



Access Health Connecticut

Health Plan Benefits & Qualifications Advisory Committee (HPBQ AC) Meeting
March 28, 2019

Agenda

- Call to Order and Introductions
- Public Comment
- Votes: Meeting Minutes (March 21, 2019)
- Follow-Ups from Prior Meeting
- Summary of Prior Meeting Topic: 2020 Plan Offering Review
- Wakely Consulting: 2020 Plan Design Review
 - 2020 Plan Offering Review [Vote]
 - Summary of Plan Actuarial Value Calculator (AVC) Results
 - Proposed Standard Plan Designs
 - Gold [Vote]
 - Bronze Non-HSA [Vote]
 - Silver Copay Cost Sharing Reduction (CSR) Variations [Vote]
 - Silver Coinsurance Cost Sharing Reduction (CSR) Variations [Vote]
- Future Items for Discussion
- Action Items
- Upcoming Meeting Schedule
- Adjournment

Public Comment

Votes:

**Review and Approval of Minutes:
March 21, 2019 HPBQ AC Special Meeting**

AHCT Vision and Mission

AHCT Vision

- The CT Health Exchange supports health reform efforts at the state and national level that provide CT residents with better health, and an enhanced and more coordinated health care experience at a reasonable, predictable cost.

AHCT Mission

- To increase the number of insured residents, improve health care quality, lower costs and reduce health disparities through an innovative, competitive marketplace that empowers consumers to choose the health plan and provider that give them the best value.

AHCT Values in Action

At Access Health CT, it is with our customers and our employees in mind that we seek to promote these collective values and to live by these behaviors. Our culture of acceptance welcomes and values everyone. We challenge the status quo to find new ways to grow and improve our community, our company and ourselves. Our people take pride in the service we provide, and in the spirit of the common good that we share.

Authenticity

Act with sincerity,
credibility and
self-awareness.

Integrity

Commit to
doing the right
thing with
genuine intention.

Excellence

Aim high and
challenge the
status quo.

Ownership

Take responsibility
and initiative.

One Team

Collaborate to
succeed.

Passion

Dedication
to creating
opportunities for
greater health
and well-being.

Follow-Ups from Prior Meeting

Action Item	Status
Individual Market Single Standard Silver Plan Proposal - Scenario 2: Enrollment Counts in Remaining Lowest Premium Silver Plan <i>(Single, Age 35+, Silver Plan Terminated)</i>	Included in this presentation
Individual Market Single Standard Silver Plan Proposal - Scenarios 2 & 3: Expected Premium Rate Impact Summary Table <i>(Single, Age 35+, Silver Plan Terminated)</i>	Included in this presentation
Standardized Plan Designs For 2020: Options for Consideration, including Silver Copay Cost Sharing Reduction (CSR) Plan Variants	Included in this presentation

Summary of Prior Meeting Topic: 2020 Plan Offering Review Proposal to Permit Only One Standard Silver Plan

Summary of Prior Meeting Topic: 2020 Plan Offering Review

- Proposal to Modify the Number of Plans Carriers Can Submit at the Silver Metal Level in the Individual Market
 - Move from up to three plans (2 required standard, 1 optional non-standard) to one required standard (Silver Copay plan)
 - Single Silver plan per carrier that remains will result in increase in amount of Premium Tax Credit (PTC)
- Enrollment Action Scenarios
 - 1: Enrollees in terminating plans are auto-enrolled into their current carrier's remaining Silver plan, per federal re-enrollment regulations, including hierarchy of product/plan assignment [45 CFR §155.335(j)]
 - 2: After auto-enrollment, enrollee not already assigned to the lowest premium Silver plan available, switches to the lowest premium Silver plan (moving to other carrier's Silver plan)
 - 3: After auto-enrollment, enrollee selects the lowest premium Bronze plan (may result in move to other carrier)
- All assumptions and caveats previously outlined continue to apply
 - Refer to materials posted to AHCT agency website, Advisory Committee, Health Plan Benefits and Qualifications Meetings for March 14 & 21, 2019

Number of Plans Required / Permitted per Issuer

	2019 INDIVIDUAL MARKET	
Metal Level	Standardized Plans	Non-Standard Plans
Platinum	N/A	2
Gold	1	3
Silver	2	1
Bronze	2	3
Catastrophic	N/A	1
TOTAL	5 Required	10 Optional
Maximum per Issuer	15	



	2020 PROPOSED	
Metal Level	Standardized Plans	Non-Standard Plans
Platinum	N/A	2
Gold	1	3
Silver	1	0
Bronze	2	3
Catastrophic	N/A	1
TOTAL	4 Required	9 Optional
Maximum per Issuer	13	

Proposal: Silver Plan Options

2019 Actual	Anthem Blue Cross Blue Shield			ConnectiCare Benefits, Inc. (CBI)		
Plan Design	Silver PPO Pathway X Tiered	Silver PPO Standard Coinsurance Pathway X	Silver PPO Standard Pathway X	Choice Silver Alternative POS	Choice Silver Standard Coinsurance POS	Choice Silver Standard POS



Proposed: 1 Silver Plan Per Carrier	Anthem Blue Cross Blue Shield	ConnectiCare Benefits, Inc. (CBI)
Plan Design	Silver PPO Standard Pathway X	Choice Silver Standard POS

Consumer Experience

Proposal to Allow Only One Standard Silver Plan per Carrier

Consumer Experience Examples- Overview

2020 Plan Offering Review

- Premium Change Comparison Examples – Scenarios 1, 2 & 3
- Single enrollee, ages 45 and 60
 - Appx 40%* of all AHCT QHP enrollees fall within the 45 to 60 age band
 - Appx 72%* of all AHCT QHP households have 1 enrollee
- Enrollee Income
 - Various income levels relative to the Federal Poverty Level (FPL)
 - 145%, 175%, 225%, 300% for subsidized enrollees, aligning with different Silver Cost Sharing Reduction (CSR) plan levels, as well as eligibility for Premium Tax Credits (PTCs) only
 - 450% for unsubsidized enrollees
- Enrollee Residence
 - Examples for each county for subsidized enrollees
 - Examples for the 4 most populated counties for non-subsidized enrollees

Consumer Experience Examples- Overview

2020 Plan Offering Review

- Summary of Review for Scenario 1 - Auto-enrollment
 - Subsidized enrollees: for most situations reviewed, members mapped from a Silver plan or continuing in current carrier remaining Silver plan see a net reduction vs 2019 premium (ranges from -\$4.20 to -\$262.59)
 - Exception: Enrollees mapped from the Choice Silver Alternative plan see an increase in all counties vs 2019 premium (ranges from +\$1.35 to +\$39.42)
 - Exception: Enrollees mapped from the Choice Silver Standard Coinsurance plan in New Haven County see an increase vs 2019 premium (age 45, 300% FPL: <\$1)
 - Unsubsidized enrollees: for all 4 examples, members mapped from any of the terminating Silver plans see a net increase vs 2019 premium (ranges from +\$36.54 to +\$230.45)
 - Enrollees continuing in current carrier remaining Silver plan see no change

Review of specific family situation regarding medical needs is a critical component of health insurance plan selection

Consumer Experience Examples- Overview

2020 Plan Offering Review

- Summary of Review for Scenario 2 – Actively enroll in lowest premium Silver plan
 - Subsidized enrollees: for most situations reviewed, members taking action to select the remaining Silver plan of the other carrier with the lowest premium see a net reduction in premium vs 2019 (ranges from -\$2.56 to -\$412.24)
 - Exception: Enrollees in Fairfield, Hartford, Middlesex and New Haven with the Choice Silver Alternative plan in 2019 see an increase vs 2019 (ranges from +\$13.40 to +\$35.90)
 - Unsubsidized enrollees: When taking action to select the remaining Silver plan with the lowest premium, for all 4 examples:
 - Enrollees in the terminating plans will see a net increase in premium vs 2019 (ranges from +\$16.56 to +\$265.16)
 - Enrollees in one of the continuing plans will see a net reduction in premium vs 2019 (ranges from -\$3.52 to -\$149.65), while enrollees in the other continuing plan will see no change in premium vs 2019

Review of specific family situation regarding medical needs is a critical component of health insurance plan selection

Consumer Experience Examples- Overview

2020 Plan Offering Review

- Summary of Review for Scenario 3 – Actively enroll in lowest premium Bronze plan
 - Subsidized enrollees: for all examples, members taking action to select the lowest premium Bronze plan (rather than the auto-enrolled Silver plan) see a net reduction in premium vs 2019 Silver plan premium (ranges from -\$3.70 to -\$438.66)
 - Unsubsidized enrollees: for all 4 examples, members taking action to select the lowest premium Bronze plan (rather than the auto-enrolled Silver plan) see a net reduction in premium vs 2019 Silver plan premium (ranges from -\$128.37 to -\$606.67)

Review of specific family situation regarding medical needs is a critical component of health insurance plan selection

Consumer Experience Examples- Overview

2020 Plan Offering Review

- Enrollees in 2019 lowest cost Bronze plan
 - Impact to net premium if proposal to allow only one standard Silver plan is adopted:
 - Subsidized enrollees: 2019 Bronze plan premium would be reduced in two examples (-\$113.10 in Fairfield and -\$98.70 in New Haven), but there would be no change in all other scenarios as the PTC is already maximized
 - Unsubsidized enrollees: no change
 - Will enrollee consider moving to the lowest premium Silver plan?
 - Subsidized enrollees: 2019 Bronze plan premium would increase (ranges from +\$21.23 to +\$164.27) in all situations other than Example 8 (reduction of \$0.10)
 - Unsubsidized enrollees: 2019 Bronze plan premium would increase (ranges from +\$262.97 to +\$457.02) in all situations

Review of specific family situation regarding medical needs is a critical component of health insurance plan selection

AHCT Consumers & Buying Patterns: Plan Selection by Enrollees Eligible for CSRs*

Proportion of CSR Eligible Enrollment By Plan Metal, CSR Tier, & Year

Metal	2017			2017 Total	2018			2018 Total	2019			2019 Total
	94% CSR	87% CSR	73% CSR		94% CSR	87% CSR	73% CSR		94% CSR	87% CSR	73% CSR	
Catastrophic	0.1%	0.1%	0.3%	0.1%	0.1%	0.1%	0.3%	0.2%	0.1%	0.0%	0.2%	0.1%
Bronze	2.7%	10.1%	22.8%	11.7%	3.6%	11.2%	27.2%	14.2%	4.6%	13.8%	37.5%	19.3%
Silver	95.7%	87.3%	69.3%	84.4%	94.6%	86.5%	64.6%	81.8%	94.4%	84.9%	57.7%	78.3%
Gold	1.6%	2.5%	7.6%	3.8%	1.7%	2.1%	8.0%	3.9%	0.9%	1.3%	4.6%	2.3%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Most Popular CSR Eligible Plans By CSR Tier

#	Plan Name	2019			2019 Total
		94% CSR	87% CSR	73% CSR	
1	Choice Silver Alternative POS	7,196	9,712	4,870	21,778
2	Choice Silver Standard POS	2,447	3,466	2,155	8,068
3	Silver PPO Standard Pathway X	1,166	2,233	1,451	4,850
4	Choice Bronze Standard POS	220	1,213	3,016	4,449

Consumer Examples: Table of Contents

Household Composition / Age / Income / County of Residence	Number
Single Enrollee, Age 45, Income at 300% of FPL (~\$36,400), Fairfield County	1
Single Enrollee, Age 60, Income at 225% of FPL (~\$27,300), Hartford County	2
Single Enrollee, Age 45, Income at 175% of FPL (~\$21,200), Litchfield County	3
Single Enrollee, Age 60, Income at 145% of FPL (~\$17,600), Middlesex County	4
Single Enrollee, Age 45, Income at 300% of FPL (~\$36,400), New Haven County	5
Single Enrollee, Age 60, Income at 225% of FPL (~\$27,300), New London County	6
Single Enrollee, Age 45, Income at 175% of FPL (~\$21,200), Tolland County	7
Single Enrollee, Age 60, Income at 145% of FPL (~\$17,600), Windham County	8
Single Enrollee, Age 45, Income at 450% of FPL (~\$54,600), Fairfield County	9
Single Enrollee, Age 60, Income at 450% of FPL (~\$54,600), Hartford County	10
Single Enrollee, Age 45, Income at 450% of FPL (~\$54,600), New Haven County	11
Single Enrollee, Age 60, Income at 450% of FPL (~\$54,600), New London County	12

