

Health Insurance Rate Review Grant Program

Cycle II - Quarter I Report

Report Date **1/31/2012**

Organization Information	
State	Mississippi
Project Title	Health Insurance Rate Review Grant Program Cycle II
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Grant Information	
Date Grant Awarded	9/20/2011
Amount Granted	\$3,783,208
Project Year	October 1, 2011 – September 30, 2014
Phase (Phase I or Phase II)	Phase I
Project Reporting Period (Example Quarter 1 10/1/2011-12/31/2011)	Quarter I 10/1/2011 – 12/31/2011

The purpose of the Cycle II Quarterly Grant Reports are to:

- Provide the Rate Review Grant Program with a better understanding of Mississippi Insurance Department's Rate Review Program and the rate review initiatives funded through this grant program
- Provide the Rate Review Grant Program with Quarterly Rate Filing Data
- Provide other States participating in the Rate Review Grant Program the opportunity to share information, highlight successes and reflect upon the progress of their programs

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Grant Performance Period-Cycle II: Date of award through September 30, 2014

Section 1003 of the Affordable Care Act requires the Secretary of the Department of Health and Human Services (HHS), in conjunction with the States, to establish a process for the annual review of health insurance premiums to protect consumers from unreasonable, unjustified and/or excessive rate increases. Section 2794 of the Public Health Service Act (PPACA Section 1003) provides for a program of grants that enable states to improve the health insurance rate review and reporting processes.

The goals of the Cycle II Rate Review Grant Program include:

- Establishing or enhancing a meaningful, comprehensive, and effective rate review program that is transparent to the public, enrollees, policyholders and to the Secretary, and under which rate filings are thoroughly evaluated, and to the extent permitted by applicable State law, approved or disapproved; and
- Developing an infrastructure to collect, analyze, and report to the Secretary critical information about rate review decisions and trends, including, to the extent permitted by applicable State law, the approval and disapproval of proposed rate increases.

PART I: NARRATIVE REPORT FORMAT

Introduction:

Mississippi continued its efforts to enhance the transparency of its rate review program in the first quarter of the grant period. MID continues to thoroughly evaluate all rate filings and approve or disapprove each filing to the extent permitted by applicable State law.

MID is developing a formal process that will enhance the current rate review program. This process includes the infrastructure necessary to collect, analyze, and report to the Secretary critical information about Mississippi's rate review process, decisions and trends.

Program Implementation Status:

Mississippi made progress during the first quarter towards the following:

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1. *Quarterly Accomplishments to Date:*

A. Rate Review Data Analysis

MID's Life and Health Actuarial Staff recently completed a data analysis of its rate review reports pursuant to a request from the Department of Health and Human Services ("HHS") Rate Review Project Officers. In November 2011, the Project Officers requested MID to revisit the Rate Review Grant Cycle I Quarter III and Quarter IV reports generated by the System for Electronic Rate And Form Filing ("SERFF"). All records in question were re-opened, HHS comments were posted, and companies were asked to address the issues. Appropriate changes have been made and where applicable, a post-submission update was requested. All but two companies have responded to date. The Data Tracker, with MID's responses, was submitted to Mississippi's Grant Project Officer on January 23, 2012. MID Rate Review staff will follow-up on the two outstanding filings, address any unforeseen issues, and continue to monitor new rate review data for accuracy.

B. Consumer Disclosures Posting

Mississippi implemented a process for compliance with the web posting requirement found in 45 C.F.R. § 154.301(b), which provides that States with Effective Rate Review Programs must implement and provide access from their web sites to Parts I and II of the Preliminary Justifications for filings which are proposed. Mississippi receives an email alert any time a rate review request greater than the ten (10) percent "Subject to Review" threshold is submitted for a Mississippi filing in the Health Insurance Oversight System ("HIOS").

MID received the following four notices from HIOS concerning one rate increase of 11.2 % with a review complete and three rate increases of 11% each pending review during the first quarter:

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Company	Product	Requested		Status
		Rate Increase	Date Submitted	
John Alden Life Insurance Company	REAL CHOICES-Indemnity-Small Group-49900MS007	11.00%	12/27/2011	Pending Review
Time Insurance Company	REAL CHOICES-PPO-Small Group-45521MS013	11.00%	12/27/2011	Pending Review
John Alden Life Insurance Company	REAL CHOICES-PPO-Small Group-49900MS008	11.00%	12/27/2011	Pending Review
*Trustmark Life Insurance Company	SMC-PPO-Small Group-26561MS002	11.20%	11/03/2011	Review Complete

*The Trustmark filing has been reviewed and completed with an approval disposition.

MID is working with its rate review website developer to post the required links to CMS's www.HealthCare.gov website for every product-specific consumer disclosure that appears for Mississippi. Mississippi's rate review website has a new "Mississippi Rate Reviews on Healthcare.gov" page with two entry points. A URL link with the date submitted and company name will be listed on the new page. A copy of the website's new page and homepage are attached hereto as Attachment "A"

C. Cycle II Grant Evaluation Plan

MID consultants assisted with the development of the Cycle II grant evaluation plan based on Mississippi's grant application proposed work plan. The evaluation plan will be a viable tool for Mississippi to use to assess the progress of its grant activities. The evaluation plan is attached hereto as Attachment "B".

D. Consultant Activities

MID retained consultants in the legal and actuarial fields and continued to collaborate with its information technology ("IT") consultants during the first quarter.

1. Legal Services

Legal consultants were retained and continued to provide assistance to MID with regard to PPACA, the United States Department of Health and Human Services

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(“HHS”) premium rate review regulations and how each affects Mississippi’s rate review process.

MID rate review grant staff and life and health actuarial staff participated in a full day meeting in November 2011, to plan stakeholder engagement activities, develop a legislative work plan, and to begin drafting rate review legislation. The consultants have committed over one hundred, fifty-five (155) hours in the first quarter reviewing HHS regulations, drafting proposed legislation and conducting regular meetings with MID staff on these issues.

2. Actuarial Services

MID continues to work with an actuarial firm to review rate filings and determine whether they are in compliance with State and Federal law. The actuaries review rate and form filings in SERFF and those posted to HIOS to prepare their recommendations for disposition. Weekly conference calls are coordinated between said actuarial firm, MID’s rate review grant staff and MID’s life and health actuarial staff to discuss PPACA progress and activities related to rate review. Any issues that arise on filings under review are also discussed weekly. The actuaries worked eighty-two (82) hours on rate review grant activities during the first quarter.

