

Filing Guideline for Plan Year 2025 ACA Forms and Rates

Tennessee is a Federally Facilitated Marketplace (FFM) without an Effective Rate Review Program, carriers must follow the timeline set out by CMS:

PY2025 QHP Data Submission and Certification Timeline

Activity	Dates
QHP Application submission and data validation window opens	4/17/24
Early Bird Application Deadline: Optional Early Bird deadline for issuers to submit QHP Applications to CMS	5/15/24
CMS reviews Early Bird QHP Application data and releases results for issuers and states to review	4/18/24 – 6/7/24
HHS-approved QHP Enrollee Survey vendor securely submits the QHP Enrollee Survey response data to CMS on behalf of the QHP issuer ¹	5/17/24
Initial Application Deadline: Initial deadline for issuers to submit QHP Applications to CMS, including Plan ID Crosswalk data	6/12/24
TDCI Form Filing and Binder Submission Deadline	6/12/24
QHP issuer submits the validated Quality Rating System (QRS) clinical measure data, with attestation, to CMS via NCQA’s Interactive Data Submission System (IDSS) ²	6/14/24
CMS reviews initial QHP Applications and releases results for issuers and states to review	6/13/24 – 7/12/24
Secondary Application Deadline: Deadline for issuers to submit their QHP Application Rates Table Templates to CMS; optional deadline for issuers to submit corrected QHP Application data to CMS	7/17/24
CMS reviews Rates Table Template data and resubmitted QHP Application data, and releases results for issuers and states to review	7/18/24 – 8/9/24
Issuers, Exchange administrators, and CMS preview the 2024 QHP quality rating information	Aug./Sep. 2024
Issuer Plan Confirmation/Crosswalk Deadline: Issuers complete final plan confirmation and submit final Plan ID Crosswalk Templates	8/7/24 – 8/21/24
Final Application Deadline: Deadline for issuers to submit changes to their QHP Applications	8/14/24
CMS reviews QHP Applications and releases results for issuers and states to review	8/15/24 – 9/9/24
CMS sends QHP Certification Agreements to issuers	9/10/24
QHP Agreement Signing Deadline: Issuers return signed QHP Certification Agreements to CMS	9/10/24 – 9/18/24
State Plan Confirmation Deadline: States complete final plan confirmation	9/10/24 – 9/18/24
Limited data correction window	9/12/24 – 9/13/24
Machine-Readable/URL Deadline: Deadline for issuers’ machine-readable data to be posted and marketing URLs to be live and active.	9/18/24
CMS releases certification notices to issuers and states	10/1/24 – 10/2/24

Activity	Dates
Anticipated public display of QHP quality rating information	11/1/24
Open Enrollment begins	11/1/24

Templates

CMS will post the relevant and required PY25 templates including:

- Business Rules Template
- Network Adequacy Template
- Network ID Template
- Plan ID Crosswalk Template
- Plans & Benefits Add-In
- Plans & Benefits Template
- Prescription Drug Template
- Rates Table Template
- Service Area Template
- Standardized Option Add-In
- Transparency in Coverage Template

Filing Instructions (tips and tricks!):

- All filings should be made via SERFF.
- Individual and small group filings may not be combined.
- Silver loading for CSRs must be included and limited to Marketplace QHPs.
- Each plan variation, such as copay versus coinsurance, deductible only, or open or closed networks must have a separate schedule page, rates, actuarial memorandum, and actuarial value calculation.
- Each variation does not require a separate filing but may be combined with the appropriate policy or certificate of coverage.
 - There may be no language variations in the schedules but the deductibles, copays, coinsurance, etc. may be bracketed with the range of number variables.
- Each filing must include the following information:
 - Identification of where the plan will be sold (i.e. on/off exchange, both)
 - Identification of the rating area(s) where the plan will be sold. A carrier participating in a designated rating area must make coverage available throughout the entire rating area.
 - Identify metal level for each benefit design for a health plan (i.e. bronze, silver, gold, platinum).
 - A separate schedule with the language for each plan design that is to be offered, numerical amounts may be bracketed.
 - The Actuarial Value of each plan design must be submitted, including a screenshot of the Actuarial Value Calculator.