Prescription Drug and Healthcare Spending (RxDC) Reports

Broker Portal Form Submission
User Manual

GROUP HEALTH PLANS
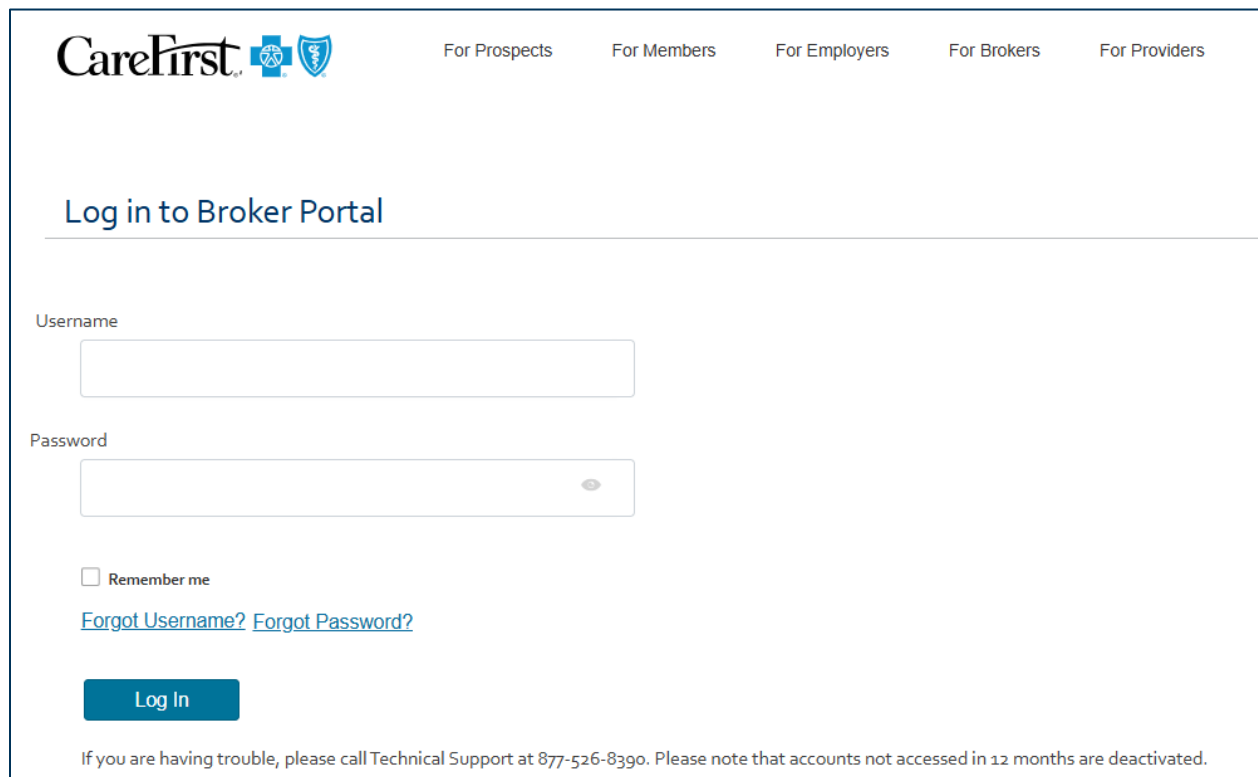
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Locating the Annual RxDC Submission Form

1. **Log into the CareFirst Broker Portal.**

   ■ **URL:** https://broker.carefirst.com/blogin/

   ■ A registered account is required to access the form.

2. **Navigate to the applicable client using the Search By Group ID function.**

If you have clients that cannot be accessed this way and you have direct access to their Employer Portal experience, switch to the applicable Employer Portal User Manual to complete the form submission on their behalf.

3. Click the Annual RxDC Submission option under *Group Apps* on the right side of the screen.

4. The form that opens will look like this:

Opt Out

1. **Review the text outlined in orange in the screenshot below before clicking the "Opt-Out" button at the bottom of the form.**

2. **To retain a record of the opt-out, take a screen shot of the pop-up confirming the selection was successful.**

Note: The Opt-Out button can still be used even if data was entered into the form fields before selecting to opt out.

Completing the Form

Clients that had a Market Segment Change upon renewal with CareFirst during the calendar year (*after January 1st*) should review the Mid-Year Market Segment Changes section before continuing.

Review one of the RxDC Informational Guides to learn about what is or is not an applicable change.

If there were no applicable market segment changes during the calendar year, leave the checkbox blank.

Important Reminders

- Review the information in the RxDC Informational Guide(s) that contain important detail about the information being requested before attempting to complete the form.

