

Green Mountain Care Board

Department of Vermont Health Access (DVHA) Presentation of Proposed 2022 Standard Qualified Health Plan (QHP) Designs

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2022 Standard Qualified Health Plans Presentation Objectives

- I. **Provide Overview:** Supporting Information and Approach For Developing 2022 Proposed QHPs for Vermont Health Connect
(Dana Houlihan)

- II. **Present Proposed Plan Designs:**
Recommendations, Alternatives, Considerations
(Julie Peper, Brittney Phillips, Brooke Steiner: Wakely Consulting)

- III. **Comments, Questions & Discussion**

- IV. **GMCB Vote**

Summary of Qualified Health Plans Currently Offered By VHC (2021)

Twenty-eight (28) medical plans*:

For Review Today:

14 Standard plans (7 from each issuer)

- Platinum: 1 BCBS & 1 MVP
- Gold: 1 BCBS & 1 MVP
- Silver: 2 BCBS & 2 MVP (One from each issuer structured as HDHP)
- Bronze: 3 BCBS & 3 MVP (One from each issuer structured as HDHP)

Also Offered on Vermont Health Connect:

14 Non-Standard plans: (7 from each issuer):

- Gold: 2 BCBS & 2 MVP (One from each issuer is structured as HDHP)
- Silver: 2 BCBS & 2 MVP (One from each issuer is structured as HDHP)
- Bronze: 2 BCBS & 2 MVP (One from each issuer is structured as HDHP)
- Catastrophic: 1 BCBS & 1 MVP (Not included in one-page handout)

* Refer to one-page handout displaying 2021 medical QHP benefits & rates

Planning for 2022 Standard QHPs Stakeholder Group Composition

DVHA:

Plan Management Director
Outreach & Education

All VT Issuers: BCBSVT, MVP, NEDD

Vermont Office of Healthcare Advocate

Department of Financial Regulation Staff

Green Mountain Care Board Staff

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- Stakeholders met regularly from November 2020 – January 2021
 - Stakeholders actively involved, providing input leading to the final QHP design proposal with broad-based support

2022 Stakeholder Group Benefit Design Principles

- **Value:** Provide compliant, comprehensive coverage
- **Affordability:** Balance impact on premium vs. consumer cost-share
- **Stability:** Implement cost share changes gradually to minimize large cost share or premium increases in future years
- **Attractiveness:** Focus on increased simplification of plan benefit designs and messaging for customers with different medical needs, a range of income levels
- **Usefulness:** Create/maintain incentives for low-cost primary & behavioral health care visits, emphasis on low-cost Generic Rx, no-cost preventive services

2022 Stakeholder Group Process Highlights

- **Strategic, Minimal Increases:** Balancing required changes across cost-share for multiple services, avoiding abrupt year/year changes.
- **Overall Cost:** Being mindful of benefit cost share decisions and their anticipated corresponding premium impact
- **Consumer Education (O & E):** Being mindful of proposing plan designs that are consistent and customer-friendly

Silver Loading Continues

- Premium for on-exchange silver plans “loaded” to cover the value of the cost sharing reduction (CSR)
- Higher silver plan premium on-exchange substantially enhances APTC with a higher benchmark plan (second lowest cost silver) premium
- Subsidy-eligible VHC enrollees may choose a silver plan with CSR and APTC, or select another metal level plan and reduce premium with APTC
- Unsubsidized customers may select a “reflective” silver plan at lower premium directly from issuers
- Reflective silver plan benefits contain one minor benefit variation: \$5 or 5% (\$25 for HDHP) higher cost share for ambulance services, approved by GMCB in 2019 and proposed again for 2022
- Silver loading does not impact QHP premium at other metal levels

2022 QHP Certification High-Level Timeline:

- **DVHA Presents Plan Design Adjustments; GMCB Approval:**
February 2021
- **Medical & Dental Issuers File Forms With DFR:** March 2021
(Form review finalized June 2021)
- **Final Notice of Benefit and Payment Parameters and the IRS limits on HDHPs:**
(Expected, Spring 2021)
- **Issuers Submit Rate Proposals:** May 2021
(GMCB completes rate review & issues decisions: August 2021)
- **DVHA Plan Certification:** August 2021
- **2022 Open Enrollment:** November 1 to December 15, 2021

Outline

- Proposed Regulation Changes for 2022
- Changes in Federal AVC for 2022
- Recommended Plan Design Changes by Metal Level

2022 Draft Notice of Benefit and Payment Parameters

Key Changes from 2021 Related to Benefits and Plan Designs

The Notice of Benefit and Payment Parameters (NBPP) is still in draft format for 2022. Any changes in the final version could impact the actuarial values and the resulting plan designs.

- A portion of the NBPP was finalized on January 14, 2021. However, it did not include the plan design aspects (MOOP, AVC, etc.).
- The Annual Limitation on Cost Sharing is proposed to be \$9,100 in 2022. This is an increase from \$8,550 in 2021.
- Should the actual limit be different, the plan designs shown here may need to change.

Federal HDHP minimum deductible and MOOP limits are not yet released for 2022.

- The 2021 minimum single deductible and MOOP are \$1,400 and \$7,000, respectively.
- The proposed plan designs do not currently account for changes in the HDHP deductible. Should the final limit for the deductible increase, the Rx deductible for the HDHP plans will need to be adjusted.
- The minimum deductible typically increases \$50 every two to three years and the last increase was for the 2020 plan year.
- The MOOP increases about \$100 each year.

There are other changes not listed here as they do not impact plan designs as directly as the items above

2022 Draft Actuarial Value Calculator (AVC) Overview

The Center for Consumer Information and Insurance Oversight (CCIIO) releases an Actuarial Value Calculator for each plan year.

- This model must be used to determine the actuarial value (AV) of a plan for purposes of determining compliance with metal level requirements.
- The calculator includes inputs for various plan design features, including:
 - Deductible
 - Out-of-Pocket Maximums
 - Member cost-sharing for 20 different service categories (emergency room, inpatient, primary care, etc.)
 - Copays and/or Coinsurance
 - Whether the deductible applies
- Some plan design features are not supported by the AVC.
 - If the impact of these features is considered substantial, an actuary can either modify the inputs to most closely represent the plan design or can modify the results of the AVC to account for these features. This requires an actuarial certification documenting the development of the modification.