3. Information Technology Services

MID requested modifications to its new rate review web portal during the first quarter to accommodate the Consumer Disclosures Posting requirements. As mentioned above, a new page has been developed and links are provided to allow users to access the postings on Healthcare.gov. Although the development of the web portal has been completed, some data issues have occurred preventing the actual launch. MID hopes to have these corrected in the near future in order to launch the site during the upcoming quarter.

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4. Quarterly Progress as, or toward, an Effective Rate Review Program

MID received a letter in July 2011, from the Center for Consumer Information and Insurance Oversight (“CCIIO”) regarding Mississippi’s rate review oversight capabilities. CCIIO reviewed Mississippi’s laws, regulations, and bulletins and determined that Mississippi has an effective rate review program according to criteria set forth in Federal regulation. MID plans to introduce legislation during Mississippi’s 2012 Legislative Session to further solidify its rate review authority and intends to issue regulations subsequent to the passage of said legislation.

5. *Challenges and Responses faced this quarter:*

Time constraints continue to pose a challenge in implementing grant activities. Mississippi’s procurement process to obtain legal consultants is lengthy and requires review and approval by two State agencies. One agency, the Personal Services Contract Review Board, only meets once a month, making it very difficult to schedule an effective date and begin activities.

6. No required variations from the original Rate Review Work Plan and companion timeline are noted.

Significant Activities: Undertaken and Planned

MID plans to introduce legislation during Mississippi’s 2012 Legislative Session to further solidify its rate review authority and intends to issue regulations subsequent to the passage of said legislation. The Legislative Session began on January 3, 2012, and will end on May 5, 2012. MID and its legal consultants are in the process of drafting legislation to be introduced by the February 20, 2012, deadline.

Operational/Policy Developments/Issues

No significant program developments/issues/problems have occurred in the first quarter, including legislative activity.

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Public Access Activities

Website development and enhancement activities were undertaken during the first quarter to work toward improving public access to Mississippi's rate review information. System testing and problems moving to a new calendar year are the only barriers associated with launching the website. MID and the IT vendor are diligently working to rectify the data issues problem.

Collaborative efforts

MID continues to work with stakeholders and consultants to increase transparency in Mississippi's rate review process.

Lessons Learned

- Incorporate reasonable deadlines in future requests for proposals to accommodate Mississippi's onerous procurement process.
- Plan accordingly to ensure that prospective vendors and contractors are aware of the lengthy State procurement process.

Updated Budget

The following is a detailed account of expenditures for the first quarter:

Expenditures	Salaries	Supplies and Equipment	Travel	Other	Contractual	Total Expenditures
Actuarial Services					\$ 10,743.75	\$ 10,743.75
Consulting Services					\$ 18,570.00	\$ 18,570.00
Legal Consulting						
Supplies and Equipment		\$ 9,358.67				\$ 9,358.67
SERFF					\$ 20,856.00	\$ 20,856.00
TOTAL FOR QUARTER I		\$ 9,358.67			\$ 50,169.75	\$ 59,528.42

A list of contracts for the first quarter is provided at the end of this report.

Updated Rate Review Work Plan and Timeline

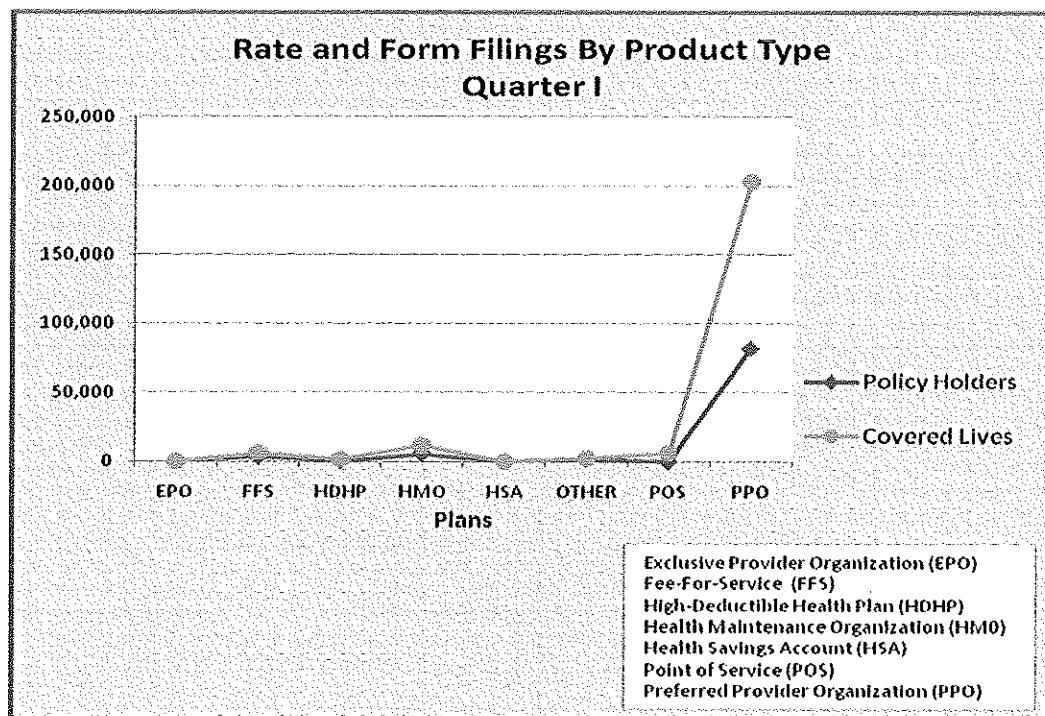
An updated objective work plan and timeline is attached hereto as Attachment "C" to reflect the activities for this quarter.

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Data Collection and Analysis

The required rate filing data, due on a quarterly basis, has been submitted via SERFF and attested to in HIOS. The Quarter I report indicates that no filings were denied during the first quarter and only two increase filings were withdrawn and not reviewed.

Please see PART II: HEALTH INSURANCE RATE DATA COLLECTION of this report for more information on the SERFF data collection report. Mississippi had four (4) companies submit a rate review record greater than the ten (10) percent "Subject to Review" threshold. The following chart shows a summary of policy holders and covered lives, by product type, affected by the first quarter rate filings:



Updated Evaluation Plan

MID consultants assisted with the development of the Cycle II grant evaluation plan based on Mississippi's grant application proposed work plan. The evaluation plan will be a viable tool to assess the progress of grant activities. The evaluation plan is attached hereto as Attachment "B".

