



MINUTES

Standardized Benefit Design Work Group

Date / time 7/24/2017 2:30 PM | *Meeting called to order by* John Pierre Cardenas

In Attendance

Elizabeth Sammis, Ph.D.*

Kathryn Hoffman, Esq.

Pia Sterling*

Robert Metz*

Chris Keen (via telephone)*

Michele Eberle

John Pierre Cardenas

Kimberly Edwards

Rebecca Smith

Leslie Gordon (via telephone)

Robyn Elliott*

Alvin Heffenbein*

Patricia O'Connor (on behalf of Kimberly Cammarata)

*Indicated work group member status. With six members present, the work group reached quorum.

Approval of Minutes

The minutes from the June 15th meeting were approved after a motion to approve them was made by Pia Sterling and seconded by Elizabeth Sammis.

Meeting

- **Workgroup Membership Updates**

John-Pierre Cardenas from MHBE shared with the committee members that two members (Leslie Gordon and John Fleig) had withdrawn from the workgroup. Another application period will be opened from July 5th through July 12th, and the information will be on the MHBE public comments page.

UPDATE: Because of the July 4th holiday, MHBE determined that the application period would run from July 12th through July 19th.



- **Topics Discussed**

Following meeting minute approval the work group members voted on several policy recommendations:

1. Leaving established QHP offering rules in place, i.e. plan offering limitation standard (no more than four offerings per metal level) and plan minimum offering standard (participating issuers must offer at least one plan at the bronze, silver, and gold metal levels). **Passed, no objection.**
2. Cost-sharing and benefits should only be standardized for in-network services. **Passed, no objection.**
3. Utilization of the Summary of Benefits and Coverage document as the basis for benefit categories included in standardization. The committee acknowledged that there are several areas that have the potential to be troublesome for standardization. CareFirst representatives discussed the variable of facility charges as complicating for standardization. Further, sleep studies and non-preventive OB-GYN care are other benefit categories that are complicating for standardizations. Work group member – Beth Sammis – suggested that having a disclaimer for the standard plans that certain specific benefits are not included in the SBC. **Passed, general consent.**
4. After discussion, the topic - inclusion of state mandated benefits in standardization – was removed from voting on.
5. Inclusion of non-standard benefits to standard plans. Kaiser Permanente and CareFirst include non-standard benefits as a value-add to their QHP offerings, e.g. adult dental and adult vision. Discussion was had on developing language to carve-out existing non-standard benefits or developing a process through which benefits that have a de minimis impact on premium be carved-out from standardization. MHBE and the work group determined that a vote on this topic be delayed until a formal motion has been written up. **Delayed, further discussion.**
6. MHBE presented the enrollment-weighted proposed Maryland –specific plan compared against popular QHPs. There are important issues to consider:
 - a. CareFirst will tier specialty drugs into preferred and non-preferred categories. Issuers must talk to pharmacy benefit managers on a 4 or 5 tier category.
 - b. Mental health parity compliance

The work group members determined that utilizing an enrollment-weighted QHP method would be best.

Summary of decisions

The work group voted to leave the established Qualified Health Plan (QHP) rules in place, which is a maximum of four plans per metal level, and a minimum of 1 QHP per bronze, silver, and gold.

The work group voted to standardize only for in-network cost sharing type plans.

The work group voted to use the Summary of Benefits and Coverage (SBCs) as the basis for the benefit categories included in standardization.



The work group decided to delay a vote until a future meeting on issuer's ability to add non-standard benefits to their offerings.

Next Meeting

7/27/2017 2:00 PM, Sky Lobby Conference Room, 750 East Pratt Street, Baltimore, MD 21202

Motion to adjourn was made at 4:30 P.M. and was passed unanimously.

Action Items:

Issuers will look at the SBCs and determine which services do not fit well for the Standardized Plan categories.