Structure of Exhibits

High level information on scenario, including enrollee family size, age, income level relative to the Federal Poverty Level (FPL) and county of residence

ROWS	COLUMNS
2019 Actual	Identifies grouping of carrier plans: 3 Silver each for Anthem Blue Cross Blue Shield (Anthem) & ConnectiCare Benefits, Inc. (CBI), with the lowest premium Bronze plan (CBI)
Plan Design	Each column identifies Plan Name - those in red font would be eliminated in the proposed scenario
Maximum Amount of Tax Credit	Identifies the maximum tax credit available for 2019 (based on household composition / age / income / residence)
Premium Before Tax Credit	Identifies the 2019 premium rate for each plan (based on household composition, age and residence); Green circle represents the lowest premium Silver plan
Net Premium After Maximum Tax Credit	Identifies the 2019 net premium after the maximum tax credit is applied
Proposed: 1 Silver Plan Per Carrier	Identifies grouping of carrier plans: 1 Silver each for Anthem & CBI , with the lowest premium Bronze plan (CBI)
Maximum Amount of Tax Credit	Represents the maximum tax credit available for the proposed scenario (based on household composition / age / income / residence) with 2 Silver plans offered (1 per carrier)
Net Premium After Maximum Tax Credit	Represents 2019 net premium for remaining Silver & lowest premium Bronze plans after maximum tax credit is applied in proposed scenario; Green circle represents lowest net premium Silver plan after max tax credit

Consumer Example 1 (APTC Only)

Single Enrollee, Age 45, Income at 300% of FPL (~ \$36,400), Resident of Fairfield County

2019 Actual	Anthem Blue Cross Blue Shield			ConnectiCare Benefits, Inc. (CBI)			
Plan Design	Silver PPO Pathway X Tiered	Silver PPO Standard Coinsurance Pathway X	Silver PPO Standard Pathway X	Choice Silver Alternative POS	Choice Silver Standard Coinsurance POS	Choice Silver Standard POS	Passage Bronze Alternative PCP POS
Maximum Amount of Tax Credit	\$285.28						
Premium Before Tax Credit	\$588.00	\$645.80	\$684.82	\$553.56	\$595.56	\$704.46	\$413.29
Net Premium After Maximum Tax Credit	\$302.72	\$360.52	\$399.54	\$268.28	\$310.28	\$419.18	\$128.01

Proposed: 1 Silver Plan Per Carrier	Anthem Silver PPO Standard Pathway X	CBI Choice Silver Standard POS	CBI Passage Bronze
Maximum Amount of Tax Credit	\$398.38 (+\$113.10 compared to current 2019)		
Net Premium After Maximum Tax Credit	\$286.44	\$306.08	\$14.91

Consumer Example 2 (APTC & 73% CSR)

Single Enrollee, Age 60, Income at 225% of FPL (~ \$27,300), Resident of Hartford County

2019 Actual	Anthem Blue Cross Blue Shield			ConnectiCare Benefits, Inc. (CBI)			
Plan Design	Silver PPO Pathway X Tiered	Silver PPO Standard Coinsurance Pathway X	Silver PPO Standard Pathway X	Choice Silver Alternative POS	Choice Silver Standard Coinsurance POS	Choice Silver Standard POS	Passage Bronze Alternative PCP POS
Maximum Amount of Tax Credit	\$731.17						
Premium Before Tax Credit	\$964.47	\$1,059.30	\$1,123.30	\$845.41	\$909.57	\$1,075.86	\$631.19
Net Premium After Maximum Tax Credit	\$233.30	\$328.13	\$392.13	\$114.24	\$178.40	\$344.69	\$4.80

Proposed: 1 Silver Plan Per Carrier	Anthem Silver PPO Standard Pathway X	CBI Choice Silver Standard POS	CBI Passage Bronze
Maximum Amount of Tax Credit	\$948.22 (+\$217.05 compared to current 2019)		
Net Premium After Maximum Tax Credit	\$175.08	\$127.64	\$4.80

Consumer Example 3 (APTC & 87% CSR)

Single Enrollee, Age 45, Income at 175% of FPL (~ \$21,200), Resident of Litchfield County

2019 Actual	Anthem Blue Cross Blue Shield			ConnectiCare Benefits, Inc. (CBI)			
Plan Design	Silver PPO Pathway X Tiered	Silver PPO Standard Coinsurance Pathway X	Silver PPO Standard Pathway X	Choice Silver Alternative POS	Choice Silver Standard Coinsurance POS	Choice Silver Standard POS	Passage Bronze Alternative PCP POS
Maximum Amount of Tax Credit	\$399.48						
Premium Before Tax Credit	\$497.13	\$545.99	\$578.99	\$496.38	\$534.03	\$631.68	\$370.59
Net Premium After Maximum Tax Credit	\$97.65	\$146.51	\$179.51	\$96.90	\$134.55	\$232.20	\$2.82

Proposed: 1 Silver Plan Per Carrier	Anthem Silver PPO Standard Pathway X	CBI Choice Silver Standard POS	CBI Passage Bronze
Maximum Amount of Tax Credit	\$530.83 (+\$131.35 compared to current 2019)		
Net Premium After Maximum Tax Credit	\$48.16	\$100.85	\$2.82

Consumer Example 4 (APTC & 94% CSR)

Single Enrollee, Age 60, Income at 145% of FPL (~ \$17,600), Resident of Middlesex County


2019 Actual	Anthem Blue Cross Blue Shield			ConnectiCare Benefits, Inc. (CBI)			
Plan Design	Silver PPO Pathway X Tiered	Silver PPO Standard Coinsurance Pathway X	Silver PPO Standard Pathway X	Choice Silver Alternative POS	Choice Silver Standard Coinsurance POS	Choice Silver Standard POS	Passage Bronze Alternative PCP POS
Maximum Amount of Tax Credit	\$922.71						
Premium Before Tax Credit	\$1,034.79	\$1,136.54	\$1,205.21	\$918.91	\$988.63	\$1,169.41	\$686.07
Net Premium After Maximum Tax Credit	\$112.08	\$213.83	\$282.50	\$8.91	\$65.92	\$246.70	\$5.21

Proposed: 1 Silver Plan Per Carrier	Anthem Silver PPO Standard Pathway X	CBI Choice Silver Standard POS	CBI Passage Bronze
Maximum Amount of Tax Credit	\$1,142.97 (+\$220.26 compared to current 2019)		
Net Premium After Maximum Tax Credit	\$62.24	\$26.44	\$5.21

Consumer Example 5 (APTC Only)

Single Enrollee, Age 45, Income at 300% of FPL (~ \$36,400), Resident of New Haven County

2019 Actual	Anthem Blue Cross Blue Shield			ConnectiCare Benefits, Inc. (CBI)			
Plan Design	Silver PPO Pathway X Tiered	Silver PPO Standard Coinsurance Pathway X	Silver PPO Standard Pathway X	Choice Silver Alternative POS	Choice Silver Standard Coinsurance POS	Choice Silver Standard POS	Passage Bronze Alternative PCP POS
Maximum Amount of Tax Credit	\$240.56						
Premium Before Tax Credit	\$550.57	\$604.70	\$641.24	\$506.64	\$545.10	\$644.76	\$378.27
Net Premium After Maximum Tax Credit	\$310.01	\$364.14	\$400.68	\$266.08	\$304.54	\$404.20	\$137.71



Proposed: 1 Silver Plan Per Carrier	Anthem Silver PPO Standard Pathway X	CBI Choice Silver Standard POS	CBI Passage Bronze
Maximum Amount of Tax Credit	\$339.26 (+\$98.70 compared to current 2019)		
Net Premium After Maximum Tax Credit	\$301.98	\$305.50	\$39.01

Consumer Example 6 (APTC & 73% CSR)

Single Enrollee, Age 60, Income at 225% of FPL (~ \$27,300), Resident of New London County

2019 Actual	Anthem Blue Cross Blue Shield			ConnectiCare Benefits, Inc. (CBI)			
Plan Design	Silver PPO Pathway X Tiered	Silver PPO Standard Coinsurance Pathway X	Silver PPO Standard Pathway X	Choice Silver Alternative POS	Choice Silver Standard Coinsurance POS	Choice Silver Standard POS	Passage Bronze Alternative PCP POS
Maximum Amount of Tax Credit	\$793.68						
Premium Before Tax Credit	\$934.35	\$1,026.19	\$1,088.21	\$972.70	\$1,046.52	\$1,237.86	\$631.19
Net Premium After Maximum Tax Credit	\$140.67	\$232.51	\$294.53	\$179.02	\$252.84	\$444.18	\$5.52

Proposed: 1 Silver Plan Per Carrier	Anthem Silver PPO Standard Pathway X	CBI Choice Silver Standard POS	CBI Passage Bronze
Maximum Amount of Tax Credit	\$1,056.27 (+\$262.59 compared to current 2019)		
Net Premium After Maximum Tax Credit	\$31.94	\$181.59	\$5.52

Consumer Example 7 (APTC & 87% CSR)

Single Enrollee, Age 45, Income at 175% of FPL (~ \$21,200), Resident of Tolland County

2019 Actual	Anthem Blue Cross Blue Shield			ConnectiCare Benefits, Inc. (CBI)			
Plan Design	Silver PPO Pathway X Tiered	Silver PPO Standard Coinsurance Pathway X	Silver PPO Standard Pathway X	Choice Silver Alternative POS	Choice Silver Standard Coinsurance POS	Choice Silver Standard POS	Passage Bronze Alternative PCP POS
Maximum Amount of Tax Credit	\$409.81						
Premium Before Tax Credit	\$497.13	\$545.99	\$578.99	\$509.47	\$548.13	\$648.36	\$380.38
Net Premium After Maximum Tax Credit	\$87.32	\$136.18	\$169.18	\$99.66	\$138.32	\$238.55	\$2.89

Proposed: 1 Silver Plan Per Carrier	Anthem Silver PPO Standard Pathway X	CBI Choice Silver Standard POS	CBI Passage Bronze
Maximum Amount of Tax Credit	\$547.35 (+\$137.54 compared to current 2019)		
Net Premium After Maximum Tax Credit	\$31.64	\$101.01	\$2.89

Consumer Example 8 (APTC & 94% CSR)

Single Enrollee, Age 60, Income at 145% of FPL (~ \$17,600), Resident of Windham County

2019 Actual	Anthem Blue Cross Blue Shield			ConnectiCare Benefits, Inc. (CBI)			
Plan Design	Silver PPO Pathway X Tiered	Silver PPO Standard Coinsurance Pathway X	Silver PPO Standard Pathway X	Choice Silver Alternative POS	Choice Silver Standard Coinsurance POS	Choice Silver Standard POS	Passage Bronze Alternative PCP POS
Maximum Amount of Tax Credit	\$891.93						
Premium Before Tax Credit	\$934.35	\$1,026.19	\$1,088.21	\$957.55	\$1,030.21	\$1,218.59	\$714.92
Net Premium After Maximum Tax Credit	\$42.42	\$134.26	\$196.28	\$65.62	\$138.28	\$326.66	\$5.43

Proposed: 1 Silver Plan Per Carrier	Anthem Silver PPO Standard Pathway X	CBI Choice Silver Standard POS	CBI Passage Bronze
Maximum Amount of Tax Credit	\$1,150.44 (+\$258.51 compared to current 2019)		
Net Premium After Maximum Tax Credit	\$5.33	\$68.15	\$5.43

Consumer Example 9 (Not Subsidized)

Single Enrollee, Age 45, Income at 450% of FPL (~ \$54,600), Resident of Fairfield County

2019 Actual	Anthem Blue Cross Blue Shield			ConnectiCare Benefits, Inc. (CBI)			
Plan Design	Silver PPO Pathway X Tiered	Silver PPO Standard Coinsurance Pathway X	Silver PPO Standard Pathway X	Choice Silver Alternative POS	Choice Silver Standard Coinsurance POS	Choice Silver Standard POS	Passage Bronze Alternative PCP POS
Maximum Amount of Tax Credit	\$0.00						
Premium Before Tax Credit	\$588.00	\$645.80	\$684.82	\$553.56	\$595.56	\$704.46	\$413.29
Net Premium After Maximum Tax Credit	\$588.00	\$645.80	\$684.82	\$553.56	\$595.56	\$704.46	\$413.29

Proposed: 1 Silver Plan Per Carrier	Anthem Silver PPO Standard Pathway X	CBI Choice Silver Standard POS	CBI Passage Bronze
Maximum Amount of Tax Credit	\$0.00		
Net Premium After Maximum Tax Credit	\$684.82	\$704.46	\$413.29

