Access Health CT

Health Plan Benefits & Qualifications (HPBQ) Advisory Committee

January 24, 2018



Today's Agenda

- A. Call to Order and Introductions
- B. Public Comment
- C. Certification Requirements
 - Certification Review Schedule
 - Recap of HPBQ AC Meeting and AHCT Board of Directors (BOD) Meeting
 - AHCT Direction: Individual Market (Votes if necessary)
 - Stand-alone Dental Plan (SADP) Plan Mix & Standardized Plan (Vote if necessary)
- D. Next Steps
- E. Adjournment



Public Comment (2 Minutes per Commenter)



Certification Requirements



Certification Review Schedule

Certification Review Topics	2017/2018 Discussion Date	Status		
Requirement to submit Standardized Plan Designs	September & October	Completed		
Plan Mix (Standard/Non-Standard Plan Offerings)	September & October	Outstanding Items		
Pediatric Dental Coverage in Medical Plans	September & October	Pending additional review		
Lowest Cost Silver Plan in the Individual Market	September & October	Pending additional review		
Essential Health Benefits (EHB) Benchmark Plan	November			
Prescription Drug Formulary Standards	November	Completed		
Network Adequacy Standards	November	Completed		
Essential Community Provider (ECP) Contracting Standards	November			
Tobacco Surcharge	December			
Broker Compensation	December	Completed		
Certification Requirements Policy	December - January			
Standardized Plan Development - Medical	December – February	Scheduled (12/13/17, 1/10, 1/24 & 2/7/18)		
Plan Mix – SHOP	January	Completed		
Plan Mix – Stand-Alone Dental Plans (SADPs)	January - February	Scheduled (1/10/18, 1/24/18,		
Standardized Plan Development – SADP	January - February	2/7/18)		

Recap of HPBQ AC Meeting (January 10, 2018)

Topic	Notes
SHOP Plan Mix	No change in number of non-standard plans for submission
Tobacco Surcharge	Move forward with surcharge
Broker Compensation	No change in requirement
Certification Requirements Policy	Technical change to document needed (i.e., change in contact information)
Stand-Alone Dental Plan (SADP) Plan Mix & Standardized Plan Design	Additional discussion needed within HPBQ AC



Recap of AHCT Board of Directors (BOD) Meeting (January 18, 2018)

- Discussion on certification requirements for 2019:
 - Approach in design of standardized plans
 - Continuing to permit non-standard Silver plans in the Individual Market
 - Continuing to require that the lowest cost Silver plan submitted in the Individual Market be the AHCT standardized plan



Feedback during discussion:

- Be sensitive to non-subsidized population
- Ensure enrollees have option for low cost plan in accordance with AHCT Mission (i.e., increase the number of insured residents)
- Prescription Drug coverage: consider amount of deductible & impact on vulnerable population / medication compliance
- Enrollee cost sharing for services subject to coinsurance may be less than those with copay
- Explore network options
- Determine if Value-Based Insurance Design (VBID) approach can be incorporated
- Total cost of care should not be confused with premium impact
- Bring value to plans
- Connecticut Insurance Department (CID) could extend rate/form filing deadline beyond
 5/1/18
- Consider needs of carriers

2018 Rate Summary for Individual Market "On-Exchange" and "Off-Exchange" Plans

			COUNTY									
			Fairfield	Hartford	Litchfield	Middlesex	New Haven	New London	Tolland	Windham	Rates	
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Table outlines the sequential order for "On-Exchange" vs. "Off-Exchange" plans by monthly premium cost for each metal level in each county

Bronze Plans: 14 plans filed

Silver Plans: 16 plans filed

Gold Plans: 5 plans filed

NOTE: Monthly premium cost of plan is only one component to consider in health insurance plan selection



