

**From:** VanLoon, Peter

**Sent:** Friday, January 18, 2013 12:33 PM

**To:** Barrett, Tanya; Dowling, Anne Melissa; Mark Espinosa; Veltri, Victoria; Grant Ritter; 'PAMELA RUSSEK ('; 'Mark Czarnecki'

**Cc:** Dr. Robert McLean; 'Steve Frayne; Arlene Murphy; Kevin Galvin; Lyons, Julie; Breault, Mary Ellen; Lyons, Timothy; Porter, Grant; 'Alta Lash; Lopes, Ann; Madrak, Jason; Counihan, Kevin; Wadleigh, James R; Lynch, David G.; Lamb, Virginia; Sigal, Steven J; Bela Gorman; "Steve' Glick'; 'Philip Boyle; Bruce Campbell; Jennifer Becher; Alex Hutchinson; Johnson, Florence; Stover, Keith Stover; Dawn Horner

**Subject:** Report to Co-Chairs of Standard Plan Design Team Meeting on January 17th, 2013

### **Meeting of January 17<sup>th</sup>**

The team met last night and worked through the Silver cost sharing reduction plans and the other metal tiers. The team has defined the Standard Plan Designs to the extent of the parameters included in the AV calculator. Staff will recommend to the Board of Directors plan designs the team has approved.

The team voted on all the plan designs and there was universal approval – no negative votes or abstentions. The approval of the plan designs was made by several with the provision that affordability is critical and must continue to be pursued. One of the eight members was absent last night. Attached are the plan designs as agreed upon (please see below).

There was continued concern expressed about the high deductibles on the bronze and silver metal tiers, but also the recognition that such deductibles are a function of the AV calculator. The team knows that setting up standard plan designs is necessary given the time constraints, and continues to raise the concern that premiums will be unaffordable to many, even with subsidies and cost sharing reductions.

The team continues with its principles to offer plans which are simple to understand, consumer focused and that promote primary care. The use of copays not subject to the deductible was a common theme, as the team believes consumers need to see value quickly for their money.

### **Next Steps**

There is still work for the team to complete the plan designs.

Staff is working to present to the team recommendations for ancillary services, e.g. home health care, durable medical equipment, and for out of network benefits. The AV calculator does not take such benefits into account for AV, but we need to define them to ensure consistency across carriers. The team is tentatively planning to meet next Tuesday evening for any issues we are not able to resolve by email, e.g. the ancillary coverage.

### **Communication**

Thank you for your feedback on informational session for the combined AC next week. I will put together a conference call and physical location for AC members for an informational session on Wednesday evening.

### **Attached Document**

Staff has updated the analysis sent prior to last night's meeting to include the direction of the team. Here are the updates at the behest of the team.

Appendix A. Standard Plan Design for Qualified Health Plans, Silver Copayment-Based Plan with Silver Alternatives

- Relative to material presented to the Working Group on Thursday, the following changes, as recommended by the group, were made:
  - 87 AV Silver alternative reflects:
    - decreasing number of days subject to deductible (per visit), from 4 to 2
    - Tier 3 (i.e. non-preferred brand drugs) has been left not subject to deductible as it was possible to stay within AV upper-bound
  - 94 AV Silver alternative reflects:
    - lowering of copay for PCP, Mental Health Visits, Rehabilitative Services, and Lab Services, from \$10 to \$5
    - lowering of Specialist Visit and X-Ray, from \$20 to \$15

Appendix B. Standard Plan Design for Qualified Health Plans, Summary

- No changes made to Bronze, Gold, or Platinum designs

Peter A. Van Loon  
Chief Operating Officer  
Connecticut Health Insurance Exchange  
[peter.vanloon@ct.gov](mailto:peter.vanloon@ct.gov)  
O-860-418-6407  
C-860-478-4436