



Indiana Department of  
Insurance

# ACA Related Rate/Form Filing Industry Webinar

March 19, 2015

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# Agenda

- ▶ Overview of relevant ACA requirements and/or changes for the upcoming filing season
- ▶ Effective Rate Review State
- ▶ Market Reforms/Regulatory Requirements
- ▶ State Filing Requirement Updates for 2016
- ▶ ACA/EHB Requirements
- ▶ IDOI Filing Timeline
- ▶ QHP Filings-SERFF Plan Management
- ▶ IDOI Roles in the Plan Management Certification Process
- ▶ Miscellaneous Filing Requirements

# ACA Overview

# Changes for 2016

- ▶ Updated Guidance for ACA filings have come from the following sources:
  - 2016 Letter to Issuers
  - Notice of Benefit and Payment Parameters
  - Qualified Health Plan Templates
  - Final Revised URRT Template/Instructions
  - 2016 Actuarial Value Calculator

# 2016 Considerations for Rate and Form Development

- ▶ Numerous sources of additional guidance provided by CMS during the 2015 filing year
- ▶ 2016 Rate and form review process will be similar to the process utilized for 2015 with important changes which will be outlined within this webinar.
  - Do not submit a separate filing for child only policies – these are included within the filed form.
  - Redline copy of changes to forms should be included in SERFF
    - No changes to forms - only a Binder is needed

# 2016 Considerations Cont'd.

- ▶ Drug template
  - ALL drugs MUST be included in the drug template
- ▶ If the filing is > threshold
  - Submit Parts 1, 2, and 3 in HIOS
- ▶ HSA limits differ from out of pocket maximums
  - Plans filed that do not match HSA limits are not HSA eligible
  - Catastrophic plans are not HSA eligible
  - Reference [REGTAP FAQ](#)
- ▶ Trend must be factored within the proposed rate increase submitted in the Rate/Rule Schedule
- ▶ Experience Workbook is required on ALL renewal filings

# Effective Rate Review State

# Effective Rate Review State Requirements

- ▶ Indiana must receive sufficient data and documentation concerning rate increases to conduct an examination of the reasonableness of the proposed increases.
- ▶ Indiana must consider the factors below as they apply to the review:
  - Medical cost trend changes
  - Reasonableness of the rate increase
- ▶ Indiana must post either rate filings under review or preliminary justifications on our websites or post a link to the preliminary justifications that appear on the CMS website
- ▶ Indiana must provide a mechanism for receiving public comments on proposed rate increases
- ▶ Indiana must report results of rate reviews to CMS for rate increases subject to review



# Federal Market Reforms / Regulatory Requirements

# Recap of 2014-15 Market Reforms Applicable to 2016

## ▶ **Age Rating**

- 3:1 ratio as stated in the regulation

## ▶ **Age Curve**

- Uniform age curve as stated in the regulation
- Ensure that the maximum to minimum does not exceed 3.0
- Premiums **MUST** be rounded to 2 decimal points

## ▶ **Tobacco Rating**

- Maximum of 1.5 ratio over non-tobacco

## ▶ **Geographic Rating Areas**

- Reference IDOI Bulletin 197

# Recap of 2014 -15 Market Reforms (cont.)

## ▶ Family Tiers

- Premiums are limited to 3 for those dependents under age 21
- Must provide coverage to age 26

## ▶ Premium Basis

- Single Risk Pool

## ▶ Small Group composite rating

- Link to [Small Group Composite Premium Basis for Health Benefit Plans Issued on or after January 1, 2015](#)

# Review of Underlying Plan Features

## ▶ **Prescription Drugs**

- Prior Authorization
- Step Therapy
- Closer scrutiny for 2016 regarding discriminatory design.
- Closer review of tiering practices

## ▶ **Product and Plan definitions**

- Uniform modification
- 2016 Product level trigger

# Uniform Modifications

## ▶ Uniform Modification

- An issuer may, at the time of coverage renewal, make uniform modifications to a product, including modifying the cost sharing, provider network, and service area of a plan.
- A plan should be considered the same plan for purposes of review for unreasonable rate increases, plan identification in the Health Insurance Oversight System (HIOS), and other programs based on changes in these characteristics

