



Agency Priority Goal Action Plan

Establish an FEHB Master Enrollment Index

Goal Leader(s):

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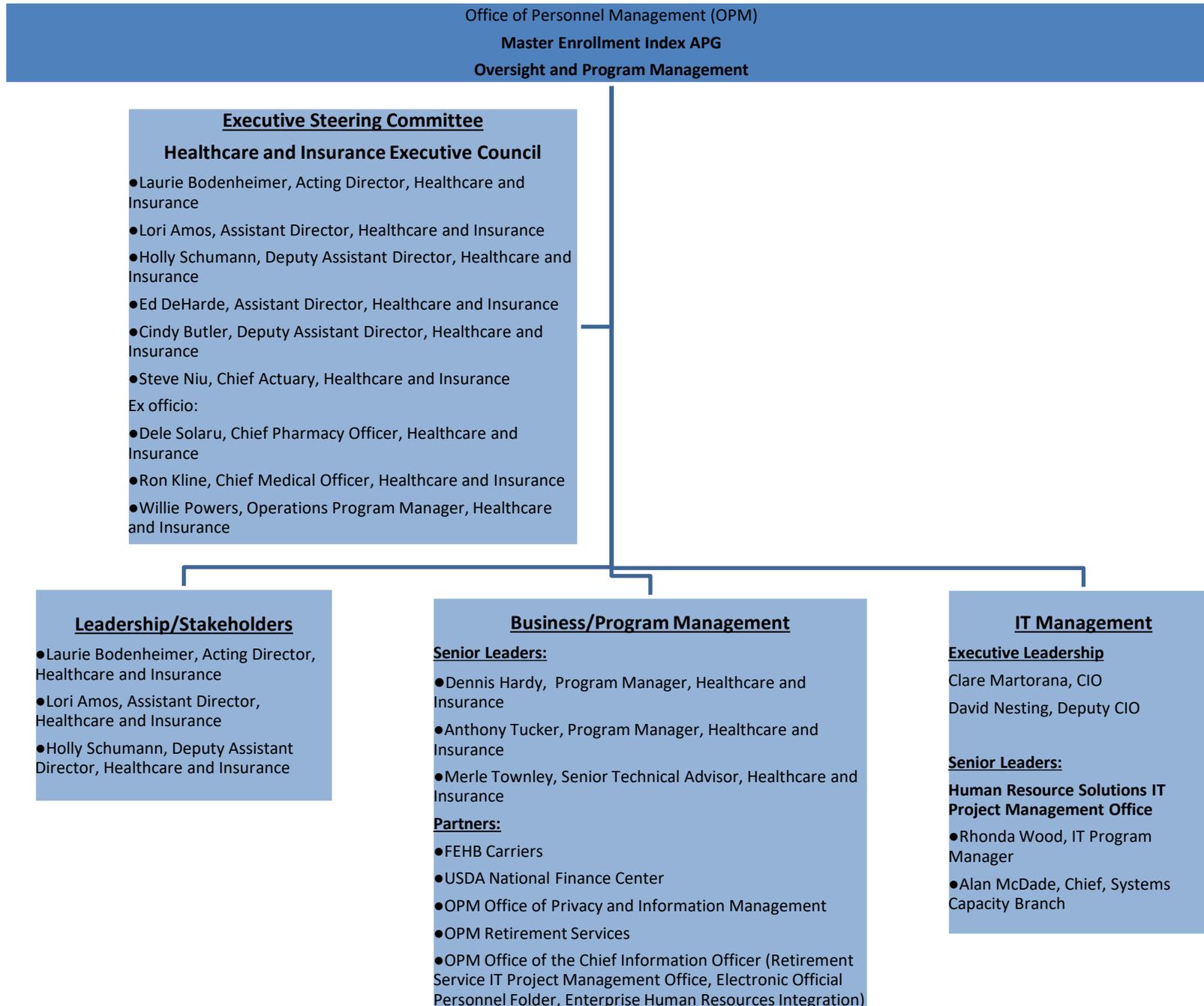
Overview