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Quarterly Report Summary Statistics:

Please provide the data as available below to include activities new this quarter and occurring to date with Rate Review Grant Funds:

- Total Funds Expended to date: \$59,528.24
- Total Staff Hired (new this quarter and hired to date with grant funds): 0
- Total Contracts in Place (new this quarter and established to date): 5
- Introduced Legislation: No
- Enhanced IT for Rate Review: Yes
- Submitted Rate Filing Data to HHS: Yes
- Enhanced Consumer Protections: Yes
- Consumer-Friendly Website: Operational in Quarter II
- Rate Filings on Website: Operational in Quarter II

Enclosures/Attachments

Attachment A:

Mississippi Rate Reviews on Healthcare.gov Website Page

Attachment B:

Rate Review Grant Cycle II Evaluation Plan

Attachment C:

Updated Rate Review Work Plan and Timeline

PART II: HEALTH INSURANCE RATE DATA COLLECTION

MID continued to use SERFF to report rate filing and rate increase activity to HHS for the Cycle II grant's first quarterly report. The following data for this quarter indicates that there were thirty (30) rate filings with sixteen (16) of those requesting an increase:

HIPR Table A – Summary

Rate Filings For This Period (A1)	30
Rate Increases For This Period (A2)	16
Reviewed (A3)	69
Approved (A4)	67
Denied (A5)	0
Deferred (A6)	2

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Table E. (SERFF Users): Number and Percentage of Rate Filings Reviewed –Combined

State	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Annual Total
Product Type (PPO, HMO, etc.)	All				
Number of Policy Holders	94,045				
Number of covered lives affected	122,728				

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RATE REVIEW CYCLE II GRANT CONTRACTS
 QUARTER I

CONSULTANT	SERVICES	COMPANY	BUDGET	TIME PERIOD
Legal Services	Assist MID in the review and implementation of the health insurance reform instituted under the federal Patient Protection and Affordable Care Act ("PPACA") and related regulations.	Baker, Donelson, Bearman, Caldwell & Berkowitz	\$350,000	October 1, 2011- September 30, 2012
Actuarial Services	Review major medical health insurance rate filings according to provisions set forth in PPACA, any applicable State laws and any subsequent State or Federal regulations. Provide written actuarial observations and recommendations to MID for each reviewed major medical health insurance rate filing.	Actuarial Resources Corp.	\$125,000	September 1, 2011- August 31, 2012
Professional Services- Evaluation Plan	Rate Review Cycle II Grant Evaluation Plan development and consulting	Leavitt Partners, LLC	\$19,500	October 1, 2011- December 31, 2011
Professional Services	Health Insurance Experts- Educational Content Development	Fraser Institute	\$100,000	September 1, 2011- December 31, 2011
Information Technology Services	Information Technology Consultants for website development Phase II. Enhancement of SERFF system to assist with collection of all parts of the industry Preliminary Justification for rate increases and to allow states to enter a Summary of Rate Review and/or a State Filing Summary.	Vimo, Inc. SERFF	\$371,000 \$20,856	October 1, 2011- September 30, 2012 October 1, 2011- September 30, 2012

ATTACHMENT A
Mississippi Rate Reviews On HealthCare.gov

Mississippi Rate Reviews on HealthCare.gov - Windows Internet Explorer provided by Mississippi Insurance Department

File Edit View Favorites Tools Help

Favorites Mississippi Insurance Depart... atat https://www.spber2.ms.gov... It's time to check-in! Inbox ... States State Refor(j)im

Home Consumers Individuals Entities Companies Fire Marshal Health Care

About Us Divisions Public Information/Media Online Services Laws, Bulletins, Regulations Consumer Alerts

Forms How Do I? Disasters/Storms Contact Us Request/Commissioner Site Map Search

MISSISSIPPI Insurance Commissioner Mike Chaney Commissioner and State Fire Marshal

Link To Mississippi Rate Reviews On HealthCare.gov http://companyprofiles.healthcare.gov/states/MS/state_reviews?search=Method+rate_reviews

Date Submitted Company Trustmark Insurance Company 11/10/2011

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MID RATE REVIEW WEBSITE HOME PAGE

The screenshot shows the Microsoft Internet Explorer browser window displaying the "MID Rate Review" website. The title bar reads "MID Rate Review - Windows Internet Explorer provided by Mississippi Insurance Department". The address bar shows the URL "http://mid.state.ms.us/MidRateReview/CheckFor.aspx". The menu bar includes File, Edit, View, Favorites, Tools, and Help. The toolbar includes Back, Forward, Stop, Refresh, Home, and Search buttons.

The main content area contains a message about rate increase interpretation, a "Related Links" section, and a "Events Calendar".

Message:

If you need help in understanding how to interpret the rate increase data represented here, please read through the help section. If you cannot find your answer online, please contact the Mississippi Insurance Department at 800-562-2957, 601-359-2453 or via email at ratehelp@mid.state.ms.us.

Related Links:

- Link to the Search for Licensed Individual, Entity, or Company on MID Website
- HealthCare.gov
- NAIC
- Federal Pre-Existing Condition Insurance Plan (PCIP)
- Patient Protection and Affordable Care Act Section by Section Analysis
- Affordable Care Act Tax Provisions
- Link to Mississippi Rate Reviews On HealthCare.gov

Events Calendar:

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Mississippi

Health Insurance Rate Review Program-Cycle II

ATTACHMENT B

**Mississippi Health Insurance Rate Review Grant Program
Cycle II
Evaluation Plan**

Mississippi Rate Review Evaluation Plan

To evaluate progress and measure success of its Cycle II Rate Review Grant Program, the Mississippi Insurance Department (MID) has developed an evaluation plan that tracks the progress of key indicators, establishes baseline data from which to measure progress, includes plans for timely intervention when targets are not met, and evaluates the achievement of program goals on an ongoing basis and at the conclusion of the program.

MID plans to hire consultants to monitor specific grant activities, evaluate the overall effectiveness of the grant program, and ensure that MID complies with all federal evaluation requirements. The Department feels having an independent agency evaluate the Rate Review Grant Program will allow for a more thorough assessment of its effectiveness. This will in turn allow MID to better determine which program enhancements need to be improved and which ones should be continued beyond 2014.

