

**Plan Certification Subgroup
Meeting Summary
May 30, 2012**

I. Welcome and Preview of the Agenda

Ms. Katie Burns welcomed members to the plan certification subgroup and provided an overview of the agenda.

II. Scope and Timeline for Recommendations

Ms. Burns discussed the overall scope of the subgroup and the timeline for recommendations.

- Generally, the subgroup is to develop understanding of federal criteria for certifying qualified health plans (QHPs) to be sold on the Exchange as well as understand how current state statutes and rules relate to those certification requirements.
- The subgroup will subsequently consider whether and how to build upon federal certification requirements in the future.
- The Exchange Advisory Task Force adopted a recommendation that the same market rules should exist inside and outside the Exchange. If that principle moves forward, QHP certification requirements would apply across the entire individual and small group insurance markets.
- This subgroup will provide information and recommendations to the Adverse Selection Workgroup, which will in turn report up to the Exchange Advisory Task Force. Ms. Burns discussed the need for a quick turnaround to provide carriers clarity on QHP standards so that carriers can develop QHPs to be sold on the Exchange beginning in October 2013. Ms. Burns suggested the group present its recommendations to the Adverse Selection Workgroup by the end of August or early September 2012.

III. Overview of Federal Certification Requirements

Ms. Burns provided an overview of federal certification requirements both for issuers and QHPs. These include issuer requirements for state licensure, restrictions on rating variations, quality measurement and accreditation requirements, marketing standards, risk adjustment standards, and nondiscrimination requirements. At the plan level, QHP's must observe premium and rate adjustment requirements, network adequacy standards and provisions related to essential community providers, enrollment and termination standards, and benefit design standards.

The work group reflected on these requirements and offered the following comments and concerns:

- Work group members suggested two additional topics for consideration: 1) What opportunities for simplification should be considered in light of ACA market reforms and QHP certification (for example, continuation and conversion requirements)?; and 2) Will tribes be able to contract using a Tribal Addendum?
- In light of the Exchange Advisory Task Force recommendation on market rules referenced above, work group members noted there was ambiguity around

whether the same products would need to be sold inside and outside the Exchange. Some members expressed concern that if carriers are required to offer the same products both inside and outside of the exchange, innovation may be limited.

- Work group members discussed what assumptions and details are incorporated into rate filings.
- Several members had comments about the network adequacy requirements including questions about what constitutes a “sufficient number” of providers and what the notification requirements to enrollees should be when providers (especially major systems and hospitals) leave a network. Work group members noted that updating of provider network information should be considered as part of the QHP certification process. Ms. Armstrong noted that the state already has some continuity of care requirements allowing certain patients to remain with providers while they are actively under treatment. Other discussion points included a reference to CMS Medicare standards and the need for flexibility in rural areas as well as the size of service areas.
- Ms. Burns noted that, for purposes of the federally facilitated exchange, insurers would need to attest they have begun the accreditation process in order to meet the accreditation requirement in 2014. Minnesota will need to set a timeline by which accreditation must be obtained.
- Members had several questions about certification and decertification processes. Some members were concerned about whether the state will adopt a streamlined recertification process for issuers who want to keep the same products on the market. Other members raised questions about the degree of change that would be permitted in order for a product to be considered “the same” from year to year. Some members were concerned that small adjustments to plan designs may trigger a full certification process, burdening both issuers and regulators.
- Ms. Armstrong was concerned that the disenrollment procedures for decertified plans (or those who don’t seek recertification) may conflict with the state’s requirements that the plan be guaranteed renewable.

IV. Wrap up and Next Steps

Ms. Burns noted the Exchange will prepare a working document that compares federal QHP requirements to existing state laws and rules on similar topics. That document will serve as the basis for discussion at this subgroup’s next meeting. After reviewing and discussing this working document at its next meeting, subgroup members will also determine how to prioritize among numerous potential topic areas.

Ms. Burns suggested that the group consider either longer or more frequent meetings in order to finalize a recommendation to the adverse selection group by the Fall. She will be forwarding suggested meeting times to members for their consideration within the next few days.