Goal Statement	Establish an FEHB Master Enrollment Index. By September 30, 2021, OPM will establish a Master Enrollment Index for the FEHB Program that includes at least 90 percent of FEHB subscribers and family members. The Master Enrollment Index will consist of a Master Person Index that includes FEHB subscribers and family members and a Master Enrollment File that includes FEHB enrollment transactions.
Challenge	There is no single authoritative source for enrollment information in the FEHB Program. As a result, OPM does not have a comprehensive, up-to-date understanding of all aspects of enrollment, including the total number of individuals covered under the Program. Information on FEHB enrollment is currently stored in multiple data systems, none of which are comprehensive or complete.
Implementation Risks	Key risks include the difficulty of obtaining data from various external stakeholders and resolving inconsistencies among the data sources which include the FEHB Central Enrollment Clearinghouse, the FEHB Data Hub, and FEHB Carriers.
Opportunity	<p>By leveraging the existing Health Insurance Data Warehouse infrastructure, OPM can merge and consolidate enrollment data from a variety of data sources to build a Master Enrollment Index (MEI).</p> <p>Implementation of the MEI will promote effective program management and improve program integrity. Uses of the enrollment index may include:</p> <ul style="list-style-type: none">▪ development of a baseline of improper enrollments, to include dual enrollments and identification of ineligible family members, and the associated costs;

Overview (continued)

- development of a five-year historical enrollment record to enable Retirement Services to more quickly and accurately determine annuitants' eligibility for FEHB in retirement;
- creation of more complete enrollment data, which may lead to a reduction in manual/exception processing by FEHB Carriers;
- possible future elimination of some Carrier reporting requirements such as the annual reporting of aggregate enrollment data;
- identification of Self Plus One or Self and Family enrollments in which only one person is covered, which may facilitate efforts to encourage switching to Self Only coverage, thereby resulting in cost savings;
- analysis of population movement between plans to inform strategies to promote competition, quality and affordability in FEHB plans; and
- population of the initial enrollment database which will help achieve the future goal of an FEHB central enrollment portal.

Leadership & Implementation Team



Goal Structure & Strategies

Related Strategic Objective: (1.4) Improve healthcare quality and affordability in the FEHB program with 75 percent of enrollees in quality affordable plans

