

Indiana Department of Insurance

**Accident & Health
Company Compliance
Webinar**

February 20, 2013

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Agenda

- **FFE/EHB Requirements**
- **Major Medical QHP Filing**
- **New IDOI A&H Website**
- **Regulatory Requirements (Market Reforms)**

Federally Facilitated Exchange QHP Certification Requirements

State Requirements for QHP Certification in an FFE (Perform Plan-Level Review)	Federal Requirements for QHP Certification in an FFE (Perform Issuer-Level Review)
<p>IDOI Requirements:</p> <ul style="list-style-type: none">▪ EHB Benefit Standards▪ AV Standards Including Cost-Sharing▪ Discriminatory Benefit Design▪ Meaningful Difference Across QHPs▪ Reasonable Service Area▪ Rates and/or Forms▪ Marketing Material	<p>HHS Requirements:</p> <ul style="list-style-type: none">▪ Administrative Information▪ Licensure and in Good Standing▪ Network Adequacy▪ Essential Community Provider Inclusion▪ Accreditation▪ Quality Data▪ QHP Certification▪ QHP Monitoring/Oversight

Essential Health Benefits Package

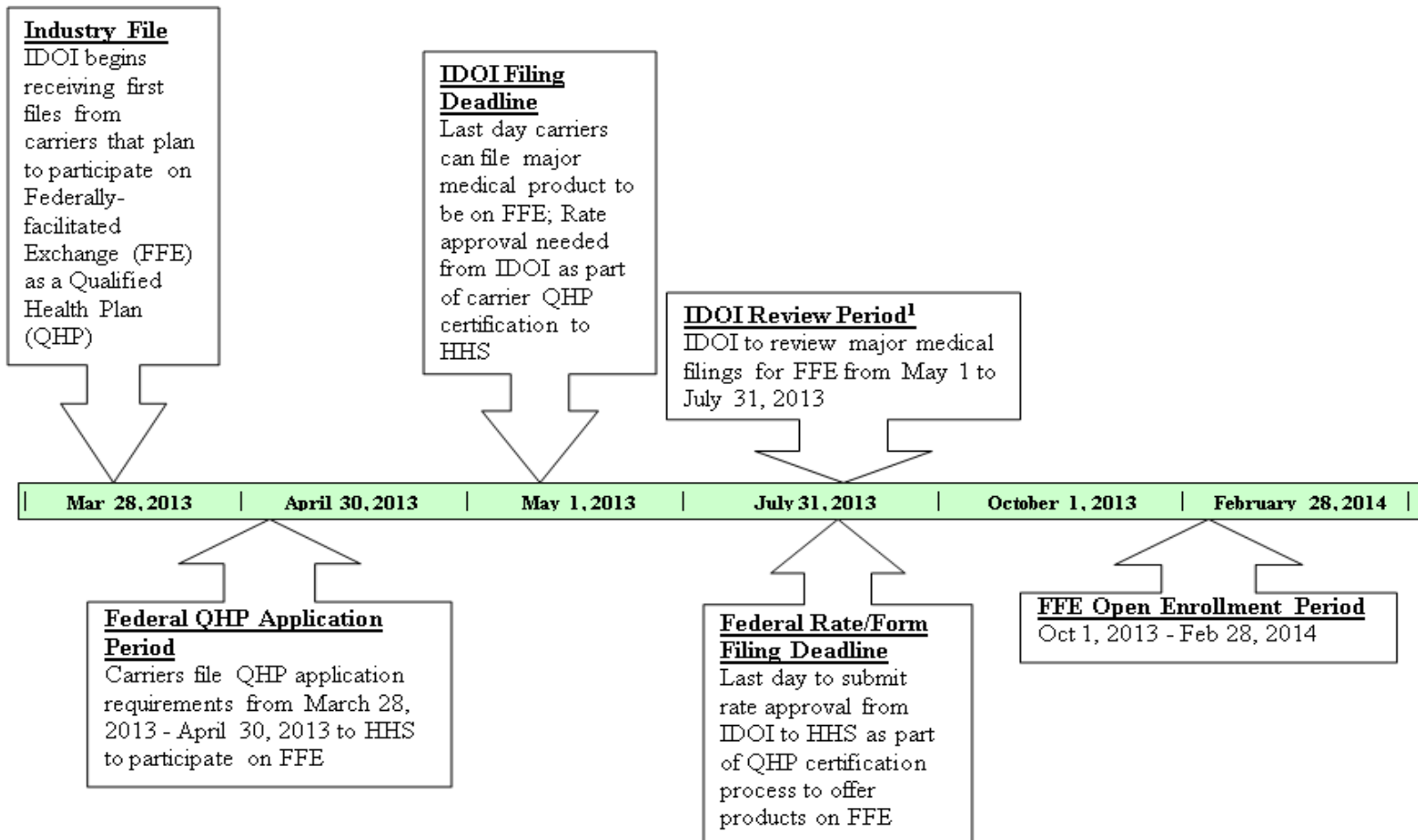
■ State EHB Package

- Anthem Blue Access PPO- Default Benchmark Plan
- State Required Benefits- Mandates
- FEDVIP MetLife PPO- Pediatric Dental
- FEDVIP Blue Vision PPO- Pediatric Vision

QHP Filing-SERFF Plan Management

- **SERFF Plan Management**
 - **Release end of March**
 - **SERFF & HIOS Filing Submission**
 - **QHP Application- Complete 9 Templates**
 - **Administrative Data Template**
 - **Essential Community Providers Template**
 - **Plans Benefits Template; Prescription Drug Template**
 - **Network Template; Service Area Template**
 - **Rate Template; Business Rules Template**
 - **Rate Review Template (Unified)**

QHP/NonQHP Major Medical Filing Timeline



¹Timeline applies to QHP and NonQHP, nongrandfathered major medical products filed.

Accident & Health Website

- **New IDOI A&H Website**

- www.in.gov/idoi/2771.htm

- **Website Overview**

- **SERFF Transition**

- **Historical Requirements and Checklists**

- **Submission Requirements for all Products- March 8 except for Nongrandfathered Major Medical**

- **Plan Management Submission Requirements- March 28 Nongrandfathered Major Medical**

Accident & Health Website cont.

