

Plan Management Stakeholder Committee

December 7, 2017





Welcome and Introductions

Meeting Minutes Approval

Feedback from the field

- ✦ Michele Eberle has been selected as the new Executive Director effective December 18, 2017.
- ✦ John-Pierre Cardenas has been appointed as the Director of Policy and Plan Management.
- ✦ Kris Vallecillo has been hired as the Health Policy Analyst for Policy and Plan Management

Open Enrollment Updates

- ✘ MHBE has begun an outreach campaign to assisted and unassisted enrollees in standard silver and silver CSR Tier I (73% AV) plans.
- ✘ The campaign execution dates are: 12/6, 12/12, & 12/14
- ✘ Copy of first outreach:
<https://content.govdelivery.com/accounts/MDHC/bulletins/1c8f2a0>
- ✘ MHBE encourages issuers and stakeholders to notify consumers to seek in person assistance and to shop around for the best deals for their families.

- ✘ The application period for the Plan Management Stakeholder Committee will be from January 4, 2018 to January 18, 2018.
- ✘ The 2018 PMSC will convene on March 1, 2018. Thereafter the PMSC will reconvene bi-monthly on the first Thursday of each month.
- ✘ The 2018 PMSC Charter and Application will be available on January 4, 2018.

MD SHOP Update



Final Memorandums for SHOP New & Renewal Business

The final versions of the New Business Process Memorandum, Renewal Process Memorandums and related Universal Applications are now released for use as of January 1, 2018. Copies of these forms are attached to this presentation for the carriers and SHOP Administrator.



New Business
Memorandum



Renewal Business
Memorandum

Memorandums & Application Status

Universal Employer/Carrier Application



MHBE SHOP Unified Employer Carrier Application - form.pdf - Adobe Acrobat Pro

File Edit View Window Help

Open Create Print Comment

1 / 5 100% Fill & Sign Comment

This file includes fillable form fields. You can print the completed form and save it to your device or Acrobat.com. Highlight Existing Fields

maryland health connection

Maryland Health Connection - Maryland SHOP Plans Employer / Carrier Application

Company Information

Legal Company Name	Doing Business As (if Applicable)		
Physical Street Address (PO Box not acceptable)	City	State	ZIP
Billing Address (if different from physical)	City	State	ZIP
Mailing Address (if different from physical or billing)	City	State	ZIP
Phone Number	Fax Number		
Does this business have multiple locations? If so, please attach sheet with all locations with Street Address, City, State and ZIP and number of employees at each broken down by Full-time, Part-time, Retired, COBRA or State Continues, 1099, Union, Seasonal, Other.			
Company Group Contact: Name and Title	Email	Phone Number	
Billing Contact: Name and Title (if different from above)	Email	Phone Number	
Enrollment Contact: Name and Title (if different from above)	Email	Phone Number	
Chief Executive Officer	Organization type: (C-Corp, Non-Profit, Partnership, Sole Proprietor, LLC, LLP, Other):		
SIC Code	Nature of Business	Federal Tax ID	Date Established

Group Information

Is your company under 50 full-time equivalent employees (FTEs)? If so, number of FTEs?	Yes	No
--	-----	----

Memorandums & Application Status

Universal Employee Eligibility and Election Form



Employee Eligibility



Employee Election Form

Maryland SHOP Employee Eligibility and Election Form (final form 2018).pdf - Adobe Acrobat Pro

File Edit View Window Help

Open Create Save Print Copy Paste Undo Redo Zoom 100%

This file includes fillable form fields. You can print the completed form and save it to your device or Acrobat.com.

Tools Fill & Sign Comment Highlight Existing Fields

maryland health connection

Maryland Health Connection - Maryland SHOP Plans

EMPLOYEE ELIGIBILITY AND ELECTION FORM

New Hire/Rehire New Enrollee Coverage Change Waiver Information Update COBRA/State Continuation Open Enrollment

1. EMPLOYER INFORMATION Employer Section Only (Include Applicable Effective Dates)

Employer Name

Employer Address

Employer City State Zip Code

Employer Phone Number Account Number

Medical Effective Date Dental Effective Date

2. EMPLOYEE INFORMATION (If you do not want SHOP coverage from your Employer, complete this section and go to Step 5.)

Last Name First Name M.I. Suffix Social Security Number

Email Address (Notifications will be sent electronically) Phone Number H W C Other Phone Number H W C

Home Address Apt or Suite Number

City State Zip Code County

Mailing Address (if different from home address) Apt / Suite No. City State Zip Code County

Gender Female Male Date of Birth: Marital Status: Single Married Divorced Widowed Domestic Partner
Date of Marriage:

