

TRAINING SESSION

Filing Medical Loss Ratio Annual Reports
through HIOS

Agenda

- Welcome
- Overview
- System Walkthrough
- Q&A
- Next Steps and Wrap up

WELCOME

Welcome

- Objective
 - Provide general information on the MLR reporting process
 - Provide specific steps for filing your MLR reports.
- Approximately 1.5 hour session with 30 minute Q&A
- Please hold your questions until the end

OVERVIEW

Overview

- ❑ The Affordable Care Act requires health insurance issuers to publicly report data on major categories of spending of policyholder premium, including the portion of premium revenues spent on clinical services to enrollees, quality improvement activities, and on all other non-claims costs. The amount of premium spent on clinical services and quality is known as the Medical Loss Ratio (MLR).
- ❑ The Center for Consumer Information and Insurance Oversight (CCIIO) Medical Loss Ratio (MLR) division has been charged with collecting the MLR data.
- ❑ The Health Information Oversight System (HIOS) Medical Loss Ratio Reporting System (MLR module) has been identified as the system of record to support the collection of the MLR data.
- ❑ The MLR data will be collected using an Excel template (MLR-A Template)
- ❑ The submission window will open on May 1, 2012.
- ❑ Submissions with data regarding 2011 experience are due by **June 1, 2012.**

Company Level Reporting

The MLR regulation requires that MLR data be reported by each Company at the Issuer, State and market level.

- ❑ For the purposes of MLR reporting through HIOS:
 - ❑ Company is the legal entity licensed to sell health insurance products in one or more States. If filing annual financial reports with the NAIC, a Company would have an associated NAIC company code. In HIOS, a Company is comprised of Issuers.
 - ❑ Issuer is the entity selling products in a specific State, in one or more market sectors or type of experience (e.g., Individual, Small Group, Large Group, mini-med experience, expatriate experience).
- ❑ Each reporting year, the number of Issuers associated with a specific Company, along with the States and market sectors in which they sell products, may vary.

REGISTRATION

Step 1 – Register for the HIOS MLR
module

The MLR Reporting Process

The MLR reporting process involves the following steps:

Step 1 – Register for the HIOS MLR module

Step 2 – Confirm Company-Issuer associations

Step 3 – Download MLR-A Templates

Step 4 – Populate MLR-A Templates

Step 5 – Upload completed MLR-A Templates

Step 6 – Attest to accuracy of uploaded MLR data

Registration Overview

- ❑ In order to gain access to the HIOS MLR module, each Company must complete an **MLR User Registration Form** and return it to the HIOS help desk for processing.
- ❑ On the MLR User Registration Form, you will provide information about your Company and identify users who will require access to the MLR module.
- ❑ Once access to the MLR module has been granted, authorized users will be notified via email.
 - ❑ Users new to HIOS will receive an additional email with instructions for setting up their user accounts.

How to Obtain MLR User Registration Form

- ❑ Existing HIOS users can access the form within HIOS at:

<https://insuranceoversight.hhs.gov/HIOS/Login.aspx>

- ❑ New HIOS users can access the form at:

<http://www.cciio.cms.gov/resources/data/mlr.html>

MLR User Registration Form Example

MLR User Registration Form

Please provide the company information for the MLR module of the Health Insurance Oversight System (HIOS).

Note: Asterisk (*) denotes a required field.

Note: Asterisk (**) denotes a required field, if applicable to your company.

*FEIN:	<input type="text"/>	**A.M. Best Number:	<input type="text"/>	*Domiciliary Address Line 1:	<input type="text"/>
*Company Name:	<input type="text"/>	**NAIC Company Code:	<input type="text"/>	Domiciliary Address Line 2:	<input type="text"/>
*Not-for-Profit?:	<input type="text"/>	**NAIC Group Code:	<input type="text"/>	*Domiciliary City:	<input type="text"/>
DBA / Marketing Name:	<input type="text"/>	**NAIC Group Name:	<input type="text"/>	*Domiciliary State:	<input type="text"/>
				*Domiciliary Zip:	<input type="text"/>
				Domiciliary Zip Plus 4:	<input type="text"/>

Please identify the users who will need access to the HIOS MLR module and indicate their user roles. The email address provided for each user will be used as their HIOS login username. For existing HIOS users, please provide the email address already being used for their HIOS account.

Note: Asterisk (*) denotes a required field.

Description of MLR User Roles:

Uploader - Individual responsible for submitting MLR data.

CEO Attester - Individual responsible for attesting to the accuracy and completeness of the MLR data submitted.

CFO Attester - Individual responsible for attesting to the accuracy and completeness of the MLR data submitted.

Note: The individuals designated as the CEO and CFO Primary and Backup Attesters cannot be the same person: these four roles must be assigned to four different persons.

