



**PLAN MANAGEMENT ADVISORY GROUP**

January 10, 2019

# WELCOME AND AGENDA REVIEW

ROB SPECTOR, CHAIR  
PLAN MANAGEMENT ADVISORY GROUP

# AGENDA

## AGENDA

### Plan Management and Delivery System Reform Advisory Group Meeting and Webinar

Thursday, January 10, 2019, 10:30 a.m. to 12:30 p.m.

Webinar link: <https://attendee.gotowebinar.com/rt/4171897155750816770>

- |                                   |                         |
|-----------------------------------|-------------------------|
| I. Welcome and Agenda Review      | 10:30 - 10:35 (5 min.)  |
| II. 2019 Plan Advisory Membership | 10:35 - 10:50 (15 min.) |
| III. Certification Update         | 10:50 - 11:15 (25 min.) |
| IV. 2020 Benefit Design           | 11:15 - 12:15 (60 min.) |
| V. Open Forum                     | 12:15 – 12:30 (15 min.) |

# 2019 PLAN ADVISORY MEMBERSHIP

JAMES DEBENEDETTI, DIRECTOR  
PLAN MANAGEMENT DIVISION

# PLAN MANAGEMENT ADVISORY GROUP

## 2019 MEMBERSHIP

### **David Brabender**

Independent Health Insurance Agent  
Legislative Chair, Sacramento Association of  
Health Underwriters

### **Douglas Brosnan**

Emergency Room Physician  
Sutter Roseville Medical Center  
Director of Provider Relations, CEP America

### **Mary June Flores**

Senior Policy and Legislative Advocate  
Health Access California

### **Jen Flory**

Policy Advocate  
Western Center on Law & Poverty

### **Amy Frith**

Manager, Strategic Clients, Account Management  
Health Net of California

### **John Newman**

Executive Director, California Exchange Operations  
Kaiser Permanente

### **April Martin**

Director, Managed Care  
Dignity Health

### **Robert Oreilly**

Vice President, Government Contracts  
Molina Health Plan

### **Cary Sanders**

Senior Director, Federal Policy  
California Pan-Ethnic Health Network

### **Robert Spector**

Area Vice President, Covered California Health  
Insurance Exchanges  
Blue Shield of California

# 2020 QUALIFIED HEALTH PLAN CERTIFICATION POLICY

MEILING HUNTER, LEAD CERTIFICATION PROGRAM SPECIALIST  
PLAN MANAGEMENT DIVISION

# QUALIFIED HEALTH PLAN AND QUALIFIED DENTAL PLAN CERTIFICATION

Plan Year 2020 Qualified Health Plan (QHP) and Qualified Dental Plan (QDP)

Certification Applications open to:

- All licensed health plan carriers.

## **Currently Contracted Applicants**

- For Sections 1-17, QHP and QDP Carriers contracted for Plan Year 2019 will continue to complete a simplified Certification Application for Plan Year 2020.
- For Sections 18-19, there are five new Quality and QIS questions. These questions will better align the application process with Attachment 7.

# PUBLIC COMMENT

- We received 91 public comments for all four applications.
- Approximately one-third of the comments were technical in nature: question numbering issues, word count, formatting, and updates to section instructions.
- We received numerous positive comments throughout the Quality and QIS sections regarding the newly added questions.
- Please see the accompanied attachment “Public Comment Summary” which represents comments concerning or resulting in Application content changes.



# PROPOSED CERTIFICATION MILESTONES

Release draft 2020 QHP & QDP Certification Applications	December 2018
Draft application comment period	December 14 – 28, 2018
Plan Management Advisory: Benefit Design & Certification Policy recommendation	January 2019
January Board Meeting: Discussion of Benefit Design & Certification Policy recommendation	January 17, 2019
Letters of Intent Accepted	February 1 -15, 2019
February Board Meeting: Approval of 2020 Patient-Centered Benefit Plan Designs & Certification Policy	February 21, 2019
<b>Final AV Calculator Released*</b>	February 2019
<b>Applicant Trainings (electronic submission software, SERFF submission and templates*)</b>	February 20-28, 2019
QHP & QDP Applications Open	March 1, 2019
March Board Meeting: Approval of 2020 Patient-Centered Benefit Plan Designs & Certification Policy (if February meeting is cancelled)	March 14, 2019
QHP Application Responses (Individual and CCSB) Due	May 1, 2019
Evaluation of QHP Responses & Negotiation Prep	May - June 2019
QHP Negotiations	June 2019
QHP Preliminary Rates Announcement	July 2019
<b>Regulatory Rate Review Begins (QHP Individual Marketplace**)</b>	July 2019/TBD
QDP Application Responses (Individual and CCSB) Due	June 1, 2019
Evaluation of QDP Responses & Negotiation Prep	June – July 2019
QDP Negotiations	July 2019
CCSB QHP Rates Due	July 24, 2019
QDP Rates Announcement (no regulatory rate review)	August 2019
Public posting of proposed rates	July 2019
Public posting of final rates (per CCIIO's proposed rate filing timeline)	September – October 2019