The resulting AV from the calculator will differ from the pricing AV used by carriers to determine premiums.

- The Federal AVC is based on summarized national data whereas carriers will likely use their own experience.
- Each carrier will likely use their own model and the methodology may differ from that used in the AVC.
- As noted above, not all service categories are represented in the AVC.

2022 Draft Federal Actuarial Value Calculator (AVC)

Key Changes from 2021

The 2022 Federal Actuarial Value Calculator (AVC) is in draft format. Any changes in the final version could impact the actuarial values and the resulting plan designs.

The 2022 Draft Federal AVC did not change from the final 2021 AVC

- Underlying claims data remains un-changed
- No trend was applied from 2021 to 2022. CMS cited the uncertainty of the impact of COVID-19 and trying to limit disruption to plan designs as the reason

Estimated Premium Impact – Notes and Caveats

“Estimated Premium Impact”: The premium changes shown on subsequent slides are meant to illustrate the trade-off between premium increases and cost sharing increases. The actual premium change will be based on each carrier’s model and experience and may differ significantly from what is shown.

- The premium change is based on the Wakely benefit model and was not adjusted for any benefit designs that are not accommodated in the model (for example, the embedded aggregate drug OOPM on the HDHPs). The actuarial values were based on high level estimates of allowed PMPMs and adjusted for each metal level by induced utilization factors. These estimates should be used as high level estimates and an additional reference point, but not as the actual expected premium changes.

2022 Estimated Actuarial Value (AV)

Impact on the Actuarial Value of VT Standard Plan Designs

- Since there were no changes from the Final 2021 AVC to the 2022 Draft AVC, no plans are required to make changes.
- Even if changes are not required, changes may still be desired to avoid the AV increase being passed on as a premium increases.
- The acceptable AV ranges below have been adjusted for the following design features that are not supported by the Federal AVC and for which a specific adjustment is not made.
 - Waiving the deductible for preventive prescription drugs: 0.5% “cushion” on HDHPs.

	Plan	2021 Federal AVC, Adjusted if Necessary	2022 Draft Federal AVC, Adjusted if Necessary	Acceptable Range	Out of Range
Deductible Plans	Platinum	89.7%	89.7%	86.0%-92.0%	NO
	Gold	81.9%	81.9%	76.0%-82.0%	NO
	Silver	71.8%	71.8%	66.0%-72.0%	NO
	Bronze (with drug limit)	64.1%	64.1%	56.0%-65.0%	NO
	Bronze (without drug limit)	64.8%	64.8%	56.0%-65.0%	NO
HDHPs	Silver - Embedded OOPM	71.2%	71.2%	66.0%-71.5%	NO
	Bronze - Embedded OOPM	63.8%	63.8%	56.0%-64.5%	NO

S.296 – Limiting Out-of-Pocket Expenses for Insulin

Limits a member's total out-of-pocket responsibility to \$100 per 30-day supply for insulin prescriptions

- Not accommodated by the Federal AVC
- Reviewed national data and utilization information from VT issuers to see if impact is meaningful and develop adjustments to AVC output, if necessary

AV impact ranges from 0.0% - 0.1%, depending on metal level

- This impact does not push any current or recommended plan designs out of the AV de minimis range
- AVs reflected here do not include an adjustment for this limit

2022 QHPs – Changes for All Plans

Even though the 2021 plan designs are still within the AV range, changes are recommended:

- Increased cost-sharing will limit the impact on premium
- Making incremental changes each year can help to avoid larger changes required in future years

2022 QHP Proposal Changes Requiring GMCB Approval

	Changes that do not Require Formal Approval
Copay	Less than or equal to \$15
Coinsurance	Less than or equal to 5 percentage points
Deductible	Less than or equal to \$200
OOPM	Less than or equal to increase in federal OOPM limit (\$400 for 2021)
Other	Modification required to meet federal guidance

- For the recommended and alternative plan designs, any changes from the 2021 plan designs are shown in boxes and shaded in orange. **Any changes requiring approval are shaded in green.**

2022 QHP Proposal Summary of Plan Design Changes

Deductible Plans		
Plan	Platinum	Gold
Changes	Increase medical deductible from \$350 to \$400	Increase medical deductible from \$1,100 to \$1,200
		Increase pharmacy deductible from \$100 to \$150
		Increase medical OOPM from \$5,200 to \$5,400
Require Approval?	NO	NO

Deductible Plans		
Plan	Silver	Bronze w/ Rx Limit
Changes	Increase medical deductible from \$3,200 to \$3,400	Increase medical deductible from \$6,250 to \$6,450
	Increase pharmacy deductible from \$350 to \$400	Increase pharmacy deductible from \$1,000 to \$1,100
	Increase combined OOPM from \$8,150 to \$8,550	Increase combined OOPM from \$8,400 to \$8,700
Require Approval?	NO	NO

Deductible Plans	
Plan	Bronze w/o Rx Limit
Changes	Increase medical deductible from \$8,400 to \$8,700
	Increase combined OOPM from \$8,400 to \$8,700
Require Approval?	YES

HDHPs		
Plan	Silver	Bronze
Changes	Increase medical deductible from \$1,750 to \$1,850	Increase medical deductible from \$5,500 to \$5,700
	Increase embedded single OOPM from \$8,550 to \$9,100	Increase combined OOPM from \$6,900 to \$7,100
		Increase embedded single OOPM from \$8,550 to \$9,100
Require Approval?	NO	NO

We are also requesting approval of the change to pediatric vision benefits to align cost sharing across all standard plans and metal levels, as noted on the following slide.

