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Sent: Tuesday, September 28, 2021 9:26 AM

To: Senkewicz, MaryBeth E. (DCHBX) <marybeth.senkewicz@dc.gov>

Cc: Tomczyk, Tammy <Tammy.Tomczyk@oliverwyman.com>; Adomshick, Mary <Mary.Adomshick@oliverwyman.com>; Libster, Jennifer (DCHBX) <jennifer.libster@dc.gov>

Subject: Standard Plan Analysis for All Metal Levels

Mary Beth,

During the prior meeting we were asked to run our analysis, using the 90% concentration threshold for drugs and 50% coinsurance for low-value services, against the standard plans at all metal levels. The results of our analysis by metal level and any important items are listed below. If there are any questions you have prior to the meeting, please reach out.

- Platinum
 - The current metal AV is 88.99%
 - Applying the necessary adjustments in the metal AV calculation for diabetic and low-value services, results in a metal AV of 89.09%
 - No additional changes were made as the adjusted value is still within the necessary range
- Gold
 - The current metal AV is 81.95%
 - Applying the necessary adjustments in the metal AV calculation for diabetic and low-value services, results in a metal AV of 82.04%
 - If the OOP maximum was raised by \$50 (from \$4,950 to \$5,000) the metal AV would decrease to 81.96% and be within the necessary range
- Silver
 - The current metal AV is 71.96%
 - We previously communicated that the updated approach resulted in a metal AV of 72.10%
 - If the deductible was raised by \$200 (from \$4,000 to \$4,200) the metal AV would decrease to 71.95% and be within the necessary range
- Bronze
 - The current metal AV for the copay plan is 64.96%
 - Applying the necessary adjustments in the metal AV calculation for diabetic and low-value services, results in a metal AV of 65.03%
 - Adjustments were made to the inputs for the “Laboratory Outpatient and Professional Services” benefit to remove the deductible and reflect an effective copay which results in the same metal AV prior to adjustments for diabetic and low-value services
 - Adjustments were made to the drug deductible, in addition to the copay amount which occurs after the deductible has been met, to account for \$0 diabetic services
 - If the OOP maximum was raised by \$50 (from \$8,550 to \$8,600) the metal AV would decrease to 64.96% and be within the necessary range
 - No analysis was performed on the HSA plan as it would not qualify to be an HSA plan under current regulations if non-preventive services were applied \$0 member cost-sharing prior to the deductible being met

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