

District of Columbia Health Benefit Exchange Authority

Standard Plans Working Group

PY 2026 Standard Plans Benefit Design

Meeting #8

November 8, 2024

Agenda

- Welcome, *Andre Beard, HBX*
- Vote, *Claire Heyison, Chair*
- Adjourn

Three Options

Options	Description	Copay for specified services and Rx		Other
		Services and Labs	Prescription drugs	
Option 1	HIV scenario with Rx	\$5 copay	\$5 copay for prescription drugs in all ARV drug classes; within each ARV drug class, the drugs selected for formulary coverage are at the carrier's discretion.	
Option 2	HIV scenario without Rx	\$5 copay	No Rx copay reduction for people with HIV diagnoses; standard plan copays for Rx apply.	<u>Outreach</u> : Carriers undertake outreach activities to inform enrollees about the availability of copay assistance programs such as the Ryan White/AIDS Drug Assistance programs and manufacturer copay assistance programs.
Option 3	HIV scenario with generic Rx only	\$0 copay	\$0 copay for generic prescription drugs in all ARV classes; within each drug class, the generic drugs selected for formulary coverage are at the carrier's discretion.	<u>Outreach</u> : Carriers undertake outreach activities to inform enrollees about the availability of copay assistance programs such as the Ryan White/AIDS Drug Assistance programs and manufacturer copay assistance programs.

AV and cost offsets

Text in red indicates that the AV is outside the de minimis range based on the 2026 AV calculator

Standard Plan Design 2026 – AV and cost offsets			
Plan	Scenario	Option 1	Options 2 and 3
Platinum	Current 2025 Plan	92.40%	92.40%
	Increase OP surgery copay from \$0 to \$50 and decrease OP facility fee from \$250 to \$200	91.68%	91.68%
Gold	Current 2025 Plan	82.95%	82.95%
	Increase MOOP from \$6,050 to \$6,950 (+\$900)	81.94%	81.94%
Silver	Current 2025 Plan	72.33%	72.32%
	Increase MOOP from \$8,850 to \$9,150 (+\$300)	71.93%	71.92%
Bronze Copay	Current 2025 Plan	66.35%	66.28%
	Increase MOOP from \$9,150 to \$10,150 (+\$1,000) + Increase Rx deductible from \$850 to \$1,000 (+\$150)	64.96%	64.88%

Snip of Standard Plans grid for 2026 - changes from 2025

DC Health Benefit Exchange, Standard Plans, PY2026		Platinum		Gold		Silver		Bronze Copay	
Actuarial Value		91.68% [91.90%]		81.94% [81.95%]		71.92% [70.80%]		64.88% [64.74%]	
Individual Overall Deductible		\$0		\$500		\$5,200		\$8,350	
Other Individual Deductibles for Specific Services									
Medical		\$0		\$500		\$4,850		\$7,500	
Prescription Drugs		\$0		\$0		\$350		\$1,000 [850]	
Dental		\$0		\$0		\$0		\$0	
Individual Out-of-Pocket Maximum		\$2,100		\$6,950 [6,050]		\$9,150 [8,850]		\$10,150 [9,150]	
Common Medical Event	Service Type	Member Cost Share	Deductible Applies	Member Cost Share	Deductible Applies	Member Cost Share	Deductible Applies	Member Cost Share	Deductible Applies
Health Care Provider's Office or Clinic visit	Primary care visit or non-specialist practitioner visit to treat an injury or illness	\$20		\$25		\$40		\$45	
	Specialist visit	\$40		\$50		\$80		\$105	
	Preventive care/screening/immunization	\$0		\$0		\$0		\$0	
Tests	Laboratory tests**	\$20		\$30		\$60		\$55	X
	X-rays and diagnostic imaging	\$40		\$50		\$80		\$80	X
	Imaging (CT/PET scans, MRIs)	\$150		\$250		\$400		\$500	X
Drugs to treat Illness or Condition	Generic	\$5		\$15		\$20		\$25	
	Preferred brand	\$15		\$50		\$50	X	\$75	X
	Non-preferred Brand	\$25		\$70		\$70	X	\$100	X
	Specialty	\$100		\$150		\$150	X	\$150	X
Outpatient Surgery	Facility fee (e.g. hospital room)	\$200 [250]		\$375		20%	X	40%	X
	Physician/Surgeon fee	\$50 [50]		\$125		20%	X	40%	X