2018 'On-Exchange' Bronze Plan Rates & Enrollment

		Fairf	ield	Hart	ford	Litchfi	ield	Midd	lesex	New	Haven	New L	ondon	Toll	and	Wind	dham		
Issuer	Plan Name	Age 46 Rate	Enrollment	Total Enrollment	Percent Bronze Enrollment														
СВІ	Choice Bronze Standard POS HSA	\$441.65	6,246	\$358.86	4,465	\$396.02	1,217	\$390.06	1,088	\$404.22	3,683	\$412.91	570	\$406.47	525	\$406.47	246	18,040	45.02%
Anthem	Bronze High Deductible HMO Pathway X Enhanced	\$451.13	198	\$393.72	62	\$381.41	126	\$422.42	14	\$422.42	87	\$381.41	151	\$381.41	77	\$381.41	49	764	1.91%
СВІ	Passage Bronze Alternative PCP POS	\$452.82	371	\$367.95	682	\$406.04	78	\$399.93	76	\$414.44	353	\$423.35	37	\$416.75	61	\$416.75	29	1,687	4.21%
Anthem	Bronze HMO Pathway X Enhanced for HSA	\$472.29	372	\$412.19	257	\$399.30	163	\$442.23	68	\$442.23	355	\$399.30	263	\$399.30	93	\$399.30	84	1,655	4.13%
Anthem	Bronze HMO Pathway X Enhanced	\$490.80	329	\$428.34	192	\$414.96	91	\$459.57	32	\$459.57	309	\$414.96	155	\$414.96	62	\$414.96	49	1,219	3.04%
Anthem	Bronze PPO Standard Pathway X for HSA	\$493.32	811	\$430.53	336	\$417.08	212	\$461.93	68	\$461.93	445	\$417.08	393	\$417.08	111	\$417.08	95	2,471	6.17%
СВІ	Choice Bronze Standard POS	\$496.31	2,992	\$403.28	2,121	\$445.02	362	\$438.33	519	\$454.25	1,569	\$464.00	171	\$456.77	185	\$456.77	92	8,011	19.99%
Anthem	Bronze PPO Standard Pathway X	\$503.24	1,757	\$439.19	671	\$425.46	609	\$471.21	202	\$471.21	1,500	\$425.46	823	\$425.46	359	\$425.46	306	6,227	15.54%
	Total Enrollees		13,076		8,786		2,858		2,067		8,301		2,563		1,473		950	40,074	
Percent	of Bronze Enrollment		32.63%		21.92%		7.13%		5.16%		20.71%		6.40%		3.68%		2.37%		



Bronze Plan Illustration: Reduce Standardized Plan Rates by 15%

		Fairfield	Hartford	Litchfield	Middlesex	New Haven	New London	Tolland	Windham
Issuer	Plan Name	Age 46 Rate							
СВІ	Choice Bronze Standard POS	\$496.31	\$403.28	\$445.02	\$438.33	\$454.25	\$464.00	\$456.77	\$456.77
	Reduce by est 15%	\$421.86	\$342.79	\$378.27	\$372.58	\$386.11	\$394.40	\$388.25	\$388.25
	Compare to lowest cost Bronze premium	95.52%	95.52%	99.18%	95.52%	95.52%	103.41%	101.79%	101.79%
	Dollar diff for age 46	-\$19.79	-\$16.07	-\$3.14	-\$17.48	-\$18.11	\$12.99	\$6.84	\$6.84
Anthem	Bronze PPO Standard Pathway X	\$503.24	\$439.19	\$425.46	\$471.21	\$471.21	\$425.46	\$425.46	\$425.46
	Reduce by est 15%	\$427.75	\$373.31	\$361.64	\$400.53	\$400.53	\$361.64	\$361.64	\$361.64
	Compare to lowest cost Bronze premium	96.85%	104.03%	94.82%	102.68%	99.09%	94.82%	94.82%	94.82%
	Dollar diff for age 46	-\$13.90	\$14.45	-\$19.77	\$10.47	-\$3.69	-\$19.77	-\$19.77	-\$19.77





Discussion



2018 'On-Exchange' Gold Plan Rates & Enrollment

		Fair	field	Hart	ford	Litch	field	Midd	lesex	New	Haven	New L	ondon	Toll	and	Windh	am		
Issuer	Plan Name	Age 46 Rate	Enrollment	Total Enrollment	Percent Gold Enrollment														
СВІ	Choice Gold Standard POS	\$787.47	1,931	\$639.87	1,584	\$706.11	432	\$695.51	403	\$720.74	1,126	\$736.22	170	\$724.76	188	\$724.76	90	5,924	66.58%
Anthem	Gold HMO Pathway X Enhanced	\$800.49	284	\$698.61	155	\$676.77	144	\$749.55	47	\$749.55	298	\$676.77	165	\$676.77	87	\$676.77	47	1,227	13.79%
Anthem	Gold PPO Standard Pathway X	\$1,048.20	717	\$914.81	251	\$886.22	146	\$981.50	46	\$981.50	299	\$886.22	166	\$886.22	54	\$886.22	68	1,747	19.63%
	otal Enrollees		2,932		1,990		722		496		1,723		501		329		205	8,898	
Percer	t of Gold Enrollment		32.95%		22.36%		8.11%		5.57%		19.36%		5.63%		3.70%		2.30%		