Mississippi proposes a two-phased approach to its evaluation plan: 1) monitoring the successful completion of grant-specific activities and milestones; and 2) monitoring and measuring improvements in selected rate filing data. In monitoring grant-specific activities, the consultants will use the "Mississippi Health Insurance Rate Review Grant Program Cycle II Evaluation Plan" presented at the end of this document. The plan outlines each task from the work plan, the associated objective, which entity is responsible for overseeing the task, the estimated timeframe for completion, the status of the task and the actual outcome achieved upon completion. The goal of this plan is to monitor the successful and timely completion of grant activities and to evaluate whether the actual outcomes achieved upon completion of the task meet the preliminary objectives.

In addition to monitoring the specific activities outlined in the Cycle II grant application, MID will continue to survey and report on certain rate filing data for the individual and small group markets. Consultants will use these data to measure the effect of the Rate Review Grant Program on Mississippi's insurance market and consumers. They will evaluate whether improvements are being made and highlight areas for improvements. This information will be used in determining the overall effectiveness of the grant program.

At the conclusion of the program, Evaluation Plan Consultants will evaluate how well MID's Rate Review Grant Program met its program goals, which include:

1. Creating a meaningful and comprehensive effective rate review program that is transparent to the public, enrollees, policyholders, and to the Secretary, and under which rate filings are thoroughly evaluated, and to the extent permitted by applicable State law, approved or disapproved
2. Developing an infrastructure to collect, analyze, and report critical information to the Secretary about rate review decisions and trends, including—to the extent permitted by applicable State law—the approval and disapproval of proposed rate increases

Evaluation Plan Consultants will couple this evaluation with its evaluation of specific grant activities and the reporting of rate filing data to assess the overall effectiveness of the Rate Review Grant Program and its effect on Mississippi's insurance market.

1. Key Indicators to be measured

Key indicators are measurable outcomes that can be tracked to ensure that all milestones, objectives, and grant requirements are being met. The key indicators used in the evaluation of grant-specific activities come from tasks outlined in the Mississippi Health Insurance Rate Review Grant Program Work Plan. These tasks will serve as the key indicators by which overall progress of grant activities is measured.

Key indicators MID will use in its evaluation plan are outlined in the “Mississippi Health Insurance Rate Review Grant Program Cycle II Evaluation Plan” presented below. Additional subtasks and their respective timeframes may be outlined as the Rate Review Grant Program work commences and additional milestones are identified that need to be completed in order for the overall objective of the task to be met. Key indicators will be regularly monitored to ensure that all milestones, objectives, and grant requirements are being met in a timely and efficient manner.

Key indicators to be used in the second phase of Mississippi’s evaluation plan—monitoring and measuring improvements in selected rate filing data—are the rate filings data and information MID currently reports on using SERFF. These indicators include, but are not limited to:

- Total rate filings for a particular period
- Number of rate increases for a particular period
- Number of rate filings that were reviewed
- Number of rate filings that were approved, denied, or deferred
- The average time to complete each review
- The average number of staff needed to complete each review
- Number of consumer complaints received
- Total number of consumer inquiries on rate increases, requests, for information, etc.

Evaluation Plan Consultants will use these data to assess the effect of the Rate Review Grant Program on Mississippi’s insurance market and consumers. Consultants will also use these data to measure if the indicators are improving over time as Rate Review Grant Program activities are being implemented. For example, it is expected that the average time to complete each review should decrease over the three-year period, while the overall number of rate increases will hopefully decline in the long run.

As part of the Rate Review Grant Program, MID is considering expanding its rate review research to include more robust data analysis and data exchange capabilities to assess the validity of rate increases and rate increase patterns and trends. Additional data points to be evaluated may include:

- Number of hits to the enhanced Web site
- Number of public forum meetings and meeting attendees (years 1, 2, and 3)
- Number of public meetings/hearings and attendees (years 2 and 3)
- The average rate increase overall and for each insurance market segment
- The average difference between the requested and approved rate
- The average impact of MID’s rate actions overall and for each insurance market segment
- The number of policyholders impacted by a proposed rate change

2. Baseline data for each indicator

Baseline data provide the starting point from which progress related to each task and milestone will be monitored and measured. Baseline data used in the evaluation of grant-specific activities are entered in the "Mississippi Health Insurance Rate Review Grant Program Cycle II Evaluation Plan" presented below. For Year 1, MID drew the applicable baseline data for each task and milestone from activities and progress made with Cycle I grant funds. As MID begins initial work on grant program tasks, baseline information that is not already determined will be developed and included in the evaluation plan.

Baseline data for Year 2 and Year 3 will come from the completion of activities in the previous year and be entered at the beginning of the current year. This process will ensure that progress is being measured, using the most applicable and updated data. Baseline data will also be adjusted to reflect unexpected delays or changes in the project work plan.

The following is a summary of health insurance rate filings currently reported that will be used as baseline data for the second phase of Mississippi's evaluation plan—monitoring and measuring improvements in selected rate filing data. MID intends to continue to use SERFF to report rate filing and rate increase activity to HHS for required quarterly reports and will use these reports as the base for tracking and measuring the progress of the included data over time.

As mentioned above, MID is considering expanding its rate review research to include more robust data analysis and data exchange capabilities to assess the validity of rate increases and rate increase patterns and trends. As these data capabilities are developed, baseline data for each of the measures will be included in the evaluation plan and measurable changes in the data will be tracked over time.

Rate Filings Statistics	Quarter I	Quarter II	Quarter III
Rate Filings for this Period	45	17	32
Rate Increases for this Period	41	15	22
Reviewed	45	8	26
Approved	45	8	26
Denied	0	0	0
Deferred	0	0	0
Average Time to Complete Each Review	4 hours	4 hours	4 hours

Consumer Contacts	2010	2011 (Jan – Jul)
Complaints Reported	354	193
Telephone Inquiries, Request for Information, etc.	3,747	1,578
Total	4,101	1,771

3. Methods to monitor progress and evaluate the achievement of program goals both on an ongoing basis and at the conclusion of the program

Rate Review Grant Program Evaluation Plans have been developed for all three years outlined in the Cycle II Work Plan. Yearly monitoring of program activities will ensure the achievement of program goals on an ongoing basis. As mentioned above, at the conclusion of the grant program, Evaluation Plan Consultants will use the evaluation of specific grant activities and rate filing data to evaluate the overall effectiveness of the Rate Review Grant Program. Consultants will also provide MID with a report outlining how specific grant activities met the achievement of overall program goals.