Consumer Example 10 (Not Subsidized)

Single Enrollee, Age 60, Income at 450% of FPL (~ \$54,600), Resident of Hartford County

2019 Actual	Anthem Blue Cross Blue Shield			ConnectiCare Benefits, Inc. (CBI)			
Plan Design	Silver PPO Pathway X Tiered	Silver PPO Standard Coinsurance Pathway X	Silver PPO Standard Pathway X	Choice Silver Alternative POS	Choice Silver Standard Coinsurance POS	Choice Silver Standard POS	Passage Bronze Alternative PCP POS
Maximum Amount of Tax Credit	\$0.00						
Premium Before Tax Credit	\$964.47	\$1,059.30	\$1,123.30	\$845.41	\$909.57	\$1,075.86	\$631.19
Net Premium After Maximum Tax Credit	\$964.47	\$1,059.30	\$1,123.30	\$845.41	\$909.57	\$1,075.86	\$631.19

Proposed: 1 Silver Plan Per Carrier	Anthem Silver PPO Standard Pathway X	CBI Choice Silver Standard POS	CBI Passage Bronze
Maximum Amount of Tax Credit	\$0.00		
Net Premium After Maximum Tax Credit	\$1,123.30	\$1,075.86	\$631.19

Consumer Example 11 (Not Subsidized)

Single Enrollee, Age 45, Income at 450% of FPL (~ \$54,600), Resident of New Haven County

2019 Actual	Anthem Blue Cross Blue Shield			ConnectiCare Benefits, Inc. (CBI)			
Plan Design	Silver PPO Pathway X Tiered	Silver PPO Standard Coinsurance Pathway X	Silver PPO Standard Pathway X	Choice Silver Alternative POS	Choice Silver Standard Coinsurance POS	Choice Silver Standard POS	Passage Bronze Alternative PCP POS
Maximum Amount of Tax Credit	\$0.00						
Premium Before Tax Credit	\$550.57	\$604.70	\$641.24	\$506.64	\$545.10	\$644.76	\$378.27
Net Premium After Maximum Tax Credit	\$550.57	\$604.70	\$641.24	\$506.64	\$545.10	\$644.76	\$378.27

Proposed: 1 Silver Plan Per Carrier	Anthem Silver PPO Standard Pathway X	CBI Choice Silver Standard POS	CBI Passage Bronze
Maximum Amount of Tax Credit	\$0.00		
Net Premium After Maximum Tax Credit	\$641.24	\$644.76	\$378.27

Consumer Example 12 (Not Subsidized)

Single Enrollee, Age 60, Income at 450% of FPL (~ \$54,600), Resident of New London County

2019 Actual	Anthem Blue Cross Blue Shield			ConnectiCare Benefits, Inc. (CBI)			
Plan Design	Silver PPO Pathway X Tiered	Silver PPO Standard Coinsurance Pathway X	Silver PPO Standard Pathway X	Choice Silver Alternative POS	Choice Silver Standard Coinsurance POS	Choice Silver Standard POS	Passage Bronze Alternative PCP POS
Maximum Amount of Tax Credit	\$0.00						
Premium Before Tax Credit	\$934.35	\$1,026.19	\$1,088.21	\$972.70	\$1,046.52	\$1,237.86	\$631.19
Net Premium After Maximum Tax Credit	\$934.35	\$1,026.19	\$1,088.21	\$972.70	\$1,046.52	\$1,237.86	\$631.19

Proposed: 1 Silver Plan Per Carrier	Anthem Silver PPO Standard Pathway X	CBI Choice Silver Standard POS	CBI Passage Bronze
Maximum Amount of Tax Credit	\$0.00		
Net Premium After Maximum Tax Credit	\$1,088.21	\$1,237.86	\$631.19

Access Health CT

2020 Individual Market Standard Plan Designs

March 28, 2019

PRESENTED BY
Julie Andrews, FSA, MAAA – Sr. Consulting Actuary

Agenda

2020 Plan Design Review

- 2020 Plan Offering Review
- Summary of Plan AVCs
- Proposed Plan Designs
 - Gold
 - Bronze Non-HSA
 - Silver Copay CSR Variations
 - Silver Coinsurance CSR Variations

Disclosures and Caveats

Disclosures: Wakely relied on data provided by others to complete this analysis and presentation. Data was reviewed for reasonability and appropriateness.

Risks and Uncertainties. The assumptions and resulting estimates and conclusions included in this presentation are inherently uncertain. Users of the results should be qualified to use it and understand the results and the inherent uncertainty. Actual results may vary, potentially materially, from our estimates. It is the responsibility of the organization receiving this output to review the assumptions carefully and notify Wakely of any potential concerns.

Subsequent Events. There are several relevant events that would affect the results of this report. This analysis presents one simplified illustration of 2020 plan offering impacts.

2020 Plan Offering Review

2020 Plan Offering Analysis

- Proposal: Remove all Silver Plans except Standard Silver Copay Option
- Assumptions
 - Assume no change in premium rates from 2019 to 2020
 - Members in any plan being eliminated (non-Standard, Standard Coinsurance) are mapped to the applicable carrier's remaining Standard copay plan (unless otherwise noted)
 - Members do not change Federal Poverty Level (FPL) % Advanced Premium Tax Credit (APTC) eligibility
 - Aging of members from 2019 to 2020 is not reflected in analysis
 - Catastrophic plans are not reflected in the analysis
- Caveats
 - The assumptions and resulting estimates and conclusions included in this report are inherently uncertain. Actual results may vary, potentially materially, from our estimates.
 - Premium Rate changes driven by market forces and from the proposed removal of silver plan options may materially impact analysis.
 - Actions by the Connecticut Insurance Department may impact analysis.
 - Changes in the expected annual contribution level and calculation method are unknown (IRS guidance not yet available for 2020)
 - Plans will change in 2020 to comply with Federal AVC requirements.

2020 Plan Offering Analysis

- Additional information is provided in Appendix A.
 - The information in the Appendix is not new, all included slides were presented at the March 21, 2019 meeting

2020 Plan Offering Analysis – Scenario 1

- Impacted Policyholders (Premium)
 - 25-27% of policyholders will experience an increase in premiums
 - 19,000-21,000 policies likely impacted
- Impacted Policyholders (Total Cost = Premium + cost sharing)
 - The eliminated plans have lower AVs
 - Policyholders will receive a plan with a higher AV under proposal
 - 0% to 1.5%: Variation in Silver Copay and Silver Coinsurance Federal AVC, variation in CSR AVCs lower
 - Cost sharing savings may offset increase in premiums for some enrollees

All Family Type Scenarios			Expected Premium Rate Impact								
Metal Level	Subsidy Eligibility	Percent Enrollment	Reduction Pop %	Reduction Premium %	Reduction \$	No Change Pop %	No Change Premium %	No Change \$	Increase Pop %	Increase Premium %	Increase \$
Gold	Not Eligible	4%	0%	0%	\$0	100%	0%	\$0	0%	0%	\$0
Silver	Not Eligible	5%	0%	0%	\$0	65%	0%	\$0	35%	23%	\$222
Bronze	Not Eligible	24%	0%	0%	\$0	100%	0%	\$0	0%	0%	\$0
Gold	Eligible	4%	100%	-31%	-\$196	0%	0%	\$0	0%	0%	\$0
Silver	Eligible	42%	47%	-51%	-\$148	0%	0%	\$0	53%	120%	\$39
Bronze	Eligible	22%	81%	-82%	-\$107	19%	0%	\$0	0%	0%	\$0
Total		100%	40%	-59%	-\$135	33%	0%	\$0	27%	102%	\$52

2020 Plan Offering Analysis – Scenario 2

- Assumes all members in Silver Non-Standard & Standard Coinsurance switch to lowest cost silver plan available, Single over 35 by FPL
- If members choose to shop for another Silver plan, there is potential for them to reduce the premium increase shown on the prior slide.
 - Not all members will be able to reduce premiums if they are already with the lowest cost carrier in their area.
 - Approximately 25,000 or 62% of members in Silver plans are already enrolled with the lowest cost carrier in their area

All Family Type Scenarios			Expected Premium Rate Impact								
Metal Level	Subsidy Eligibility	Percent Enrollment	Reduction Pop %	Reduction Premium %	Reduction \$	No Change Pop %	No Change Premium %	No Change \$	Increase Pop %	Increase Premium %	Increase \$
Gold	Not Eligible	4%	0%	0%	\$0	100%	0%	\$0	0%	0%	\$0
Silver	Not Eligible	5%	0%	0%	\$0	65%	0%	\$0	35%	21%	\$199
Bronze	Not Eligible	24%	0%	0%	\$0	100%	0%	\$0	0%	0%	\$0
Gold	Eligible	4%	100%	-31%	-\$196	0%	0%	\$0	0%	0%	\$0
Silver	Eligible	42%	54%	-52%	-\$141	0%	0%	\$0	46%	96%	\$31
Bronze	Eligible	22%	81%	-82%	-\$107	19%	0%	\$0	0%	0%	\$0
Total		100%	44%	-60%	-\$132	33%	0%	\$0	24%	80%	\$45

2020 Plan Offering Analysis – Scenario 3

- Assumes all members in Silver Non-Standard & Standard Coinsurance switch to lowest cost bronze plan, Single over 35 by FPL
- If members choose to shop and move to the lowest cost Bronze plan, there is potential for them to reduce the premium increase shown on the prior slides.
 - Members would likely have a sizable increase in cost sharing. Depending on their specific health needs, this may not result in a reduction in total cost
 - Table reflects all members moving to Bronze, though members in CSR plans may be less likely to switch, due to the significant increase in cost sharing.

All Family Type Scenarios			Expected Premium Rate Impact								
Metal Level	Subsidy Eligibility	Percent Enrollment	Reduction Pop %	Reduction Premium %	Reduction \$	No Change Pop %	No Change Premium %	No Change \$	Increase Pop %	Increase Premium %	Increase \$
Gold	Not Eligible	4%	0%	0%	\$0	100%	0%	\$0	0%	0%	\$0
Silver	Not Eligible	5%	35%	-25%	-\$83	65%	0%	\$0	0%	0%	\$0
Bronze	Not Eligible	24%	0%	0%	\$0	100%	0%	\$0	0%	0%	\$0
Gold	Eligible	4%	100%	-31%	-\$196	0%	0%	\$0	0%	0%	\$0
Silver	Eligible	42%	100%	-75%	-\$144	0%	0%	\$0	0%	0%	\$0
Bronze	Eligible	22%	81%	-82%	-\$107	19%	0%	\$0	0%	0%	\$0
Total		100%	67%	-73%	-\$135	33%	0%	\$0	0%	0%	\$0

Further Discussion/Vote

2020 Plan Design Review

Summary of 2020 AV Changes

Individual Market	Gold	Silver Copay	Silver Coinsurance	Bronze	Bronze HSA
Permissible AV Range	76.0%-82.0%	66.0%-72.0%	66.0%-72.0%	56.0%-65.0% ¹	56.0%-65.0% ¹
2019 AV Range	80.% to 82.0%	70.1% to 71.9%	70.1% to 70.4%	64.0% to 64.6%	62.5%
2020 AV Range	82.2% to 82.8%	71.8% to 73.1%	70.8% to 71.4%	65.4% to 66.0%	63.7%

¹ Bronze plan designs are eligible for new expanded "de minimis" range

Individual Market - CSR Plan Variations: Silver Copay	73% AV CSR	87% AV CSR	94% AV CSR
Permissible AV Range	72.0%-74.0% ²	86.0%-88.0%	93.0%-95.0%
2019 AV Range	72.3% to 73.9%	86.9% to 87.9%	93.9% to 94.7%
2020 AV Range	73.8% to 75.1%	88.1% to 88.6%	94.9% to 95.0%

Individual Market - CSR Plan Variations: Silver Coinsurance	73% AV CSR	87% AV CSR	94% AV CSR
Permissible AV Range	72.0%-74.0% ²	86.0%-88.0%	93.0%-95.0%
2019 AV Range	73.3% to 73.5%	87.3% to 87.5%	94.76%
2020 AV Range	73.8% to 74.5%	87.9% to 88.03%	95.01%

² 73.0% CSR Silver must be have a differential of 2.0%+ with Standard Silver

2020 Benefit Cost-Sharing MOOP Backup Plan

- Contingency Planning: Under §156.130(a)(2), CMS proposed a maximum annual limitation on cost sharing of \$8,200 for self-only coverage, whereas they would have proposed a maximum annual limitation on cost sharing of \$8,000 for self-only coverage if employer-sponsored insurance premiums continued to be used in the premium adjustment percentage calculation for the 2020 benefit year.
- The following suggestions were proposed - carrier review not yet completed
 - Silver: MOOP \$8,200 limited to \$8,000; increase medical deductible by \$200
 - Bronze: MOOP \$8,200 limited to \$8,000; increase medical deductible by \$600
- This limit does not apply to HSA (Health Savings Account) qualified High Deductible Health Plans (HDHPs). That limit is released by the IRS in the spring.