The individuals designated as the CEO and CFO Backup Attesters must be qualified officers of the company as listed on the State annual filing documents.

	First Name*	Last Name*	Title*	Email Address*	Phone Number*	Extension	MLR User Role	MLR User Sub-Role
Required							CEO Attester	Primary
Required							CEO Attester	Backup
Required							CFO Attester	Primary
Required							CFO Attester	Backup
Required							Uploader	Primary
Required							Uploader	Backup
1							Uploader	Backup
2							Uploader	Backup
3							Uploader	Backup
4							Uploader	Backup
5							Uploader	Backup
6							Uploader	Backup
7							Uploader	Backup
8							Uploader	Backup
9							Uploader	Backup

How to Complete MLR User Registration Form

- Provide general company information
- Provide specific user information
- The following six users are required:
 - Uploader** – This user is responsible for uploading the MLR-A Templates populated with MLR data through the HIOS MLR module
 - Back-up Uploader**– This user is responsible for uploading the MLR-A Templates if the primary Uploader is unavailable
 - CEO Attester** – This user is responsible for attesting to the accuracy and completeness of the MLR data submitted
 - CEO Attester Back-up** – This user is responsible for attesting to the accuracy and completeness of the MLR data submitted, if the CEO is unavailable to attest
 - CFO Attester** – This user is responsible for attesting to the accuracy and completeness of the MLR data submitted
 - CFO Attester Back-up** – This user is responsible for attesting to the accuracy and completeness of the MLR data submitted, if the CFO is unavailable to attest
- Companies will also have an option to authorize additional back-up Uploaders

How to Submit MLR User Registration Form

- ❑ Once you have completed the MLR User Registration Form, please email the form from a company email address to insuranceoversight@hhs.gov

Receive Access Confirmation

- ❑ If the MLR User Registration Form was filled out correctly, users will receive an email stating that MLR module access has been granted.

Welcome to the Health Insurance Oversight System (HIOS) Medical Loss Ratio module.

Your account has been created successfully. Based on the MLR user information provided, you have been identified as a CEO Attester - Primary user. You can now access the MLR module by logging into HIOS at <https://insuranceoversight.hhs.gov> and clicking on the "MLR Reporting System" link.

If this is your first time using HIOS, please log in using your e-mail address as your user ID along with the temporary password that will arrive in a separate e-mail. If the e-mail containing your temporary password has not arrived within 1 hour, please notify the help desk at insuranceoversight@hhs.gov or 1-877-343-6507. When you log in for the first time, you will be prompted to create a new password. The new password will require two special characters (such as # \$ % &). Please note that the following special characters are not allowed within the HIOS system: (< > ;).

If you have previously registered with HIOS, you may use your existing HIOS password to access the MLR module. If you are a current user of HIOS and need to have your password reset, please notify the help desk.

If you have any questions or need technical support regarding the HIOS Medical Loss Ratio System, please contact the HIOS help desk at insuranceoversight@hhs.gov or 1-877-343-6507.

Thank you,
The Medical Loss Ratio System Team

- ❑ If there were problems with the MLR User Registration Form, the person who submitted the form will be notified by email.

How to Log into HIOS

- ❑ Once access to the MLR module is granted, you will be able to log in using either:
 - ❑ the login information provided in your access confirmation email, or
 - ❑ your existing HIOS login credentials.

- ❑ Navigate to the URL:
<https://insuranceoversight.hhs.gov/HIOS/Login.aspx>

- ❑ Enter the following credentials on the Login Screen and click “Login”
 - ❑ Username
 - ❑ Password
 - ❑ Verification Word

- ❑ Select “MLR Reporting System” module

Health Insurance Oversight System

Friday, March 09, 2012

Sign-In

* Indicates required fields.

*User Name:

*Password:

[Forgot Password?](#)

Type the letters you see in the image into the Word Verification field below. If you are unable to read the image pictured below, please select the Play Audio Code link for audio verification

*Word Verification: Please enter the letters you see in the image. If you use the Audio Verification, type the pronounced numbers and the first letter of each word.

HFNYA

[Can't read it?](#)
[Generate New Image](#)

[Play Audio Code](#)

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201

CONFIRMATION

Step 2 – Confirm Company-Issuer
associations

The MLR Reporting Process

The MLR reporting process involves the following steps:

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Step 3 – Download MLR-A Templates

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Step 6 – Attest to accuracy of uploaded MLR data

Purpose of Confirming Company-Issuer Associations

- Every Company will need to confirm the list of its associated Issuers for which the Company will report MLR data for the reporting year (i.e., for which States it will be reporting).
- HIOS will utilize the list of confirmed Issuers to generate an MLR-A Template for each Issuer, with the header pre-populated with the Company and Issuer information (e.g., *HIOS ID, FEIN, Company Name, etc.*).
- The list of confirmed Issuers will also be utilized to verify that we receive completed MLR-A Templates for all Issuers expected to be included in the report.
- You will not be able to download the pre-populated MLR-A Templates until you confirm the associations.