Consultants will also provide MID with an analysis of impacts from the grant program, possibly including:

- The program's impact on rising health insurance premiums
- An analysis of how the program could be used to further lower health insurance premiums
- Improvements made by the program in the public engagement process
- The impact of grant funding on MID's infrastructure and how these improvements can be used in preparation for health insurance exchange operations

MID will continue to evaluate Mississippi's Health Insurance Rate Review Program as it transitions from the establishment and enhancement stage to the operational stage. For example, MID will continue to use SERFF to survey and report on rate filing data for the individual and small group market segments in order to monitor the effectiveness of the program and highlight possible areas for improvement. Consultants will assist MID in developing a formal evaluation plan at the conclusion of the Rate Review Grant Program that will be used to monitor and evaluate the ongoing operations of Mississippi's rate review program.

4. Inclusion of plans for timely interventions when targets are not met or obstacles delay progress

In preparation for the quarterly progress reports to HHS, MID and its Evaluation Plan Consultants will update the status for each measure on a monthly basis. Specific persons within the "Responsible Entity" will be assigned to report to the consultants on the status of each task during regularly scheduled meetings. This regular review will ensure that all indicators are being met as well as highlight the need for any interventions when targets are not being completed or unexpected obstacles delay plans. When obstacles or delays do arise during the Rate Review Grant Program, MID will work with the responsible entity to evaluate the cause of the obstacle and develop appropriate plans to either remove the obstacle or establish a new course of action. Once these plans are developed, timeframes, baseline information, and key indicators of other tasks affected by the delay will be reexamined to ensure that task specific objectives are still being met and the broad goals of the grant program are being achieved.

Mississippi Health Insurance Rate Review Grant Program Cycle II Evaluation Plan

Grants Management Consultant		Submit required reporting information to HHS	of \$250 not to exceed \$200,000)
MID	Hire grants management consultant	Retain consultants for oversight of grant activities Submit required reporting information to HHS	Contract executed and submission of required reporting information to HHS has begun
Grants Management Consultant		Submit required reporting information to HHS Execute contract for Web site enhancements	Developed high-level goals for expected deliverables from consultants
MID	Retain information technology consultants	Execute contract for meetings facilitation and consulting Submit required reporting information to HHS	Developed high-level goals for expected deliverables from consultants
MID	Retain consultants for meetings	Execute contract for assessment of rate review process and activities Submit required reporting information to HHS	Developed high-level goals for expected deliverables from consultants
Grants Management Consultant		Retain health insurance experts	Developed thoughts on the type of information to be included in the Toolkit based on its end goals
MID	Retain consultants for education and outreach program	Execute contract for design of MID "Toolkit" Submit required reporting information to HHS	Developed description of educational/professional qualifications for staff responsible for rate review
Grants Management Consultant		Hire life and health actuarial division staff	Brach Director II hired
MID		Submit required reporting information to HHS	Developed initial description of tasks and proposed deliverables
Temp Staff	Hire temp staff for stenographic reporting	Hire temp staff Record and transcribe public hearing minutes as needed	

IV Enhancing Rate Review Process - IT

Information Technology Consultants; Health Insurance Experts	Implement Web site enhancements	- Add new features and functionalities - Provide consumer friendly written content, i.e., FAQs	Completion of the initial Phase I development (to be operational Sept. 30, 2011)					
MID	Improve the IT infrastructure supporting rate review functions	Execute contract with SERFF for increased reporting and data exchange capabilities	98% of all filings received by MID are filed and reviewed by SERFF					
MID; Information Technology Consultants	Plan for enhanced electronic filing and approval processes	Conduct research to include more robust data capabilities to assess rate increase validity	Currently evaluating what data capabilities are needed and can be developed					
V. Enhancing Consumer Protection Standards								
Meeting Consultants		Conduct educational briefing meetings	- Rate filing information to soon be available on new Web site					
Meeting Consultants	Enhance transparency of the rate filing process	Conduct 20 planned public forum meetings	- Rate filing information currently available under MS Code					
Education & Outreach Consultants		Plan and produce "MID Health Insurance Rate Toolkit"	- Developed high-level goals for public meetings and Toolkit					
MID; Legal Consultants	Require written justification for any health insurance rate increase	Issue appropriate action to require insurers to provide a layman's written explanation	Plain language summaries for rate changes are being prepared and will be presented on new Web site					
MID; Legal Consultants; Health Insurance Experts	Implement a public hearings process for proposed rate increases	Develop a process for public meetings and hearings	- Insurers are currently required to give 60 days' notice prior to rate change					
Temp Staff		Establish a hearing/media room	- No currently established policies for public meetings and/or hearings					
Health Insurance Experts	Explore alternatives to lessen need for insurance	Record and transcribe public hearing minutes as needed	- No formal hearings held by MID for two years					
		Assess current rate review processes and standards	- Currently evaluating what data capabilities are					

MID; Information Technology Consultants	rate increases	Develop new analytic capacities to assess rate increase validity	needed and can be developed - Currently reviewing developments from other states
V. Reporting to the Secretary on Rate Increase Patterns			
Grants Management Consultant	Provide certain rate filing data on insurance markets	Use SERFF to submit rate filing data to HHS	SERFF is used for Cycle 1 grant quarterly reports
VI. Coordination with the MS Health Benefit Exchange			
Health Insurance Experts		Identify process to review insurance rate filing patterns	- Currently evaluating what data capabilities are needed and can be developed
MID	Submit recommendations to MS Exchange regarding insurers' Exchange participation	Determine potential patterns or practices for unjustified rates	- TBD; will occur on an on-going basis as the Exchange becomes operational
MID		Identify companies unwilling to negotiate with MID on reviews	
MID		Coordinate with the MS Exchange as appropriate	

More details on each task are provided in Mississippi Health Insurance Rate Review Grant Program Work Plan.