## ▶ Plan-level modifications

- What constitutes the same or different plan
  - “Plan” means, with respect to an issuer and a product, the pairing of the health insurance coverage benefits under the product with a particular cost-sharing structure, provider network, and service area

## ▶ More Information

- Notice of Benefit and Payment Parameters Final Rule

# State Filing Requirement Updates for 2016

# Legislative Changes to Definition of Small Group

## ▶ **HB 1341**

- IC 27-8-15-14(b)
  - Provides for the Department of Insurance to adopt emergency rules to conform the definition of “small employer” to the federal definition under PPACA.

## ▶ **Federal Definition of Small Group §1304(b)**

- (2) **SMALL EMPLOYER.**—The term “small employer” means, in connection with a group health plan with respect to a calendar year and a plan year, an employer who employed an average of at least 1 but not more than 100 employees on business days during the preceding calendar year and who employs at least 1 employee on the first day of the plan year.

# Recap of Transitional Plans

- ▶ 2013
  - IDOI allowed early renewal of plans
  
- ▶ 2014 ([Indiana Bulletin 205](#))
  - Renewal must be an ACA compliant product
    - ACA Regulation corresponds with Indiana guidance
    - Indiana did not force carriers to cancel policies but gave carriers the option of continuing individual and small group plans through September 30, 2017
  
- ▶ 2016 Filing information
  - Rate Review Justification needs to be submitted
  - Increases > 10% need to also be submitted to HIOS
  
- ▶ 2016 Renewals
  - Able to retain transitional status regardless of small group definition changes
  - ALL transitional renewals must comply with the following:
    - No annual lifetime limits on EHBs
    - Dependent Age 26
    - Preventative Services



# ACA / EHB Requirements

# 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

# Essential Health Benefits Filing Requirements

- ▶ Templates
- ▶ EHB Plans and Binders
- ▶ EHB FAQ
- ▶ Habilitation Services and Devices Covered at Parity with Rehabilitation Services
  - Services are separate for rehab and hab
    - 20/20/20 PT/OT/ST for rehabilitative
    - 20/20/20 PT/OT/ST for habilitative

# IDOI Filing Timeline

# MAY 15, 2015

- ▶ Filing Deadline for the 2016 Benefit Year
- ▶ Applies to:
  - Non-grandfathered Major Medical
    - Individual and Small Group (SHOP)
      - Both **ON** and **OFF** the FFM
  - QHP Dental both **ON** and **OFF** the FFM

# Federal Filing Timeline in Indiana

Activity	Approximate Dates
Deadline for Issuers to Submit Plan Data to IDOI via SERFF	5/15/2015
IDOI reviews all QHP and Non-QHP filings ON and OFF the FFM	5/16/2015-8/24/2015
IDOI submits certification recommendations to FFM; Data locked down for all risk pools	8/25/2015
FFM Reviews Plan Data	8/26/2015
Open Enrollment	11/1/2015

# ACA Filings / SERFF and HIOS

# SERFF FILINGS

## ▶ SERFF Filings

- Streamlined Supporting documents
- Includes:
  - Required Rate Fields in SERFF
  - EHB Verification Template
  - Actuarial requirements
    - Experience Workbook
    - Actuarial Memorandum
    - IDOI Rate and Crosswalk Template
    - *URRT or Rate Review Justification*



# IDOI EHB VERIFICATION TEMPLATE

- Used instead of the Plans and Benefits Template for carriers only submitting off exchange plans
- Lists plan details for each plan
  - Formulary ID, metal level, AV,...

A	B	C	D	E	F	G	H	I
HIOS Issuer ID	Market Coverage	HIOS Plan ID (Standard Component)	Plan Marketing Name	Formulary ID	New/Existing Plan?	Plan Type	Level of Coverage	Unique Plan Design?