Non-standard Gold plan (HMO) is appx 24% lower in premium than the standardized plan offered by that same carrier





Discussion



Stand-Alone Dental Plan (SADP)

Current CMS Requirements

Provide benefits in accordance with State's Essential Health Benefit (EHB) Benchmark plan

Must comply with either a "High" or "Low" Actuarial Value*

Must include maximum out-of-pocket (MOOP) for children under age 19**

Final NBPP may not be released until February/March, so status of these elements is pending for 2019 plan year



^{*}Proposed HHS Notice of Benefit and Payment Parameters (NBPP) for 2019 was released 10/27/17 & outlines a potential change regarding this requirement

^{**}NBPP stated no change proposed for this requirement

Plan Mix – Stand-Alone Dental Plan (SADP)

Current Guidelines: Number of Plans Permitted per Issuer									
	Individua	Individual Market Small Group Market*							
	Standardized	Non-Standard	Standardized	Non-Standard					
High Option	1	3	1	3					
Low Option	0	3	0	5					
TOTAL	•	uired / tional	1 Required / 3 Optional						
Maximum		1	4						

2018 Submitted Plans

3 in Individual market (one issuer)

 1 standardized plan & 2 nonstandard plans

2 in Small Group market (one issuer)

 1 standardized plan & 1 nonstandard plans

AHCT eliminated the requirement that the standardized plan must include out-of-network coverage effective for the 2018 plan year

SADP Issuers including out-of-network coverage should follow Connecticut Insurance Department (CID) guidance related to form and rate filing submission.



Stand-Alone Dental Plan (SADP)

Does not apply to Preventive & Diagnostic Services

Plan Overview

Deductible

Member Pays In-Network

up to 3 family members

\$60 per member,

Notes

Out-of-Pocket Maximum	\$350 One child / \$700 Two or more children	For children under age 19 only (required per ACA)
Diagnostic & Preventive	\$0	Oral Exams (twice per year); X-Rays [Periapicals (four per year), Bitewing Radiographs (once every year), Panoramic or Complete Series (once every three years)]; Cleanings (twice per year); Periodontal Scaling and Root Planing; Periodontal Maintenance(once every 3 months following periodontic surgery); Fluoride (twice per year, under age 19); Sealants (for children under 19)
Basic Services	20% after deductible	Filings; Simple Extractions
Major Services	40% after deductible	Surgical Extractions; Endodontic Therapy (i.e. Root Canal Treatment); Periodontal Therapy; Crowns and Cast Restorations; Prosthodontics (Complete and Partial Dentures; Fixed Bridgework)
Orthodontic services	50% after deductible	Medically necessary - for children under age 19 only
Waiting Periods and Plan Maximums (for adults aged 19 and older only)	Plan Maximum: \$2,000 per adult member age 19 and over	Applicable Waiting Period for Benefits Diagnostic and Preventive Services: no waiting period Basic Services: 6 months and Major Services: 12 months (Waiver of waiting period available with proof of prior coverage for services under a dental insurance plan when the termination date was no more than 30 days prior to the effective date of this plan)

Stand-Alone Dental Plan (SADP)

- Certification Requirements for 2019 Discussion Points
 - Plan Mix for Individual and SHOP
 - Standardized Plan Design: Cost Sharing
 - Standardized Plan Design: Other features





Discussion



Next Steps

- Next HPBQ AC meeting scheduled for February 7th
 - Discuss agenda topics for which certification requirement recommendations are outstanding
 - Consideration for future additional HPBQ AC meeting and special Board of Directors meeting



Next Steps

2019 AHCT Standardized Plan Design Development Continuum

Proposed 2019
HHS Payment
Notice & Draft
Actuarial Value
Calculator
(AVC)
Released:
10/27/17