How to Confirm Company-Issuer Associations

- Select the “*Company/Issuer Association*” tab
 - Select the “*Company*”
 - Select the “*Reporting Year*”
 - Click “View Associations”
 - Confirm the list of Issuers by clicking “Confirm”
- OR
- Update the pre-populated **MLR Company-Issuer Association Form** to add or remove any Issuers
 - Upload the updated form back to the MLR module

Monday, April 02, 2012
[HIOS MAIN PAGE](#) [HOME](#) [FAQ](#) [CONTACT US](#) [SIGN OUT](#)

Test CEO Attester

Company/Issuer Associations Download Templates

Company and Issuer Reporting Associations

Please select the Company and Reporting Year, then select the "View Associations" button to view the company to issuer reporting associations.

(*) Indicates a required field

*Company:

*Reporting Year:

[View Associations](#)

Confirmation

Group Name: CGI Test 0330
Group NAIC Code: 00330
Company Name: CGI Test Company1 03302012
Company NAIC Code: 01330
Am Best Number: 001330
Federal EIN: 000001330
Address: 0330 Smith Road Fairfax, Virginia 22030

Issuer ID	Issuer Name	State	Health Insurance Coverage			Mini-Med			Expatriate	
			Individual	Small Group	Large Group	Individual	Small Group	Large Group	Small Group	Large Group
73620	CGI Test Company1 03302012	AK	Yes	No	No	Yes	No	No	Yes	No
63023	CGI Test Company1 03302012	AS	No	No	No	No	No	No	No	Yes
20591	CGI Test Company1 03302012	VA	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes

If changes are needed to the associations, please download [this pre-populated Company-Issuer Association Form](#), identify changes and upload below.

If the company to issuer associations are correct for the reporting year, please confirm:

I have examined the data in the Company-Issuer Associations for my organization. To the best of my knowledge, it accurately represents the company-level business setup and organization of my company and the states in which we conduct business.

[Confirm](#)

Upload Company-Issuer Association Form

Please upload the Company-Issuer Association Form for your company. Files must have a .xls or .xlsx extension and cannot have file names that contain spaces or are longer than 100 characters.

[Choose File](#) No file chosen

[Upload](#)

MLR Company-Issuer Association Form Example

MLR Company-Issuer Association Form

Please review all issuer information, and make updates if necessary, for the MLR module of the Health Insurance Oversight System (HIOS).

Note: Asterisk (*) denotes a required field.

FEIN: 000001330	A.M. Best Number: 001330	Domiciliary Address Line 1: 0330 Smith Road
Company Name: CGI Test Company1	NAIC Company Code: 01330	Domiciliary Address Line 2:
Not-for-Profit?: Yes	NAIC Group Code: 00330	Domiciliary City: Fairfax
DBA / Marketing Name: CGI Test1 0330	NAIC Group Name: CGI Test 0330	Domiciliary State: Virginia
		Domiciliary Zip: 22030
		Domiciliary Zip Plus 4:

Please complete this portion of the MLR Company-Issuer Association Form to do either of the following within the MLR module of the Health Insurance Oversight System (HIOS).

- To add a new Issuer-to-Company association, add Issuer information to the bottom of list (please leave the "Action" field blank; leave "HIOS Issuer ID" blank if none)
- To add an existing Issuer-to-Company association, identify the existing HIOS Issuer ID and correct state
- To remove an existing Issuer-to-Company association, select "Delete" in the Action column
- To keep an existing Issuer-to-Company association unchanged, please leave the row unchanged
- Any changes to the Individual or Small Group health insurance coverage fields on this Form will not impact any other HIOS modules (e.g. PlanFinder, Rate Review, etc.)

	HIOS Issuer ID	State*	Health Insurance Coverage*			Mini-Med*			Expatriate*		Action
			Individual	Small Group	Large Group	Individual	Small Group	Large Group	Small Group	Large Group	
1	73620	AK	Yes	No	No	Yes	No	No	Yes	No	
2	63023	AS	No	No	No	No	No	No	No	Yes	Delete
3	20591	VA	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											

DOWNLOADING

Step 3 – Download MLR-A Templates

The MLR Reporting Process

The MLR reporting process consists of the following steps:

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Overview of Downloading MLR-A Templates

- ❑ Each Company will have access to a set of MLR-A Template files for each Issuer with pre-populated header information, as well as an MLR-A Template for the Company's national Grand Total numbers.
- ❑ The MLR module will generate a zip file containing all MLR-A Template files for the selected Company and Reporting Year.
- ❑ The zip file will only become available for download after Company-Issuer associations have been confirmed.