Status Key:

On Schedule	Delay	Stopped	Completed
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Grants Management Consultant	Retain information technology consultants	Submit required reporting information to HHS	TBD
MID		Execute contract for Web site enhancements	
MID	Retain consultants for meetings	Execute contract for meetings facilitation and consulting	TBD
Grants Management Consultant		Submit required reporting information to HHS	
MID	Retain health insurance experts	Execute contract for assessment of rate review process and activities	TBD
Grants Management Consultant		Submit required reporting information to HHS	
MID	Retain consultants for education and outreach program	Execute contract for development of MID "Toolkit"	TBD
Grants Management Consultant		Submit required reporting information to HHS	
MID	Hire life and health actuarial division staff	Office Director hired	TBD
Grants Management Consultant		Submit required reporting information to HHS	
MID	Hire Temp Staff for Stenographic Reporting	Hire temp staff	TBD
Temp Staff		Record and transcribe public hearing minutes as needed	
IV. Enhancing Rate Review Process - IT			
Information Technology Consultants; Health Insurance Experts	Implement Web site enhancements	- Continue to add new features and functionalities - Provide consumer friendly written content and other resources on Web site	TBD
MID	Improve the IT infrastructure that supports review functions	Execute contract with SERFF for increased reporting and data exchange capabilities	TBD

MID; Information Technology Consultants	Plan for enhanced electronic filing and approval processes	Build on previous research to include more robust data analysis and data exchange capabilities	TBD
V. Enhancing Consumer Protection Standards			
Meeting Consultants		Conduct educational briefing meetings	
Meeting Consultants	Enhance transparency of the rate filing process	Conduct 10 planned public forum meetings	TBD
Education & Outreach Consultants		Produce "MID Health Insurance Rate Toolkit" Volume II	
MID; Legal Consultants	Assess feasibility of justification for rate increases	Issue appropriate requirements to provide additional justification for rate increases	TBD
MID	Continue public hearings for proposed rate increases	Conduct public meetings and hearings as needed	TBD
Temp Staff		Record and transcribe minutes as needed	
Health Insurance Experts	Explore alternatives to lessen need for insurance rate increases	Assess current rate review processes and standards	TBD
MID; Information Technology Consultants		Develop new analytic capacities to assess rate increase validity	
VI. Reporting to the Secretary on Rate Increase Patterns			
Grants Management Consultant	Provide certain rate filing data on insurance markets	Use SERFF to submit rate filing data to HHS	TBD
VII. Coordination with the MS Health Benefit Exchange			
Health Insurance Experts	Submit recommendations to MS Exchange regarding insurers' Exchange participation	Update process to review insurance rate filing patterns	TBD
MID		Identify potential patterns or practices	

MID		Identify companies unwilling to negotiate with MID on reviews				
MID		Coordinate with the MS Exchange as appropriate				

More details on each task are provided in Mississippi Health Insurance Rate Review Grant Program Work Plan.

Status Key:

On Schedule	Delay	Stopped	Completed
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MID	Retain health insurance experts	Execute contract for assessment of rate review process and activities	TBD
Grants Management Consultant		Submit required reporting information to HHS	
MID	Retain consultants for education and outreach program	Execute contract for updating "Toolkit" and post on Web site	TBD
Grants Management Consultant		Submit required reporting information to HHS	
Grants Management Consultant	Hire temp staff for stenographic reporting	Submit required reporting information to HHS	TBD
MID		Hire temp staff	
Temp Staff		Record and transcribe public hearing minutes as needed	
IV. Enhancing Rate Review Process - IT			
Information Technology Consultants; Health Insurance Experts	Implement Web site enhancements	- Continue to add new features and functionalities - Provide consumer friendly written content and other resources on Web site	TBD
MID	Improve the IT infrastructure that supports review functions	Execute contract with SERFF for increased reporting and data exchange capabilities	TBD
MID; Information Technology Consultants	Plan for enhanced electronic filing and approval processes	Build on previous research to include more robust data analysis and data exchange capabilities	TBD
V. Enhancing Consumer Protection Standards			
Meeting Consultants	Enhance transparency of the rate filing process	Conduct educational briefing meetings	TBD
Meeting Consultants		Conduct 10 planned public forum meetings	

MID; Legal Consultants	Assess feasibility of justification for rate increases	Issue appropriate requirements to provide additional justification for rate increases	TBD
MID	Continue public hearings for proposed rate increases	Conduct public meetings and hearings as needed	TBD
Temp Staff		Record and transcribe minutes as needed	
Health Insurance Experts	Explore alternatives to lessen need for insurance rate increases	Assess current rate review processes and standards	TBD
MID; Information Technology Consultants		Develop analytic capacities to assess rate increase validity	
VI. Reporting to the Secretary on Rate Increase Patterns			
Grants Management Consultant	Provide certain rate filing data on insurance markets	Use SERFF to submit rate filing data to HHS	TBD
VII. Coordination with the MS Health Benefit Exchange			
Health Insurance Experts	Submit recommendations to MS Exchange regarding insurers' Exchange participation	Update process to review insurance rate filing patterns	
MID		Identify potential patterns or practices for unjustified rate increases	TBD
MID		Identify companies unwilling to negotiate with MID on reviews	
MID		Coordinate with the MS Exchange as appropriate	

More details on each task are provided in Mississippi Health Insurance Rate Review Grant Program Work Plan.

Status Key:

On Schedule	Delay	Stopped	Completed
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Health Insurance Rate Review Program-Cycle II

ATTACHMENT C

**Mississippi Health Insurance Rate Review Grant Program
Work Plan – Quarter I Update
Grant Years 2011 – 2014**

Mississippi

Health Insurance Rate Review Program-Cycle II

**Mississippi Health Insurance Rate Review Grant Program
Work Plan – Quarter I Update
Grant Years 2011 – 2014**

YEAR 1 MILESTONES	OBJECTIVES	PROCESSES & ACTIVITIES	TIMELINE
I. Strengthen effective rate review process	Promulgate Regulation based on Bulletin 2011-7	Obtained Attorney General's and Mississippi Personal Services Contract Review Board approvals and execute contract to retain legal consultants. Submit the required reporting information for consultant hiring to HHS. Legal consultants assist with drafting of legislation	December 2011 January 2012 November 2011- April 2012
II. Improve rate filing requirements	Regulation issued to increase the requirements for more supporting documentation and data in line with HHS regulation	Develope legislative strategy and prepare informational materials. Educate members of the Mississippi State Legislature about the rate review process and inform key legislators of need for legislation. Earliest date that bill could become law.	November 2011 – April, 2012 January 2012 - April 2012 July 1, 2012
III. Enhancing rate review process - Staffing	Retain Consultant for Professional Services	Legal consultants assist with draft regulation requiring companies to provide additional justification for rate increases. Regulation Issued.	November 2011- March 2012 April 2012
		Issued contract for development of Rate Review Grant Program Evaluation Plan.	November 2011