# IDOI EHB VERIFICATION TEMPLATE

- Compares product level benefits
  - Starts with a Base Benefit Package

Benefits	EHB	State-Required Benefit	Is this Benefit Covered?	Quantitative Limit on Service	Limit Quantity	Limit Unit	Minimum Stay	Exclusions	Benefit Explanation	EHB Variance Reason	Excluded from In Network MOOP	Excluded from Out of Network MOOP	(Product 1)
Primary Care Visit to Treat an Injury or Illness	Yes		Covered								No	No	
Specialist Visit	Yes		Covered								No	No	
Other Practitioner Office Visit (Nurse, Physician Assistant)	Yes		Covered								No	No	
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	Yes		Covered								No	No	
Outpatient Surgery Physician/Surgical Services	Yes		Covered								No	No	
Hospice Services	Yes		Covered								No	No	
Non-Emergency Care When Traveling Outside the U.S.													

# IDOI EHB VERIFICATION TEMPLATE

- Lists differences in benefits between the Base Benefit Package and each product's benefits

Excluded from In Network MOOP	Excluded from Out of Network MOOP	(Product 1)	(Product 2)	(Product 3)
No	No			
No	No			
No	No			
No	No			
No	No			
No	No			

# IDOI RATE and CROSSWALK TEMPLATE

- ▶ Does not replace the Rate template or the Crosswalk template
- ▶ Lists the age 21 non-tobacco rate for each plan by county
- ▶ Will lookup Rating Areas if the formula is filled down

IDOI Rate and Crosswalk Template										
<b>Instructions:</b> Please complete the following for every plan/county combination offered in each benefit year for all plans. Please also complete the Tobacco Factors sheet. The Standard Age Curve and Rating Areas sheets have been provided for your convenience. Please contact the IDOI at 317-232-2416 if you have any questions.										
Benefit Year 2015					Benefit Year 2016					
Plan ID	Metal Level	Service Area ID	Age 21 Non-Tobacco Rate	County	Rating Area (Fill down as needed.)	Plan ID	Metal Level	Service Area ID	Age 21 Non-Tobacco Rate	Rate Change due to Crosswalking (Fill down as needed.)
				Marion	Rating Area 10					
				Brown	Rating Area 13					
					#N/A					
					#N/A					
					#N/A					
					#N/A					

# IDOI RATE and CROSSWALK TEMPLATE

- ▶ Clearly shows the premium change felt by a consumer after crosswalking to the same or different plan
- ▶ The carrier may list the data in any order

IDOI Rate and Crosswalk Template										
<b>Instructions:</b> Please complete the following for every plan/county combination offered in each benefit year for all plans. Please also complete the Tobacco Factors sheet. The Standard Age Curve and Rating Areas sheets have been provided for your convenience. Please contact the IDOI at 317-232-2416 if you have any questions.										
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				Marion	Rating Area 10					
				Brown	Rating Area 13					
					#N/A					
					#N/A					
					#N/A					
					#N/A					

# IDOI RATE and CROSSWALK TEMPLATE

- ▶ Please complete the Tobacco Factors sheet

Age	Tobacco Factors for Benefit Year 2015	Tobacco Factors for Benefit Year 2016
0-17		
18		
19		
20		
21		
22		
23		
24		
25		

# IDOI RATE and CROSSWALK TEMPLATE

- ▶ We included the Standard Age Curve and the Indiana Rating Areas for your convenience

Age	Age Factor
0-17	0.635
18	0.635
19	0.635
20	0.635
21	1.000
22	1.000
23	1.000

County	Rating Area
Adams	Rating Area 3
Allen	Rating Area 4
Bartholomew	Rating Area 12
Benton	Rating Area 5
Blackford	Rating Area 8
Boone	Rating Area 10

# BINDER FILINGS

## ▶ BINDER filings

- Required by ALL filers, not just QHP
- More Information:
  - See SERFF Plan Management Instructions Page



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### My Binders

	Company Name	<input type="checkbox"/>	Market Type	◆	Binder Name	◆	State Tracking #	◆	Binder State Status	◆	SERFF Status	◆	Date Submitted
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# QHP and QDP Rate Filing

## ▶ **SERFF and HIOS Filing Submission**

- Carriers must file concurrently
- Both HIOS ID and HIOS submission tracking number are required on ALL filings