How to Download MLR-A Templates

- Log into the HIOS MLR module
- Select the *“Download Templates”* tab
- Select the *“Company”*
- Select the *“Reporting Year”*
- Click *“Download Files”*
- The MLR module will generate a zip file containing pre-populated MLR-A Templates (separate Excel files for each State of operation, plus one Excel file for the Grand Total)
- Extract the contents of the zip file into a folder on your computer

How to Download MLR-A Templates (screenshot)

The screenshot shows a web browser window displaying the 'Health Insurance Oversight System Medical Loss Ratio Data Collection System' interface. The date is Monday, March 12, 2012. The user is logged in as 'Test User 3000' and is associated with Pennsylvania. The 'Download Templates' section is active, showing a 'Download Files' button. A WinZip Pro window is open, displaying the downloaded files: 'MLR_Template_Grand_Total.xls' and 'MLR_Template_Indiana.xls'.

Overlaid on the right is an Excel spreadsheet titled 'MLR_Template_Pennsylvania.xls'. The spreadsheet contains the following data:

Row	Column A	Column B	Column C	Column D	Column E	Column F
1		Department of Health and Human Services				
2		Medical Loss Ratio Reporting Form				
3		Parts 1 and 2 - Data Development				Finalize
4		Group Affiliation:				Federal EN :
6		Test User 3000				
7		Company Name:				AmBest Number
8		Test User 3000				
9		DBA / Marketing Name:				NAIC Group Cod
10		Test User 3000				
11		Address:				NAIC Company
12		12601 Fair Lakes Circle Wilkes Barre, Pennsylvania 18711				
13						
Part 1						Total as of 12/
				NAIC Supp. Health Care Exhibit Line		1
1.1	Premium			Pt 1, Ln 1.1	\$	
1.2	Total direct premium earned (from Part 2, Line 1.11 respectively)			Pt 1, Ln 1.2		
1.3	Federal high risk pools			Pt 1, Ln 1.3		
1.4	State high risk pools			Pt 1, Ln 1.4	\$	
1.5	Premium earned including federal and state high risk programs (Lines 1.1 + 1.2 + 1.3)			Pt 1, Ln 1.9		
1.6	Net assumed less ceded reinsurance premium earned (exclude amts reported already included in Line 1.1)			Pt 1, Ln 1.10		
1.7	Other adjustments due to IMLR calculations Premium			Pt 1, Ln 1.11		
1.8	Risk revenue			Pt 1, Ln 1.11	\$	
	Premium earned including federal and state high risk programs net of reinsurance (Lines 1.4 + 1.5 + 1.6 + 1.7)					
Claims						
2.1	Adjusted Incurred Claims (from Part 2, Line 2.17 & 2.18 respectively)			Pt 1, Ln 2.2	\$	
2.2	Prescription drugs (informational only; already included in adjusted incurred claims above)			Pt 1, Ln 2.3		
2.3	Pharmaceutical rebates (informational only; already excluded from adjusted incurred claims above)			Pt 1, Ln 2.4		
2.4	State stop loss, market stabilization and claim/census based assessments (informational only; already excluded from adjusted incurred claims above)			Pt 1, Ln 5.1		
2.5	Net assumed less ceded claims incurred (exclude amounts reported already included in Line 2.1)			Pt 1, Ln 5.2		
2.6	Other adjustments due to IMLR calculation - claims incurred			Pt 1, Ln 5.3		
2.7	Rebates paid			Pt 1, Ln 5.4		
2.8	Estimated rebates unpaid at the end of the prior MLR reporting year					

POPULATING

Step 4 – Populate MLR-A Templates

The MLR Reporting Process

The MLR reporting process consists of the following steps:

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Overview of the MLR-A Template

The MLR-A Template was developed to collect the data elements necessary to calculate issuers' MLRs and rebates. You will find that the MLR-A template is structurally similar to the NAIC Supplemental Health Care Exhibit.

