



2019 NOTICE OF BENEFIT & PAYMENT PARAMETERS

Summary of Final Regulatory Changes

Beth Deines & Molly McClurg

April 23, 2018

Notice and Comment Rulemaking

October 27, 2017: Proposed Regulations released.

November 27, 2018: Connect for Health Colorado submitted public comments.

April 17, 2018: Final regulatory changes released.

June 18, 2018: Rules become effective, with flexibility for states that need to make technological changes in order to comply.

State Options for Flexibility and Innovation

- HHS sought comments on how to facilitate State flexibility and innovation.
- No new requirements were finalized.
- HHS will continue to explore avenues for supporting State flexibility and encouraging innovation.

Increased Flexibility for SHOP

- SHOPs are not required to perform employee eligibility, premium aggregation, or enrollment functions.
- The FF-SHOP will cease these functions, SBM-SHOPs can choose to continue or stop operations.
- If a SHOP decides not to perform enrollment functions, enrollment will take place through Carriers directly, or with the assistance of Brokers.

Navigator Program Standards

- Finalized rule removes requirements around types of Navigator entities, physical presence within the area served, and number of entities with whom Exchanges must contract.
- The rule was finalized as proposed, but does not impact Connect for Health Colorado or the assistance it provides.
- Connect for Health Colorado will continue to work to achieve its mission through its Navigator program and through other assistance and insurance literacy programs.

Changes to Special Enrollment Periods

- The final rule contains a series of new regulations that clarify how Special Enrollment Period Metal Tier Limitations apply to various household members.
- Removes Metal Tier Limitations from the Plan Display Error SEP (45 CFR 155.420(d)(12)).

Prior Coverage Requirements

- The final rule exempts qualified individuals who have lived in service areas where no QHP was offered through an Exchange during their most recent enrollment period from prior coverage requirements.
- For SEPs that require proof of prior coverage (for example, permanent move or marriage), individuals who have lived in a rating area where no QHP was offered through an Exchange will not be required to provide proof of prior coverage.
- Please note that there are no bare counties in Colorado for the 2018 plan year.

Other Technical Changes

- Numerous changes were made to verification requirements, special enrollment periods, coverage effective dates, and how terminations can take place. Details regarding these changes can be found in the attached table.
- NES is anticipated to ease our ability to incorporate needed changes.
- Implementation will be handled on a rolling basis.

QUESTIONS?