Continue AHCT
Certification
Requirements
Review &
Standardized Plan
Design
Development
2/7/18

AHCT BOD Vote:
 Carrier
 Certification
 Requirements &
 Standardized
 Plans: 2/15/18

AHCT Releases 2019 QHP / SADP Application: Early April 2018

















Finalized 2019 Final AVC Released: 12/28/17 HHS 2019
Payment
Notice – Final
Expected in
Feb 2018

AHCT Releases 2019 QHP / SADP Solicitation: Early March 2018 Rate and Form Filings Due to CID 5/1/18





>Adjournment





> Appendix



Plan Mix - Medical

Current	Current Guidelines: Number of Plans Permitted per Issuer									
	Individua	al Market	Small Group Market*							
	Standardized	Non-Standard	Standardized	Non-Standard						
Platinum	1 (Optional)	2	0	4 (Optional)						
Gold	1	3	0	Min 1 – Max 6						
Silver	1	3	0	Min 2 – Max 6						
Bronze	2	3	0	Min 2 – Max 4						
Catastrophic	N/A	1	N/A	N/A						
TOTAL	4 Required / 1 Optional	12 Optional	0 Required	5 Required / 15 Optional						
Maximum	1	7	20							

2018 Submitted Plans

20 in Individual market (two issuers):

- 8 standardized plans (no Platinum)
- Non-standard plans: 1 Gold,
 5 Silver, 4 Bronze and
 2 Catastrophic

14 in Small Group market (two issuers):

- Non-standard plans:
- 1 Platinum, 3 Gold, 5 Silver, 5 Bronze

^{*}Effective for the 2018 plan year, AHCT removed the requirement for Issuers to submit standardized plans for SHOP; The minimum count of plans are required to include out-of-network coverage and include pediatric dental EHBs



2018 On Exchange Plan Rates

		Fairfield		Hai	rtford	Lito	hfield	Middlesex	
	Diag Manhating Name	Plan Rate	Rank: Lowest	Plan Rate	Rank: Lowest	Plan Rate	Rank: Lowes	Plan Rate	Rank: Lowest
Issuer	Plan Marketing Name	(Age 46)	to Highest	(Age 46)	to Highest	(Age 46)	to Highest	(Age 46)	to Highest
СВІ	Choice Catastrophic POS	\$330.80	1	\$268.80	1	\$296.63	2	\$292.17	1
Anthem	Catastrophic HMO Pathway X Enhanced	\$332.76	2	\$290.42	2	\$281.34	1	\$311.58	2
СВІ	Choice Bronze Standard POS HSA	\$441.65	3	\$358.86	3	\$396.02	4	\$390.06	3
Anthem	Bronze High Deductible HMO Pathway X Enhanced	\$451.13	4	\$393.72	5	\$381.41	3	\$422.42	5
СВІ	Passage Bronze Alternative PCP POS	\$452.82	5	\$367.95	4	\$406.04	6	\$399.93	4
Anthem	Bronze HMO Pathway X Enhanced for HSA	\$472.29	6	\$412.19	7	\$399.30	5	\$442.23	7
Anthem	Bronze HMO Pathway X Enhanced	\$490.80	7	\$428.34	8	\$414.96	7	\$459.57	8
Anthem	Bronze PPO Standard Pathway X for HSA	\$493.32	8	\$430.53	9	\$417.08	8	\$461.93	9
СВІ	Choice Bronze Standard POS	\$496.31	9	\$403.28	6	\$445.02	10	\$438.33	6
Anthem	Bronze PPO Standard Pathway X	\$503.24	10	\$439.19	10	\$425.46	9	\$471.21	10
CBI	Choice Silver Standard POS	\$697.31	11	\$566.61	11	\$625.26	11	\$615.87	11
СВІ	Passage Silver Alternative PCP POS	\$699.23	12	\$568.16	12	\$626.97	12	\$617.55	12
СВІ	Choice Silver Alternative POS	\$701.43	13	\$569.96	13	\$628.95	13	\$619.50	13
Anthem	Silver PPO Standard Pathway X	\$747.65	14	\$652.50	15	\$632.10	14	\$700.08	15
Anthem	Silver Core PPO Pathway X	\$750.44	15	\$654.92	16	\$634.46	15	\$702.68	16
Anthem	Silver High Deductible HMO Pathway X Enhanced	\$751.29	16	\$655.67	17	\$635.18	16	\$703.49	17
Anthem	Silver Low Deductible HMO Pathway X Enhanced	\$753.60	17	\$657.69	18	\$637.14	17	\$705.65	18
СВІ	Choice Gold Standard POS	\$787.47	18	\$639.87	14	\$706.11	19	\$695.51	14
Anthem	Gold HMO Pathway X Enhanced	\$800.49	19	\$698.61	19	\$676.77	18	\$749.55	19
Anthem	Gold PPO Standard Pathway X	\$1,048.20	20	\$914.81	20	\$886.22	20	\$981.50	20