Medical Loss Ratio Reporting Form Parts 1 and 2 - Data Development																		
Holding Company Name:				Federal EIN:				Company Contact Name:										
Company Name:				AmBest Number:		HIOS Number:		Contact Phone Number:										
DBA / Marketing Name:				NAIC Group Code:		Business in the State of:		Not-For-Profit:										
Address:				NAIC Company Code:		Domiciliary State:		MLR Reporting Year:										
Part 1													Comprehensive Major Medical					
				Individual				Small Group				Large Group						
NAIC Supp. Health Care Exhibit Line				Total as of 12/31/XX	3/31/YY	Deferred PY (Add)	Deferred CY (Subtract)	Total as of 3/31/YY	Total as of 12/31/XX	3/31/YY	Deferred PY (Add)	Deferred CY (Subtract)	Total as of 3/31/YY	Total as of 12/31/XX	3/31/YY	Deferred PY (Add)	Deferred CY (Subtract)	
				1	2	3	4	5	6	7	8	9	10	11	12	13	14	
1. Premium																		
1.1 Total direct premium earned (from Part 2, Line 1.11 respectively)				Pt 1, Ln 1.1	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
1.2 Federal high risk pools				Pt 1, Ln 1.2	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
1.3 State high risk pools				Pt 1, Ln 1.3	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
1.4 Premium earned including federal and state high risk programs (Lines 1.1 + 1.2 + 1.3)				Pt 1, Ln 1.4	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
1.5 Net assumed/less ceded reinsurance premium earned (exclude amounts reported already included in Line 1.1)				Pt 1, Ln 1.5		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX		XXX	XXX	
1.6 Other adjustments due to MLR calculations Premium				Pt 1, Ln 1.10		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX		XXX	XXX	
1.7 Risk revenue				Pt 1, Ln 1.11		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX		XXX	XXX	
1.8 Premium earned including federal and state high risk programs net of reinsurance (Lines 1.4 + 1.5 + 1.6 + 1.7)					\$ -	XXX	XXX	XXX	XXX	\$ -	XXX	XXX	XXX	XXX	\$ -	XXX	XXX	
2. Claims																		
2.1 Adjusted Incurred Claims (from Part 2, Line 2.17 & 2.18 respectively)																		
2.2 Prescription drugs (informational only; already included in adjusted incurred claims above)				Pt 1, Ln 2.2	\$ -	\$ -	XXX	XXX	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	XXX
2.3 Pharmaceutical rebates (informational only; already excluded from adjusted incurred claims above)				Pt 1, Ln 2.3			XXX	XXX	\$ -			XXX	XXX	\$ -			XXX	
2.4 State stop loss, market stabilization and claim/census based assessments (informational only; already excluded from adjusted incurred claims above)				Pt 1, Ln 2.4			XXX	XXX	\$ -			XXX	XXX	\$ -			XXX	
2.5 Net assumed/less ceded claims incurred (exclude amounts reported already included in Line 2.1)				Pt 1, Ln 2.5		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX		XXX	XXX	
2.6 Other adjustments due to MLR calculation - claims incurred				Pt 1, Ln 2.6		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX		XXX	XXX	

How to populate the MLR-A Template

- ❑ You should populate all cells applicable to your block of business.
 - ❑ **White** cells indicate that data entry by the user is permitted.
 - ❑ **Green** cells indicate that data do not need to be entered for 2011, as the data are not pertinent to MLR for the 2011 Reporting Year.
 - ❑ **Pink** cells with “XXX” indicate that no data entry is permitted.
 - ❑ **Grey** cells indicate automated calculation fields, where no data entry is permitted.

	A	B	C	D	E	F	G	H	
1		Department of Health and Human Services							
2		Medical Loss Ratio Reporting Form							
3		Parts 1 and 2 - Data Development							
4									
5		Group Affiliation:				Federal EIN :			
6		Test User 3000				234040430			
7		Company Name:				AmBest Number:		Issuer ID:	
8		Test User 3000							
9		DBA / Marketing Name:				NAIC Group Code:		Business ID:	
10		Test User 3000				024	AmBest Number field is required.		
11		Address:				NAIC Company Code:		Domiciliary:	
12		12601 Fair Lakes Circle Wilkes Barre, Pennsylvania 18711				234			
13									
14									
15									
16									
17		Part 1					Individual		
18					NAIC Supp. Health Care Exhibit Line	Total as of 12/31/XX	3/31/YY	Deferred PY (Add)	Deferred C
19		1. Premium				1	2	3	4
20		1.1	Total direct premium earned (from Part 2, Line 1.11 respectively)		Pt 1, Ln 1.1	\$ -	\$ -	\$ -	\$ -
21		1.2	Federal high risk pools		Pt 1, Ln 1.2	\$ 100,000	\$ 100,000		\$ -
22		1.3	State high risk pools		Pt 1, Ln 1.3	\$ 130,000	\$ 130,000		\$ -
23		1.4	Premium earned including federal and state high risk programs (Lines 1.1 + 1.2 + 1.3)		Pt 1, Ln 1.4	\$ 230,000	\$ 230,000	\$ -	\$ -
24		1.5	Net assumed less ceded reinsurance premium earned (exclude amts reported already included in Line 1.1)		Pt 1, Ln 1.9	\$ 1,000	XXX	XXX	XXX
25		1.6	Other adjustments due to MLR calculations Premium		Pt 1, Ln 1.10	\$ 20,000	XXX	XXX	XXX
26		1.7	Risk revenue		Pt 1, Ln 1.11	\$ 3,100	XXX	XXX	XXX
27		1.8	Premium earned including federal and state high risk programs net of reinsurance (Lines 1.4 + 1.5 + 1.6 + 1.7)			\$ 254,100	XXX	XXX	XXX

How to populate the MLR-A Template

- The data entered on the Grand Total MLR-A Template should be an aggregate of the data for all States. Data for experience that is to be reported only at the national level (Expatriate plans only) should be entered only on the Grand Total MLR-A Template.
- Each MLR-A Template must be finalized once all data have been entered. To finalize, click the “Finalize” button on any tab.
- Finalization performs validation checks on the MLR-A Template to ensure that all required data are entered, and to indentify any errors. Validation errors should be addressed prior to upload.
- Save the completed MLR-A Template file with the appropriate file name convention for upload to the MLR module.