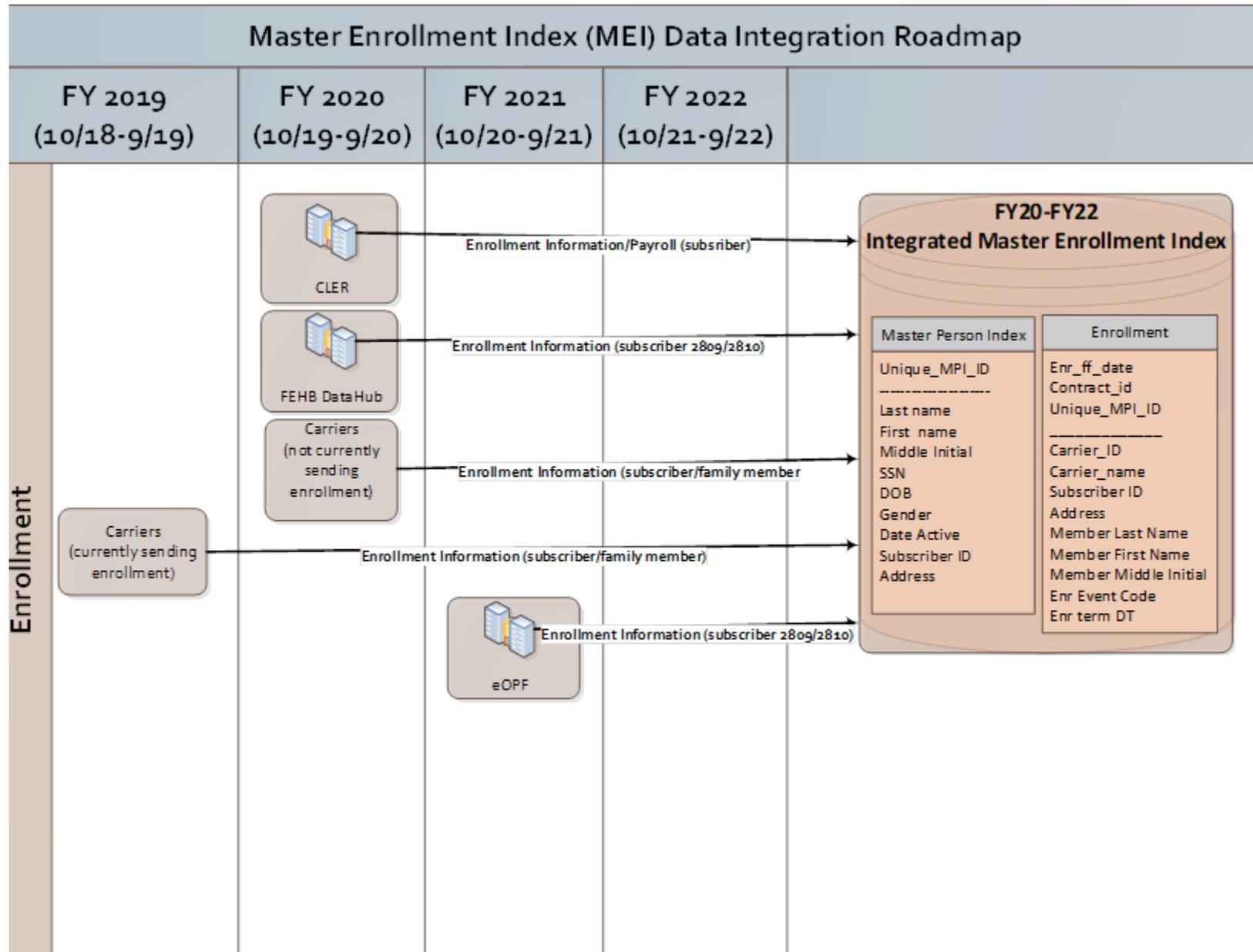
The primary goal is to establish a central, authoritative source for FEHB enrollment information, including both subscribers and family members, to facilitate administrative efficiencies regarding enrollment for OPM and FEHB Carriers.

OPM's strategies are to:

- establish standards and procedures for collecting data across sources;
- develop protocols to assimilate these data; and
- and build and maintain a digital platform to store, access, analyze, and report enrollment data.

The following table shows a brief timeline for the collection and assimilation of various Carrier and internal OPM data sources into two component files that will make up the Master Enrollment Index. The Master Person Index contains one record per person for those enrolled in or otherwise eligible for FEHB coverage. The Master Enrollment File reflects multiple enrollment transactions that comprise up to seven years of enrollment history for each person included in the Master Person Index who has, or has had, FEHB coverage.

Goal Structure & Strategies (continued)



Summary of Progress – Q1-Q2 FY 20

Q1 2020

OPM established an integrated project team and initiated weekly meetings to review objectives and define a structure and timeline for the Master Enrollment Index. The agency defined an initial structure for each component of the Master Enrollment Index; a Master Person Index used to assign a unique OPM ID to each person (subscriber and family members) for tracking across time/plans, and as a repository for key personally identifiable information to be removed from enrollment records as needed; and a Master Enrollment File to hold five to seven years of historical transaction-level information about enrollment over time. OPM reviewed potential available data sources and defined initial protocols to transform those sources into an integrated format, assign a unique and fully random Master Person Identifier (MPID), and begin to outline the detail for the structure of each underlying component of the Master Enrollment Index as a whole.