- A brief definition of the required data can be viewed in the form by hovering over a specific field.

- Clients that wish to retain a record of their submission(s) should use print screen or screen shot capabilities to capture a view of the data entered before clicking submit and/or the pop-up that appears to indicate a submission was successful.
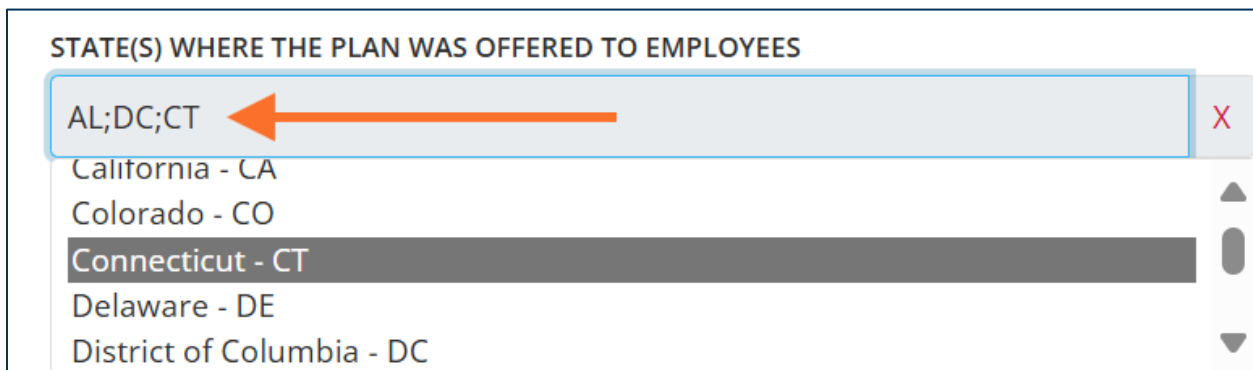
States Where the Plan is Offered

Click the gray box labeled "SELECT STATE" to reveal the dropdown for making selections.

- Use the scroll bar to navigate through the list of options available.

- Multiple states and/or U.S. territories can be selected without needing to hold down the ctrl key.

- If "National" is selected, only U.S. territories can be added as selections.

- Selections will appear in the gray box, separated by semicolons when there is a list of more than one selection.

- State and/or U.S. territory selections will be represented in the list of selections by the corresponding 2-digit abbreviation.

Entering Paid Amounts

An entry is required for each of the following fields:

☐ Premium Paid by Member
☐ Premium Paid by Employer

Requirements for Entering Paid Amounts:

■ All amounts should be total dollar amounts.

■ The form automatically includes the decimal point.

■ Paid amount fields cannot be left blank.

■ If the client pays 100% of the cost of coverage with no contribution from the member enter 0 for the Premium Paid by Member.

Example of a form ready for submission

Submitting the Form

1. After entering the required information, click the "Submit" button at the bottom of the form.

Clients that want a record of the information provided should take a print screen or screenshot before submitting the form.

2. A pop-up will appear to confirm a successful submission.

Clients that want a record of a successful submission should take a print screen or screenshot before clicking the "Okay" button.

Mid-Year Market Segment Changes

Clients that had an applicable mid-year market segment change as outlined in the RxDC Instructional Guide(s) need to provide two sets of data that will be stored and reported separately.

Annual RxDC Information Submission

PLEASE CLICK HERE TO ACCESS THE RxDC INSTRUCTIONAL GUIDE(S) FOR MORE INFORMATION ON HOW TO COMPLETE THIS SUBMISSION BEFORE FILLING OUT THE FORM BELOW.

Select the **OPT-OUT** button at the bottom of the screen if **CareFirst should not include RxDC data for this account** in its carrier submission of the **D1 – Premium and Life Years** report. By opting out, the account accepts responsibility for ensuring a separate submission is made on their behalf to comply with the requirements of 26 CFR part 54, 29 CFR part 2590, and 45 CFR part 149, as applicable.

Check the box below if the account renewal was during the calendar year and at least one of the following statements are true:
  1. The account size changed – Small Group (2-50) vs. Large Group (51+)
  2. The funding arrangement changed – Fully Insured vs. Self-Funded
Refer to the RxDC Instructional Guide linked above for specific directions on how to complete each entry.

