Plan Management Advisory Group Update
September 3, 2019
QHP MODEL CONTRACT REFRESH 2022-2024 UPDATE

At the August board of directors meeting, Plan Management presented a proposal to extend the QHP model contract refresh originally slated for 2021-2023 to 2022-2024.

Additional time is needed to ensure:

- Active, informed stakeholder engagement in the development of new QHP Issuer contract requirements.
- Increase engagement and alignment with other large purchasers in California on quality metrics and other contract requirements: CalPERS, Medi-Cal, DHCS.

The board will vote on the extension proposal at the September 19 board meeting.

QHP Certification Application during 2020 for 2021 plan year will be a continuation of the current 2017-2020 contract.
2022-2024 MODEL CONTRACT DEVELOPMENT TIMEFRAME WILL OVERLAP WITH 2021 QHP CERTIFICATION CYCLE

2021 Plan Year

- Engage Stakeholders through Plan Management Advisory & Refresh Workgroup Fall 2019-Winter 2020
- Applicant Submissions & Evaluations May-June
- Rate Negotiations & Announcement June-July 2020
- Post First Draft for Public Comment Sept 2020
- Public Comment Response Oct 2020
- Draft to Board Meeting Nov 2020
- Open Enrollment Q4 2020-Q1 2021
- Board Approval of 2022-2024 Model Contract Jan 2021

2022-2024 Plan Year

- December 2019
- Jan-Mar 2020
- Apr-June 2020
- July - Sept 2020
- Oct-Dec 2020
- 2021 Plan Year
Objective of the workgroup is to make recommendations on changes to the QHP model contract 2022-2024.

Upcoming workgroup sessions

- Sept 24: Review selections from Covered California Experience report. Presentation on the workgroup process to review material, discuss possible contract expectations and measurements, and reach consensus on recommendations on changes to Attachment 7 contract language.

- Oct 3: Health Equity, reducing disparities- presentation from subject matter experts, review of current Covered CA initiatives, discussion of best practices & evidence, develop recommendations on changes to Attachment 7 contract language.

- Nov 6: Mental Health and Substance Use Disorder- presentation from subject matter experts, review of current Covered CA initiatives, discussion of best practices & evidence, develop recommendations on changes to Attachment 7 contract language.

- Dec 5: Effective Primary Care- presentation from subject matter experts, review of current Covered CA initiatives, discussion of best practices & evidence, develop recommendations on changes to Attachment 7 contract language.

Agendas for each workgroup session are forthcoming.

To participate or have questions, please email Thai at Thai.Lee@covered.ca.gov
2021 BENEFIT DESIGN
VBID PILOT PROGRAM UPDATE

- Covered California has convened several internal meetings with VBID subject matter experts/researchers to develop a draft proposal for the 2021 Benefits Workgroup. Upfront work includes:
  - Initial Actuarial Value (AV) modeling to determine magnitude of AV changes by service and cost share
  - Covered California claims analysis: chronic condition prevalence, utilization, medical/drug spend (total population and by region)
  - Gathering preliminary input on regulatory, administrative, and operational issues
- **GOAL:** Narrow down list of chronic conditions, services, and cost sharing to 1-2 draft plans that can be presented to the benefits workgroup for further discussion and adjustments.
- The benefits workgroup will further develop the proposal to go before the Plan Advisory Group and the Board this winter with the proposed 2021 Benefit Designs.
VBID PILOT PROGRAM: STAKEHOLDER INPUT

Next steps:

▪ Present a draft VBID proposal to the 2021 Benefits Workgroup that identifies the following via 1-2 VBID plans as a starting point for stakeholder discussion and program development. Covered California continues to work through the details of this proposal and anticipates presenting a draft in October.
  ▪ Chronic conditions
  ▪ Services/Drugs
  ▪ Cost-sharing
  ▪ Metal tier(s)

▪ Stakeholder workgroup will provide input on the proposal and discuss VBID pilot program implementation policies:
  ▪ Region selection
  ▪ Issuer requirements in VBID pilot regions
  ▪ Communication plan (enrollees, providers, etc.)
2021 BENEFIT DESIGN WORKGROUP

- Tentative meeting dates (Wednesdays, 10 a.m. to 12 noon Pacific):
  - October 2, 16, 30 / November 13, 27 / December 11 / January 8, 22 / February 5, 19
  - VBID and dental benefit design will be the first discussion topics, with benefits modeling to begin once the Draft 2021 AV Calculator is available

- Discussion topics
  - Health Benefits: VBID, new IRS rules for preventive services in HDHPs
  - Dental Benefits: Low-AV pediatric dental plan (proposal by carrier), changes to D&P category and codes (various)

- Please email Allie Mangiaracino at allie.mangiaracino@covered.ca.gov to be added to the benefits workgroup and/or suggest additional discussion topics.