UPLOADING

Step 5 – Upload completed MLR-A
Templates

The MLR Reporting Process

The MLR reporting process consists of the following steps:

Step 1 – Register for the HIOS MLR module

Step 2 – Confirm Company-Issuer associations

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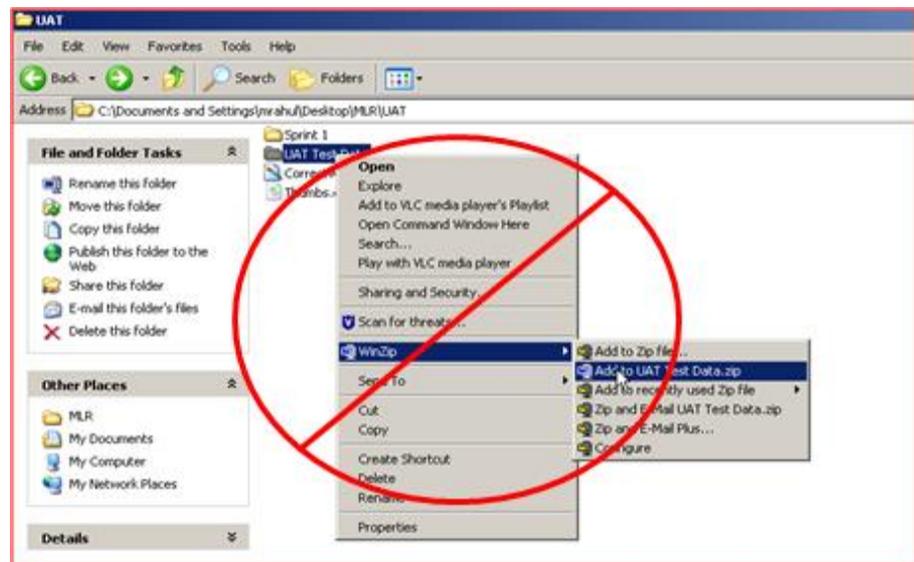
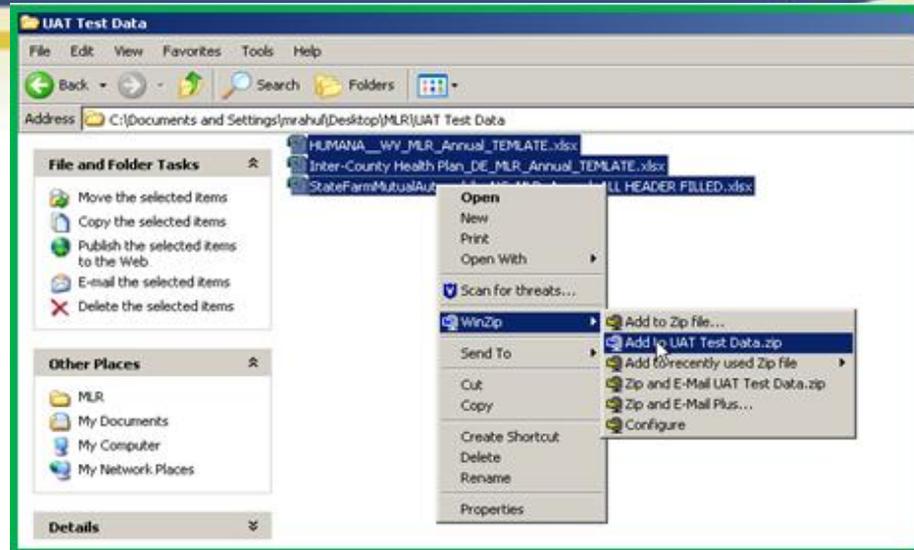
Step 5 – Upload completed MLR-A Templates

Step 6 – Attest to accuracy of the uploaded MLR data

Combining Completed MLR-A Templates in a Single Zip File

You must combine all completed MLR-A Templates into a single zip file.

- ❑ CORRECT: Open the folder. Select all Excel files. Right-click on the selected files, choose “WinZip” and “Add to Zip file...” option, and type a file name at the end of the directory.
 - ❑ Note: No spaces are allowed in the zip file name.
- ❑ INCORRECT: Do NOT zip the files at the folder level. Files will fail to upload.