## ▶ **QHP Application**

- For certification of a plan as a QHP for the 2016 benefit year, issuers will be required to submit a complete QHP Application, including plans that were certified as QHPs for the 2015 benefit year
- Complete **ALL** 10 federal templates and the Indiana specific crosswalk
- All Major Medical plans **MUST** provide a copy of AV calculation pages for each plan

## ▶ **Binders**

- This year all ACA (not just QHP) filings will be using a binder submission

## ▶ **Templates**

- All templates must be submitted in SERFF as .xlsm files **AND** .xlm files

# Non- QHP Major Medical Rate Filing

## ▶ **SERFF & HIOS Filing Submission**

- Carriers must file concurrently
- Both HIOS ID and HIOS submission tracking number are required on ALL filings

## ▶ **Complete the following templates:**

- IDOI EHB verification template
- Prescription Drug Template
- URRT
- All Major Medical plans **MUST** provide a copy of AV calculation pages for each plan.
- Indiana specific crosswalk template – IDOI Rate and Crosswalk Template

# Unified Rate Review Template (URRT)

(This must be submitted as both .xlsm and .pdf)

## ▶ Part I

- All Rate Filings

## ▶ Part II

- Files that meet the subject to review threshold of 10%. The product filing requires Part II if any product in the filing equals or exceeds the 10% threshold increase.

## ▶ Part III

- All Rate Filings
- Parts I-III are satisfied by completing the template and narrative in HIOS

# **Roles in the Certification Process**

# Federally-facilitated Marketplace QHP Certification Requirements

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

# SERFF Filing Access

# SERFF FILING ACCESS

- ▶ Insurance company filings submitted electronically to the Indiana Department of Insurance are available online through the SERFF Filing Access (“SFA”) website at no cost.
- ▶ The SFA website allows users to search for and download filings made available in accordance with Indiana’s public access laws.
- ▶ Click the following link to access the SFA website:  
<https://filingaccess.serff.com/sfa/home/IN>

# Resources

Resource	Resources
<a href="#"><u>IDOI Industry Updates</u></a>	<a href="#"><u>2016 Notice of Benefit &amp; Payment Parameters Final Rule</u></a>
<a href="#"><u>IDOI A&amp;H Product Filing Information</u></a>	<a href="#"><u>SERFF Filing Access</u></a>
<a href="#"><u>IDOI Bulletins</u></a>	<a href="#"><u>Reference Documents</u></a>
<a href="#"><u>Data Templates</u></a>	<a href="#"><u>Webinar Slides</u></a>
<a href="#"><u>Registration for Technical Assistance Portal (REGTAP)</u></a>	<a href="#"><u>ACA Rate &amp; Form Filing Q&amp;A</u></a>
<a href="#"><u>CMS Regulations and Guidance</u></a>	<a href="#"><u>IDOI A&amp;H Rate Filing &amp; Plan Management Binder Information and Instructions</u></a>
<a href="#"><u>2016 Final Letter to Issuers</u></a>	



# Weekly Office Hours

- ▶ **Every Thursday during the month of April 2015**
  - 3:00pm EST
  - Call in: 605-475-4000
  - Passcode: 397597#
  
- ▶ **Questions received by 5:00pm EST on Tuesday will be addressed on Thursday's call**
  - [compliance@idoi.in.gov](mailto:compliance@idoi.in.gov)
  - Subject line requirement
    - Address whether question is “Rate” or “Form” related

# Webinar Slides

- ▶ **Today's webinar slides are available on the IDOI website at:**
  - [http://www.in.gov/idoi/files/IDOI\\_ACAWebinar\\_March\\_19\\_2015.pdf](http://www.in.gov/idoi/files/IDOI_ACAWebinar_March_19_2015.pdf)
- ▶ **The link can be found on:**
  - <http://www.in.gov/idoi/2812.htm>
    - (which is titled “Accident & Health Reference Documents”)

The background of the slide features the Indiana Department of Insurance logo, which consists of a central torch with a flame, surrounded by a circle of stars. The word "INDIANA" is written in an arc above the torch. The entire logo is set against a blue background with a subtle wave pattern.

**Contact**

**Indiana Department of  
Insurance**

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