Date of Hire/Rehire Hours Worked Per Week Employment Status: FT PT Other Occupation:

Payroll Frequency Weekly Bi-Weekly Monthly Semi-Monthly Are you actively at work? Yes No

If Hispanic/Latino, ethnicity (OPTIONAL - Check all that apply) Mexican Mexican American Chicano/a Puerto Rican Cuban Other

SHOP Reconciliation Memorandum, Reconciliation Template and Discrepancy Template

- MHBE SHOP has conducted conference calls between BenefitMall and the requesting carriers to discuss the reconciliation process.
- MHBE expects that the reconciliation process will begin for January 2018 with the expectation that the first month would be a testing period to work out any concerns or issues.
- MHBE is requesting feedback and concerns from the carriers and SHOP Administrator regarding the reconciliation process as it begins to be implemented.

Webinars available

- MHBE SHOP has conducted webinars for authorized producers to discuss SHOP in greater detail as well as to provide access to quoting template tools to use in comparison of individual marketplace, SHOP and off-SHOP plans.

Action Items

- MHBE is requesting that carriers and the SHOP Administrator begin using these Employer and Employee Application Forms beginning January 1, 2017 for all SHOP business. Feedback is on implementation of the use of these forms.
- The final memorandum regarding the SHOP Reconciliation Process has been provided and conference calls held with the carriers. Feedback and any concerns should be sent to MHBE SHOP with the implementation of the process as of January 1, 2018 enrollments.
- Please send requests for a copy of the SHOP Webinar to mhbe.shop@maryland.gov.
- MHBE SHOP is available for presentations and/or additional training sessions at the participating carriers' discretion. Please contact Becky Smith with any questions at mhbe.shop@maryland.gov.



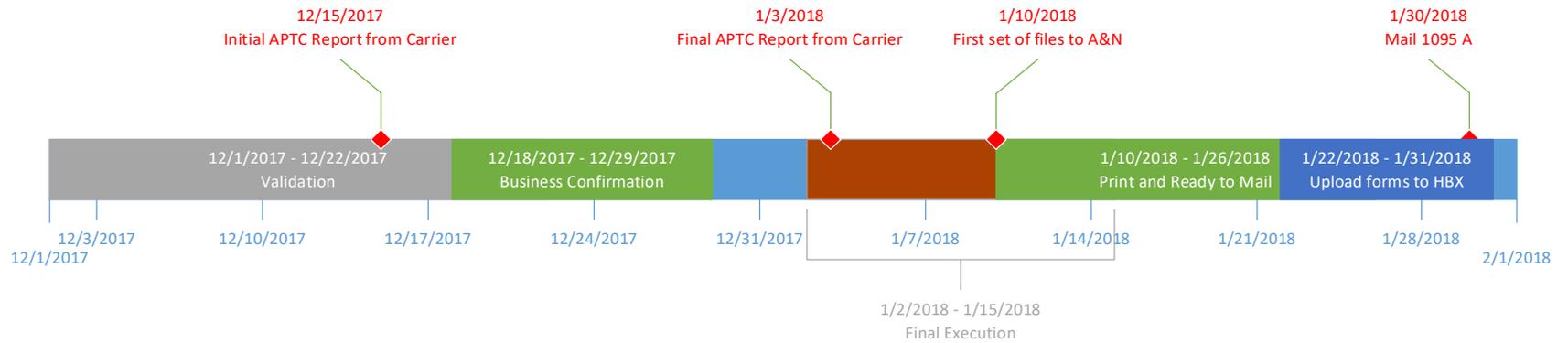
SHOP
Reconciliation

Questions or Comments?