Pediatric Vision Exam and Materials

Pediatric vision exam and materials are an essential health benefit:

- Currently, the cost-sharing on these services and supplies varies according to the richness of the health plan selected. Currently, cost-share on the optometrist visit and glasses ranged from \$20 each for the platinum plan to \$85 each on bronze plans.
- The stakeholder group has agreed to establish a uniform pediatric vision cost-share structure that does not vary across plans.
- The benefit would allow for \$20 optometrist copay and \$20 glasses or contacts copay for one visit/pair a year.
- Consumers with high-deductible plans will have access to this benefit once the deductible is met, per IRS requirements.
- This decision improves equitable access to vision care and supplies for children. Pediatric vision cost-share will now mirror the pediatric dental cost-share which has uniform cost-sharing across plans, regardless of the richness of the plan. The insurers have priced this to impact premiums by \$10-20 annually, at most.

2014 to 2021 QHPs Platinum Deductible Plan

Deductible/OOP Max	2014 - 2016	2017	2018	2019	2020	2021
Type of Plan	Deductible	Deductible	Deductible	Deductible	Deductible	Deductible
Medical Ded	\$150	\$250	\$300	\$350	\$350	\$350
Rx Ded	\$0	\$0	\$0	\$0	\$0	\$0
Integrated Ded	No	No	No	No	No	No
Medical OOPM	\$1,250	\$1,300	\$1,300	\$1,350	\$1,350	\$1,400
Rx OOPM	\$1,250	\$1,300	\$1,300	\$1,350	\$1,350	\$1,400
Integrated OOPM	No	No	No	No	No	No
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual
Medical Deductible waived for:	Prev, OV, UC, Amb, ER	Prev, OV, UC, Amb, ER	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb
Drug Deductible waived for:	N/A	N/A	N/A	N/A	N/A	N/A
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient ¹	10%	10%	10%	10%	10%	10%
Outpatient ²	10%	10%	10%	10%	10%	10%
ER ³	\$100	\$100	\$100	\$100	\$100	\$100
Radiology (MRI, CT, PET)	10%	10%	10%	10%	10%	10%
Preventive	\$0	\$0	\$0	\$0	\$0	\$0
PCP Office Visit	\$10	\$10	\$10	\$10	\$15	\$15
MH/SA Office Visit	\$10	\$10	\$10	\$10	\$15	\$15
Specialist Office Visit ⁴	\$20	\$30	\$30	\$30	\$40	\$40
Physical Therapy/Chiropractic	\$20	\$30	\$30	\$30	\$20	\$20
Urgent Care	\$40	\$40	\$40	\$40	\$50	\$50
Ambulance	\$50	\$50	\$50	\$50	\$60	\$60
Rx Generic	\$5	\$5	\$5	\$5	\$10	\$10
Rx Preferred Brand	\$40	\$50	\$50	\$50	\$50	\$50
Rx Non-Preferred Brand	50%	50%	50%	50%	50%	50%
Rx Specialty	50%	50%	50%	50%	50%	50%

2022 QHPs Platinum Deductible Plan

Deductible/OOP Max	2021 Plan Design	2022 Recommended Design	2022 Alternative Design
Type of Plan	Deductible	Deductible	Deductible
Medical Ded	\$350	\$400	\$350
Rx Ded	\$0	\$0	\$0
Integrated Ded	No	No	No
Medical OOPM	\$1,400	\$1,400	\$1,400
Rx OOPM	\$1,400	\$1,400	\$1,400
Integrated OOPM	No	No	No
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual
Medical Deductible waived for:	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb
Drug Deductible waived for:	N/A	N/A	N/A
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient	10%	10%	10%
Outpatient	10%	10%	10%
ER	\$100	\$100	\$100
Radiology (MRI, CT, PET)	10%	10%	10%
Preventive	\$0	\$0	\$0
PCP Office Visit	\$15	\$15	\$15
MH/SA Office Visit	\$15	\$15	\$15
Specialist Office Visit	\$40	\$40	\$40
Physical Therapy/Chiropractic	\$20	\$20	\$20
Urgent Care	\$50	\$50	\$50
Ambulance	\$60	\$60	\$60
Rx Generic	\$10	\$10	\$10
Rx Preferred Brand	\$50	\$50	\$50
Rx Non-Preferred Brand	50%	50%	50%
Rx Specialty	50%	50%	50%
Actuarial Value			
2021 Federal AVC, Adjusted if Necessary	89.7%	N/A	89.7%
2022 DRAFT Federal AVC, Adjusted if Necessary	89.7%	89.4%	89.7%
Difference from 2021 Federal AVC, Adjusted	0.0%	-0.3%	0.0%
Estimated Premium Impact	N/A	0.2%	0.4%

2014 to 2021 QHPs Gold Deductible Plan

Deductible/OOP Max	2014 - 2016	2017	2018	2019	2020	2021
Type of Plan	Deductible	Deductible	Deductible	Deductible	Deductible	Deductible
Medical Ded	\$750	\$850	\$850	\$850	\$900	\$1,100
Rx Ded	\$50	\$100	\$100	\$100	\$100	\$100
Integrated Ded	No	No	No	No	No	No
Medical OOPM	\$4,250	\$4,500	\$4,500	\$4,700	\$5,000	\$5,200
Rx OOPM	\$1,250	\$1,300	\$1,300	\$1,350	\$1,350	\$1,400
Integrated OOPM	No	No	No	No	No	No
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual
Medical Deductible waived for:	Prev, OV, UC, Amb, ER	Prev, OV, UC, Amb, ER	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb
Drug Deductible waived for:	Generic scripts	Generic scripts	Generic scripts	Generic scripts	Generic scripts	Generic scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient ¹	20%	20%	30%	30%	30%	30%
Outpatient ²	20%	20%	30%	30%	30%	30%
ER ³	\$150	\$150	\$150	\$150	\$150	\$150
Radiology (MRI, CT, PET)	20%	20%	30%	30%	30%	30%
Preventive	\$0	\$0	\$0	\$0	\$0	\$0
PCP Office Visit	\$15	\$15	\$15	\$15	\$20	\$20
MH/SA Office Visit	\$15	\$15	\$15	\$15	\$20	\$20
Specialist Office Visit ⁴	\$25	\$30	\$30	\$30	\$50	\$50
Physical Therapy/Chiropractic	\$25	\$30	\$30	\$30	\$30	\$30
Urgent Care	\$45	\$45	\$40	\$40	\$60	\$60
Ambulance	\$50	\$50	\$50	\$50	\$70	\$70
Rx Generic	\$5	\$5	\$5	\$10	\$10	\$12
Rx Preferred Brand	\$40	\$50	\$50	\$50	\$50	\$55
Rx Non-Preferred Brand	50%	50%	50%	50%	50%	50%
Rx Specialty	50%	50%	50%	50%	50%	50%