How to Upload the Zip File

- ❑ Select the “*Upload MLR Annual Form*” tab
- ❑ Select the “*Company*”
- ❑ Select the “*Reporting Year*”
- ❑ Click “Browse” and select the zip file you created
- ❑ Click “Upload File”
 - ❑ **Note:** No spaces are allowed in the zip file name
- ❑ The system will indicate that the MLR-A data have been uploaded, pending validation checks.

Health Insurance Oversight System
Medical Loss Ratio Data Collection System

Monday, March 12, 2012 [HIOS MAIN PAGE](#) [HOME](#) [CONTACT US](#) [SIGN OUT](#)
Training User

[Download Templates](#) **Upload MLR Annual Form** [Upload Supplemental Materials](#) [View Uploaded Data](#)

Upload MLR Annual Form

Please select the Company and Reporting Year you are uploading data for. Please upload a single zip file containing one spreadsheet for each state you are associated with, as well as a Grand Total Report spreadsheet.

Note: Only MLR templates and the Grand Total Report are accepted within the Zip file. Please upload any supplemental files utilizing the "Upload Supplemental Materials" tab once the MLR Annual Form zip has been successfully processed by the system.

(*) Indicates a required field

***Company:**

***Reporting Year:**

Group Affiliation: Test User 3000

You are associated with the following States: Pennsylvania

Please select the "Browse..." button to select a file in the correct .zip format for upload. After selecting the applicable file, select the "Upload File" button to start the upload.

[Accessibility](#) | [Rules of Behavior](#) | [Web Policies](#) | [File Formats and Plug-Ins](#)

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How to Upload Supplemental Materials

- ❑ Companies may submit supplemental materials to justify the data reported on any of the MLR-A Templates.
- ❑ Submitting supplemental materials is optional and is not required for attestation to the accuracy of the MLR submission.
- ❑ You must upload the MLR-A Templates for the Company and the Reporting Year *before* uploading supplemental materials.
 - ❑ Note: No spaces are allowed in the supplemental material file names.
 - ❑ Only PDF and MS Word documents are allowed.

How to Upload Supplemental Materials

- ❑ Select the “*Upload Supplemental Materials*” tab
- ❑ Select the “*Company*”
- ❑ Select the “*Reporting Year*”
- ❑ Click “Browse” and select the supplemental material files for upload
- ❑ Click “Upload File(s)”

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Upload Supplemental Materials

Please select the Company and Reporting Year associated to the Supplemental Materials prior to clicking the Upload File(s) button.

(*) Indicates a required field

***Company:**

***Reporting Year:**

Group Affiliation: Test User 3000

You are associated with the following States: Pennsylvania

Please select the "Browse..." button to select a file in the correct format for upload¹. After selecting the applicable file(s), select the "Upload Files" button to start the upload².

[Browse...](#) [remove](#)

[Browse...](#)

¹ Files cannot contain spaces in the file name and must have a .doc, docx or .pdf extension. The system also will not accept files for upload that are larger than 30MB.

² If a file has been previously uploaded into the system, it cannot be uploaded again unless the file name is changed. File names uploaded into the system must be unique.

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Upload Confirmation

- ❑ All identified Uploaders and Attesters will receive a confirmation email once the zip file has been uploaded successfully. The email will identify any validation warnings.
- ❑ If the upload fails, the identified Uploaders will receive an email indicating the reasons why the upload has failed.
- ❑ Once successfully uploaded, the MLR data will be ready for attestation.

Thank you for uploading your Medical Loss Ratio data through Health Insurance Oversight System (HIOS).

The details of the submission are below:

Group Affiliation: Test Company

Company: Test Company

Reporting Year: 2011

Associated States: AL

Status: Submitted

File Name: MLR_Test_Data.zip

Date/Time Uploaded: 3/28/2012 1:00:00 PM

Upload User: MLR Submitter

All Excel files contained within the Zip file have been uploaded without error. The uploaded data can be viewed on the Medical Loss Ratio system at <https://insuranceoversight.hhs.gov>. We have notified the attesters that the data is ready for their review and attestation. Please note that a Medical Loss Ratio upload is considered an incomplete filing prior to attestation by both attesters. If you have any questions regarding this email notification, please contact our help desk at insuranceoversight@hhs.gov or 1-877-343-6507.