Rates for a 46-year old by Rating Area/County

Plans displayed based on ascending order for costs in Fairfield County

Lowest Cost Silver Plan for each rating area is displayed in dark green font

Second Lowest Cost Silver
Plan (SLCSP) for each
rating area, used to
calculate amount of
Premium Tax Credit (PTC),
is identified in red font

Refer to Appendix 1a & 1b for rate exhibits for excerpt of 2018 plan rates in Individual Market



2018 On Exchange Plan Rates

		New	Haven	New	London	То	lland	Win	dham
	Dian Manhatina Nama	Plan Rate	Rank: Lowest						
Issuer	Plan Marketing Name	(Age 46)	to Highest						
СВІ	Choice Catastrophic POS	\$302.76	1	\$309.27	2	\$304.46	2	\$304.46	2
Anthem	Catastrophic HMO Pathway X Enhanced	\$311.58	2	\$281.34	1	\$281.34	1	\$281.34	1
СВІ	Choice Bronze Standard POS HSA	\$404.22	3	\$412.91	5	\$406.47	5	\$406.47	5
Anthem	Bronze High Deductible HMO Pathway X Enhanced	\$422.42	5	\$381.41	3	\$381.41	3	\$381.41	3
СВІ	Passage Bronze Alternative PCP POS	\$414.44	4	\$423.35	8	\$416.75	7	\$416.75	7
Anthem	Bronze HMO Pathway X Enhanced for HSA	\$442.23	6	\$399.30	4	\$399.30	4	\$399.30	4
Anthem	Bronze HMO Pathway X Enhanced	\$459.57	8	\$414.96	6	\$414.96	6	\$414.96	6
Anthem	Bronze PPO Standard Pathway X for HSA	\$461.93	9	\$417.08	7	\$417.08	8	\$417.08	8
СВІ	Choice Bronze Standard POS	\$454.25	7	\$464.00	10	\$456.77	10	\$456.77	10
Anthem	Bronze PPO Standard Pathway X	\$471.21	10	\$425.46	9	\$425.46	9	\$425.46	9
CBI	Choice Silver Standard POS	\$638.22	11	\$651.93	15	\$641.78	15	\$641.78	15
СВІ	Passage Silver Alternative PCP POS	\$639.96	12	\$653.72	16	\$643.53	16	\$643.53	16
СВІ	Choice Silver Alternative POS	\$641.99	13	\$655.77	17	\$645.56	17	\$645.56	17
Anthem	Silver PPO Standard Pathway X	\$700.08	14	\$632.10	11	\$632.10	11	\$632.10	11
Anthem	Silver Core PPO Pathway X	\$702.68	15	\$634.46	12	\$634.46	12	\$634.46	12
Anthem	Silver High Deductible HMO Pathway X Enhanced	\$703.49	16	\$635.18	13	\$635.18	13	\$635.18	13
Anthem	Silver Low Deductible HMO Pathway X Enhanced	\$705.65	17	\$637.14	14	\$637.14	14	\$637.14	14
СВІ	Choice Gold Standard POS	\$720.74	18	\$736.22	19	\$724.76	19	\$724.76	19
Anthem	Gold HMO Pathway X Enhanced	\$749.55	19	\$676.77	18	\$676.77	18	\$676.77	18
Anthem	Gold PPO Standard Pathway X	\$981.50	20	\$886.22	20	\$886.22	20	\$886.22	20

Rates for a 46-year old by Rating Area/County

Plans displayed based on ascending order for costs in Fairfield County

Lowest Cost Silver Plan for each rating area is displayed in <u>dark green</u> <u>font</u>