2022 QHPs Gold Deductible Plan

Deductible/OOP Max	2021 Plan Design	2022 Recommended Design	2022 Alternative Design
Type of Plan	Deductible	Deductible	Deductible
Medical Ded	\$1,100	\$1,200	\$1,100
Rx Ded	\$100	\$150	\$100
Integrated Ded	No	No	No
Medical OOPM	\$5,200	\$5,400	\$5,200
Rx OOPM	\$1,400	\$1,400	\$1,400
Integrated OOPM	No	No	No
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual
Medical Deductible waived for:	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb
Drug Deductible waived for:	Generic scripts	Generic scripts	Generic scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient	30%	30%	30%
Outpatient	30%	30%	30%
ER	\$150	\$150	\$150
Radiology (MRI, CT, PET)	30%	30%	30%
Preventive	\$0	\$0	\$0
PCP Office Visit	\$20	\$20	\$20
MH/SA Office Visit	\$20	\$20	\$20
Specialist Office Visit	\$50	\$50	\$50
Physical Therapy/Chiropractic	\$30	\$30	\$30
Urgent Care	\$60	\$60	\$60
Ambulance	\$70	\$70	\$70
Rx Generic	\$12	\$12	\$12
Rx Preferred Brand	\$55	\$55	\$55
Rx Non-Preferred Brand	50%	50%	50%
Rx Specialty	50%	50%	50%
Actuarial Value			
2021 Federal AVC, Adjusted if Necessary	81.9%	N/A	N/A
2022 DRAFT Federal AVC, Adjusted if Necessary	81.9%	81.5%	81.9%
Difference from 2021 Federal AVC, Adjusted	0.0%	-0.4%	0.0%
Estimated Premium Impact	N/A	0.3%	0.8%

2014 to 2021 QHPs Silver Deductible Plan

Deductible/OOP Max	2014	2015	2016	2017	2018	2019	2020	2021
Type of Plan	Deductible	Deductible	Deductible	Deductible	Deductible	Deductible	Deductible	Deductible
Medical Ded	\$1,900	\$1,900	\$2,000	\$2,150	\$2,600	\$2,800	\$3,200	\$3,200
Rx Ded	\$100	\$100	\$150	\$150	\$300	\$300	\$350	\$350
Integrated Ded	No	No	No	No	No	No	No	No
Medical OOPM	\$5,150	\$5,100	\$5,600	\$6,000	\$6,800	\$7,500	\$7,900	\$8,150
Rx OOPM	\$1,250	\$1,250	\$1,250	\$1,300	\$1,300	\$1,350	\$1,350	\$1,400
Integrated OOPM	No	No	No	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual
Medical Deductible waived for:	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb
Drug Deductible waived for:	Generic scripts	Generic scripts	Generic scripts	Generic scripts	Generic scripts	Generic scripts	Generic scripts	Generic scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient ¹	40%	40%	40%	40%	40%	40%	50%	50%
Outpatient ²	40%	40%	40%	40%	40%	40%	50%	50%
ER ³	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250
Radiology (MRI, CT, PET)	40%	40%	40%	40%	40%	40%	50%	50%
Preventive	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PCP Office Visit	\$20	\$25	\$25	\$25	\$25	\$30	\$35	\$35
MH/SA Office Visit	\$20	\$25	\$25	\$25	\$25	\$30	\$35	\$35
Specialist Office Visit ⁴	\$40	\$45	\$50	\$65	\$75	\$75	\$80	\$80
Urgent Care	\$60	\$60	\$60	\$60	\$85	\$85	\$90	\$90
Ambulance	\$100	\$100	\$100	\$100	\$100	\$100	\$100	\$100
Rx Generic	\$12	\$12	\$15	\$15	\$15	\$15	\$15	\$15
Rx Preferred Brand	\$50	\$50	\$60	\$60	\$60	\$60	\$60	\$60
Rx Non-Preferred Brand	50%	50%	50%	50%	50%	50%	50%	50%
Rx Specialty	50%	50%	50%	50%	50%	50%	50%	50%

Year over year changes made to the plan design are shaded in orange.

2022 QHPs Silver Deductible Plan

Deductible/OOP Max	2021 Plan Design	2022 Recommended Design	2022 Alternative Design
Type of Plan	Deductible	Deductible	Deductible
Medical Ded	\$3,200	\$3,400	\$3,200
Rx Ded	\$350	\$400	\$350
Integrated Ded	No	No	No
Medical OOPM	\$8,150	\$8,550	\$8,150
Rx OOPM	\$1,400	\$1,400	\$1,400
Integrated OOPM	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual
Medical Deductible waived for:	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb
Drug Deductible waived for:	Generic scripts	Generic scripts	Generic scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient	50%	50%	50%
Outpatient	50%	50%	50%
ER	\$250	\$250	\$250
Radiology (MRI, CT, PET)	50%	50%	50%
Preventive	\$0	\$0	\$0
PCP Office Visit	\$35	\$35	\$35
MH/SA Office Visit	\$35	\$35	\$35
Specialist Office Visit	\$80	\$80	\$80
Physical Therapy/Chiropractic	\$45	\$45	\$45
Urgent Care	\$90	\$90	\$90
Ambulance	\$100	\$100	\$100
Rx Generic	\$15	\$15	\$15
Rx Preferred Brand	\$60	\$60	\$60
Rx Non-Preferred Brand	50%	50%	50%
Rx Specialty	50%	50%	50%
Actuarial Value			
2021 Federal AVC, Adjusted if Necessary	71.8%	N/A	N/A
2022 DRAFT Federal AVC, Adjusted if Necessary	71.8%	71.1%	71.8%
Difference from 2021 Federal AVC	0.4%	-0.7%	0.0%
Estimated Premium Impact	N/A	0.6%	1.5%

Changes from the 2021 plan design are shaded in orange. Changes also requiring GMCB approval are shaded in green.