Q2 2020

Established protocols and business rules: OPM defined an algorithm to assign a unique identification number (Master Person ID) for de-identification. The agency established Secure File Transfer Protocols for carriers to submit test files. In addition, OPM initiated the development of business rules which will be used to standardize the data format for plans that have submitted full data to date.

Drafted Carrier Letter defining enrollment data reporting requirements: OPM drafted a Carrier Letter to define enrollment data reporting requirements, which is under administrative review before final issue.

Additional progress: The agency defined data format and transfer requirements to generate supporting data files from the Centralized Enrollment Clearinghouse System (CLER) and OPM Retirement Services that will serve as priority sources for key identification markers (for example, Social Security Numbers and Medicare eligibility markers). These will be used to verify, and correct as needed, data reported by Carriers. OPM also began preliminary work on the Master Enrollment File component of the Master Enrollment Index, which will include transaction level detail of enrollment changes for subscribers and family members over time.

Key Milestones

Milestone	Milestone Due date	Revised Due date	Milestone Status	Comments
Establish Integrated Project Team	Q1 2020		Completed	
Define basic structure/components of the Master Enrollment Index (Master Person Index / Master Enrollment File)	Q1 2020		Completed	
Identify and review data sources to populate the Master Enrollment Index	Q1 2020		Completed	
Define standard transformation protocol for plan data into integrated enrollment file format	Q1 2020		Completed	
Issue Carrier Letter defining enrollment data reporting requirements	Q2 2020	Q3 2020	Behind Schedule	Completed draft under review for final administrative sign-off.
Initialize Master Person Index	Q3 2020		On-track	
Establish a unique identification number (Master Person ID) for de-identification	Q2 2020		Completed	
Get first feed(s) of data from additional plans.	Q3 2020		On-track	
Obtain initial Centralized Enrollment Clearinghouse System files and incorporate updates on an ongoing basis (will reflect 100 percent of 7-year historical subscriber data, with ongoing updates quarterly)	Q4 2020		Not Started	
Obtain initial FEHB Data-Hub files and incorporate updates on an ongoing basis (will reflect all electronic transactions from agencies in rolling 5-year increments; this represents approximately 70 percent of all 2809 and 2810 transactions)	Q3 2020		Not Started	
Obtain initial Health Benefits Data File files (or equivalent) and incorporate updates on an ongoing basis (this includes eligible subscribers who choose not to enroll)	Q3 2020		Not Started	
Initialize Master Enrollment File (with Carrier data)	Q3 2020		On-track	
Publish System of Records Notice	Q4 2020		On-track	
Publish updated Privacy Impact Assessment for the Health Insurance Data Warehouse (This is where the Master Enrollment Index will reside)	Q4 2020		On-track	
Receive monthly Carrier data feeds for at least 90 percent of enrollees	Q4 2020		On-track	
Establish order of precedence for data sources	Q4 2020		On-track	
Integrate 90 percent of enrollment in Master Person Index	Q4 2020		On-track	
Integrate enrollment data for 75 percent of known subscribers into Master Enrollment File	Q3 2021		Not Started	
Create Master Enrollment File data application for data visualization and analysis	Q4 2021		Not Started	

Key Indicators

FY 2020 Indicator

	Q1 FY 20	Q2 FY 20	FY 20 Year-End Target
Percent of known subscribers and family members in the Master Person Index	N/A*	N/A*	90%

*OPM does not plan to have subscribers and family data until Q3 FY 2020.

FY 2021 Indicator

	FY 21 Year-End Target
Percent of known subscribers and family members for whom enrollment transactions are included in the Master Enrollment File	75%

Note: The Master Enrollment File has not yet been established. It is scheduled to be initialized (that is, created with some initial plan data) later this year.

Data Accuracy and Reliability

Measure 1: Percent of known subscribers and family members in the Master Person Index

Definition of Measure:

The number of current subscribers and family members included in the Master Person Index divided by the March headcount and actuarial estimates of average family size.

