

## EXECUTIVE BOARD OF THE DISTRICT OF COLUMBIA HEALTH BENEFIT EXCHANGE AUTHORITY

To adopt consensus recommendations regarding employer choice of qualified dental plans, employer contribution methodology and requirements for qualified dental plans, and transparency of dental plan offerings on DC Health Link.

**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**, §1311(d)(2)(b) of the Affordable Care Act of 2010 (P.L. 111-148 & P.L. 111-152) ("ACA") allows an "issuer of a plan that only provides limited scope dental benefits... to offer the plan through the Exchange (either separately or in conjunction with a qualified health plan);"

**WHEREAS**, for plan year 2014, the Department of Insurance, Securities and Banking (DISB) did not approve stand-alone pediatric dental plans for sale in the exchange marketplace, citing duplication of benefits since all qualified health plans ("QHPs") embedded the pediatric dental essential health benefit;

**WHEREAS**, on February 12, 2014, the Executive Board re-established the Dental Plans Advisory Working Group ("Dental Working Group") to consider requiring QHPs to provide plan options that do not include the pediatric dental benefit, separate deductibles for the pediatric dental benefits, employer choice of qualified dental plans, employer contribution methodology and requirements for qualified dental plans, and transparency of dental plan offerings on DC Health Link;

**WHEREAS**, on March 7, March 14 and March 28, 2014, the Dental Working Group met and reviewed technical capabilities of DC Health Link, policies for qualified health plans as a comparison for decisions pertaining to qualified dental plans, and the approaches of other state marketplaces;

**WHEREAS**, the Dental Working Group adopted consensus recommendations on employer choice of qualified dental plans, contribution methodology and requirements for qualified dental plans, and transparency for dental plan offerings on DC Health Link;

**NOW, THEREFORE, BE IT RESOLVED** that the Executive Board hereby approves the following four consensus recommendations:

- 1. Employers may offer to their employees any number of the qualified dental plans available to small businesses in DC Health Link.
- 2. Employers are not required to have a minimum contribution amount toward standalone qualified dental plan coverage.
- 3. If an employer chooses to offer a contribution for standalone qualified dental plan coverage, the employer contribution methodology shall be the employer contributing a percentage of the member-level age rate within a reference plan selected by the employer; this is the same methodology used for contributions for qualified health plans.
- 4. The DCHealthLink.com website shall provide greater transparency (more information) about pediatric dental benefits.

**I HEREBY CERTIFY** that the foregoing Resolution was adopted on this 14<sup>th</sup> day of May, 2014, by the Executive Board of the District of Columbia Health Benefit Exchange Authority in an open meeting.

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

Date