Second Lowest Cost
Silver Plan (SLCSP) for
each rating area, used to
calculate amount of
Premium Tax Credit
(PTC), is identified in red
font

Refer to Appendix 1a & 1b for rate exhibits for excerpt of 2018 plan rates in Individual Market



CMS AGE SLOPE – EFFECTIVE FOR 2018 PLAN YEAR

AGE	PREMIUM RATE RATIO COMPARED TO AGE 21	AGE	PREMIUM RATE RATIO COMPARED TO AGE 21	AGE	PREMIUM RATE RATIO COMPARED TO AGE 21
0-14	0.765	31	1.159	48	1.635
15	0.833	32	1.183	49	1.706
16	0.859	33	1.198	50	1.786
17	0.885	34	1.214	51	1.865
18	0.913	35	1.222	52	1.952
19	0.941	36	1.23	53	2.04
20	0.97	37	1.238	54	2.135
21	1	38	1.246	55	2.23
22	1	39	1.262	56	2.333
23	1	40	1.278	57	2.437
24	1	41	1.302	58	2.548
25	1.004	42	1.325	59	2.603
26	1.024	43	1.357	60	2.714
27	1.048	44	1.397	61	2.81
28	1.087	45	1.444	62	2.873
29	1.119	46	1.5	63	2.952
30	1.135	47	1.563	64 and Older	3

For 2014 – 2017, all ages within the band of 0 through 20 had ratio of .65 when compared to age 21 rate

When a rate is known for an age, but an estimate of the rate for a different age is desired, take the rate for the "known" age, divide it by its corresponding premium ratio, and then multiply it by the premium ratio for the "different age"

Example: If Age 46 Rate is \$441.65, and you want to know the approximate rate for age 30, the equation would be as follows: $$441.65 \div 1.5 \times 1.135 = 334.18

Note rate may not match exactly due to rounding



2018 AHCT Plan Enrollment: Standardized/Non-Standard QHPs

Enrollment data of Individual AHCT plans as of 1/8/2018

Metal Level	Enrollment	Percent
Catastrophic	1,752	1.54%
Bronze	40,074	35.11%
Silver	63,410	55.56%
Gold	8,898	7.80%
TOTAL	114,134	100.00%

Metal Level	Standardized Plans	Non-Standard Plans	Total	Percent in Standardized Plans
Catastrophic	0	1,752	1,752	0.00%
Bronze*	34,749	5,325	40,074	86.71%
Silver	55,526	7,884	63,410	87.57%
Gold	7,671	1,227	8,898	86.21%
TOTAL	97,946	16,188	114,134	85.82%

*Bronze Plans	Standardized Plans	Non-Standard Plans	Total	Percent in Standardized Plans			
Non-HSA Bronze	14,238	3,670	17,908	79.51%			
HSA Compatible	20,511	1,655	22,166	92.53%			
Total	34,749	5,325	40,074	86.71%			



2018 AHCT Plan Enrollment: Standardized/Non-Standard QHPs

	GC	GOLD SILVER		LVER	BRONZE (HSA compatible)		BRONZE (not HSA compatible)		CATASTROPHIC	
County	Non-Std	Standard	Non-Std	Standard	Non-Std	Standard	Non-Std	Standard	Non-Std	Grand Total
Fairfield	284	2,648	2,270	17,239	372	7,057	898	4,749	436	35,953
Hartford	155	1,835	1,585	12,675	257	4,801	936	2,792	479	25,515
Litchfield	144	578	613	3,736	163	1,429	295	971	98	8,027
Middlesex	47	449	390	2,526	68	1,156	122	721	96	5,575
New Haven	298	1,425	1,674	12,538	355	4,128	749	3,069	404	24,640
New London	165	336	688	3,668	263	963	343	994	124	7,544
Tolland	87	242	358	1,734	93	636	200	544	87	3,981
Windham	47	158	306	1,410	84	341	127	398	28	2,899
Total	1,227	7,671	7,884	55,526	1,655	20,511	3,670	14,238	1,752	114,134
	8,898 63,410		22,166		17,908		1,752			



