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*Agency of Human Services*

**MEMO TO:** Medicaid & Exchange Advisory Board

**FROM:** Department of Vermont Health Access

**DATE:** February 19, 2015

**SUBJECT:** Department of Vermont Health Access Proposed Administrative Rule: Qualified Health Plans Certification

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The Department of Vermont Health Access (DVHA) is filing a permanent administrative rule for certification and de-certification procedures and administrative standards for Qualified Health Plans (QHPs) on Vermont's Health Benefit Exchange (Vermont Health Connect).

- Adoption of an administrative rule would replace the current process of the State contracting with QHPs on administrative requirements for Exchange participation. The State is required to have rules in place for QHP certification under 33 V.S.A. §§ 1810, 1811(b)(2)(A),(B) and (C).
- Under 33 V.S.A. §§ 1805, 1806 the Commissioner of the DVHA has an implicit duty to promulgate rules regarding the operation of the Vermont Health Benefit Exchange.
- The DVHA has extended the current contracts with QHPs for 2015; the proposed rule would control the QHP certification process for plan year 2016.
- The proposed rule sets forth the certification process and administrative requirements for QHPs in areas including:
  - Customer service,
  - Materials and marketing,
  - Enrollment and eligibility, and
  - Premium payment.
- The proposed effective date of the rule is August 11, 2015.
- The DVHA will pre-file the rule with the Inter-Agency Committee on Administrative Rules (ICAR) on March 30, 2015. The ICAR hearing is scheduled for April 13, 2015.
- As part of the permanent rulemaking process, there will be a public comment period and public hearing.
- The proposed rule was shared with the Department of Financial Regulation (DFR) and the Green Mountain Care Board (GMCB) for review and comment in January 2015. The DFR performs



form and actuarial review for QHPs and GMCB performs rate reviews for QHPs. The DFR and GMCB are supportive of DVHA rulemaking.

- The DVHA met with health plan carriers on January 19, 2015 and February 18, 2015 to discuss the proposed rule. At the meetings, the DVHA listened to comments from carriers and answered questions, and the DVHA reviewed and considered these comments in drafting the proposed rule.
- For additional information or comments, please contact: Howard Pallotta, General Counsel at DVHA ([Howard.Pallotta@state.vt.us](mailto:Howard.Pallotta@state.vt.us)), or Addie Strumolo, Health Policy Analyst at Vermont Health Connect ([Adaline.Strumolo@state.vt.us](mailto:Adaline.Strumolo@state.vt.us)).
- Enclosed please find the Table of Contents for this proposed administrative rule.

## **QUALIFIED HEALTH PLAN RULE**

### **INTRODUCTION**

Under 33 V.S.A. §§ 1810, 1811 (f)(2)(A),(B) and (C), the Commissioner of the Department of Vermont Health Access has a specific duty to create rules for the operation of the Vermont Health Benefit Exchange or VHBE. Under 33 V.S.A. §§ 1805, 1806 the Commissioner of Vermont Health Access has an implicit duty to promulgate rules regarding the operation of the Vermont Health Benefit Exchange or VHBE.

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