

DRAFT LEGISLATIVE PACKAGE SUMMARY

ACA Working Group Meeting October 27, 2017

1. STATUTORY CLEAN UP

The District of Columbia implemented provisions of the Affordable Care Act into District code. A review of this code and proposed changes would focus on maintaining the State based marketplace, DC Health Benefit Exchange Authority (HBX), and the District's insurance market rules and consumer protections.

A review of the District code for cleanup would include the District's state based marketplace, eligibility and enrollment for marketplace coverage, open enrollment, eligibility for advance premium tax credit, cost sharing reduction, navigator requirements, exemptions to the individual responsibility requirement, metal levels, certification of qualified health plans including essential health benefits, cost sharing protections, actuarial value, network adequacy, waiting period limitations, quality rating, guaranteed issue, guaranteed renewability, pre-existing condition protections, nondiscrimination based on health status, prohibition of lifetime and annual limits, prohibition on rescissions, preventive services at no cost sharing, dependent coverage to age 26, and medical loss ratio.

2. DISTRICT PROHIBITION ON CARRIER REQUIREMENT TO PAY BACK PREMIUMS AS A CONDITION OF NEW ENROLLMENT

The HBX Executive Board passed a resolution June 14, 2017 recommending that the District of Columbia Department of Insurance, Securities and Banking act to prohibit the ability of carriers to require back premium payments as a condition of enrollment during an open enrollment period.

To protect residents, a change in District code to prohibit health insurance carriers from requiring an individual or employer to pay all past-due premiums owed to that carrier prior to enrollment is necessary. This would be for premiums owed for coverage in the prior 12-month period in order to effectuate coverage for that carrier during open enrollment or special enrollment periods.

3. MARKET STABILITY RECOMMENDATIONS

The HBX ACA Working Group recommendations are to provide stability in response to actions, or inactions, at the federal level that are having a destabilizing effect on the local health insurance market and markets nationwide. Such recommendations are reflected in a separate handout.

A sustained and substantial commitment to these policies can best achieve predictable premiums and consistent affordability. Such commitment is also critical to support the operational investment necessary to implement these policies.