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**RESOLUTION OF THE EXECUTIVE BOARD
DISTRICT OF COLUMBIA
HEALTH BENEFIT EXCHANGE AUTHORITY**

To implement and adopt recommendations from the Social Justice and Health Disparities Working Group: Modify insurance design for DC Health Link standard plans to eliminate cost-sharing, including deductibles, co-insurance, and co-payment, for medical care, prescription drugs, supplies and related services that prevent and manage diseases and health conditions that disproportionately affect patients of color in the District.

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, §1301(a)(1)(C)(ii) of the ACA requires QHP issuers to offer one silver-level and one gold-level plan at a minimum;

WHEREAS, D.C. Official Code §31-3171.09(5)(B)(i) requires QHP issuers to offer at least one bronze plan;

WHEREAS, 45 C.F.R. §155.1000(c) allows state exchanges to limit certification to those plans that it finds are in the best interest of qualified individuals and employers and 45 C.F.R. §156.200(d) allows state exchanges to require additional certification requirements beyond the federal minimums;

WHEREAS, §5 of the Act (D.C. Official Code §31-3171.04(a)(7)) authorizes the Authority to implement procedures for certification, recertification, and decertification of QHPs;

WHEREAS, on March 22, 2013, the Executive Board adopted a Resolution to develop standardized benefit plans (benefits and cost-sharing) at each of the four metal level tiers based on input from consumers, employers, carriers, and based on early purchase preferences;

WHEREAS, on November 12, 2014, the Executive Board adopted a Resolution setting standard plans at all four metal level tiers for Plan Year 2016;

WHEREAS, on March 9, 2015, the Executive Board adopted consensus recommendations to modify the standard Bronze plan to be consistent with the 2016 Plan Year Actuarial Calculator released by the Center for Consumer Information and Insurance Oversight;

WHEREAS, on April 6, 2016, the Executive Board adopted a Resolution modifying the standard plans at all four metal level tiers for Plan Year 2017;

WHEREAS, on February 8, 2017, the Executive Board adopted a Resolution modifying the standard plans at all four metal level tiers, plus an HSA-compatible bronze plan for Plan Year 2018;

WHEREAS, on March 14, 2018, the Executive Board adopted a Resolution modifying the standard plans at the gold, silver and bronze copay levels for Plan Year 2019;

WHEREAS, on February 13 and May 8, 2019, the Executive Board adopted a Resolution modifying the standard plans at the gold, silver and bronze copay levels for Plan Year 2020;

WHEREAS, on April 1, 2020, the Executive Board adopted a Resolution modifying the standard plans at the gold, silver, bronze copay and bronze HSA-compatible levels for Plan Year 2021;

WHEREAS, on February 10, 2021, the Executive Board adopted a Resolution modifying the standard plans at the gold, silver, bronze copay and bronze HSA-compatible levels for Plan Year 2022;

WHEREAS, on July 14, 2021, the Executive Board adopted a Resolution adopting the recommendations of the Social Justice and Health Disparities Working Group;

WHEREAS, one of the recommendations of the Social Justice and Health Disparities Working Group directed the Standard Plans Working Group to modify insurance design for DC Health Link standard plans to eliminate cost-sharing, including deductibles, co-insurance, and co-payment, for medical care, prescription drugs, supplies and related services that prevent and manage diseases and health conditions that disproportionately affect patients of color in the District, and listed a prioritization of chronic conditions for the Standard Plans Working Group to review, the first of which was diabetes. The recommendation also specified that the new insurance design should be developed for standard plans in the small group marketplace as well as individual marketplace for plan year 2023;

WHEREAS, the working group met eight times, once a week, between September 14 and November 2, 2021 by conference call;

WHEREAS, the working group came to consensus on the policy of providing certain services, medications, and supplies for Type 2 diabetics at \$0 cost-sharing in standard plans as allowed by law;

NOW, THEREFORE, BE IT RESOLVED that the Executive Board hereby approves the following recommendations from the Standard Plans Advisory Working Group:

The Executive Board adopts the recommendation for standard plans for DC Health Link at the platinum, gold, silver, and bronze copay metal level tiers for 2023 as set forth in the *Recommendations of the Standard Plans Advisory Working Group to the District of Columbia Health Benefit Exchange Authority*, dated November 8, 2021.

I HEREBY CERTIFY that the foregoing Resolution was adopted on this 10th day of November 2021, by the Executive Board of the District of Columbia Health Benefit Exchange Authority in an open meeting.

/s/ Khalid Pitts, Secretary/Treasurer
District of Columbia Health Benefit Exchange Authority

November 10, 2021
Date