■ Major Medical Filing Simulation

- Navigation Bar
- Form/Rate Requirements
- Attestations
- File proper TOI and Sub-TOI
- Small Group Definition- 2-50

■ Dental Plans

- FFE may have 5 Pediatric Stand-Alone Dental Plans

Essential Health Benefits

- EHB Website Section
- EHB Compliant Form Filings
- EHB Template vs. Certificate of Coverage
 - Review Certificate for Complete Benefit Information
 - EHB FAQ
 - EHB Substitutions not Allowed
 - Habilitation Services Covered at Parity with Rehabilitation Services

Unified Rate Review Template

- **Part I- Complete Unified Rate Review Template for All Rate Increases Above 0%**
- **Part II- Complete Narrative or Written Description (Required only for files that meet the subject to review threshold of 10%)**
- **Part III- Complete Actuarial Memorandum and Attestation for All Rate Increases Above 0%**
 - **Parts I-III are satisfied by completing the template and narrative, if applicable, in HIOS**

Summary of 2014 Market Reforms

- **Age Rating-** Limit age rating to 3:1 ratio as stated in the regulation.
- **Age Curve-** Uniform age curve as stated in the regulation. The department is proposing a modified curve with slightly higher children factors greater than 0.635 for ages 0-20.
- **Tobacco Rating-** Limit tobacco rating to no more than a 1.5:1 ratio as stated in the regulation.
- **Geographic Rating Areas-** 7 rating areas divided by counties.

Summary of 2014 Market Reforms cont.

- **Family Tiers-** Establish family tiers with cap of 3 members under the age of 21 that are rated as stated in the regulation. The department proposes a cap of 3 members through age 26 allowing higher factors for minors.
- **Premium Basis-** Rates calculated in small group market on per member basis as stated in the regulation.
- **Merging Markets-** Individual and small group markets will not be merged. Maintain separate risk pools.
 - Not Applicable to Grandfathered Health Plans, Self Funded, Excepted Benefits (Blanket/Other) or Individual Short-Term Limited Duration Coverage

Miscellaneous Filing Information

- Medicare Supplement- July 15 Filing Deadline
- EFT Required for All A&H Rates and/or Forms
Product Filings Fees Effective January 1, 2013

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