2019 Plan Design Overview with 2020 Plan Samples

The 2020 plan samples have been reviewed for AVC or Mental Health Parity compliance by Carriers

2020 - Individual Market Plans

Static Benefit Cost Sharing Features

- No changes are proposed to these features for 2020

Individual Market	Gold	Silver Copay	Bronze Non-HSA
Coinsurance	30%	40%	40%
Inpatient Hospital	\$500 per day (after ded., \$1,000 max. per admission)	\$500 per day (after ded., \$2,000 max. per admission)	\$500 per day (after ded., \$1,000 max. per admission)
Advanced Radiology (CT/PET Scan, MRI)	\$65	\$75	\$75 (after ded.)
Rehabilitative & Habilitative Therapy (Physical, Speech, Occupational) Combined 40 visit calendar year maximum, separate for each type	\$20	\$30*	\$30* (after ded.)
Chiropractic Care 20 visit calendar maximum	\$40	\$50	\$50 (after ded.)
All Other Medical	30%	40%	40% (after ded.)

2020 - Individual Market Gold Plan, 80% AV

Individual Market	2019 Gold	Sample Plan 5	Sample Plan 7
Medical Deductible	\$1,300 (INN)/\$3,000 (OON)	\$1,300	\$2,100
Rx Deductible	\$50 (INN)/\$350 (OON)	\$50	\$50
Out-of-pocket Maximum	\$5,000 (INN)/\$10,000 (OON)	\$5,250	\$5,250
Primary Care	\$20	\$20	\$25
Specialist Care	\$40	\$40	\$50
Urgent Care	\$50	\$50	\$75
Emergency Room	\$200	\$400	\$400
Outpatient Hospital	\$500 (after ded.)	\$300@ASC/\$500 otherwise (after ded.)	\$300@ASC/\$500 otherwise (after ded.)
Non-Advanced Radiology (X-ray, Diagnostic)	\$40 (after ded.)	\$40 (after ded.)	\$40
Laboratory Services	\$10 (after ded.)	\$10 (after ded.)	\$10
Generic / Preferred Brand / Non-Preferred Brand / Specialty Rx	\$5 / \$25 / \$50 / 20% (spec. after ded., \$100 max per spec. script)	\$5 / \$35 / \$60 / 20% (spec. after ded., \$100 max per spec. script)	\$5 / \$35 / \$60 / 20% (spec. after ded., \$100 max per spec. script)
Mental health intensive outpatient program and partial hospitalization (MH IOP/PHP)			Outpatient Facility & Outpatient Physician (not subject to deductible)
2020 AVC Results		81.91%	81.93%

Further Discussion/Vote

2020 - Individual Market Bronze Non-HSA Plan, 65% AV

Individual Market	2019 Bronze Non-HSA	Sample Plan 2	Sample Plan 4
Combined Medical/Rx Deductible	\$6,000 (INN)/\$12,000 (OON)	\$6,075	\$6,575
Out-of-pocket Maximum	\$7,900 (INN)/\$15,800 (OON)	\$8,200	\$8,200
Primary Care	\$40	\$40	\$40
Specialist Care	\$50 (after ded.)	\$60 (after ded.)	\$60 (after ded.)
Urgent Care	\$75	\$75	\$100
Emergency Room	\$200 (after ded.)	\$450 (after ded.)	\$450 (after ded.)
Outpatient Hospital	\$500 (after ded.)	\$300@ASC/\$500 otherwise (after ded.)	\$300@ASC/\$500 otherwise (after ded.)
Non-Advanced Radiology (X-ray, Diagnostic)	\$40 (after ded.)	\$40 (after ded.)	\$50 (after ded.)
Laboratory Services	\$10 (after ded.)	\$10 (after ded.)	\$20 (after ded.)
Generic / Preferred Brand / Non-Preferred Brand / Specialty Rx	\$5 / 50% / 50% / 50% (all but generic after ded., \$500 max per spec. script)	\$10 / 50% / 50% / 50% (all but generic after ded., \$500 max per spec. script)	\$10 / 50% / 50% / 50% (all but generic after ded., \$500 max per spec. script)
2020 AVC Results		64.98%	64.65%

Further Discussion/Vote

2019 Plan Design Overview with 2020 Plan Samples Silver Copay CSR Options

The 2020 plan samples have been reviewed for AVC or Mental Health Parity compliance by Carriers

2020 - Individual Market Silver Copay Plan, 70% AV

Individual Market	2019 Silver Copay	Sample Plan 2
Medical Deductible	\$4,300 (INN)/ \$8,600 (OON)	\$4,300
Rx Deductible	\$250 (INN)/ \$500 (OON)	\$250
Out-of-pocket Maximum	\$7,900 (INN)/ \$15,800 (OON)	\$8,200
Primary Care	\$40	\$40
Specialist Care	\$50	\$60
Urgent Care	\$75	\$75
Emergency Room	\$200 (after ded.)	\$450 (after ded.)
Outpatient Hospital	\$500 (after ded.)	\$300@ASC/\$500 otherwise (after ded.)
Non-Advanced Radiology (X-ray, Diagnostic)	\$40 (after ded.)	\$40 (after ded.)
Laboratory Services	\$10 (after ded.)	\$10 (after ded.)
Generic / Preferred Brand / Non-Preferred Brand / Specialty Rx	\$5 / \$35 / \$60 / 20% (all but generic after ded., \$200 max per spec. script)	\$10 / \$45 / \$70 / 20% (all but generic after ded., \$200 max per spec. script)
2020 AVC Results		71.93%

Changes from the 2019 plan design are shown in red font.

*Cost sharing at maximum copay allowable as specified by Statute

2020 - Individual Market Silver 73% AV CSR Copay Plan

Individual Market	2019 Silver Copay, 73% CSR	Sample Plan 2, 73% CSR
Medical Deductible	\$3,900	\$3,900
Rx Deductible	\$250	\$250
Out-of-pocket Maximum	\$6,300	\$6,550
Primary Care	\$40	\$40
Specialist Care	\$50	\$60
Urgent Care	\$75	\$75
Emergency Room	\$200 (after ded.)	\$450 (after ded.)
Outpatient Hospital	\$500 (after ded.)	\$300@ASC/\$500 otherwise (after ded.)
Non-Advanced Radiology (X-ray, Diagnostic)	\$40 (after ded.)	\$40 (after ded.)
Laboratory Services	\$10 (after ded.)	\$10 (after ded.)
Generic / Preferred Brand / Non-Preferred Brand / Specialty Rx	\$5 / \$35 / \$60 / 20% (all but generic after ded., \$100 max per spec. script)	\$10 / \$45 / \$70 / 20% (all but generic after ded., \$100 max per spec. script)
2020 AVC Results		73.97%

2020 - Individual Market Silver 87% AV CSR Copay Plan

Individual Market	2019 Silver Copay, 87% CSR	Sample Plan 2, 87% CSR
Medical Deductible	\$600	\$650
Rx Deductible	\$50	\$50
Out-of-pocket Maximum	\$2,300	\$2,500
Primary Care	\$20	\$20
Specialist Care	\$35	\$45
Urgent Care	\$50	\$50
Emergency Room	\$75 (after ded.)	150 (after ded.)
Outpatient Hospital	\$100 (after ded.)	\$60@ASC/\$100 otherwise (after ded.)
Non-Advanced Radiology (X-ray, Diagnostic)	\$30 (after ded.)	\$30 (after ded.)
Laboratory Services	\$10 (after ded.)	\$10 (after ded.)
Generic / Preferred Brand / Non-Preferred Brand / Specialty Rx	\$5 / \$20 / \$35 / 20% (all but generic after ded., \$60 max per spec. script)	\$10 / \$25 / \$40 / 20% (non-preferred brand and spec. after ded., \$60 max per spec. script)
2020 AVC Results		87.88%

Changes from the 2019 plan design are shown in red font.
*Cost sharing at maximum copay allowable as specified by Statute

2020 - Individual Market Silver 94% AV CSR Copay Plan

Individual Market	2019 Silver Copay, 87% CSR	Sample Plan 2, 94% CSR
Medical Deductible	\$0	\$0
Rx Deductible	\$0	\$0
Out-of-pocket Maximum	\$900	\$900
Primary Care	\$10	\$10
Specialist Care	\$30	\$30
Urgent Care	\$40	\$40
Emergency Room	\$50	\$50
Outpatient Hospital	\$75	\$45@ASC/\$75 otherwise
Non-Advanced Radiology (X-ray, Diagnostic)	\$25	\$25
Laboratory Services	\$10	\$10
Generic / Preferred Brand / Non-Preferred Brand / Specialty Rx	\$5 / \$10 / \$30 / 20% (\$60 max per spec. script)	\$5 / \$10 / \$30 / 20% (\$60 max per spec. script)
2020 AVC Results		94.98%

2020 - Individual Market Silver Copay CSR Options

Individual Market	Individual Market Silver 73% Plan – Copay Option	Individual Market Silver 87% Plan – Copay Option	Individual Market Silver 94% Plan – Copay Option
Medical Deductible	\$3,900	\$650	\$0
Rx Deductible	\$250	\$50	\$0
Coinsurance	40%	40%	40%
Out-of-pocket Maximum	\$6,550	\$2,500	\$900
Primary Care	\$40	\$20	\$10
Specialist Care	\$60	\$45	\$30
Urgent Care	\$75	\$50	\$40
Emergency Room	\$450 (after ded.)	\$150 (after ded.)	\$50
Inpatient Hospital	\$500 Per Day (after ded., \$2,000 max. per admission)	\$100 Per Day (after ded., \$400 max. per admission)	\$75 Per Day (\$300 max. per admission)
Outpatient Hospital	\$300@ASC/\$500 otherwise (after ded.)	\$60@ASC/\$100 otherwise (after ded.)	\$45@ASC/\$75 otherwise
Advanced Radiology (CT/PET Scan, MRI)	\$75	\$60	\$50
Non-Advanced Radiology (X-ray, Diagnostic)	\$40 (after ded.)	\$30 (after ded.)	\$25
Laboratory Services	\$10 (after ded.)	\$10 (after ded.)	\$10
Rehabilitative & Habilitative Therapy (Physical, Speech, Occupational) Combined 40 visit calendar year maximum, separate for each type	\$30	\$20	\$20
Chiropractic Care 20 visit calendar maximum	\$50	\$30	\$20
All Other Medical	40%	40%	40%
Generic / Preferred Brand / Non- Preferred Brand / Specialty Rx	\$10 / \$45 / \$70 / 20% (all but generic after ded., \$100 max per spec. script)	\$10 / \$25 / \$40 / 20% (non-preferred brand and spec. after ded., \$60 max per spec. script)	\$5 / \$10 / \$30 / 20% (\$60 max per spec. script)

*Cost sharing at maximum copay allowable as specified by Statute

Further Discussion/Vote

2019 Plan Design Overview with 2020 Plan Samples Silver Coinsurance CSR Options

The 2020 plan samples have been reviewed for AVC or Mental Health Parity compliance by Carriers

2020 - Individual Market Silver Coinsurance Plan, 73% AV

Individual Market	2019 Individual Market Silver 73% Plan – Coinsurance Option	2020 Individual Market Silver 73% Plan – Coinsurance Option 1
Medical Deductible	\$2,600 (2x family)	\$2,750 (2x family)
Rx Deductible	\$250 (2x family)	\$250 (2x family)
Coinsurance	30%	30%
Out-of-pocket Maximum	\$6,300 (2x family)	\$6,550 (2x family)
2020 AVC Results		73.90% (satisfies 2% differential)

2020 - Individual Market Silver Coinsurance Plan, 87% AV

Individual Market	2019 Individual Market Silver 87% Plan – Coinsurance Option	2020 Individual Market Silver 87% Plan – Coinsurance Option 1
Medical Deductible	\$500 (2x family)	\$500 (2x family)
Rx Deductible	\$50 (2x family)	\$50 (2x family)
Coinsurance	20%	20%
Out-of-pocket Maximum	\$2,300 (2x family)	\$2,400 (2x family)
2020 AVC Results		87.86%

