

EXECUTIVE BOARD OF THE DISTRICT OF COLUMBIA HEALTH BENEFIT EXCHANGE AUTHORITY

To adopt recommendations regarding a separate deductible for pediatric dental benefits offered in OHPs.

WHEREAS, the Health Benefit Exchange Authority Establishment Act of 2011, effective March 4, 2012 (D.C. Law 19-94; D.C. Official Code § 31-3171.01 *et seq.*) ("Act") created the District of Columbia Health Benefit Exchange Authority ("Authority"), an independent authority of the Government of the District of Columbia, and its governing Executive Board;

WHEREAS, §1311(d)(2)(b) of the Affordable Care Act of 2010 (P.L. 111-148 & P.L. 111-152) ("ACA") allows an "issuer of a plan that only provides limited scope dental benefits... to offer the plan through the Exchange (either separately or in conjunction with a qualified health plan);"

WHEREAS, for plan year 2014, the Department of Insurance, Securities and Banking (DISB) did not approve stand-alone pediatric dental plans for sale in the exchange marketplace, citing duplication of benefits since all qualified health plans ("QHPs") embedded the essential pediatric dental benefit;

WHEREAS, on February 12, 2014, the Executive Board re-established the Dental Plans Advisory Working Group ("Dental Working Group") to consider requiring QHPs to provide plan options that do not include the pediatric dental benefit, separate deductibles for the pediatric dental benefits, employer choice of qualified dental plans, employer contribution methodology and requirements for qualified dental plans, and transparency of dental plan offerings on DC Health Link;

WHEREAS, the Dental Working Group met on March 7, March 14 and March 28, 2014 and reviewed technical capabilities of DC Health Link, policies for qualified health plans as a comparison for decisions pertaining to qualified dental plans, and the approaches of other state marketplaces;

WHEREAS, although some major medical carriers were uncertain about the impact of a separate deductible for pediatric dental benefits in QHPs, the majority of the Dental Working Group's members voted to require QHPs with embedded pediatric dental benefits to have separate deductibles for those benefits beginning in 2016;

WHEREAS, on April 27, 2014, the Insurance Market Executive Board Working Committee deliberated on having a separate deductible for pediatric dental benefits in QHPs, and approved a recommendation for Board consideration in a unanimous vote to require a separate deductible for pediatric dental benefits in qualified health plans with the maximum deductible to be determined in the future based on recommendations from the Dental Working Group, or other group to which the Executive Board may assign the issue; and

NOW, THEREFORE, BE IT RESOLVED that the Executive Board hereby approves the unanimous recommendation by the Insurance Market Executive Board Working Committee that a QHP with an embedded essential pediatric dental benefit being offered in DC Health Link have a separate deductible beginning in 2016 for its pediatric dental benefit. There shall be maximum amounts for the deductible to be informed by the Dental Working Group, or other group to which the Executive Board may assign the issue. A QHP can choose to have lower or zero deductibles for the pediatric dental benefit.

I HEREBY CERTIFY that the foregoing Resolution was adopted on this 14th day of May, 2014, by the Executive Board of the District of Columbia Health Benefit Exchange Authority in an open meeting.

Khalid Pitts, Secretary/Treasurer	Date
District of Columbia Health Benefits Exchange Authority	