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	Submit the required reporting information for consultant hiring to HHS.	January 2012
	Submit Evaluation plan to HHS.	January 2012
Retain actuarial consultants	Retained consultants for expertise to complete grant activities	October 2011-September 2012
	Submit the required reporting information for consultant hiring to HHS.	October 2011
Hired Grants Management Full Time Staff	Management and oversight of grant activities and expenditures.	September 2011
Retain Information Technology Consultants	Submit the required reporting information for contract approval to HHS.	October 2011
	Execute contract for website enhancements.	October 2011-September 2012
Retain Consultants for Meetings	Execute contract for meetings facilitation and consulting services.	November 2011-April 2012
	Submit the required reporting information for consultant hiring to HHS.	November 2011
Retain Health Insurance Experts	Execute contract for assessment of health insurance rate review process and implementation of activities to deter increases.	November 2011- September 2012
	Submit the required reporting information for consultant hiring to HHS.	March 2012
Retain Consultants for Education and Outreach Program	Execute contract for design, content development, production monitoring for new “MID Health Insurance Rate Toolkit”.	March 2012- August 2012
	Submit the required reporting information for consultant hiring to HHS.	January 2012
Hire one additional Life and Health Actuarial Division staff	Hire Branch Director II.	April 2012
Hire Temp Staff for	Submit the required reporting information for	March 2012- September

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	Stenographic Reporting	contract approval to HHS. Hire temp staff for transcription services. Record and transcribe public hearing minutes as needed.	2012
IV. Enhancing rate review process – IT	Implement Website Enhancements	<ul style="list-style-type: none"> -Add several new features and functionalities to provide users with more resources and encourage involvement. -Provide consumer friendly written content on website, including Frequently Asked Questions (“FAQs”) and articles and graphics illustrating how rates are determined and why rate modifications occur. 	October 2011- April 2012
	Improve the IT infrastructure that supports health insurance rate review functions, including more robust data analysis and data exchange capabilities both within the State as well as with the Federal government	<ul style="list-style-type: none"> Executed contract with SERFF for increased reporting and data exchange capabilities for Cycle II requirements 	November 2011
V. Enhancing consumer protection standards	Plan for enhanced electronic filing and approval processes for rates and policy forms	<ul style="list-style-type: none"> Conduct research to include more robust data analysis and data exchange capabilities to assess the validity of rate increases and rate increase patterns and trends. Educational briefing meetings conducted with health insurance agents, companies, and legislators, to ensure that all parties fully understand the new requirements regarding health insurance rates. 	January 2012- August 2012 April 2012 February 2012-July 2012

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	regarding health insurance rates.	
	Plan and produce new "MID Health Insurance Rate Toolkit"	March 2012- August 2012
Require written explanation as to the company's justification for any health insurance rate increase that is filed.	Issue appropriate action to require insurers to provide a layman's written explanation as to the justification for a rate increase	December 2011-April 2012.
Implement a public hearings process for proposed rate increases.	Develop a process for public meetings and hearings concerning proposed health insurance rate increases.	April 2012- June 2012
	Establish a hearing/media room with appropriate equipment to facilitate public meetings and hearings	March 2012- June 2012
	Record and transcribe public hearing minutes as needed.	May 2012-September 2012
Explore alternatives to lessen need for health insurance rate increases.	Assess current rate review processes and standards and prepare recommendations	March 2012-July 2012
	Develop new analytic capacities to assess the validity of rate increases.	
VI. Reporting to the Secretary on Rate Increase Patterns	Provide certain rate filing data for the individual and small group market segments.	Use SERFF to submit required rate filing data to HHS on a quarterly basis.
VII. Coordination with the Mississippi Health Benefit Exchange	Submit recommendations, as appropriate, to Mississippi Health Benefit Exchange regarding health insurers' Exchange participation.	January 31, 2012; April 30, 2012; July 31, 2012; October 31, 2012
	Identify process to review health insurance rate filing patterns.	January 2012- September 2012
	Determine potential patterns or practices for unjustified rate increases	
	Identify companies unwilling to negotiate with MID on rate review matters.	

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YEAR 2 MILESTONES	OBJECTIVES	PROCESSES & ACTIVITIES	TIMELINE
I. Strengthen effective rate review process	Issue new bulletin or regulation to strengthen rate review process.	Obtain Attorney General's approval and execute contract to retain legal consultants. Submit the required reporting information for consultant hiring to HHS. Legal consultants assess current process and research options for implementation Bulletin or Regulation issued if needed.	October, 2012 October 2012 November 2012-March 2013 June 2012 June 2012- September 2012
II. Improve rate filing requirements	Identify new requirements to improve the rate filings.	Identify need for new legislation. Legal consultants research possible requirements for rate filings and draft regulation language. Regulation issued if needed.	January 2013-March 2013 November 2012- March 2013 April 2013
III. Enhancing rate review process - Staffing	Retain Consultant for Professional Services	Issue contract to monitor Evaluation Plan activities. Submit the required reporting information for consultant hiring to HHS. Submit Evaluation plan status update to HHS when required.	January 2013-March 2013 November 2012 January 2013 October 2012-September 2013 October 2012

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Retain Information Technology Consultants	Submit the required reporting information for contract approval to HHS.	October 2012
Retain Consultants for Meetings	Execute contract for website enhancements.	October 2012-September 2013
Retain Health Insurance Experts	Execute contract for meetings facilitation and consulting services.	November 2012-May 2013
Retain Consultants for Education and Outreach Program	Submit the required reporting information for consultant hiring to HHS.	November 2012
Hire one additional Life and Health Actuarial Division staff	Execute contract for assessment of health insurance rate review process and implementation of any new activities to deter increases.	December 2012-September 2013
Hire Temp Staff for Stenographic Reporting	Submit the required reporting information for consultant hiring to HHS.	December 2012
IV. Enhancing rate review process- IT	<ul style="list-style-type: none">-Implement Website Enhancements-Provide consumer friendly written content and	October 2012- May 2013

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	other health insurance resources on website.	
Improve the IT infrastructure that supports health insurance rate review functions, including more robust data analysis and data exchange capabilities both within the State as well as with the Federal government	Execute contract with SERFF as needed for increased reporting and data exchange capabilities for Cycle II requirements.	November 2012- April 2013
Plan for enhanced electronic filing and approval processes for rates and policy forms	Build on previous research to include more robust data analysis and data exchange capabilities and identify process for assessment of rate increases and rate increase patterns and trends.	January 2013- August 2013
V. Enhancing consumer protection standards	Enhance transparency of the rate filing process	Educational briefing meetings conducted with health insurance agents, companies, and legislators, to ensure that all parties fully understand the new requirements regarding health insurance rates.
		November 2012-April 2013
		Conduct 10 planned public forum meetings around the State to educate the general public regarding health insurance rates.
		February 2013-August 2013
		Produce Volume II of "MID Health Insurance Rate Toolkit"
		June 2013- September 2013
		Issue appropriate requirements requiring to insurers to provide additional justification for a health insurance rate increase.
		January 2013- May 2013.