2020 - Individual Market Silver Coinsurance Plan, 94% AV

Individual Market	2019 Individual Market Silver 94% Plan – Coinsurance Option	2020 Individual Market Silver 94% Plan – Coinsurance Option 1
Medical Deductible	\$0	\$0
Rx Deductible	\$0	\$0
Coinsurance	20%	20%
Out-of-pocket Maximum	\$750 (2x family)	\$800 (2x family)
2020 AVC Results		94.81%

2020 - Individual Market Silver Coinsurance CSR Options

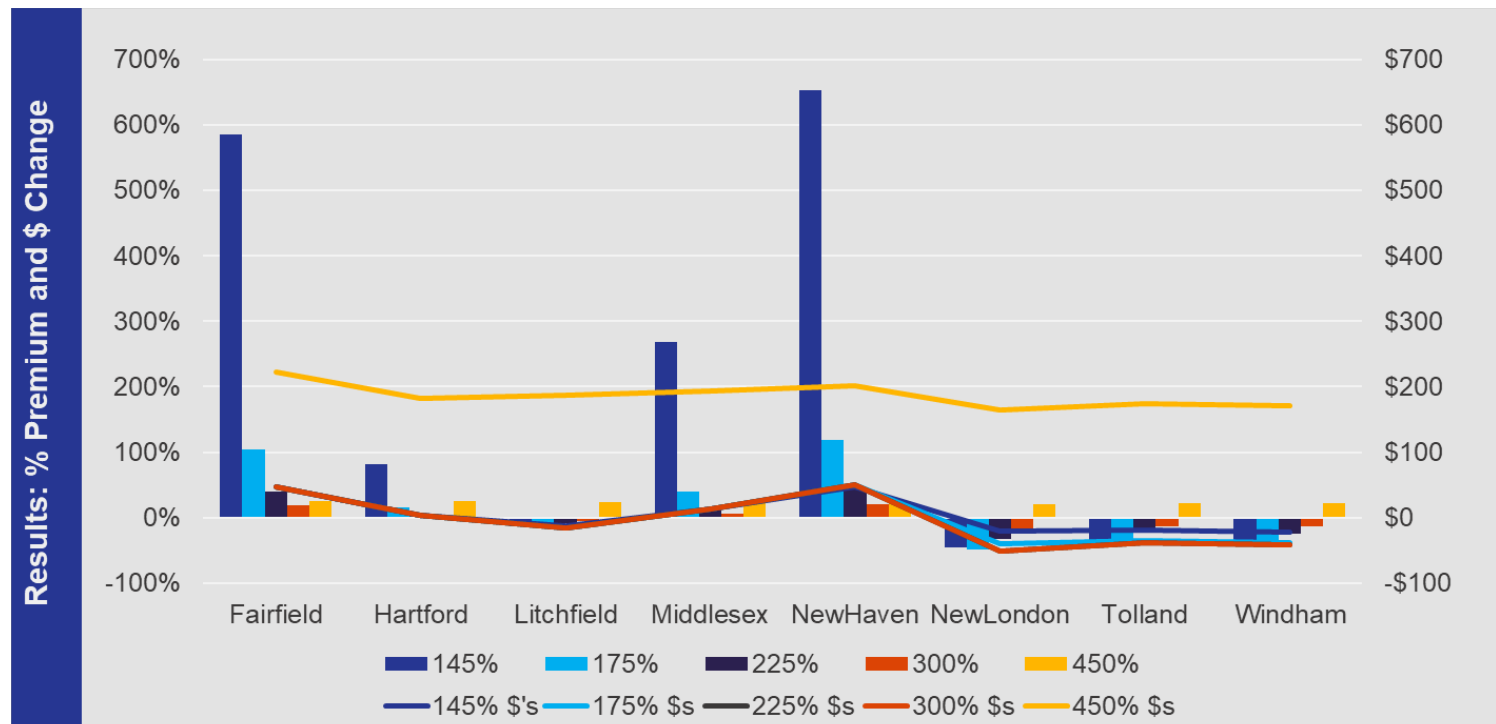
Individual Market	Individual Market Silver 73% Plan – Coinsurance Option	Individual Market Silver 87% Plan – Coinsurance Option 1	Individual Market Silver 94% Plan – Coinsurance Option
Primary Care	30%	20%	20%
Specialist Care	30% (after ded.)	20% (after ded.)	20%
Urgent Care	30% (after ded.)	20% (after ded.)	20%
Emergency Room	30% (after ded.)	20% (after ded.)	20%
Inpatient Hospital	30% (after ded.)	20% (after ded.)	20%
Outpatient Hospital	30% (after ded.)	20% (after ded.)	20%
Advanced Radiology (CT/PET Scan, MRI)	30% (after ded.)	20% (after ded.)	20%
Non-Advanced Radiology (X-ray, Diagnostic)	30% (after ded.)	20% (after ded.)	20%
Laboratory Services	30% (after ded.)	20% (after ded.)	20%
Rehabilitative & Habilitative Therapy (Physical, Speech, Occupational) Combined 40 visit calendar year maximum, separate for each type	30% (after ded.)	20% (after ded.)	20%
Chiropractic Care 20 visit calendar maximum	30% (after ded.)	20% (after ded.)	20%
All Other Medical	30%	30%	30%
Generic / Preferred Brand / Non- Preferred Brand / Specialty Rx	\$5 / 30% / 30% / 30% (all but generic after Rx ded., \$100 max per spec. script)	\$5 / 20% / 20% / 20% (all but generic after Rx ded., \$60 max per spec. script)	\$5 / 20% / 20% / 20% (\$60 max per spec. script)

Further Discussion/Vote

Appendix A
2020 Plan Offering Review
Slides Presented at March 21, 2019 Meeting

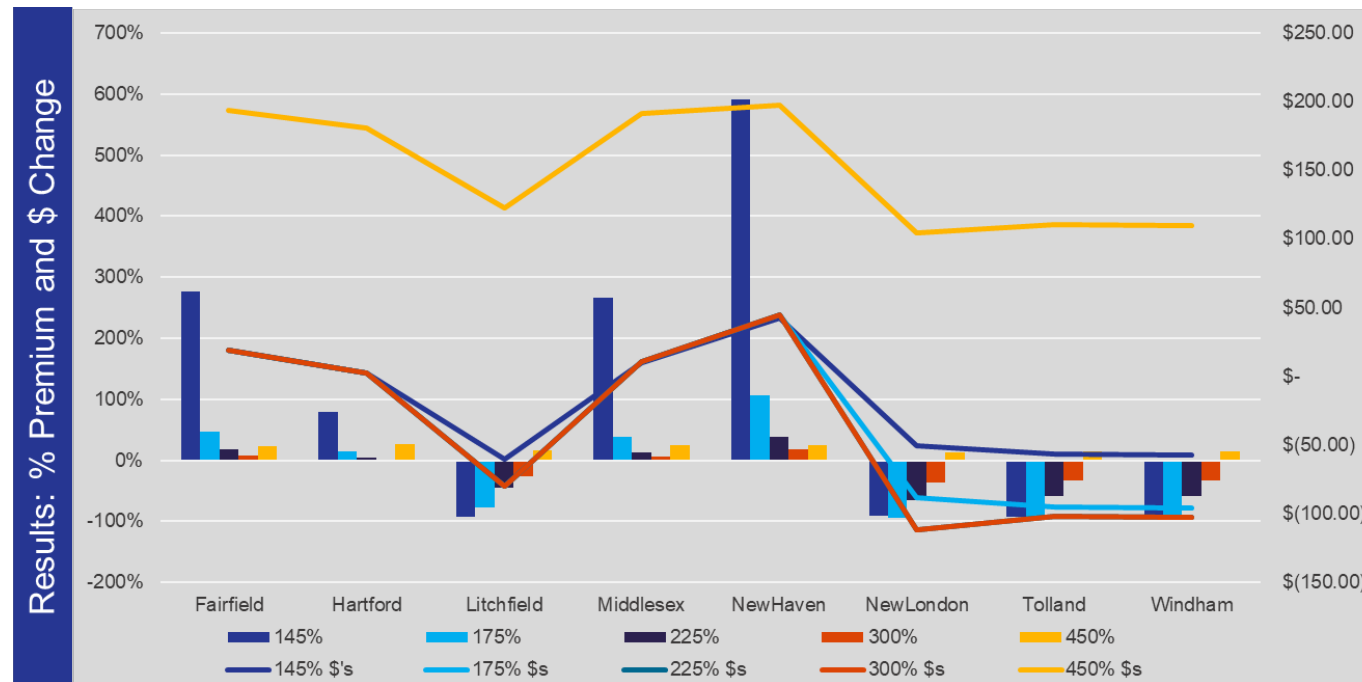
2020 Plan Offering Analysis – Scenario 1

- Members in Silver Non-Standard & Standard Coinsurance plan are mapped to the applicable carrier's remaining Standard Silver copay plan, Single over 35 by FPL
- Enrollment: 12,405 Subsidized, 365 non-subsidized policies
- This is the same scenario that was presented during the March 14th meeting.



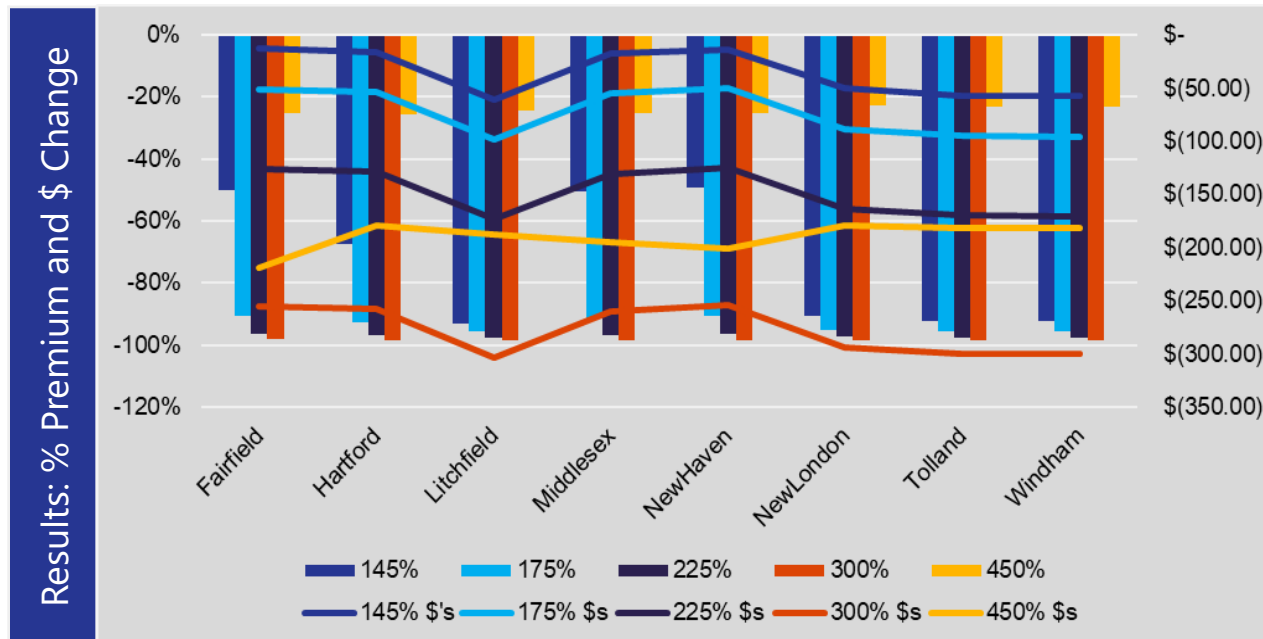
2020 Plan Offering Analysis – Scenario 2

- Assumes all members in Silver Non-Standard & Standard Coinsurance switch to lowest cost silver plan available, Single over 35 by FPL
- If members choose to shop for another Silver plan, there is potential for them to reduce the premium increase shown on the prior slide.
 - Not all members will be able to reduce premiums if they are already with the lowest cost carrier in their area.

