

**State of California
Office of Administrative Law**

In re:
California Health Benefit Exchange

Regulatory Action:

Title 10, California Code of Regulations

Adopt sections: 6466

Amend sections:

Repeal sections:

**NOTICE OF APPROVAL OF EMERGENCY
REGULATORY ACTION**

**Government Code Sections 11346.1 and
11349.6**

OAL Matter Number: 2021-0329-01

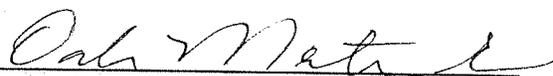
OAL Matter Type: Emergency (E)

This emergency rulemaking action by the California Health Benefits Exchange adopts a regulation to implement the healthcare subsidy provision of Proposition 22 (November 3, 2020).

OAL approves this emergency regulatory action pursuant to sections 11346.1 and 11349.6 of the Government Code.

This emergency regulatory action is effective on 4/8/2021 and, pursuant to Business and Professions Code section 7466(b), will expire on 4/8/2023. The Certificate of Compliance for this action is due no later than 4/7/2023.

Date: April 8, 2021



Dale P. Mentink
Attorney IV

For: Kenneth J. Pogue
Director

Original: Peter Lee, Executive Director
Copy: Courtney Leadman

NOTICE PUBLICATION/REGULATIONS SUBMISSION

STD. 400 (REV. 10/2019)

EMERGENCY

For use by Secretary of State only

OAL FILE NUMBERS	NOTICE FILE NUMBER Z-	REGULATORY ACTION NUMBER	EMERGENCY NUMBER 2021-0329-01E
For use by Office of Administrative Law (OAL) only		2021 MAR 29 A 11:52 OFFICE OF ADMINISTRATIVE LAW	
NOTICE		REGULATIONS	

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

APR 08 2021

1:30 P.M.

AGENCY WITH RULEMAKING AUTHORITY Covered California	AGENCY FILE NUMBER (if any)
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A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE	TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE <input type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER (Optional)
OAL USE ONLY <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	NOTICE REGISTER NUMBER	PUBLICATION DATE	

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Average Statewide Monthly Premium	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S) N/A
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2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)	ACTION ON PROPOSED NOTICE
ACTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	<input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn
TITLE(S) 10	ADOPT 6466
	AMEND
	REPEAL

3. TYPE OF FILING	<input type="checkbox"/> Regular Rulemaking (Gov. Code §11346) <input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4) <input checked="" type="checkbox"/> Emergency (Gov. Code, §11346.1(b))		
	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute. <input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)		
	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h)) <input type="checkbox"/> File & Print <input type="checkbox"/> Other (Specify) _____		
	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100) <input type="checkbox"/> Print Only		

DM
per agency request
4/8/21

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)
<input type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a)) <input checked="" type="checkbox"/> Effective on filing with Secretary of State <input type="checkbox"/> \$100 Changes Without Regulatory Effect <input type="checkbox"/> Effective other (Specify) _____

6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY
<input type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660) <input type="checkbox"/> Fair Political Practices Commission <input type="checkbox"/> State Fire Marshal <input type="checkbox"/> Other (Specify) _____

7. CONTACT PERSON Courtney Leadham	TELEPHONE NUMBER (916) 281-2562	FAX NUMBER (Optional)	E-MAIL ADDRESS (Optional) courtney.leadham@covered.ca.gov
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8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

NATURE OF AGENCY HEAD OR DESIGNEE 	DATE March 18, 2021
TYPED NAME AND TITLE OF SIGNATORY Peter V. Lee, Executive Director	

For use by Office of Administrative Law (OAL) only
ENDORSED APPROVED
APR 08 2021
Office of Administrative Law

Title 10. Investment

Chapter 12. California Health Benefit Exchange

Article 4. General Provisions

§ 6466. Average statewide monthly premium.

(a) On or before each September 1, Covered California shall publish the average statewide monthly premium for an individual for the following calendar year for a Covered California bronze health insurance plan on its public website.

(b) For purposes of this section, the "average statewide monthly premium" published pursuant to subdivision (a) for the calendar year subsequent to each September 1, means the average statewide bronze premium calculated when determining California's Individual Shared Responsibility Penalty pursuant to section 61015, subdivision (a)(2) of the Revenue and Taxation Code multiplied by the average age rating factor for individuals enrolled in Covered California in the prior calendar year.

(c) For purposes of this section, "average age rating factor" means the age rating curve established by the federal Centers for Medicare and Medicaid Services pursuant to Section 2701(a)(3) of the federal Public Health Service Act (42 U.S.C. Sec. 300gg(a)(3)), weighted by the average age of all enrollees in Covered California qualified health plans in the individual market.

Note: Authority cited: Section 100504, Government Code; Sections 7454 and 7466, Business and Professions Code. Reference: Sections 7454 and 7466, Business and Professions Code; Section 61015, Revenue and Taxation Code.