2014 to 2021 QHPs Silver HDHP Plans

Deductible/OOP Max	2014	2015	2016	2017	2018	2019	2020	2021
Type of Plan	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP
Medical Ded	\$1,550	\$1,550	\$1,425	\$1,550	\$1,550	\$1,550	\$1,700	\$1,750
Rx Ded	\$1,250	\$1,300	\$1,300	\$1,300	\$1,350	\$1,350	\$1,400	\$1,400
Integrated Ded	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Medical OOPM	\$5,750	\$5,750	\$5,750	\$6,400	\$6,400	\$6,650	\$6,750	\$6,900
Rx OOPM	\$1,250	\$1,300	\$1,300	\$1,300	\$1,350	\$1,350	\$1,400	\$1,400
Integrated OOPM	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Yes	Yes
Family Deductible / OOP	Aggregate, 2x Individual	Aggregate, 2x Individual	Aggregate with Combined Medical/Rx embedded \$6,850 Single MOOP; 2x Individual	Aggregate with Combined Medical/Rx embedded \$7,150 Single MOOP; 2x Individual	Aggregate with Combined Medical/Rx embedded \$7,350 Single MOOP; 2x Individual	Aggregate with Combined Medical/Rx embedded \$7,900 Single OOPM; 2x Individual	Aggregate with Combined Medical/Rx embedded \$8,150 Single OOPM; 2x Individual	Aggregate with Combined Medical/Rx embedded \$8,550 Single OOPM; 2x Individual
Medical Deductible waived for:	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive
Drug Deductible waived for:	Wellness scripts	Wellness scripts	Wellness scripts	Wellness scripts	Wellness scripts	Wellness scripts	Wellness scripts	Wellness scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient ¹	20%	20%	25%	25%	30%	30%	30%	30%
Outpatient ²	20%	20%	25%	25%	30%	30%	30%	30%
ER ³	20%	20%	25%	25%	30%	30%	30%	30%
Radiology (MRI, CT, PET)	20%	20%	25%	25%	30%	30%	30%	30%
Preventive	0%	0%	0%	0%	0%	0%	0%	0%
PCP Office Visit	10%	10%	10%	10%	10%	10%	10%	10%
MH/SA Office Visit	10%	10%	10%	10%	10%	10%	10%	10%
Specialist Office Visit ⁴	20%	20%	25%	25%	30%	30%	30%	30%
Urgent Care	20%	20%	25%	25%	30%	30%	30%	30%
Ambulance	20%	20%	25%	25%	30%	30%	30%	30%
Rx Generic	\$10	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Rx Preferred Brand	\$40	\$40	\$40	\$40	\$40	\$40	\$40	\$40
Rx Non-Preferred Brand	50%	50%	50%	50%	50%	50%	50%	50%
Rx Specialty	50%	50%	50%	50%	50%	50%	50%	50%

2022 QHPs Silver HDHP Plan Options

Deductible/OOP Max	2021 Plan Design	2022 Recommended Design	2022 Alternative Design
Type of Plan	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP
Medical Ded	\$1,750	\$1,850	\$1,750
Rx Ded	\$1,400	\$1,400	\$1,400
Integrated Ded	Yes	Yes	Yes
Medical OOPM	\$6,900	\$6,900	\$6,900
Rx OOPM	\$1,400	\$1,400	\$1,400
Integrated OOPM	Yes	Yes	Yes
Family Deductible / OOP	Aggregate with Combined	Aggregate with Combined	Aggregate with Combined
	Medical/Rx embedded \$8,550	Medical/Rx embedded \$9,100	Medical/Rx embedded \$9,100
	Single OOPM; 2x Individual	Single OOPM; 2x Individual	Single OOPM; 2x Individual
Medical Deductible waived for:	Preventive	Preventive	Preventive
Drug Deductible waived for:	Wellness scripts	Wellness scripts	Wellness scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient	30%	30%	30%
Outpatient	30%	30%	30%
ER	30%	30%	30%
Radiology (MRI, CT, PET)	30%	30%	30%
Preventive	0%	0%	0%
PCP Office Visit	10%	10%	10%
MH/SA Office Visit	10%	10%	10%
Specialist Office Visit	30%	30%	30%
Physical Therapy/Chiropractic	30%	30%	30%
Urgent Care	30%	30%	30%
Ambulance	30%	30%	30%
Rx Generic	\$10	\$10	\$10
Rx Preferred Brand	\$40	\$40	\$40
Rx Non-Preferred Brand	50%	50%	50%
Rx Specialty	50%	50%	50%
Actuarial Value			
2021 Federal AVC, Adjusted if Necessary	71.2%	N/A	N/A
2022 DRAFT Federal AVC, Adjusted if Necessary	71.3%	70.7%	71.0%
Difference from 2021 Federal AVC	0.1%	-0.5%	-0.2%
Estimated Premium Impact	N/A	0.9%	1.3%

Should the HDHP minimum deductible for 2022 change from \$1,400, the pharmacy deductible and OOPM will be increased to align with the new amount.