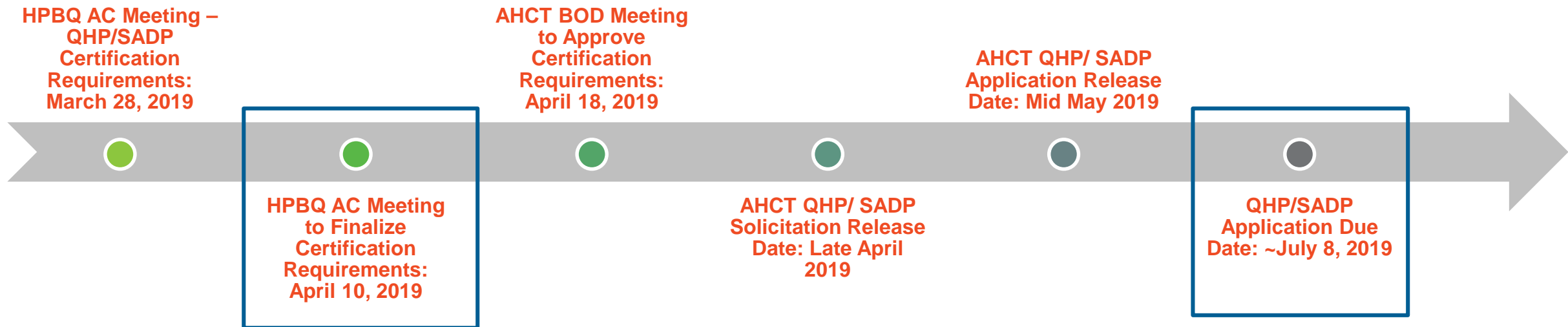


2020 Plan Offering Analysis – Scenario 3

- Assumes all members in Silver Non-Standard & Standard Coinsurance switch to lowest cost bronze plan, Single over 35 by FPL
- If members choose to shop and move to the lowest cost Bronze plan, there is potential for them to reduce the premium increase shown on the prior slides.
 - Members would likely have a sizable increase in cost sharing. Depending on their specific health needs, this may not result in a reduction in total cost
 - Graph reflects all members moving to Bronze, though members in CSR plans may be less likely to switch, due to the significant increase in cost sharing.



QHP/SADP Certification Requirements & Submission: Plan Year 2020 Timeline



-- Future Items for Discussion

-- Action Items

Meeting Schedule

Proposed Meeting Agendas (subject to change)	Target Dates (subject to change)
Final Recommendations for QHP/SADP Certification Requirements for 2020, including Standardized Plan Designs	April 10, 2019
Present HPBQ AC Recommendations for 2020 QHP/SADP Certification Requirements, including Standardized Plan Designs for Board of Directors Review and Approval	April 18, 2019

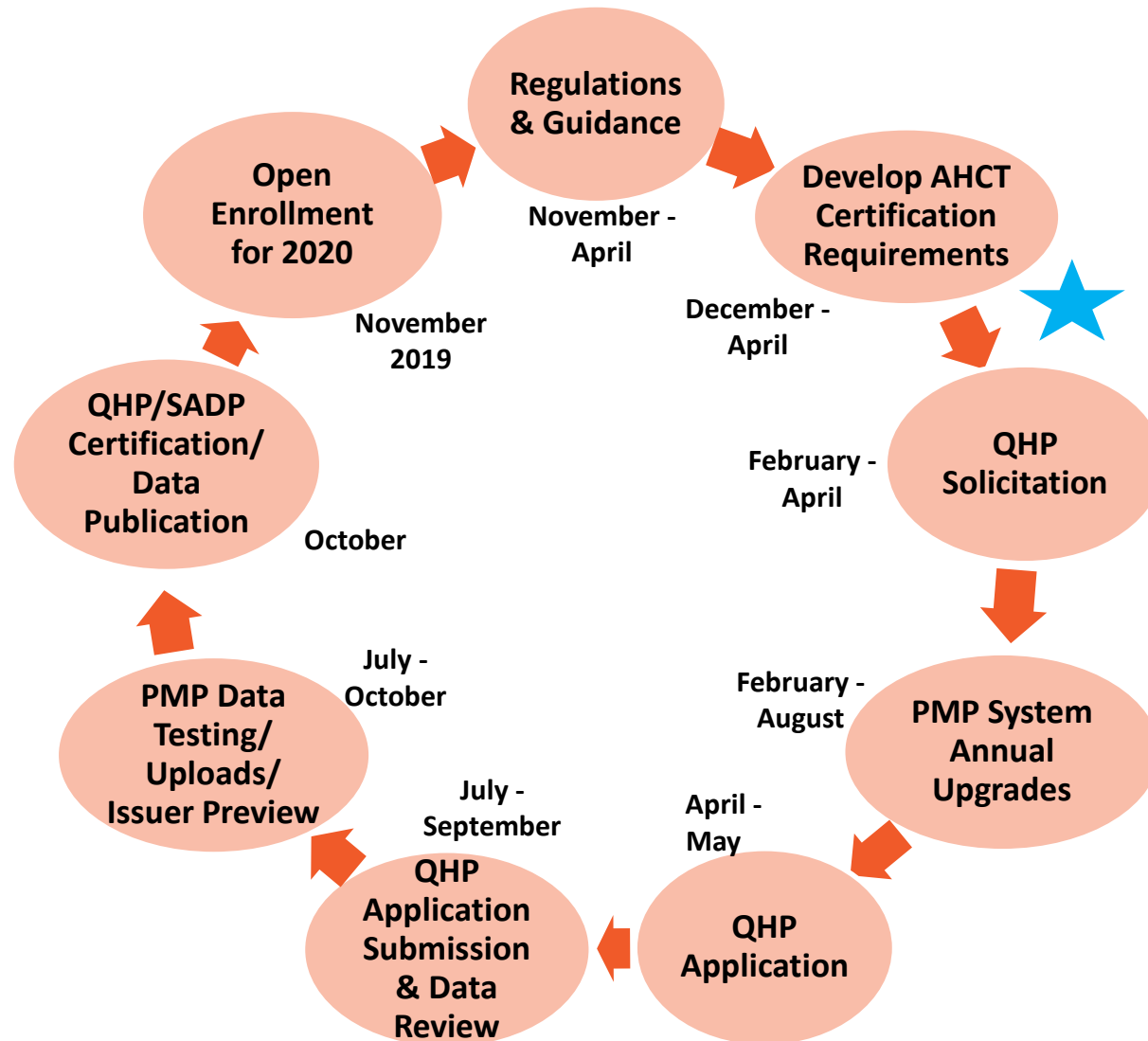
Appendix

2019 Net Premium: 45-year old Lowest Silver vs Lowest Bronze

	Lowest Premium Silver Plan*	Lowest Premium Bronze Plan*	
Fairfield	Choice Silver Alternative POS	Passage Bronze Alternative PCP POS	
Hartford	Choice Silver Alternative POS	Passage Bronze Alternative PCP POS	
Litchfield	Choice Silver Alternative POS	Passage Bronze Alternative PCP POS	
Middlesex	Choice Silver Alternative POS	Passage Bronze Alternative PCP POS	
New Haven	Choice Silver Alternative POS	Passage Bronze Alternative PCP POS	
New London	Silver PPO Pathway X Tiered	Passage Bronze Alternative PCP POS	
Tolland	Silver PPO Pathway X Tiered	Passage Bronze Alternative PCP POS	
Windham	Silver PPO Pathway X Tiered	Passage Bronze Alternative PCP POS	
	Unsubsidized Enrollee - Age 45		
	Lowest Premium Silver Plan	Lowest Premium Bronze Plan	Cost Differential
Fairfield	\$553.56	\$413.29	\$140.27
Hartford	\$449.81	\$335.83	\$113.98
Litchfield	\$496.38	\$370.59	\$125.79
Middlesex	\$488.91	\$365.03	\$123.88
New Haven	\$506.64	\$378.27	\$128.37
New London	\$497.13	\$386.39	\$110.74
Tolland	\$497.13	\$380.38	\$116.75
Windham	\$497.13	\$380.38	\$116.75
	Enrollee with Income at 300% FPL (\$36,420/yr) - Age 45 – Net Cost After Subsidy		
	Lowest Premium Silver Plan	Lowest Premium Bronze Plan	Cost Differential
Fairfield	\$268.28	\$128.01	\$140.27
Hartford	\$269.81	\$155.83	\$113.98
Litchfield	\$301.43	\$175.64	\$125.79
Middlesex	\$267.25	\$143.37	\$123.88
New Haven	\$266.08	\$137.71	\$128.37
New London	\$283.87	\$173.13	\$110.74
Tolland	\$291.85	\$175.10	\$116.75
Windham	\$291.85	\$175.10	\$116.75

	Enrollee with Income at 225% FPL (\$27,315/yr) - Age 45 – Net Cost After Subsidy		
	Lowest Premium Silver Plan	Lowest Premium Bronze Plan	Cost Differential
Fairfield	\$138.61	\$3.14	\$135.47
Hartford	\$140.14	\$26.16	\$113.98
Litchfield	\$171.76	\$45.97	\$125.79
Middlesex	\$137.58	\$13.70	\$123.88
New Haven	\$136.41	\$8.04	\$128.37
New London	\$154.20	\$43.46	\$110.74
Tolland	\$162.18	\$45.43	\$116.75
Windham	\$162.18	\$45.43	\$116.75
	Enrollee with Income at 175% FPL (\$21,245/yr) - Age 45 – Net Cost After Subsidy		
	Lowest Premium Silver Plan	Lowest Premium Bronze Plan	Cost Differential
Fairfield	\$63.75	\$3.14	\$60.61
Hartford	\$65.28	\$2.55	\$62.73
Litchfield	\$96.90	\$2.82	\$94.08
Middlesex	\$62.72	\$2.77	\$59.95
New Haven	\$61.55	\$2.87	\$58.68
New London	\$79.34	\$2.94	\$76.40
Tolland	\$87.32	\$2.89	\$84.43
Windham	\$87.32	\$2.89	\$84.43
	Enrollee with Income at 145% FPL (\$17,603) - Age 45 – Net Cost After Subsidy		
	Lowest Premium Silver Plan	Lowest Premium Bronze Plan	Cost Differential
Fairfield	\$25.36	\$3.14	\$22.22
Hartford	\$26.89	\$2.55	\$24.34
Litchfield	\$58.51	\$2.82	\$55.69
Middlesex	\$24.33	\$2.77	\$21.56
New Haven	\$23.16	\$2.87	\$20.29
New London	\$40.95	\$2.94	\$38.01
Tolland	\$48.93	\$2.89	\$46.04
Windham	\$48.93	\$2.89	\$46.04

Plan Management Certification Life Cycle



Each plan year, the cycle begins with the release of regulations and guidance, including the Actuarial Value Calculator (AVC) tool used to develop standardized plans, and ends once Open Enrollment commences

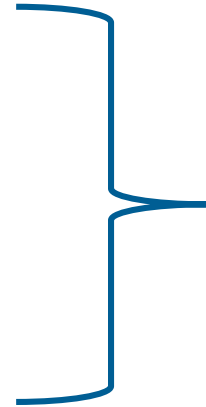
Note: timeframes subject to change

2019 Plan Mix: Number of Plans Required / Permitted per Issuer

	INDIVIDUAL MARKET		SHOP
Metal Level	Standardized Plans	Non-Standard Plans	Total
Platinum	N/A	2	4 (Optional)
Gold	1	3	Min 1 – Max 6
Silver	2	1	Min 2 – Max 6
Bronze	2	3	Min 2 – Max 4
Catastrophic	N/A	1	N/A
TOTAL	5 Required	10 Optional	5 Required / 15 Optional
Maximum per Issuer	15		20

2019 AHCT Plan Enrollment: Standardized / Non-Standard QHPs

Metal Level	Total	Percent
Catastrophic	1,910	1.72%
Bronze	49,134	44.24%
Silver	53,886	48.52%
Gold	6,136	5.52%
TOTAL	111,066	100.00%



**Std Silver Plans	Total	Percent of Std Silver
Copay Based	21,369	87.5%
Coinsurance Based	3,055	12.5%
TOTAL	24,424	100.00%

Metal Level	Standardized Plans	Non-Standard Plans	Total	Percent in Std Plans by Metal Level
Catastrophic	N/A	1,910	1,910	0.0%
Bronze*	40,166	8,968	49,134	81.75%
Silver**	24,424	29,462	53,886	45.33%
Gold	5,222	914	6,136	85.10%
TOTAL	69,812	41,254	111,066	62.86%

*Bronze Plans	Standardized Plans	Non-Standard Plans	Total	Percent in Standardized Plans
Non-HSA Bronze	24,320	8,968	33,198	72.99%
HSA Compatible	15,936	N/A	15,936	100.00%
TOTAL	40,166	8,968	49,134	81.75%