☐ MID-YEAR MARKET SEGMENT CHANGE(S) APPLY

STATE(S) WHERE THE PLAN WAS OFFERED TO EMPLOYEES
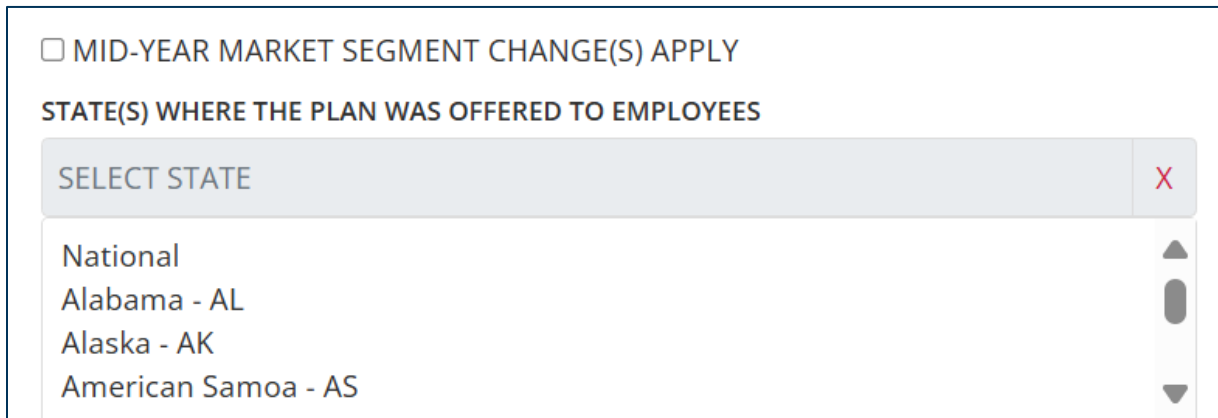
| SELECT STATES | ✖ |

Check the box to confirm at least one of the outlined criteria is true and mid-year market segment changes apply. This will reveal additional data fields.

☑ MID-YEAR MARKET SEGMENT CHANGE(S) APPLY

GROUP ID (4 OR 5 DIGIT)

ENTER GROUP ID

PLAN YEAR EFFECTIVE DATE

mm/dd/yyyy

MARKET SEGMENT ○ Small (2-50) ○ Medium (51-199) ○ Large (200-999) ○ Jumbo (1000 +)

SELF-FUNDED DATA SUBMISSION ○ Yes ○ No

The submissions can be completed in any order, as long as the information provided in each submission is specific to the time period either before or after the change in market segment.

We recommend that the information for the most recent market segment be the first submission, and the following instructions take that approach.

1. Enter the <u>current</u> Group ID assigned by CareFirst. This ID is either a 4-digit number or a 5-digit ID that could be either numeric or alphanumeric.

2. Enter the Plan Year Effective Date for the market segment change.

This should be for the plan year that started in the calendar year being reported.

3. Select the market size applicable to the client.

MARKET SEGMENT ● Small (2-50) ○ Medium (51-199) ○ Large (200-999) ○ Jumbo (1000 +)

SELF-FUNDED DATA SUBMISSION ○ Yes ○ No

The Self-Funded Data Submission indicator cannot be selected when the Market Segment selected is Small (2-50).

Clients that select the Medium (51-199) market segment for the plan that became effective in calendar year 2024 will need to select "No" for the Self-Funded Data Submission Indicator.

4. Complete the form as outlined in the previous sections of this manual with the information for the applicable portion of the calendar year.

5. After submitting the first form, repeat the steps in this section with the information from before the change.

☐ The Group ID may or may not be the same.

☐ The Plan Year Effective Date should be in the calendar year before the year being reported.

☑ MID-YEAR MARKET SEGMENT CHANGE(S) APPLY

GROUP ID (4 OR 5 DIGIT)

ABC6

PLAN YEAR EFFECTIVE DATE

02/01/2023 🗓

For the Market Segment size and the Self-Funded Data Submission indicator, at least one will be different – or possibly both.

MARKET SEGMENT ○ Small (2-50) ○ Medium (51-199) ○ Large (200-999) ○ Jumbo (1000 +)

SELF-FUNDED DATA SUBMISSION ○ Yes ○ No

For clients that were fully-insured both before and after the effective date of the change, and only the market segment was different, the form will have all the same fields to be completed as the previous submission.

☑ MID-YEAR MARKET SEGMENT CHANGE(S) APPLY

GROUP ID (4 OR 5 DIGIT)

ABC6

PLAN YEAR EFFECTIVE DATE

02/01/2023 📅

MARKET SEGMENT ○ Small (1-50) ⦿ Medium (51-199) ○ Large (200-999) ○ Jumbo (1000 +)

SELF-FUNDED DATA SUBMISSION ○ Yes ⦿ No

STATE(S) WHERE THE PLAN WAS OFFERED TO EMPLOYEES

SELECT STATES	✖

PREMIUM PAID BY MEMBER

ENTER PREMIUM PAID BY MEMBER

PREMIUM PAID BY EMPLOYER

ENTER PREMIUM PAID BY EMPLOYER

Forms must be completed by the due date to be included in CareFirst's **RxDC - D1 Premium and Life Years file submission.** Clients that do not submit the form on time will be responsible for making sure a separate submission is made to CMS.

