



June 1, 2015

**MEMORANDUM**

**TO: Standing Advisory Board**  
**FROM: Debbie Curtis, Senior Deputy Director for Policy & Programs**  
**Mary Beth Senkewicz, Associate General Counsel and Policy Advisor**  
**RE: Benchmark 2017 EHB Plan**

This memorandum is a follow up to the Standing Advisory Board (SAB) meeting held on May 21, 2015 regarding the 2017 Benchmark EHB Plan. At that time, Board members asked for further information about the following benefits in the three largest small group plans that were displayed on the chart of plans and benefits created by HBX staff: hospice; rehabilitation; habilitation; durable medical equipment; and home health. The Department of Insurance, Securities and Banking (DISB) sent out a Data Call requesting certain information. The replies from CareFirst (Plans A, B and D) and Kaiser (Plan C) are attached.

You will notice that the CareFirst plans have visit limits on Habilitative Services for Adults. Please be aware that the plans inquired about in the data call are 2014 plans; for the 2017 EHB benchmark plan, under the CMS rule, coverage for habilitative services must be at least as favorable as the coverage for rehabilitative services. Therefore the federal regulation would override this limitation in the CareFirst plan if it were selected as the benchmark. As stated in the previous memo on habilitative services, the HBX Carrier Manual will be updated to ensure carriers are informed of the need to comply with the new federal regulation.

DISB also took public comment on the 2017 Benchmark EHB plan. Attached are a comment letter from ASHA and one from the Acupuncture Society of DC. DISB reports that it received 65 comments on acupuncture. DISB states that the letter from the Acupuncture Society fully expresses the comments from the acupuncture community.