2 of 2 plans

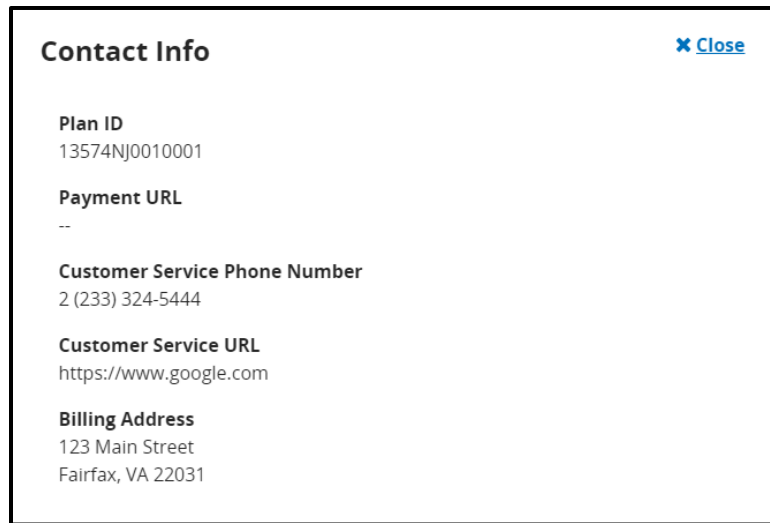
Click Contact Info to see Additional Information.

Figure 4 shows the available plans “Contact Info” pop-up. As seen in **Figure 4**, a pop-up will appear on the screen when the **Contact Info** hyperlink is clicked that will display the following information for the plan:

² If the primary subscriber has a spouse/life partner, the maximum number of dependents that can be added is four.

- Plan ID
- Payment URL
- Customer Service Phone Number
- Customer Service URL
- Billing Address

Figure 4. Available Plans Additional Information



The screenshot shows a modal window titled "Contact Info" with a "Close" button in the top right corner. The modal contains the following information:

Plan ID	13574NJ0010001
Payment URL	--
Customer Service Phone Number	2 (233) 324-5444
Customer Service URL	https://www.google.com
Billing Address	123 Main Street Fairfax, VA 22031

The administrative information (i.e., customer service phone number, customer service URL and billing address) displayed on www.HealthCare.gov and Plan Preview is pulled from the Issuer General Information Fields and the Marketplace General Information Fields in HIOS.

5. Plan Display Results: Unavailable Plans

The radio button can be used to view Unavailable Plans based on the created rating scenario. **Figure 5** shows the Unavailable Plans table. As seen in **Figure 5**, unavailable reason codes will display describing why the plan is unavailable. Multiple reasons may display for a single plan.

Figure 5. Unavailable Plans

Plan Results

View available or unavailable plans?
 Available Unavailable

[Search](#)

Plan ID	Plan Name	Product Type	Plan Type	Metal Level	SPO	Reason
13574NJ0010001	Med Ind PPO Plan 1	PPO	HEALTHCARE	BRONZE	SPO	600: CSR Variant Mismatch
13574NJ0110001	Dental Ind PPO High Plan 1	PPO	DENTAL	HIGH	Non-SPO	600: CSR Variant Mismatch

Show plans per page < Previous 1 Next > Showing 1-2 of 2 plans

6. Selecting a Plan

Figure 6 shows where to click to select a plan. To select a plan to view, select the *Plan Card* button. A new window will open in your browser with the plan that was chosen.

Figure 6. Selecting a Plan

Plan Results

View available or unavailable plans?
 Available Unavailable

[Search](#)

Plan ID	Plan Name	Product Type	Plan Type	Metal Level	SPO	View
13574NJ0010001	Med Ind PPO Plan 1	PPO	HEALTHCARE	BRONZE	SPO	Contact Info Plan Card
13574NJ0110001	Dental Ind PPO High Plan 1	PPO	DENTAL	HIGH	Non-SPO	Contact Info Plan Card

Show plans per page < Previous 1 Next > Showing 1-2 of 2 plans

On the Plan Details page of the plan that was selected, the rating scenario will display on the top of the screen. The Rating Scenario, as seen in **Figure 7**, summarizes the following:

- Plan ID
- Exchange Variant
- Effective Date
- Zip Code

- County
- Market Type
- Subscriber Information

Figure 7. Rating Scenario Summary Section

Plan Card					
Rating Scenario					
This section displays the rating scenario entered to generate the plan details shown below in the Plan Details section.					
Plan ID	CSR Variant	Effective Date	Zip code	County	Market Type
13574NJ0010001	Exchange Variant (no CSR)	1/1/2024	07013	Passaic	Individual

Subscriber Relationship	Date of Birth	Age	Last Tobacco Use (months)	Resides with Primary Subscriber?
Primary Subscriber	12/22/1998	25	Not Applicable	Not Applicable

7. Deductible and Maximum Out-of-Pocket (MOOP) Display Logic for SADPs Plan Details Page

Figure 8 shows the dental plan card. Deductibles and MOOPs will display “See Plan Brochure” and not display the actual cost-sharing values, irrespective of the specific rating scenario.

Figure 8. Plan Details Page with “See Plan Brochure” Display for Deductible and MOOP

Plan Card	
This is the initial view of the plan that will be displayed in the Plan Search Results on the Exchange Portal.	
<p>Estimated monthly premium</p> <p>\$265</p> <p>✓ Guaranteed Rate</p> <p>Plan Details</p> <p>Like This Plan</p>	<p>Time Insurance Company</p> <p>Dental Ind PPO High Plan 1</p> <p>PPO Plan ID: 13574NJ0110001</p> <hr/> <p>See plan brochure</p> <p>Deductible ⓘ</p> <p>See plan brochure</p> <p>Out-of-pocket maximum ⓘ</p> <div style="border: 1px dashed gray; padding: 5px; margin-top: 10px;"> <p>Add medical providers</p> <p>Add your medical providers and we'll show you which plans cover them</p> </div>
	<p>Compare</p>

In a unique feature for SADPs, the premium will be listed as guaranteed or estimated. The “Guaranteed Rate” or “Estimated Rate” that displays below the monthly premium (see **Figure 8**) can be verified by referencing the “Guaranteed vs. Estimated Rate” field on the Benefits Package tab of the Plans and Benefits template.