

Plan Management Stakeholder Committee

March 1, 2018



Welcome & Introductions

Committee Charter Approval

Feedback from the field



Committee
Charter



Committee
Members

- ✘ **March 1** - Renewals Debrief and Direction and 1095-A Results
- ✘ **May 3** - PayNow URL, SEP Loss of Minimum Essential Coverage, Proposed Regulation Review, 2019 SHOP Process and 2018 Legislative Session Impact
- ✘ **July 5** - Plan Certification Process and Renewal Timeline for 2019
- ✘ **September 6** - Open Enrollment Readiness
- ✘ **November 1** - Draft 2020 Plan Certification Standards

- ✦ Elizabeth Leo has joined the Department of Policy and Plan Management as the Partner Data Specialist
- ✦ The Manager of Plan Management position has been posted to MD Job Apps. The application period closes March 12, 2018.
- ✦ The Health Policy Analyst vacancy will be posted in coming weeks. The PMSC will be notified of the posting.

Plan Management



- ✦ February 20, 2018 – MHBE Board of Trustees determined an Open Enrollment Period for coverage beginning on January 1, 2019.
 - November 1, 2018 to December 15, 2018 with the option to extend.

- ✦ MHBE Staff presented two other options to the MHBE Board.
 - Option 1: October 15, 2018 to December 7, 2018
 - Option 2: November 1, 2018 to January 31, 2019

- ✦ February 1, 2018 – MHBE Policy and Plan Management met with issuer partners to review 2017 renewals processes.
- ✦ MHBE and issuers discussed successes, challenges, and opportunities for growth to improve current procedure.
- ✦ MHBE will release the draft report to the PMSC on March 5. PMSC Members are welcome to provide comment on the draft report. Please submit comment by March 15 to mhbe.publiccomments@Maryland.gov.



- ✦ 2018 MHBE Carrier Application now available on marylandhbe.com

- ✦ Due: July 2, 2018

- ✦ Supplemented by new attestations:
 - Network Adequacy
 - Provider Directory Availability



2018 Carrier
Application

SHOP



Background:

1. Proposed rule in the 2019 Notice of Benefit and Payment Parameters (not yet finalized) relaxes requirements on the Small Business Health Options Program Marketplaces. This added flexibility provides states with opportunities to implement SHOP Marketplaces that fit their needs.
2. Statutory requirement to establish a SHOP Marketplace under § 31-108(b)(13) of the Insurance Article

Total Enrollment: As of January 1- 150 active group & 923 covered lives

Contract Term: Option Year One – June 30, 2018

Goals:

1. Provide enrollment options to employers whose employees experience drastic rate increases in the individual marketplace.
2. Facilitate small group enrollment into SHOP QHPs through a streamlined process that reduces administrative burden and empowers employers.
3. Promote enrollment into SHOP QHPs to allow employers access to the Small Business Health Care Tax Credit.
4. Educate small group producers on the advantages of the SHOP and other options available to their clients.

- I. Provide detail on what a Direct Enrollment Model would like to the Board Chair and present to the MHBE Board at the April 9 session.
- II. MHBE will share the proposed Direct Enrollment Model to the PMSC for comment by March 7.
- III. Comments must be received by March 21 and sent to mhbe.publiccomments@Maryland.gov.
- IV. Provide the MHBE Board of Trustees with options on a permanent solution by September 30, 2018.

Policy



Sponsor: Senator Middleton

Category: Emergency Measure – Effective in 2018

Policy Goal: Premium Affordability

Provisions:

1. Directs the Maryland Health Benefit Exchange to apply for a 1332-Waiver.
2. Directs MHBE to establish a Health Care Access Program under the 1332-Waiver and promulgate regulation to implement the program.
3. The Health Care Access Program will provide reinsurance to issuers in the individual marketplace and an alternative premium subsidy structure.
4. The MHBE Fund is authorized to receive and provide funding for the Health Care Access Program.

Revenue:

1. Levies a new, state-based Health Insurance Premium Assessment (2.7% of all taxable premiums), effective January 1, 2019. Assessed on 2018 premiums. Collects health insurer windfall from the federal Health Insurance Tax moratorium for 2018.
2. Pass through Premium Tax Credits under a 1332 Waiver for Reinsurance.

Protect Maryland Health Care Act of 2018

Introduced: February 8, 2018

Sponsor: Senator Feldman

Category: Standard Measure – Effective for 2019 for filing in 2020.

Policy Goal: Reducing Uninsured/Expanding Marketplace

Provisions:

1. Establishes a Maryland Insurance Stabilization Fund.
2. Establishes a Down Payment Escrow Fund.
3. Assesses a payment on uninsured filer's (including uninsured members of the filer's household) for failing to maintain minimum essential coverage.
4. Leverages Maryland income tax filing processes as a vehicle to facilitate eligibility determinations for insurance affordability programs.
5. Provides uninsured filers the option to:
 - a. Opt-out Allow MHBE to determine the filer's (or members of the filer's household) eligibility for insurance affordability programs; and
 - b. Allow MHBE to use the filer's payment to facilitate the filer's (or members of the filer's household) enrollment into QHPs; or
 - c. Opt-in Have their payment sent to the Maryland Stabilization Fund.
(Default option if return is filed after April 15.)

6. Transfers payments to Down Payment Escrow Fund.
7. Directs MHBE to use payments to default enroll the uninsured into zero-cost coverage (with APTC) when available.
 - a. Provides rules for default enrollment – highest actuarial value, lowest out-of-pocket cost, lowest premium, and random allocation.
 - b. Sets options for MHBE to effectuate coverage – SEPs or Voluntary Election.
8. Directs MHBE to inform filers, who did not have zero-cost coverage options at filing, the amount of payment available to the filer before Open Enrollment.
9. Directs Comptroller to disburse payment funds to issuers on a monthly basis to facilitate continuous coverage. Mid-year termination of coverage cedes remaining payment funds to the Maryland Stabilization Fund.
10. Directs MHBE to default enroll filers who do not take action during Open Enrollment into QHPs.

11. Directs MHBE to reconcile down payment funds with issuers and the Comptroller monthly.
12. Directs MHBE to determine if filers unknown to MHBE have payment funds held in escrow by the Comptroller.
13. Directs MHBE to determine estimated payment liability to unknown filers if they did not obtain MEC during the calendar year.
14. Directs MHBE to work with the Comptroller to develop an insurance status verification system.

Revenues:

1. MHBE is authorized to use Maryland Stabilization Funds to fund program implementation costs.

Proposed Regulations Timeline

May 2018:

Present proposed regulation to the MHBE Board

July 2018:

Proposed Regulation published in MD Register

Formal comment process held

August 2018:

Public comments due from stakeholders

October 2017:

Staff review comments to respond to. Not incorporated at this time.

Will work further with stakeholders to address comments

December 2017:

Request approval of finalized regulation from Board

- **Chapter 7** – Rules that govern eligibility standards for enrollment in a qualified health plan (QHP), and a QHP with APTC and CSR.
- **Chapter 14** – Rules that govern terminations, cancellations, or rescissions of coverage in a QHP on the Marketplace.
- **Chapter 15** – Rules that detail the standards a carrier shall meet to be authorized to offer QHPs on Maryland Health Connection.
- **Chapter 16** – Rules that detail the standards a QHP shall meet to be certified and offered on Maryland Health Connection.

Questions or Comments?

Public Comments & Questions?

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