

2020 Legislatively Mandated Studies

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New Mandated Studies Due to the Legislature in 2020

1. July 15, 2020: Report on **enrollment** in Medicaid, MCHP, and QHPs with APTC that result from MEEHP for tax year 2019 filings (Joint Chairmen's Report)
2. Sept. 30, 2020: Report on 2019 **reinsurance** payments, updated forecast of spending and funding needs over the waiver period, and, if not all budgeted FY 2021 provider assessment funds are needed, the planned use of those funds in FY 2021 (Joint Chairmen's Report)
3. Dec. 1, 2020: Report that evaluates the appropriate future State **funding** level of MHBE (SB190 & Joint Chairmen's Report)
4. Dec. 1, 2020: Study of an individual **subsidy** program (HB196 / SB124)

Individual Subsidy Study – Specific Requirements

1. Experiences of state-based individual market subsidies in other states, particularly those with a reinsurance program;
2. Effect the Easy Enrollment Program has had on the uninsured rate and risk pool in the individual market;
3. Population that would be the target of the State-based individual market subsidies, including age and income level;
4. Number of individuals currently enrolled in the individual market who would be eligible for State-based subsidies;
5. If young adults would be the intended target of the State-based subsidies, whether State-based subsidies alone will encourage more young adults to enroll in the individual market and whether cost-sharing reductions will be necessary;
6. Average amount of individual market subsidies needed for a State-based subsidy program to effectively cover more individuals and lower the risk of the individual market pool;

Individual Subsidy Study – Specific Requirements

7. Amount of State-based individual market subsidy funding needed to reduce rates in the individual market by 1% and 5%;
8. Estimate of the impact that funding for State-based individual market subsidies will have on the availability of funds for reinsurance in the individual market, using actual State liability for the State Reinsurance Program for the 2019 benefit year;
9. Appropriate allocation of available funding for reinsurance and State-based individual market subsidies that will maximize enrollment and affordability in the individual market;
10. Staffing and infrastructure needs to administer a State-based individual market subsidy program; and
11. Impact additional State-based individual market subsidies will have on federal subsidies and whether the State will need to amend its current State Innovation Waiver under § 1332 of the Affordable Care Act or request an additional waiver.