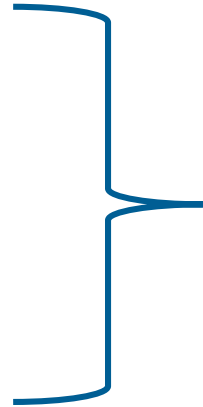


2019 AHCT Plan Enrollment: Standardized / Non-Standard QHPs

	GOLD		SILVER		BRONZE (NOT HSA compatible)		BRONZE (HSA compatible)		CATASTROPHIC	
County	Standard	Non-Std	Standard	Non-Std	Standard	Non-Std	Standard	Non-Std	Non-Std	Total
Fairfield	1,902	263	7,338	9,621	8,967	1,899	5,569	N/A	553	36,112
Hartford	1,214	107	5,292	6,906	4,470	2,690	3,476	N/A	483	24,638
Litchfield	356	101	1,729	1,689	1,594	751	1,272	N/A	119	7,611
Middlesex	321	33	1,187	1,294	1,312	353	857	N/A	104	5,461
New Haven	1,004	194	5,396	7,003	5,277	1,622	3,054	N/A	449	23,999
New London	213	108	2,009	1,515	1,370	763	925	N/A	109	7,012
Tolland	133	63	827	792	767	548	478	N/A	51	3,659
Windham	79	45	646	642	473	342	305	N/A	42	2,574
Total	5,222	914	24,424	29,462	24,230	8,968	15,936	N/A	1,910	111,066
	6,136		53,886		33,198		15,936		1,910	
					49,134					

2018 AHCT Plan Enrollment: Standardized / Non-Standard QHPs

Metal Level	Total	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 Std Plans by Metal Level
Catastrophic	N/A	1,752	1,752	0.0%
Bronze*	34,479	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%

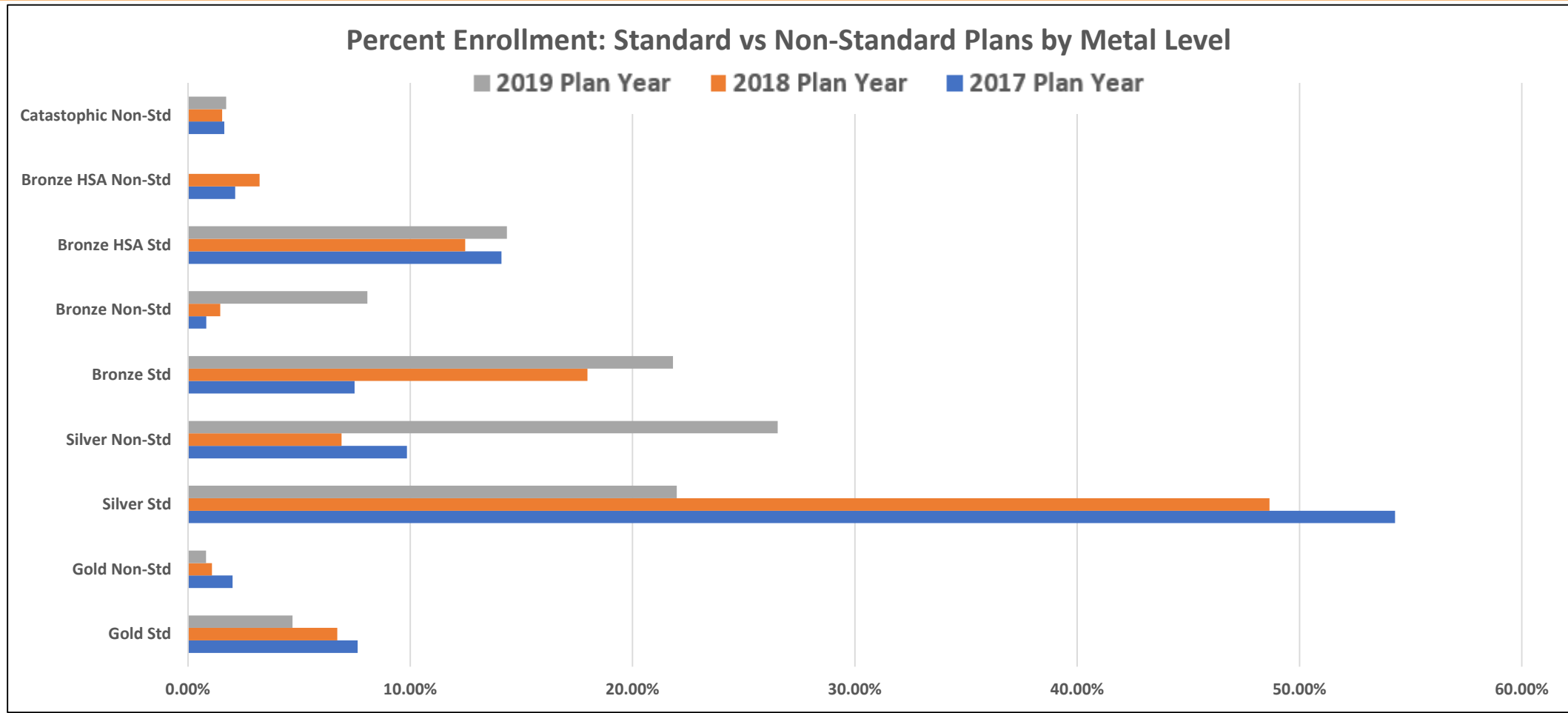
*Bronze Plans	Standardized Plans	Non-Standard Plans	Total	Percent in Standardized Plans
Non-HSA Bronze	14,238	3,670	17,908	79.51%
HSA Compatible	20,511	1,655	22,166	92.53%
TOTAL	34,749	5,325	40,074	86.71%



2018 AHCT Plan Enrollment: Standardized / Non-Standard QHPs

	GOLD		SILVER		BRONZE (NOT HSA compatible)		BRONZE (HSA compatible)		CATASTROPHIC	
County	Standard	Non-Std	Standard	Non-Std	Standard	Non-Std	Standard	Non-Std	Non-Std	Total
Fairfield	2,648	284	17,239	2,270	7,057	372	4,749	898	436	35,953
Hartford	1,835	155	12,675	1,585	4,801	257	2,792	936	479	25,515
Litchfield	578	144	3,736	613	1,429	163	971	295	98	8,027
Middlesex	449	47	2,526	390	1,156	68	721	122	96	5,575
New Haven	1,425	298	12,538	1,674	4,128	355	3,069	749	404	24,640
New London	336	165	3,668	688	963	263	994	343	124	7,544
Tolland	242	87	1,734	358	636	93	544	200	87	3,981
Windham	158	47	1,410	306	341	84	398	127	28	2,899
Total	7,671	1,227	55,526	7,884	20,511	1,655	14,238	3,670	1,752	114,134
	8,898		63,410		22,166		17,908		1,752	
					40,074					

AHCT Plan Enrollment 2017 – 2019 Plan Years: Standardized / Non-Standard QHPs

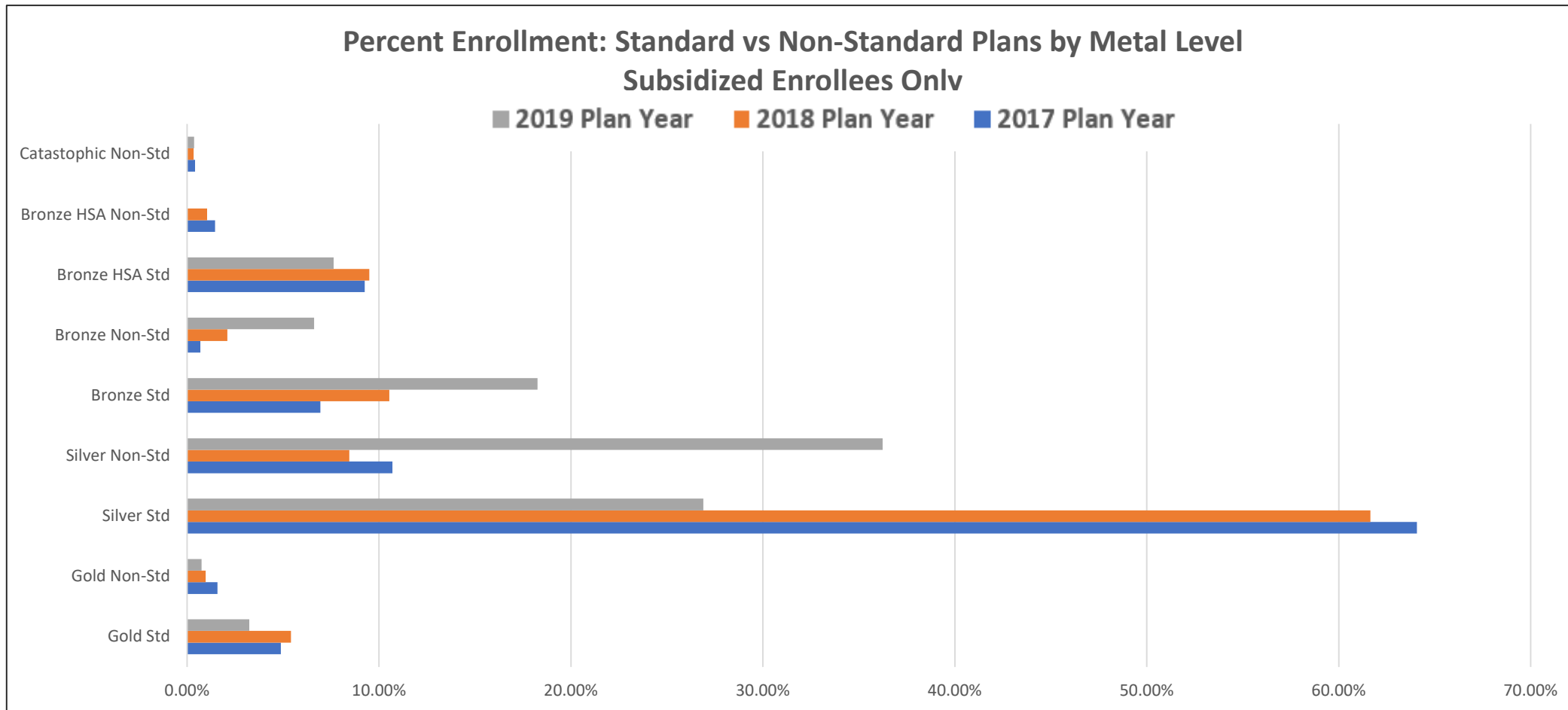


2019 Plan Year: Silver Standard Plan total includes enrollment in both the “Copay” and “Coinsurance” versions, with a split of 87.5% / 12.5% respectively

Data for Individual AHCT plans as of end of open enrollment for each plan year



AHCT Plan Enrollment 2017 – 2019 Plan Years: Standardized / Non-Standard QHPs

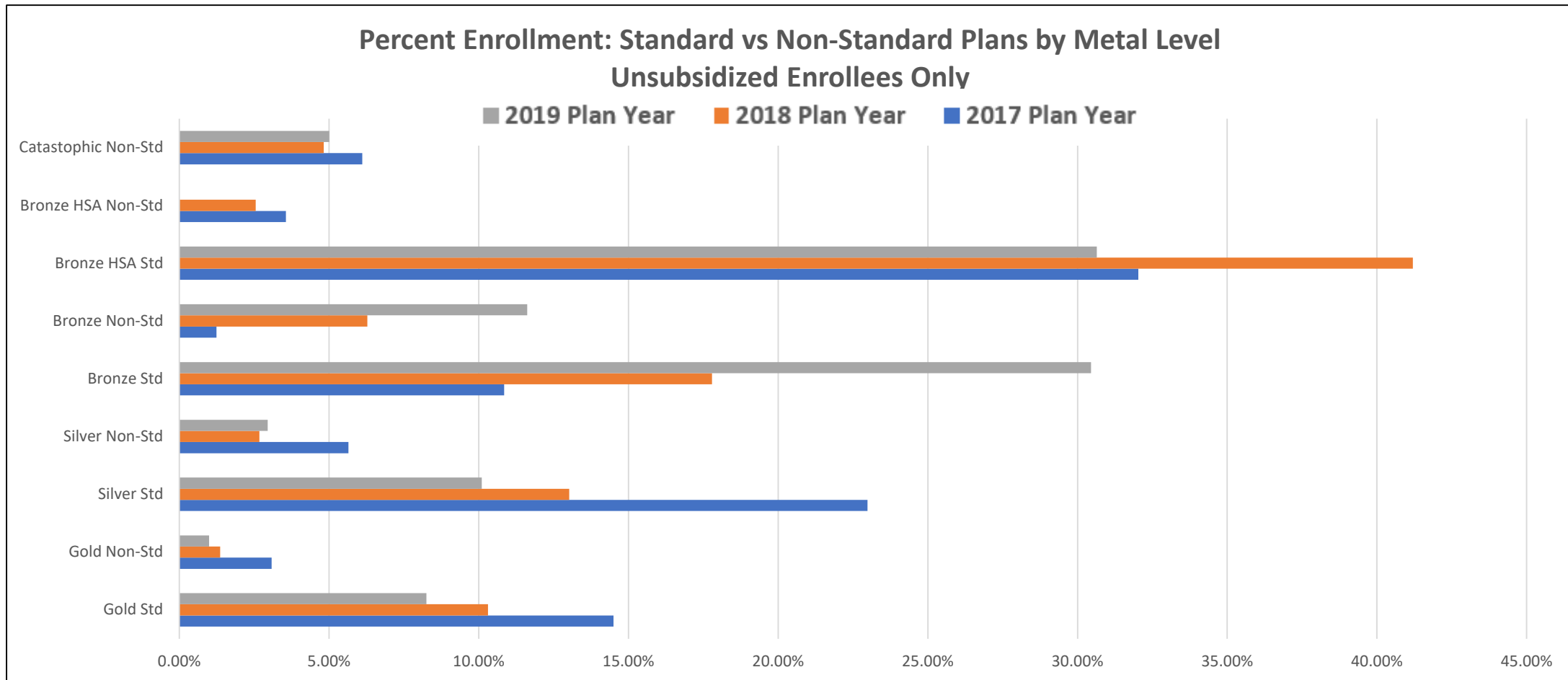


2019 Plan Year: Silver Standard Plan total includes enrollment in both the “Copay” and “Coinsurance” versions, with a split of 86.7% / 13.3% respectively