[Submit] [Opt-Out]

For clients that did not have a change in market size, but were previously self-insured, the form will have only the fields required for fully insured Large Group health plans.

☑ MID-YEAR MARKET SEGMENT CHANGE(S) APPLY

GROUP ID (4 OR 5 DIGIT)

ABC6

PLAN YEAR EFFECTIVE DATE

02/01/2023 📅

MARKET SEGMENT ○ Small (1-50) ⦿ Medium (51-199) ○ Large (200-999) ○ Jumbo (1000 +)

SELF-FUNDED DATA SUBMISSION ⦿ Yes ○ No

STATE(S) WHERE THE PLAN WAS OFFERED TO EMPLOYEES

SELECT STATES	✖

ADMIN FEES

ENTER AMOUNT PAID

STOP LOSS ISSUER NAME

ENTER THE NAME OF ISSUER

STOP LOSS ISSUER EIN

ENTER EIN NUMBER

PBM NAME

ENTER PBM NAME

PBM EIN

ENTER PBM EIN NUMBER

PREMIUM PAID BY MEMBER

ENTER PREMIUM PAID BY MEMBER

PREMIUM PAID BY EMPLOYER

ENTER PREMIUM PAID BY EMPLOYER

PREMIUM EQUIVALENTS

ENTER PREMIUM EQUIVALENT

STOP LOSS PREMIUM

ENTER AMOUNT PAID

Forms must be completed by the due date to be included in CareFirst's **RxDC - D1 Premium and Life Years file submission.** Clients that do not submit the form on time will be responsible for making sure a separate submission is made to CMS.

[Submit] [Opt-Out]

□ For clients that were previously fully insured but moved from the Large Group market where it is possible that the client's pharmacy benefits were not through CareFirst, the form will display optional PBM fields to capture that information if applicable.

FAQs

Q: Is there a different way for current clients to provide the data to CareFirst?

A: No. In the interest of data security and governance, all current client data must be provided using the form created in the secure portals, either by the client directly, or by their broker/consultant, if applicable.

Q: Can I provide data for clients that are no longer with CareFirst through the CareFirst Broker Portal?

A: No. Clients that do not have active access to the Employer Portal will need to have their data submitted using the applicable RxDC Survey created for former clients.

Q: How do I know if my submission was successful?

A: If a popup appears with the message "Form submitted successfully" and there is no error message that appears at the same time, the submission was successful.

Q: Can I see which clients in my portfolio have a completed form submission?

A: This is not currently an option.

Q: Can I check the status of my submission(s)?

A: This is not currently an option.

Q: Can I get a copy of the data I submitted?

A: This is not currently an option. Clients that want to retain a copy of the data they submit should capture the screen with the completed form before clicking the submit button.

Q: If an error message appears at the same time as the confirmation of successful submission, was the data received?

A: There is a chance that the data did not save. The troubleshooting tips in the next section should be used to attempt the submission again.

Q: Can I change my data after I have clicked submit?

A: The form can be filled out again with all required data, including any corrections, as many times as needed prior to the due date. CareFirst will use the data submitted closest to the due date.

Q: What do I do if I am not sure that my submission was successful?

A: It may be a good idea to submit again if the successful submission pop-up was not received. The subsequent successful mission will simply replace the original submission if it was successful.

Troubleshooting Tips

In the event of an error message or technical issue in completing the submission, try the tips below before attempting the submission again.

Suggestion #1

1. Log out of the portal.
2. Clear your browser's cache.
3. Log into the portal and try again.

Suggestion #2

1. Log out of the portal.
2. Clear your browser's cache.
3. Open a new browser tab.
4. Log into the portal and try again.

Suggestion #3

1. Log out of the portal.
2. Open a private or incognito window in your browser.
3. Log into the portal and try again.

Suggestion #4

1. Log out of the portal and close your browser.
2. Open a different browser.
3. Log into the portal and try again.

Suggestion # 5

It's possible that scheduled maintenance, an unplanned network outage, or other technical issue may be temporarily impacting your ability to submit the form.

1. Log out of the portal.
2. Try again another day.

If you are unable to successfully troubleshoot the issue, please contact Portal Support at SBUPortalSupport@carefirst.com. Please include a detailed description of the issue, including screenshots of the data you are entering and any errors you are receiving.