2014 to 2021 QHPs Bronze Deductible Plan, with Rx Limit

Deductible/OOP Max	2014	2015	2016	2017	2018	2019	2020	2021
Type of Plan	Deductible	Deductible	Deductible	Deductible	Deductible	Deductible	Deductible	Deductible
Medical Ded	\$3,500	\$3,500	\$4,000	\$4,600	\$5,000	\$5,500	\$6,000	\$6,250
Rx Ded	\$200	\$300	\$500	\$700	\$900	\$900	\$1,000	\$1,000
Integrated Ded	No	No	No	No	No	No	No	No
Medical OOPM	\$6,350	\$6,350	\$6,850	\$7,150	\$7,350	\$7,900	\$8,150	\$8,400
Rx OOPM	\$1,250	\$1,250	\$1,250	\$1,300	\$1,300	\$1,350	\$1,350	\$1,400
Integrated OOPM	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual
Medical Deductible waived for:	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive
Drug Deductible waived for:	Applies to all scripts							Generic Scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient ¹	50%	50%	50%	50%	50%	50%	50%	50%
Outpatient ²	50%	50%	50%	50%	50%	50%	50%	50%
ER ³	50%	50%	50%	50%	50%	50%	50%	50%
Radiology (MRI, CT, PET)	50%	50%	50%	50%	50%	50%	50%	50%
Preventive	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PCP Office Visit	\$35	\$35	\$35	\$35	\$35	\$35	\$35	\$35
MH/SA Office Visit	\$35	\$35	\$35	\$35	\$35	\$35	\$35	\$35
Specialist Office Visit ⁴	\$80	\$80	\$85	\$90	\$90	\$90	\$90	\$90
Physical Therapy/Chiro	\$80	\$80	\$85	\$90	\$90	\$90	\$45	\$45
Urgent Care	\$100	\$100	\$100	\$100	\$100	\$100	\$100	\$100
Ambulance	\$100	\$100	\$100	\$100	\$100	\$100	\$100	\$100
Rx Generic	\$20	\$20	\$20	\$20	\$20	\$20	\$20	\$15
Rx Preferred Brand	\$80	\$80	\$80	\$85	\$85	\$85	\$85	\$85
Rx Non-Preferred Brand	60%	60%	60%	60%	60%	60%	60%	60%
Rx Specialty	60%	60%	60%	60%	60%	60%	60%	60%

Year over year changes made to the plan design are shaded in orange.

2022 QHPs Bronze Deductible Plan, with Rx Limit

Deductible/OOP Max	2021 Plan Design	2022 Recommended Design	2022 Alternative Design
Type of Plan	Deductible	Deductible	Deductible
Medical Ded	\$6,250	\$6,450	\$6,500
Rx Ded	\$1,000	\$1,100	\$1,100
Integrated Ded	No	No	No
Medical OOPM	\$8,400	\$8,700	\$8,900
Rx OOPM	\$1,400	\$1,400	\$1,400
Integrated OOPM	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual
Medical Deductible waived for:	Preventive	Preventive	Preventive
Drug Deductible waived for:	Generic Scripts	Generic Scripts	Generic Scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient	50%	50%	50%
Outpatient	50%	50%	50%
ER	50%	50%	50%
Radiology (MRI, CT, PET)	50%	50%	50%
Preventive	\$0	\$0	\$0
PCP Office Visit	\$35	\$35	\$35
MH/SA Office Visit	\$35	\$35	\$35
Specialist Office Visit	\$90	\$90	\$90
Physical Therapy/Chiropractic	\$45	\$45	\$45
Urgent Care	\$100	\$100	\$100
Ambulance	\$100	\$100	\$100
Rx Generic	\$15	\$15	\$15
Rx Preferred Brand	\$85	\$85	\$85
Rx Non-Preferred Brand	60%	60%	60%
Rx Specialty	60%	60%	60%
Actuarial Value			
2021 Federal AVC, Adjusted if Necessary	64.1%	N/A	N/A
2022 DRAFT Federal AVC, Adjusted if Necessary	64.1%	63.7%	63.4%
Difference from 2021 Federal AVC, Adjusted	0.0%	-0.4%	-0.7%
Estimated Premium Impact	N/A	1.0%	0.6%

Should the finalized annual limitation on cost sharing be lower than \$8,700, the Medical OOPM will be decreased to align with the new amount.

The draft proposed limit is \$9,100.

2018 to 2021 QHPs Bronze Deductible Plan, without Rx Limit

Deductible/OOP Max	2018	2019	2020	2021
Type of Plan	Deductible	Deductible	Deductible	Deductible
Medical Ded	\$7,350	\$7,600	\$7,900	\$8,400
Rx Ded	N/A	N/A	N/A	N/A
Integrated Ded	Yes	Yes	Yes	Yes
Medical OOPM	\$7,350	\$7,600	\$7,900	\$8,400
Rx OOPM	N/A	N/A	N/A	N/A
Integrated OOPM	Yes	Yes	Yes	Yes
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual
Medical Deductible waived for:	Preventive, OV	Preventive, OV	Preventive, OV	Preventive, OV
Drug Deductible waived for:	Generic Scripts	Generic Scripts	Generic Scripts	Generic Scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient ¹	0%	0%	0%	0%
Outpatient ²	0%	0%	0%	0%
ER ³	0%	0%	0%	0%
Radiology (MRI, CT, PET)	0%	0%	0%	0%
Preventive	0%	0%	0%	0%
PCP Office Visit	\$40	\$40	\$40	\$40
MH/SA Office Visit	\$40	\$40	\$40	\$40
Specialist Office Visit ⁴	\$100	\$100	\$100	\$100
Physical Therapy/Chiropractic	\$100	\$100	\$50	\$50
Urgent Care	0%	0%	0%	0%
Ambulance	0%	0%	0%	0%
Rx Generic	\$25	\$25	\$25	\$30
Rx Preferred Brand	0%	0%	0%	0%
Rx Non-Preferred Brand	0%	0%	0%	0%
Rx Specialty	0%	0%	0%	0%