Data for Individual AHCT plans as of end of open enrollment for each plan year



AHCT Plan Enrollment 2017 – 2019 Plan Years: Standardized / Non-Standard QHPs



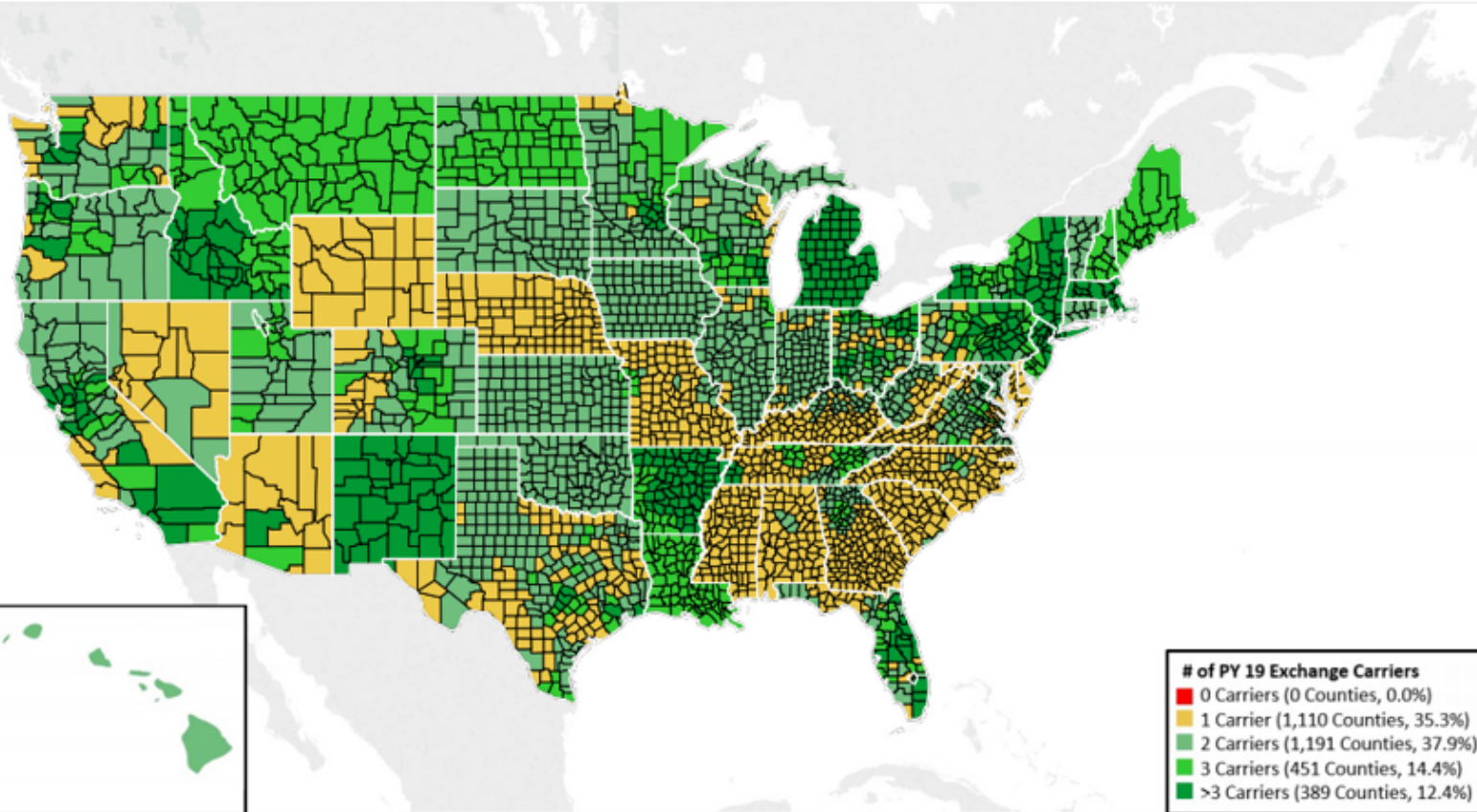
2019 Plan Year: Silver Standard Plan total includes enrollment in both the “Copay” and “Coinsurance” versions, with a split of 92.4% / 7.6% respectively

Data for Individual AHCT plans as of end of open enrollment for each plan year



Issuer Participation - 2019

County by County Plan Year 2019 Insurer Participation in Health Insurance Exchanges



-All State-based Exchange data is self-reported from the Exchanges to CMS (CA, CO, CT, DC, ID, MA, MD, MN, NY, RI, VT, WA)

-Federally-facilitated Exchange data reflected on this map is point in time as of 09/28/2018

Data source: <https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Downloads/Final-2019-County-Coverage-Map.pdf>

Plan Design Development: Benefit Cost Sharing Categories

Actuarial Value Calculator (AVC) Inputs
Integrated Medical and Drug Deductible? (Yes or No)
Apply Inpatient Copay per Day? (Yes or No)
Apply Skilled Nursing Facility Copay per Day? (Yes or No)
Use Separate OOP Maximum for Medical and Drug Spending? (Yes or No)
Deductible (\$) for Medical, Drug or Combined
Coinsurance (% , Insurer's Cost Share)
Maximum Out-of-Pocket (MOOP)
MOOP if Separate (\$)

Medical Benefits: Subject to Deductible (Yes or No) Subject to Coinsurance (Yes or No) Coinsurance (Insurer's Cost Share) or Copay Values (Member Cost Share)
Emergency Room Services
All Inpatient Hospital Services (inc. MHSU)
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)
Specialist Visit
Mental/Behavioral Health and Substance Use Disorder Outpatient Services
Imaging (CT/PET Scans, MRIs)
Speech Therapy
Occupational and Physical Therapy
Preventive Care/Screening/Immunization
Laboratory Outpatient and Professional Services
X-rays and Diagnostic Imaging
Skilled Nursing Facility
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)
Outpatient Surgery Physician/Surgical Services

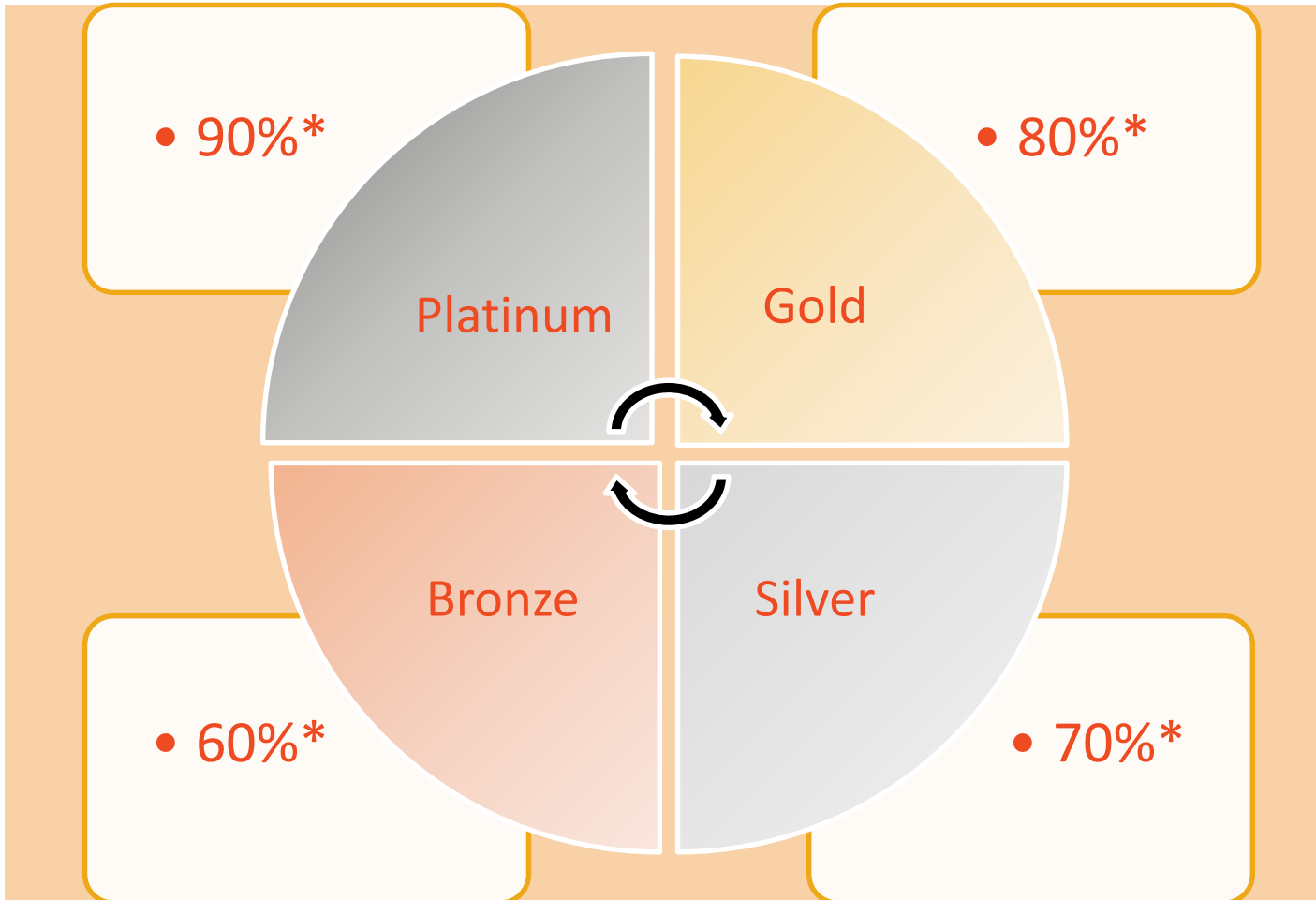
Prescription Drug Benefits Subject to Deductible (Yes or No) Subject to Coinsurance (Yes or No) Coinsurance (Insurer's Cost Share) or Copay Values (Member Cost Share)
Generics
Preferred Brand Drugs
Non-Preferred Brand Drugs
Specialty Drugs (i.e. high-cost)

Options for Additional Benefit Design Limits:
Set a Maximum on Specialty Rx Coinsurance Payments? (Yes or No) If yes, value:
Set a Maximum Number of Days for Charging an IP Copay? (Yes or No) If yes, value from 1-10:
Begin Primary Care Cost-Sharing After a Set Number of Visits? (Yes or No) If yes, value from 1-10:
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays? (Yes or No) If yes, value from 1-10:

Other Elements for Consideration Not Included in AVC
Out-of-Network Deductible and Cost Sharing
Chiropractic Services
Diabetic Equipment and Supplies
Durable Medical Equipment
Home Health Care
Mammography Ultrasound
Urgent Care
Pediatric Services, including vision (exam & hardware) and dental

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%*