Stand-Alone Dental Plan (SADP) AHCT Enrollment: Individual Market

Plan Name	Enrollment	Percent of SADP Plan Enrollment (Total Members)
Anthem Dental Family Enhanced (Standard)	175	21.60%
Anthem Dental Family	432	53.30%
Anthem Dental Anthem Dental Family Value	203	25.10%
TOTAL	810	100%

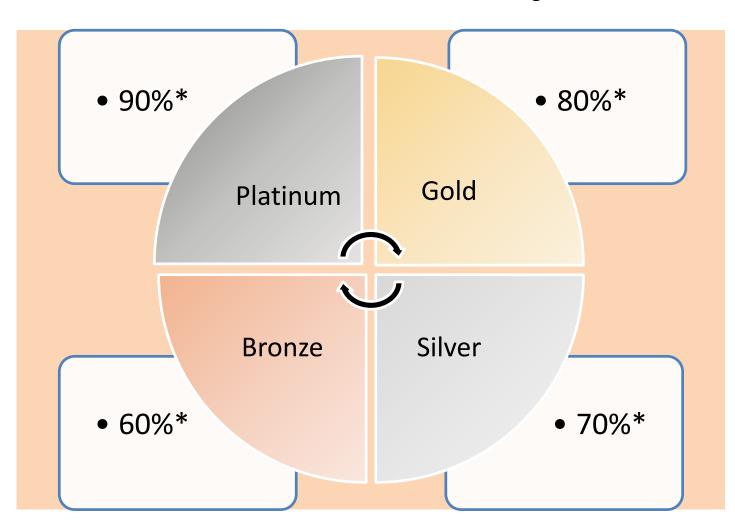
*Numbers based on enrollment data of Individual AHCT SADPs as of 1/8/2018 (Terminations due to non-payment of premium not yet processed)

		SUBSCRIBER ENROLLMENT BY COUNTY								
Plan Name	Enrollment Status	Fairfield	Hartford	Litchfield	Middlesex	New Haven	New London	Tolland	Windham	Grand Total
And Donald Family	Single enrollee	27	18	8	7	15	5	2	1	83
	Enrollee & Spouse	3	9	2	2	3	0	0	1	20
Anthem Dental Family Enhanced	Enrollee & Child(ren)	2	1	1	0	1	2	0	1	8
Ennanced	Family	5	1	0	0	2	0	0	0	8
	Total	37	29	11	9	21	7	2	3	119
	Single enrollee	51	73	19	16	48	16	14	11	248
	Enrollee & Spouse	9	5	3	2	9	4	3	1	36
Anthem Dental Family	Enrollee & Child(ren)	1	1	1	2	3	1	1	0	10
	Family	7	9	0	2	3	3	0	0	24
	Total	68	88	23	22	63	24	18	12	318
	Single enrollee	34	36	4	8	38	10	5	5	140
Anthem Dental Family	Enrollee & Spouse	7	7	0	0	2	1	0	0	17
Value	Enrollee & Child(ren)	0	2	0	0	1	0	0	0	3
value	Family	3	2	1	0	0	0	0	0	6
	Total	44	47	5	8	41	11	5	5	166
All Combined	Single enrollee	112	127	31	31	101	31	21	17	471
	Enrollee & Spouse	19	21	5	4	14	5	3	2	73
	Enrollee & Child(ren)	3	4	2	2	5	3	1	1	21
	Family	15	12	1	2	5	3	0	0	38
	Total	149	164	39	39	125	42	25	20	603



Affordable Care Act - Health Plan Types

Metal Levels: Actuarial Value & Average Overall Cost of Providing Essential Health Benefits (EHBs)



*CMS regulations allow for a 'de minimis' range for the Actuarial Value (AV) calculation for each metal level, and for Silver Cost Sharing Reduction plans

Per regulations effective for the 2018 Plan Year, 'de minimis' AV ranges are as follows:

- Platinum: 86% 92%
- Gold: 76% 82%
- Silver: 66% 72%**
- Bronze: 56% 62% (AV range permitted for 'Expanded Bronze' plans is up to 65%; plan must include at least 1 major service not subject to deductible or is a High Deductible Health Plan)

**Silver Cost Sharing Reduction (CSR) Plans:

- 73% CSR: 72% 74%, but must be at least 2 points greater than 'standard' Silver plan
- 87% CSR: 86% 88%
- 94% CSR: 93% 95%