\* Final SERFF template dependent on CMS release

\*\* TBD = dependent on CCIIO rate filing timeline requirements

# 2020 BENEFIT DESIGN

ALLIE MANGIARACINO, SR. MARKET INSIGHTS ANALYST  
PLAN MANAGEMENT DIVISION

# UPDATE ON 2019 DENTAL COPAYMENT SCHEDULE

The 2019 Dental Copayment Schedule was presented in draft at the March 2018 Board Meeting. The final 2019 Dental Copayment Schedule will be presented to the Board this month with the updated 2019 CDT codes.

- D1354 - Interim caries arresting medicament application - per tooth (Pediatric and Adult - No Charge)
- D4275 - Non-autogenous connective tissue graft procedure (including recipient site and donor material) – first tooth, implant or edentulous tooth position in same graft site (Pediatric – Not Covered, Adult - \$190)
- D6096 - Remove broken implant retaining screw (Pediatric – \$60, Adult - Not Covered)

# 2020 BENEFIT DESIGN WORKGROUP UPDATE

- The workgroup convened for four meetings this fall/winter to discuss various policy items and proposals for the 2020 health and dental benefit designs.
- OMB has not released the 2020 Notice of Benefit and Payment Parameters (NBPP) and Draft AV Calculator (AVC).
  - The workgroup has deferred discussions on cost-sharing changes until the new AVC is available.
  - Timing of the NBPP/AVC release is uncertain and dependent on a budget agreement and end of the government shutdown.
  - The next workgroup meeting will be held on Monday, January 14th.

# 2020 BENEFIT DESIGN WORKGROUP UPDATE

## Health Benefit Designs

### Copay-only plan

- **Under discussion:** Should Covered California include a new Silver plan in the Standard Benefit Plan Design (SBPD) that does not have a deductible and only copays, i.e. “Copay-only plan”?
  - Currently awaiting the Draft 2020 AVC to model cost shares and determine feasibility
  - Considering whether the copay-only plan would be:
    - The single standard Silver
    - A required additional plan offered with the current Silver
    - An optional “add-on” plan
    - An optional plan in lieu of the current standard Silver

### Cost-sharing and impacts to MHPAEA testing

- **Under discussion:** To the extent possible, how can Covered California prevent cost-sharing deviations resulting from MHPAEA testing and the SBPD? Options discussed include:
  - Changing outpatient surgery cost-sharing to a copay (not recommended)
  - Changing mental health/substance use “other items and services” to coinsurance and moving some services in “other items” to “office visits”
  - Make no changes

# 2020 BENEFIT DESIGN WORKGROUP UPDATE

## Health Benefit Designs

### Blue Shield's Preferred Pharmacy Design Proposal for CCSB Trio Plans

- **Recommendation:** Grant exception to Blue Shield to include a preferred pharmacy network in its CCSB Trio plan, in alignment with the rest of Blue Shield's small business plans

# 2020 BENEFIT DESIGN WORKGROUP UPDATE

## Dental Benefit Designs Update

### Pediatric AV Limit

- **Recommendation:** Expand the de minimis range of the pediatric AV to -2/+5%. Evaluate annual dental trend and premium impacts and update AV limits as necessary.

### CDT Update Timing issue

- **Recommendation:** Finalize the copay schedule at the time of Board approval. Dental carriers will work with providers to reconcile new codes with the approved old codes for reimbursement and/or implement CDT mapping.

### Inclusion of adult orthodontia benefit in the Family Dental Plan

- **Under discussion:** Currently considering dental carrier feedback related to projected premium impact, copay amounts, inclusion as a required or optional benefit.
  - Should the adult orthodontia benefit be a required benefit or optionally offered by carriers?
  - Should it be required for DHMOs only, or both DHMOs and DPPOs?
  - What would be the member cost share for adult orthodontia?

# BENEFIT DESIGN CONTINGENCY PLANNING

The delayed release of the 2020 Payment Parameters and Draft AV Calculator raises the question of whether Covered California, issuers, and stakeholders should consider contingency plans for designing benefits now and in future years. Issues to consider include:

- What is the latest date possible to finalize benefits to allow Certification Applicants enough time to design products, set pricing, and apply to the Exchange?
- Should Covered California use the prior year's AVC (assuming the same increase in AV by metal tier) to set the preliminary benefit designs and update as necessary when the new AVC is released?
- Legal and regulatory implications of a major delay
- Changes to the Board meeting schedule to account for delayed timeline



# OPEN FORUM AND NEXT STEPS

ROB SPECTOR, CHAIR  
PLAN MANAGEMENT ADVISORY GROUP