Data Source:

The Master Person Index, which is a compilation of administrative (Centralized Enrollment Clearinghouse System, Data-Hub, Health Benefit Data File) and FEHB Carrier data sources. Current estimates of enrollment are derived from a combination of Centralized Enrollment Clearinghouse System data and actuarial estimates of family size based on aggregate reporting from plans.

Data Verification and Validation:

OPM will use the Centralized Enrollment Clearinghouse System data verification process and enrollment file verification by FEHB Carrier. Centralized Enrollment Clearinghouse System data, reported quarterly, are routinely checked against Carrier data and vice versa. Carrier data are reported monthly, checked against prior Carrier data, and examined for inconsistent and/or anomalous data.

OPM will collaborate with database owners and FEHB Carriers to develop validation parameters. The agency will also carry out extensive data exploration and documentation with the data owners of all source data, including FEHB Carriers. From this process, the parameters for validation will be developed to promote precision across collection platforms and resolution of incomplete data, and data inconsistencies.

Data Limitations:

Since data will be coming from multiple sources, data availability may be an issue, along with managing multiple sources of error across data sets and sources. The timing of receipt of the different data will complicate this further. To mitigate to the extent possible, the agency will stagger input from various sources and establish ready contacts with the original owner of each data source. OPM will also establish an ongoing process to compare monthly (in the case of Carrier data) and quarterly (in the case of Centralized Enrollment Clearinghouse System data) update files with previously submitted data, and across data sources. The agency will also establish an order of precedence for the various data sources as it gains more detail about the problems it encounters during the development phase of this project.

Despite these potential limitations, the data are sufficiently accurate, valid, and reliable for the purpose of establishing an operable Master Person Index.

Data Accuracy and Reliability

Measure 2: Percent of known subscribers and family members for whom enrollment transactions are included in the Master Enrollment File.
Definition of Measure: The number of subscribers and family members for whom enrollment transactions are included in the Master Enrollment File divided by the number of enrollees included in the Master Person Index.
Data Source: The Master Enrollment File, which includes all enrollment transactions for each FEHB Carrier, supplemented with data from administrative sources (Centralized Enrollment Clearinghouse System, Data-Hub, Health Benefit Data File). The Master Person Index includes all known subscribers and family members.
Data Verification and Validation: OPM will compare enrollment transactions across sources when available. Centralized Enrollment Clearinghouse System data, reported quarterly, are routinely checked against Carrier data and vice versa. Carrier data are reported monthly, checked against prior Carrier data, and examined for inconsistent and/or anomalous data. OPM will collaborate with database owners and FEHB Carriers to develop validation parameters. The agency will carry out extensive data exploration and documentation with the data owners of all source data, including FEHB Carriers. From this process, the parameters for validation will be developed to promote precision across collection platforms and resolution of incomplete data and data inconsistencies.
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Additional Information

Contributing Programs

President's Management Agenda:

- CAP Goal 2: Leveraging Data as a Strategic Asset: The Master Enrollment Index will improve OPM's ability to make data-driven decisions about the FEHB Program

Regulations:

- 5 CFR Part 890 sets forth the regulations governing the FEHB Program, including carrier reporting and enrollment eligibility rules

Policies:

- The FEHB Handbook provides guidance to agencies and employees on the enrollment process and eligibility rules
- FEHB Carrier Letters offer guidance to FEHB carriers on enrollment procedures
- Benefits Administration Letters offer guidance to Federal agencies on enrollment procedures

Stakeholder Consultations

In 2019, OPM established an Enrollment Process Improvement Core Group to collaborate with FEHB Carriers to identify key challenges with the FEHB enrollment process and develop solutions. The Carriers have uniformly expressed support for efforts to improve efficiency in the enrollment process, including enhancing enrollment data quality. In addition, OPM has also established an Agency Benefits Officer Collaboration Group with representatives from a variety of Federal agencies to gather their input on ways to improve the FEHB enrollment process.