2022 QHPs Bronze Deductible Plan, without Rx Limit Options

Deductible/OOP Max	2021 Plan Design	2022 Recommended Design	2022 Alternative Design
Type of Plan	Deductible	Deductible	Deductible
Medical Ded	\$8,400	\$8,700	\$8,550
Rx Ded	N/A	N/A	N/A
Integrated Ded	Yes	Yes	Yes
Medical OOPM	\$8,400	\$8,700	\$8,550
Rx OOPM	N/A	N/A	N/A
Integrated OOPM	Yes	Yes	Yes
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual
Medical Deductible waived for:	Preventive, OV	Preventive, OV	Preventive, OV
Drug Deductible waived for:	Generic Scripts	Generic Scripts	Generic Scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient	0%	0%	0%
Outpatient	0%	0%	0%
ER	0%	0%	0%
Radiology (MRI, CT, PET)	0%	0%	0%
Preventive	0%	0%	0%
PCP Office Visit	\$40	\$40	\$40
MH/SA Office Visit	\$40	\$40	\$40
Specialist Office Visit	\$100	\$100	\$100
Physical Therapy/Chiropractic	\$50	\$50	\$50
Urgent Care	0%	0%	0%
Ambulance	0%	0%	0%
Rx Generic	\$30	\$30	\$30
Rx Preferred Brand	0%	0%	0%
Rx Non-Preferred Brand	0%	0%	0%
Rx Specialty	0%	0%	0%
Actuarial Value			
2021 Federal AVC, Adjusted if Necessary	64.8%	N/A	N/A
2022 DRAFT Federal AVC, Adjusted if Necessary	64.8%	64.3%	64.6%
Difference from 2021 Federal AVC, Adjusted	0.0%	-0.5%	-0.2%
Estimated Premium Impact	N/A	1.1%	1.4%

Should the finalized annual limitation on cost sharing be lower than \$8,700, the Medical OOPM will be decreased to align with the new amount.

The draft proposed limit is \$9,100.

2014 to 2021 QHPs Bronze HDHP

Deductible/OOP Max	2014	2015	2016	2017	2018	2019	2020	2021
Type of Plan	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP
Medical Ded	\$2,000	\$2,000	\$4,100	\$5,050	\$5,250	\$5,250	\$5,500	\$5,500
Rx Ded	\$1,250	\$1,300	\$1,300	\$1,300	\$1,350	\$1,350	\$1,400	\$1,400
Integrated Ded	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Medical OOPM	\$6,250	\$6,250	\$6,500	\$6,550	\$6,550	\$6,650	\$6,750	\$6,900
Rx OOPM	\$1,250	\$1,300	\$1,300	\$1,300	\$1,350	\$1,350	\$1,400	\$1,400
Integrated OOPM	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes
Family Deductible / OOP	Aggregate, 2x Individual	Aggregate, 2x Individual	Aggregate with Combined Medical/Rx embedded \$6,850 Single MOOP; 2x Individual	Aggregate with Combined Medical/Rx embedded \$7,150 Single MOOP; 2x Individual	Aggregate with Combined Medical/Rx embedded \$7,350 Single MOOP; 2x Individual	Aggregate with Combined Medical/Rx embedded \$7,900 Single OOPM; 2x Individual	Aggregate with Combined Medical/Rx embedded \$8,150 Single OOPM; 2x Individual	Aggregate with Combined Medical/Rx embedded \$8,550 Single OOPM; 2x Individual
Medical Deductible waived for:	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive
Drug Deductible waived for:	Wellness scripts	Wellness scripts	Wellness scripts	Wellness scripts	Wellness scripts	Wellness scripts	Wellness scripts	Wellness scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient ¹	50%	50%	50%	50%	50%	50%	50%	50%
Outpatient ²	50%	50%	50%	50%	50%	50%	50%	50%
ER ³	50%	50%	50%	50%	50%	50%	50%	50%
Radiology (MRI, CT, PET)	50%	50%	50%	50%	50%	50%	50%	50%
Preventive	0%	0%	0%	0%	0%	0%	0%	0%
PCP Office Visit	50%	50%	50%	50%	50%	50%	50%	50%
MH/SA Office Visit	50%	50%	50%	50%	50%	50%	50%	50%
Specialist Office Visit ⁴	50%	50%	50%	50%	50%	50%	50%	50%
Physical Therapy/Chiro	50%	50%	50%	50%	50%	50%	50%	50%
Urgent Care	50%	50%	50%	50%	50%	50%	50%	50%
Ambulance	50%	50%	50%	50%	50%	50%	50%	50%
Rx Generic	\$12	\$12	\$12	\$12	\$12	\$12	\$12	\$12
Rx Preferred Brand	40%	40%	40%	40%	40%	40%	40%	40%
Rx Non-Preferred Brand	60%	60%	60%	60%	60%	60%	60%	60%
Rx Specialty	60%	60%	60%	60%	60%	60%	60%	60%

Year over year changes made to the plan design are shaded in orange.

2022 QHPs Bronze HDHP

Deductible/OOP Max	2021 Plan Design	2022 Recommended Design	2022 Alternative Design
Type of Plan	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP
Medical Ded	\$5,500	\$5,700	\$5,700
Rx Ded	\$1,400	\$1,400	\$1,400
Integrated Ded	Yes	Yes	Yes
Medical OOPM	\$6,900	\$7,100	\$7,000
Rx OOPM	\$1,400	\$1,400	\$1,400
Integrated OOPM	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes
Family Deductible / OOP	Aggregate with Combined	Aggregate with Combined	Aggregate with Combined
	Medical/Rx embedded \$8,550	Medical/Rx embedded \$9,100	Medical/Rx embedded \$9,100
	Single OOPM; 2x Individual	Single OOPM; 2x Individual	Single OOPM; 2x Individual
Medical Deductible waived for:	Preventive	Preventive	Preventive
Drug Deductible waived for:	Wellness scripts	Wellness scripts	Wellness scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient	50%	50%	50%
Outpatient	50%	50%	50%
ER	50%	50%	50%
Radiology (MRI, CT, PET)	50%	50%	50%
Preventive	0%	0%	0%
PCP Office Visit	50%	50%	50%
MH/SA Office Visit	50%	50%	50%
Specialist Office Visit	50%	50%	50%
Physical Therapy/Chiropractic	50%	50%	50%
Urgent Care	50%	50%	50%
Ambulance	50%	50%	50%
Rx Generic	\$12	\$12	\$12
Rx Preferred Brand	40%	40%	40%
Rx Non-Preferred Brand	60%	60%	60%
Rx Specialty	60%	60%	60%
Actuarial Value			
2021 Federal AVC, Adjusted if Necessary	63.8%	N/A	N/A
2022 DRAFT Federal AVC, Adjusted if Necessary	63.8%	63.0%	63.2%
Difference from 2021 Federal AVC, Adjusted	0.0%	-0.8%	-0.6%
Estimated Premium Impact	N/A	1.3%	1.5%

