

**Maryland Health Benefit Exchange Carrier and Qualified Plan
Certification
Interim Procedures – Additional Definitions; Dental and Vision Plan
Certification; Carrier Requirements Related to Producer Compensation
Data**

*Authority: Insurance Article §§ 31-106(c)(1)(iv); 31-108(b)(4); 31-115(b)(5)(vi); 31-115(b)(6)(ii),
Annotated Code of Maryland.*

Technical Changes

All mentions of the phrase “carrier certification” in the Maryland Health Benefit Exchange Interim Procedures as adopted by the Board on October 9, 2012 are replaced with the phrase “carrier authorization.”

All mentions of the phrase “certified carrier” in the Maryland Health Benefit Exchange Interim Procedures as adopted by the Board on October 9, 2012 are replaced with the phrase “authorized carrier.”

Definitions

This section amends Maryland Health Benefit Exchange Carrier and Qualified Plan Certification Interim Procedures, as adopted by the Maryland Health Benefit Exchange Board of Trustees on October 9, 2012, by adding the following:

.01 Scope and Definitions

C. Definitions.

For purposes of these interim procedures, the following definitions apply...

“Authorized Carrier” means a carrier whose application for participation, only by way of offering qualified plans as certified by the Exchange, is approved.

“Carrier Authorization” means the approval of the application for participation submitted by a carrier in anticipation of seeking certification for health benefit plans, dental plans, or vision plans, as applicable, as qualified plans.

“Embedded” means the benefit is integrated within a health benefit plan, must be purchased with the health benefit plan, and may not be purchased as a separate and distinct benefit.

“Endorsement” means the benefit is bundled with a health benefit plan, and may, at the consumer’s option, be purchased separately from the health benefit plan.

“Stand-alone” means the benefit is offered for sale without an affiliated health benefit plan.

Dental and Vision Plan Certification

This section addresses dental and vision plan certification, and amends the Maryland Health Benefit Exchange Carrier and Qualified Plan Certification Interim Procedures, as adopted by the Maryland Health Benefit Exchange Board of Trustees on October 9, 2012, by adding the following:

- .11 Certification of benefit plans providing limited dental or vision benefits as qualified plans.
- A. Plans providing adult dental benefits.
 - (1) To obtain certification as a plan that provides only adult dental benefits, an authorized carrier shall offer the benefit plan only as a stand-alone dental plan.
 - (2) An authorized carrier shall display the pricing for each qualified plan described in subsection (1) that it offers for sale through the Individual Exchange or the SHOP Exchange.
 - B. Plans providing adult vision benefits as permitted by federal law.
 - (1) To obtain certification as a plan that provides only adult vision benefits, an authorized carrier shall offer the benefit plan only as a stand-alone vision plan, if determined by the Office of the Attorney General to be permitted by federal law for state-based exchanges.
 - (2) An authorized carrier shall display the pricing for each qualified plan described in subsection (1) that it offers for sale through the Individual Exchange or the SHOP Exchange.
 - C. Plans providing pediatric dental or vision benefits.
 - (1) To obtain qualified dental plan certification for a benefit plan that provides pediatric dental benefits, an authorized carrier shall offer the pediatric dental benefits:
 - (a) embedded within a health benefit plan;
 - (b) as an endorsement to a health benefit plan; or
 - (c) as a stand-alone benefit plan.
 - (2) To obtain qualified vision plan certification for a benefit plan that provides pediatric vision benefits, an authorized carrier shall offer the pediatric vision benefits:
 - (a) embedded within a health benefit plan; or
 - (b) as an endorsement to a health benefit plan;
 - (3) Where pediatric dental benefits or pediatric vision benefits are embedded within a health benefit plan offered for sale as a qualified health plan, the authorized carrier offering the qualified health plan shall display the pricing for, as appropriate, the pediatric dental benefits in a manner that is separate and distinct from the pricing displayed for all other benefits offered in the qualified health plan.
 - D. Compliance with Federal Law.

Nothing in this section shall be construed to negate the requirement that a qualified health plan or a qualified dental plan providing limited pediatric dental benefits provide pediatric dental benefits that meet the requirements of §1302(b)(1)(j) of the Affordable Care Act.

Requirements Related to Producer Compensation Data

The following addresses requirements related to producer compensation data and producer appointments, and amends to section .03C of the Maryland Health Benefit Exchange Carrier and Qualified Plan Certification Interim Procedures, as adopted by the Maryland Health Benefit Exchange Board of Trustees on October 9, 2012, to add the following:

.03 Application Procedures

C. A carrier authorization applicant must attest to the following in its application for authorization...

(14) That the carrier will:

(a) collect and maintain, for a period of not less than three years, all schedules, agreements, policies, procedures, programs and other information regarding producer compensation, including commissions, bonuses, or any other remuneration, in cash or in kind, provided or to be provided to producers for the sale, solicitation, or servicing of health benefit plans offered for sale through the SHOP Exchange or Individual Exchange, and in the commercial market outside the Exchange; and

(b) upon request of the Commissioner, provide any or all of the information in subsection (a) to the Maryland Insurance Administration.