2017 1095 A Planning



Timeline



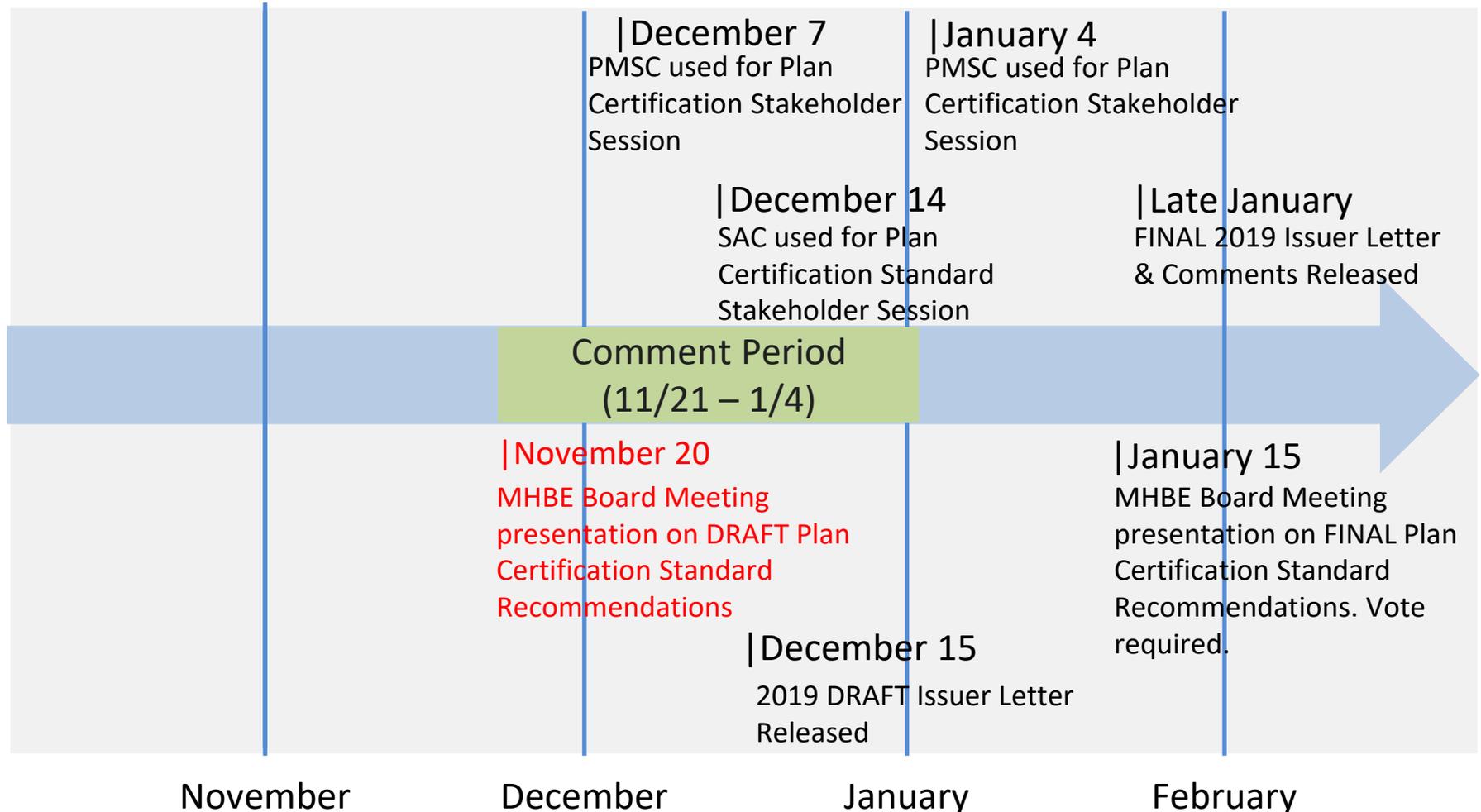
- ❖ **Deliver APTC reports with highest possible quality based on the timeline**
- ❖ **Respond to questions with priority about APTC report (if any)**
- ❖ **Perform to manual verification requests (if any)**

2019 Draft Plan Certification Standards

November 20, 2017



Plan Certification Standards - Timeline



2018 Plan Certification Standard

Network Access Plans & Network Adequacy:

Carriers must submit their Network Access Plan template to MHBE, along with three new templates: quantitative standards network composition reporting, provider accessibility standards, and member services standard. These will not be shared publicly.

Proposed 2019 Plan Certification Standard

MHBE proposes to add an attestation to the 2019 Carrier Application. Applying issuers must attest to meeting their respective requirements under the final network adequacy regulation promulgated in COMAR 31.10.44 Network Adequacy.

2018 Plan Certification Standard

Issuers must submit a provider directory file to MHBE every two weeks.

Proposed 2019 Plan Certification Standard

MHBE proposes to supplement the 2019 Carrier Application with an attestation. Applying issuers attest to submitting provider directory data to MHBE every two weeks. Applying issuers attest that the submitted data is complete, accurate, and up-to-date to the extent feasible.



