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DEPARTMENT OF INSURANCE

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WILLIAM W. DEAL
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MEMORANDUM

Date: March 27, 2014

To: Interested parties

From: Weston Trexler, Product Review Bureau Chief

Re: March 24, 2014 Individual/Small Group EHB Filer Meeting Summary

The following is a summary of the discussion from the March 24, 2014 meeting held at the Department of Insurance (DOI), which was attended by most carriers that participate in the individual and small group markets for medical and dental plans.

After introductions, Wes Trexler led the discussion on renewals and discontinuations of plans. Wes stated that based on the proposed federal requirement at 45 CFR 147.106(e), if the changes to a plan were more than a "uniform modification of coverage" as defined by that section, the plan would be considered discontinued and a new plan being offered. Idaho Code §§ 41-4707 and 41-5207 prohibits the discontinuation of a medical plan if it has been in use for fewer than 36 months or has greater than 15% of the carrier's market share enrolled. DOI will allow a plan with no enrollees to be discontinued. DOI would consider a discontinuance request for a plan in force for less than 36 months as long as the company provides justification that the action would be in the best interest of Idaho consumers. The carrier would need to submit the request prior to the discontinuance in accordance with the timeframes stated in 41-4707 and 41-5207.

Donna Daniel led the discussion on changes to 2014 policy forms. The February 14, 2014 notice to carriers stated that carriers are encouraged to make changes to 2014 policy forms by amendment. However, DOI wanted company input on what works best for each company's systems. Some carriers stated they have historically issued amendments, others issue a new policy with a new form number each year. Based on the discussion, DOI recommends that carriers refile the policy forms for renewing plans with 2015 information so that 2014 information would not be included in the 2015 plan documents. DOI requests that carriers attach redlined versions as supporting documentation and that carriers check and recheck that the starting points for the redlined versions are the final 2014 form currently filed with DOI.

DOI discussed the allowable variable language stated in the draft QHP Standards notice. DOI agreed to add the tribal member over 300% of federal poverty level language and internal company identification coding. Based on a follow-up email, DOI also added a clarification that variable language for domestic partners is also allowed. The catastrophic plan forms must not include variable language on cost sharing provisions, and the forms should be refiled each year to reflect changes in the dollar amounts.

DOI requests SBCs be filed within 2 weeks of the form filing. A carrier brought up that the 2015 SBC template is not yet released. If the 2015 SBC template is not available by a reasonable date, DOI will consider changing that submission date.

DOI responded to several questions from participants:

1. Has DOI set a submission deadline for carriers with only off-exchange non-QHPs? There is no set date for the submission of the non-QHP filings. DOI recommends that the

- carriers file no later than August 29, and DOI cannot provide reasonable assurance of a completed review prior to open enrollment if the filing is submitted after October 1, 2014. Those dates will be communicated in the meeting summary and an FAQ rather than as a revision to the QHP Standards.
2. Are the templates required for off-exchange non-QHPs? Yes, Binders are still required for off-exchange products, and carriers with only non-QHPs are not required to meet the QHP timeframes.
 3. To whom should a carrier send the letter of intent? The letter of intent of carrier filings for 2015 due April 1, 2014 should be submitted to Wes Trexler (weston.trexler@doi.idaho.gov) with a cc to Donna Daniel (donna.daniel@doi.idaho.gov).
 4. Has there been any discussion to add an Adult Only Stand Alone Dental Plan on the exchange? Wes stated that adult dental could be part of a SADP that covers the pediatric oral EHB. He has not heard of plans to allow adult-only dental plans for 2015, but carriers could recommend YHI consider it for 2016.

Wes briefly reviewed each section of the QHP Standards draft document. The following items were called out:

- Good Standing—nothing further needed from the carriers as DOI currently provides this information to the Exchange.
- Network Adequacy—carriers must attest that they meet the Idaho standard.
- Essential Community Providers—Idaho will increase to the 30% standard, in line with the federal guidelines. If the company is unable to meet the 30%, they may submit justification and DOI will review.
- Patient safety—this is new for 2015.
- Discriminatory Benefit Design—an attestation is required. DOI will again test for benefit outliers in 2015.
- Rx Drug Coverage—the draft federal prescription drug template was corrected to allow drugs paid under the medical benefit to be counted toward the benchmark minimums. YHI recommends carriers review their exceptions and appeal process to avoid delays in ongoing treatment of new members.
- Meaningful Difference—this does not apply to SADP. Idaho will follow federal guidelines and consider the broader perspective to ensure meaningful consumer choice.
- Cost Sharing Variation—a carrier mentioned that they have noticed surprisingly high numbers of silver/gold zero cost sharing plan variations are being purchased, even though the benefits and cost sharing are identical to the cheaper bronze options. Wes will share with YHI the carrier's request to show only the lowest cost option for each carrier within each service area and each network option. YHI will also determine at that time if they can add a prominent explanation for those eligible for the zero cost sharing plan variation. Carriers should still submit the zero cost sharing plan variation for each plan at all metal levels (same as 2014). DOI would like to hear suggestions on how to simplify this while not decreasing the options for eligible tribal members.
- Tribal Support—YHI encourages carriers to accept premiums directly from the tribes on behalf of their members.

DOI responded to several more questions from participants prior to ending the call:

5. Are the catastrophic plans discontinued each year or renewed? They are not considered a discontinuation since the deductible/OOP increase is a mandated change. Carriers must refile the forms, SBC and Summary of Benefits with redlined versions.
6. Are SADPs outside the exchange required to include the pediatric dental EHB? Same as 2014, they are not required to include pediatric dental.
7. Is there any new information regarding reasonable assurance of pediatric dental coverage? Wes stated the federal standard has not changed and DOI and YHI are looking into this. Wes would appreciate any input from carriers on how to comply with the regulation while reducing consumer confusion.
8. Will carriers have a log in to YHI? Yes, YHI will set up each carrier with access to their plan information including the ability to view how consumers see the plans.
9. Will YHI allow direct enrollment by carriers? Wes stated that YHI does see the value of that capability, and so YHI is evaluating the impact of enabling direct enrollment for the 2015 plan year. The decision will be made by the YHI board sooner rather than later based on that analysis.
10. How does the employer contract with each carrier upon providing the option to employees? When the employer agrees with the Exchange, are they agreeing to all the carriers' contracts? Wes will look into this.
11. Will YHI provide orientation or training for plan preview? Wes stated yes, he has understood that YHI will provide some training when the carrier portal is available, such as how to set up an account, what you can see, and how to access the portal. Any questions can be submitted to Wes, and he will address with YHI.