Thank you,
The Medical Loss Ratio System Team

ATTESTATION

Step 6 – Attest to accuracy of the uploaded MLR data

The MLR Reporting Process

The MLR reporting process involves the following steps:

- Step 1 – Register for the HIOS MLR module
- Step 2 – Confirm Company-Issuer associations
- Step 3 – Download MLR-A Templates
- Step 4 – Populate MLR-A Templates
- Step 5 – Upload completed MLR-A Templates
- Step 6 – Attest to accuracy of the uploaded MLR data

Notification that MLR Data are Ready for Attestation

- ❑ HIOS will notify Attesters by email once the MLR data have been uploaded and are ready for attestation.
- ❑ If the upload generated validation warnings, the Attesters and Uploaders will need to communicate to determine if the submission is acceptable.
- ❑ The CEO Attester and CFO Attester must both attest to accuracy of the uploaded MLR data in order for the filing to be complete.

You have been identified as an Attester user. The MLR system has received Medical Loss Ratio data for your company. The details of the submission are below:

Group Affiliation: Test Company

Company: Test Company

Reporting Year: 2011

Associated States: AL

Status: Submitted

File Name: MLR_Test_Data.zip

Date/Time Uploaded: 3/28/2012 4:00:17 PM

Upload User: MLR Submitter

All Excel files contained within the Zip file have been uploaded without error. You can now review and attest to the accuracy of the uploaded data on the Medical Loss Ratio system at <https://insuranceoversight.hhs.gov>. Please note that a Medical Loss Ratio upload is considered an incomplete filing prior to attestation by both attesters. If you have any questions regarding this email notification, please contact our help desk at insuranceoversight@hhs.gov or 1-877-343-6507.

Thank you,

The Medical Loss Ratio System Team

How to Attest

- Log into the HIOS MLR module
- Select the “*Attestation*” tab
- Select the “*Company*”
- Select the “*Reporting Year*”
- Click “*View Data*”
- Select the checkbox that indicates that you attest to the accuracy of the MLR data
- Click “*Save Attestation*”

Health Insurance Oversight System
Medical Loss Ratio Data Collection System

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testSandy Iss

[Download Templates](#) [Upload MLR Annual Form](#) [Upload Supplemental Materials](#) [View Uploaded Data](#) **Attestation** [MLR Operational Reports](#) [Admin Page](#)

Attestation

Confirmation:

- This submission has been successfully attested to by the CFO Attester user.

Please select a Company and Reporting Year, then click the "View Data" button to view uploaded MLR data.

(*) Indicates a required field

*Company:
*Reporting Year:
Group Affiliation: Aetna Health Inc. (a GA corp.)

You are associated with the following States: Georgia, Oregon

[View Data](#)

Status: **Partially Attested**

Annual MLR Submission

Date/Time Uploaded: 3/1/2012 2:06:05 PM
Uploaded By: swetha gar

Version: Pending Attestation
Resubmission Requested: No

Template Submitted: [upload.zip \(755.5KB\)](#)

"The officers of this reporting issuer being duly sworn, each attest that he/she is the described officer of the reporting issuer, and that this MLR Reporting Form is a full and true statement of all the elements related to the health insurance coverage issued for the MLR reporting year stated above, and that the MLR Reporting Form has been completed in accordance with the Department of Health and Human Services reporting instructions, according to the best of his/her information, knowledge and belief. Furthermore, the scope of this attestation by the described officer includes any related electronic filings and postings for the MLR reporting year stated above, that are required by Department of Health and Human Services under section 2718 of the Public Health Service Act and implementing regulations."

CFO User Attestation: Attestation: I attest that the MLR Annual Form file uploaded is complete and accurate.
CFO User Attestation: Attested By: testSandy Issuser on 3/4/2012 12:25:09 AM

[Save Attestation](#)

*Attestation is not permitted while an Annual MLR zip file is pending system processing. The applicable attestation checkbox will be disabled while a file is pending system processing.

Supplemental Materials

No supplemental materials have been uploaded.

[Accessibility](#) [Rules of Behavior](#) [Web Policies](#) [File Formats and Pop-Ups](#)

The MLR Reporting Process

To recap: to file your MLR data, you will need to:

Step 1 – Register for the HIOS MLR module



Step 2 – Confirm Company-Issuer associations



Step 3 – Download MLR-A Templates



Step 4 – Populate MLR-A submission



Step 5 – Upload MLR-A submission



Step 6 – Attest to accuracy of the uploaded MLR data



Questions & Answers

Questions and Answers



Further Questions

If you have additional questions after this training, you can use any of the following:

- Issuer calls
 - To be Determined**
- Email
 - MLR email box (*MLRQuestions@cms.hhs.gov* – policy related matters)
 - HIOS help desk email (*hios_submissions@hhs.gov* – technical matters)
- Phone
 - HIOS help desk phone number 877-343-6507* – technical matters
- User Guide
 - Accessible on the HIOS MLR module

WRAP UP

Wrap Up and Next Steps

Wrap Up and Next Steps

Wrap Up

- Thank you for attending
- Please let us know if you have any questions

Next Steps

- Obtain the MLR module User Guide – Accessed through the HIOS MLR module
- Complete Step 1 – Register for the HIOS MLR module