Essential Community Providers (ECP)

2018 Plan Certification Standard	Proposed 2019 Plan Certification Standard
<p>Expanded ECP Definition: Add LHDs, OMHCs, SUD providers under COMAR 10.09.80.03.B(1) & B(3) licensed or approved by DHMH as programs or facilities, and SBHCs</p> <ul style="list-style-type: none"> • Providers must be able to meet carrier credentialing standards • Must contract with at least 30% of ECPs/service area (write in option and alternative allowed) • Must offer contracts in good faith for providers in service area to all available IHCPs, any willing LHD and at least 1 ECP in each ECP category in each county where available • Dental carriers must offer contract in good faith to 30% of all ECPs/service area and all available IHCPs. MHBE encourages SADPs to contract with at least 1 FQHC and any willing LHDs. • Annually MHBE will provide a list of expanded-ECPs by end of January with instructions to complete MHBE ECP Template 	<p>This standard will remain unchanged from 2018. MHBE proposes to include this standard (including the Alternate ECP Standard) in the next update of the Carrier Reference Manual</p>



Reduction of Administrative Burden:

2018 Plan Certification Standard

Proposed 2019 Plan Certification Standard

Marketing and Benefit Design of QHPs:

Carrier must attest to no plan discrimination. MHBE will review plan benefits to determine if any additional standards are needed to address discriminatory benefit design. MHBE adds that it will review new federal proposed requirements and follow the FFM approach for reviewing discriminatory effect.

This standard will remain unchanged from 2018. **MHBE proposes to include this standard in the next update of the Carrier Reference Manual**

2018 Plan Certification Standard

Proposed 2019 Plan Certification Standard

Prescription Drug Certification Standards:

Formulary Link must link directly to list of covered drugs and include tiering and cost-sharing information. Plans should indicate the tier and may include a legend to allow the consumer to match the tier to the drug category.

MHBE proposes to refine the language of this standard.

The formulary link provided in “Prescription Drug Search” must link directly to the QHP’s list of covered drugs and include tier information. Plans must include a legend to allow the consumer to match the indicated tier with a drug category.

Issuers must track drug exceptions and provide information to MHBE upon request.

This standard will remain unchanged from 2018. MHBE proposes to include this standard in the next update of the Carrier Reference Manual

2018 Plan Certification Standard	Proposed 2019 Plan Certification Standard
<p>SADP* Rating Cap: Stand Alone Dental Plans must cap rating at three minor dependents.</p>	<p>This standard will remain unchanged from 2018. MHBE proposes to include this standard in the next update of the Carrier Reference Manual</p>
<p>Optional Embedded Pediatric Dental Benefits: Embedded Pediatric Dental Benefits in QHPs are optional.</p>	<p>This standard will remain unchanged from 2018. MHBE proposes to include this standard in the next update of the Carrier Reference Manual</p>

*Stand-Alone Dental Plans

2018 Plan Certification Standard

Proposed 2019 Plan Certification Standard

Primary Care Above-EHB Benefits:

Board should direct MHBE to:

- Determine if above State-EHB Primary Care benefits should be included in Plan Certification Standards for 2019 plans.
- Seek input from Standing Advisory Committee and stakeholder groups.
- Develop recommendations for Board's consideration
- Consult with MIA on whether it can address the number of primary care visits required without cost per year

MHBE recommends the removal of this plan certification standard.

MHBE proposes that MHBE be directed to assemble a work group to address primary care above-EHB benefits.

2018 Plan Certification Standard

Proposed 2019
Plan
Certification
Standard

Prohibition on Ending Plan Contract When Primary Insured Terminates Coverage: When primary subscriber is terminated, for outstanding citizenship/immigration status verifications, other enrollees should be allowed to continue on contract with amounts contributed to deductible and OOP costs under contract; if termination results in invalid enrollment group, eligible members have 60 day SEP.

MHBE will work with stakeholders to consider future applications such as certain voluntary terminations (i.e. new Medicare eligibility). Regardless of who accumulated the costs and the new contract type, such as if the household moves to a self-only plan, any amounts contributed to deductible and OOP costs under original contract should be

This standard remains unchanged from 2018. **MHBE proposes to develop a working group to determine an implementation pathway.**

2018 Plan Certification Standard

Proposed 2019 Plan Certification Standard

Employee Choice Expansion:

MHBE proposes an expansion to the employee choice model. Employers may select up to two consecutive metal tiers (e.g. Bronze and Silver, or Silver and Gold) and employees will be able to select any plan between the chosen metal tiers across any issuer. This will be optional for 2018, issuers electing this option must report election to MHBE.