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filed.	Continue public hearings process for proposed rate increases	Conduct public meetings and hearings concerning proposed health insurance rate increases as needed. Record and transcribe public hearing minutes as needed.	October 2012-September 2013
	Explore alternatives to lessen need for health insurance rate increases.	Assess current rate review processes and standards and prepare recommendations Develop new analytic capacities to assess the validity of rate increases.	January 2013-July 2013
VI. Reporting to the Secretary on Rate Increase Patterns	Provide certain rate filing data for the individual and small group market segments.	Use SERFF to submit required rate filing data to HHS quarterly.	January 31, 2013; April 30, 2013; July 31, 2013; October 31, 2012
VII. Coordination with the Mississippi Health Benefit Exchange	Submit recommendations, as appropriate, to Mississippi Health Benefit Exchange regarding health insurers' continued participation in the Exchange.	Update process of review of health insurance rate filing patterns. Identify potential patterns or practices for unjustified rate increases Identify companies unwilling to negotiate with MID on rate review matters. Coordinate with the Mississippi Health Benefit Exchange to develop recommendations, as appropriate, about whether particular health insurers should be excluded from participation in the Exchange.	October 2012- September 2013

Mississippi

Health Insurance Rate Review Program-Cycle II

YEAR 3 MILESTONES	OBJECTIVES	PROCESSES & ACTIVITIES	TIMELINE
I. Strengthen effective rate review process	Issue new bulletin or regulation to strengthen rate review process.	Obtain Attorney General's approval and execute contract to retain legal consultants. Submit the required reporting information for consultant hiring to HHS.	October 2013 October 2013
		Legal consultants assess current process and research options for implementation	November 2013-March 2014
		Bulletin or Regulation issued if needed.	July 2014
	Identify need for new legislation.	Assess need for possible legislative strategy and begin preparation of materials.	June 2013- September 2014
II. Improve rate filing requirements	Identity new requirements to improve the rate filings.	Legal consultants research possible new requirements for rate filings and draft regulation as needed.	November 2013- March 2014
		Action taken if needed.	July 2014
III. Enhancing rate review process - Staffing	Retain actuarial consultants	Retain consultants annually as needed for expertise to complete grant activities	October 2013-September 2014
		Submit the required reporting information for consultant hiring to HHS.	October 2013
	Retain Information Technology Consultants	Submit the required reporting information for contract approval to HHS. Execute contract for website enhancements.	October 2013
	Retain Consultants for Meetings	Execute contract for meetings facilitation and consulting services.	October 2013-September 2014 November 2013-May 2014

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	Retain Health Insurance Experts	Submit the required reporting information for consultant hiring to HHS. Execute contract for assessment of health insurance rate review process and implementation of any appropriate new activities to deter increases.	November 2013 December 2013- September 2014
	Retain Consultants for Education and Outreach Program	Submit the required reporting information for consultant hiring to HHS. Execute contract for update to content for the “MID Health Insurance Rate Toolkit” to be posted on website.	December 2013 January 2014- June 2014
	Hire Temp Staff for Stenographic Reporting	Submit the required reporting information for consultant hiring to HHS. Submit the required reporting information for contract approval to HHS. Hire temp staff for transcription services. Record and transcribe public hearing minutes as needed.	January 2014 October 2013 October 2013- September 2014
IV. Enhancing rate review process – IT	Implement Website Enhancements	-Continue to add new features and functionalities to provide users with more resources and encourage involvement. -Provide consumer friendly written content and other health insurance resources on website.	October 2013- July 2014
	Improve the IT infrastructure that supports health insurance rate review functions, including more robust data analysis and data exchange capabilities both within the State as well as with the Federal government	Execute contract with SERFF as needed for increased reporting and data exchange capabilities for Cycle II requirements.	November 2013- April 2014

Mississippi

Health Insurance Rate Review Program-Cycle II

	Plan for enhanced electronic filing and approval processes for rates and policy forms	Build on previous research to include more robust data analysis and data exchange capabilities and identify processes for assessment of rate increases, rate increase patterns and trends.	January, 2014- September, 2014
V. Enhancing consumer protection standards	Enhance transparency of the rate filing process	Educational briefing meetings conducted with health insurance agents, companies, and legislators, to ensure that all parties fully understand the any new requirements regarding health insurance rates. Conduct 10 planned public forum meetings around the State to educate the general public regarding health insurance rates.	November, 2013-August, 2014 February 2014- September 2014
	Assess feasibility of new requirements for company's justification for any health insurance rate increase that is filed.	Issue appropriate requirements to insurers to provide additional justification for a rate increase.	January 2014- September 2014
	Continue public hearings process for proposed rate increases	Provide public meetings and hearings concerning proposed health insurance rate increases as needed.	October 2013-September 2014
		Record and transcribe public hearing minutes as needed.	October 2013-September 2014
	Explore alternatives to lessen need for health insurance rate increases.	Assess current rate review processes and standards and prepare recommendations Develop new analytic capacities to assess the validity of rate increases.	January 2014-September 2014
VI. Reporting to the	Provide certain rate filing data	Use SERFF to submit required rate filing data to	January 31, 2014; April 30,

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Secretary on Rate Increase Patterns	for the individual and small group market segments.	HHS quarterly.	2014; July 31, 2014; October 31, 2014
VII. Coordination with Mississippi Health Benefit Exchange	Submit recommendations, as appropriate, to Mississippi Health Benefit Exchange regarding health insurers' continued participation in the Exchange.	Update process to review health insurance rate filing patterns. Identify potential patterns or practices for unjustified rate increases Identify companies unwilling to negotiate with MID on rate review matters. Coordinate with the Mississippi Health Benefit Exchange to facilitate recommendations, as appropriate, about whether particular health insurers should be excluded from participation in the Exchange.	October 2013- September 2014