



Mississippi Health Insurance Exchange Advisory Board

Mississippi Insurance Department

Commissioner Mike Chaney

March 14, 2012

Overview of Essential Health Benefits

Essential Health Benefits

- When: Effective 2014
- Where: Inside and outside the Exchange
- Who: Individual and small group markets
- What: Comprehensive package of items and services equal the scope of benefits provided under a “typical” employer plan

EHB Benefit Categories

- Ambulatory patient services
- Emergency services
- Hospitalization
- Maternity and newborn care
- Mental health and substance abuse disorder services, including behavioral health treatment
- Prescription drugs
- Rehabilitative and habilitative services and devices
- Laboratory services
- Preventive and wellness services and chronic disease management
- Pediatric services, including oral and vision care

What is a “typical” plan?

- Department of Labor, Bureau of Labor Statistics (BLS) report
- Institute of Medicine
- Feedback from states

A Decision for States

- HHS bulletin issued 12/16/2011
- Proposed flexibility; allow states to set the “benchmark”
 - Will serve as a reference plan
 - Will be selected from existing plans
 - Will reflect both the scope of services and any limits offered by a “typical employer plan” in the state
- Federally defined benchmark

Identifying the Benchmark

- One of the three largest small group insurance products in the state's small group market
- One of the three largest state employee health plans by enrollment
- One of the three largest national Federal Employee Health Benefits Plan ("FEHBP") plan options by enrollment
- The largest insured commercial non-Medicaid HMO plan operating in the state

Small Group Insurance Products

- Blue Cross Blue Shield of Mississippi's Network Blue (ID#11721MS002)
- UnitedHealthcare Insurance Company's Choice Plus (ID#98805MS001)
- UnitedHealthcare of Mississippi's Choice Plus (ID#97560MS002)

National FEHBP Plans

- Blue Cross Blue Shield (Standard Option)
- Blue Cross Blue Shield (Basic Option)
- Government Employees Health Association (Standard Option)

Summary

- #1 priority is to pick a plan
- Balance with affordability
- Resist the urge to over-think

Other Discussion Topics for Exchange Advisory Board

Exchange Market Regulation

- Certification/de-certification processes for health plans
 - How should plans available through the exchange be rated?
- Carrier participation requirements
 - Should carriers be required to participate in both the individual and small group markets?
- Standardization
 - What should the standardized format for presenting coverage options look like?
- Leveling the playing field
 - What are your suggestions for ensuring a competitive market inside and outside the exchange?

Program Integration

- Eligibility, enrollment, and verification
 - What should the screening process look like?
- Carrier participation requirements
 - What should be done to mitigate “churn” among the Medical Assistance, CHIP, and subsidy-eligible populations?

Financial Sustainability

- Operating costs/financial sustainability
 - Should assessments and/or fees be considered? If so, against whom and at what amounts?

Outreach, Education, Adoption & Enrollment

- Role of brokers/agents/navigators
 - May brokers be navigators and/or may navigators be brokers?
- Training, oversight, and compensation
 - What type of oversight is required for navigators? Which state agency should be charged with this oversight?
- Communications
 - What is the appropriate role and scale of a public relations campaign to drive enrollment in the exchange?

Employer Participation

- Definition and participation requirements for small businesses
 - Should there be participation requirements for employer groups in the exchange?
- Defined contribution
 - If there is a defined contribution market, how would the risk adjuster mechanism need to be structured to provide a greater variety of plan choices?

Proposed Topic Assignments and Initial Reporting Schedule

Subcommittee	Possible Topics Assignments			
Educated Health Care Consumers	EHB	Exchange Market Regulation	Financial Sustainability	Outreach & Education
Experience in Enrollment	EHB	Program Integration	Employer Participation	Outreach & Education
Hard to Reach Populations	EHB	Program Integration	Financial Sustainability	Outreach & Education
Health Care Providers	EHB	Program Integration	Financial Sustainability	Outreach & Education
Health Insurance Agents & Brokers	EHB	Exchange Market Regulation	Employer Participation	Outreach & Education
Health Insurance Issuers	EHB	Exchange Market Regulation	Employer Participation	Outreach & Education
Large Employers	EHB	Exchange Market Regulation	Employer Participation	Outreach & Education
Public Health Experts	EHB	Program Integration	Financial Sustainability	Outreach & Education
Small Business and Self-Employed Individuals	EHB	Exchange Market Regulation	Employer Participation	Outreach & Education
State Government Agencies & Divisions	EHB	Program Integration	Financial Sustainability	Outreach & Education

EAB Meeting Process and Deadlines

March 14	Assign EHB Questions
April 11	Present EHB Initial Findings
May 9	Present EHB Final Recommendations
June 13	Adopt EHB Recommendations

Ongoing Assignments and Reporting

March 14	Assign EHB Questions
April 11	Present EHB Initial Findings
May 9	Present EHB Final Recommendations Assign Questions for 2 nd Topic
June 13	Adopt EHB Recommendations Present Initial Findings for 2 nd Topic



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