This standard will remain unchanged from 2018.
MHBE proposes to include this standard in the next update of the Carrier Reference Manual

Employer Choice Composite Rating:

Per MIA Bulletin 15-34, Employer groups in the Employer Choice model may elect to participate in composite rating for either a single QHP offering or multiple QHP from a single carrier. MHBE encourages issuers to offer at least one QHP that will offer composite rating/premium. Issuers must identify the plans to MHBE. This will be optional for 2018, issuers

This standard will remain unchanged from 2018.
MHBE proposes to include this standard in the next update of the Carrier Reference Manual

Established Standard	Proposed 2019 Plan Certification Standard
<p>Special Enrollment Period (SEP) Verification: In 2018, MHBE will add verification requirements for SEPs due to loss of minimum essential coverage (MEC). MHBE will assess the results of the added verification to determine if verifications should be added to other SEPs.</p>	<p>This standard remains unchanged from 2018.</p>



QHP/SADP Offering Limitations/Meaningful Difference*

Established Standard	Proposed 2019 Plan Certification Standard
<p>SADP* Tier Limitation: SADPs may not offer more than one dental plan per product per tier</p>	<p>This standard will remain unchanged from 2018. MHBE proposes to include this standard in the next update of the Carrier Reference Manual</p>
<p>QHP Meaningful Difference Standard: MHBE adopts the FFM Meaningful Difference Standard as they pertain to standard plan variations</p>	<p>This standard will remain unchanged from 2018. MHBE proposes to include this standard in the next update of the Carrier Reference Manual</p>

*Stand-Alone Dental Plans



Network Type Categories*

Established Standard	Proposed 2019 Plan Certification Standard
<p>Network Category Expansion*: MHBE proposes, in line with the FFM proposal, to add a network breadth indicator on Maryland Health Connection Plan Shopping to denote a QHPs relative network coverage.</p> <p>MHC is able to deploy the following indicators for network breadth:</p> <ul style="list-style-type: none">- Broad- Standard- Basic- IDS (Integrated Delivery System)	<p>MHBE proposes the removal of this plan certification standard.</p>



Proposed 2019 Plan Certification Standard

Increased Access to the QHP Policy Contract:

MHBE proposes that issuers supply a URL that provides a direct link to each QHP's Summary Plan Document (SPD) on the QHP's SBC or a direct link to a webpage that hosts the issuer's SPDs. Issuers will reference the SPD in the box at the top of the first page of the Summary of Benefits and Coverage.



Proposed 2019 Plan Certification Standard

De minimus payments and termination:

MHBE proposes that issuers allow for a 2% de minimus range for monthly premium under payments, after effectuation, before a consumer is flagged for termination due to non-payment.



Standardized Benefit Design*

Established Plan Certification Standard	Proposed 2019 Standard
<p>Standardized Options: MHBE proposes to establish “standardized options” for the individual marketplace. Issuers participating on the individual marketplace must include, within their annual QHP product offerings, standardized options. These options will apply toward metal level limitation standards. This will be deferred for plan year 2018 but will be implemented on the Marketplace in plan year 2019. In 2017, MHBE will create a workgroup to help determine the scope of the standard, whether it be mandatory or optional, develop draft plans, and provide additional insight.</p>	<p><i>Please see Standardized Benefit Design Work Group</i></p>
<p>Prominent Display of Standardized Options: MHBE will create an indicator and filtering mechanism for standardized plans on Maryland Health Connection Plan Shopping User Interface.</p>	

2017 Standardized Benefit Design Work Group

Policy	Recommendation	Vote Record	Date of Vote
Marketplace Scope	Plan should not be standardized on the SHOP Marketplace.	SHOP – Consensus	04/27/2017
	Plans should be standardized on the Individual (IVL) Marketplace.	IVL – 5 yeas, 3 nays	11/9/2017
Metal Level Inclusion	Plans should be standardized at bronze, silver, and gold metal levels.	Consensus	11/9/2017
Existing QHP Rules	Existing QHP Rules should not be amended.	Consensus	06/15/2017
Included Benefits	The coverage categories in the Summary of Benefits and Coverage should be the standardized categories.	Consensus	06/29/2017
Excluded Benefits	Non-standard benefits may be offered if such benefits have a de minimus impact on EHB% of Premium	Consensus	08/24/2017
Extent of Cost-Sharing Standardization	Only in-network cost-sharing should be standardized	Consensus	07/27/2017
New-Market Entrants	The MHBE Board should utilize existing waiver authority to support new market entrants.	Consensus	11/9/2017

Next Steps

1. Release DRAFT 2019 Letter to Issuers on December 15, 2017.
2. Develop a summary document incorporating issuer feedback with MHBE response.
- Due January 8, 2018.
3. MHBE Board meeting on January 15 to adopt final proposed 2019 Plan Certification Standards.
4. Late January - 2019 FINAL Issuer Letter Released with Comments/Response Document.

Public Comments & Questions?

Please send comments or questions to mhbe.carriers@Maryland.gov