Should the HDHP minimum deductible for 2022 change from \$1,400, the pharmacy deductible and OOPM will be increased to align with the new amount

Should the HDHP out-of-pocket maximum for 2022 come in lower than \$7,100 for an individual, the Medical OOPM will be decreased to align with the new amount

2022 QHP Proposal Summary of Plan Design Changes

Deductible Plans		
Plan	Platinum	Gold
Changes	Increase medical deductible from \$350 to \$400	Increase medical deductible from \$1,100 to \$1,200
		Increase pharmacy deductible from \$100 to \$150
		Increase medical OOPM from \$5,200 to \$5,400
Require Approval?	NO	NO

Deductible Plans		
Plan	Silver	Bronze w/ Rx Limit
Changes	Increase medical deductible from \$3,200 to \$3,400	Increase medical deductible from \$6,250 to \$6,450
	Increase pharmacy deductible from \$350 to \$400	Increase pharmacy deductible from \$1,000 to \$1,100
	Increase combined OOPM from \$8,150 to \$8,550	Increase combined OOPM from \$8,400 to \$8,700
Require Approval?	NO	NO

Deductible Plans	
Plan	Bronze w/o Rx Limit
Changes	Increase medical deductible from \$8,400 to \$8,700
	Increase combined OOPM from \$8,400 to \$8,700
Require Approval?	YES

HDHPs		
Plan	Silver	Bronze
Changes	Increase medical deductible from \$1,750 to \$1,850	Increase medical deductible from \$5,500 to \$5,700
	Increase embedded single OOPM from \$8,550 to \$9,100	Increase combined OOPM from \$6,900 to \$7,100
		Increase embedded single OOPM from \$8,550 to \$9,100
Require Approval?	NO	NO

We are also requesting approval of the change to pediatric vision benefits to align cost sharing across all standard plans and metal levels, as noted on slide 19.

QUESTIONS?

2021 QHPs Appendices

- Appendix A: 2022 Recommended Plan Designs - All Metals and CSR Plans
- Appendix B: 2022 Silver On/Off Exchange Plan Designs

Appendix A: 2022 QHP Deductible Plans

Deductible/OOP Max	Platinum	Gold	Silver	Bronze w/ Rx Limit	Bronze w/o Rx Limit
Type of Plan	Deductible	Deductible	Deductible	Deductible	Deductible
Medical Ded	\$400	\$1,200	\$3,400	\$6,450	\$8,700
Rx Ded	\$0	\$150	\$400	\$1,100	N/A
Integrated Ded	No	No	No	No	Yes
Medical OOPM	\$1,400	\$5,400	\$8,550	\$8,700	\$8,700
Rx OOPM	\$1,400	\$1,400	\$1,400	\$1,400	N/A
Integrated OOPM	No	No	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Yes
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual
Medical Deductible waived for:	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Preventive	Preventive, OV
Drug Deductible waived for:	N/A	Generic scripts	Generic scripts	Generic Scripts	Generic Scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient	10%	30%	50%	50%	0%
Outpatient	10%	30%	50%	50%	0%
ER	\$100	\$150	\$250	50%	0%
Radiology (MRI, CT, PET)	10%	30%	50%	50%	0%
Preventive	\$0	\$0	\$0	\$0	0%
PCP Office Visit	\$15	\$20	\$35	\$35	\$40
MH/SA Office Visit	\$15	\$20	\$35	\$35	\$40
Specialist Office Visit	\$40	\$50	\$80	\$90	\$100
Chiropractic	\$20	\$30	\$45	\$45	\$50
Physical Therapy	\$20	\$30	\$45	\$45	\$50
Urgent Care	\$50	\$60	\$90	\$100	0%
Ambulance	\$60	\$70	\$100	\$100	0%
Rx Generic	\$10	\$12	\$15	\$15	\$30
Rx Preferred Brand	\$50	\$55	\$60	\$85	0%
Rx Non-Preferred Brand	50%	50%	50%	60%	0%
Rx Specialty	50%	50%	50%	60%	0%
Actuarial Value					
2022 DRAFT Federal AVC, Adjusted if Necessary	89.4%	81.5%	71.1%	63.7%	64.3%

Appendix A: 2022 QHP Deductible Plans – CSR Variations

Deductible/OOP Max	70% AV Silver	250-300% FPL (73% AV)	200-250% FPL (77% AV)	150-200% FPL (87% AV)	133-150% FPL (94% AV)
Type of Plan	Deductible	Deductible	Deductible	Deductible	Deductible
Medical Ded	\$3,400	\$3,100	\$2,600	\$1,100	\$200
Rx Ded	\$400	\$350	\$300	\$200	\$0
Integrated Ded	No	No	No	No	No
Medical OOPM	\$8,550	\$6,750	\$6,000	\$2,200	\$900
Rx OOPM	\$1,400	\$1,250	\$1,100	\$450	\$200
Integrated OOPM	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual	Stacked, 2x Individual
Medical Deductible waived for:	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb	Prev, OV, UC, Amb
Drug Deductible waived for:	Generic scripts	Generic scripts	Generic scripts	Generic scripts	N/A
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient	50%	50%	50%	40%	10%
Outpatient	50%	50%	50%	40%	10%
ER	\$250	\$250	\$250	\$250	\$75
Radiology (MRI, CT, PET)	50%	50%	50%	40%	10%
Preventive	\$0	\$0	\$0	\$0	\$0
PCP Office Visit	\$35	\$35	\$25	\$10	\$5
MH/SA Office Visit	\$35	\$35	\$25	\$10	\$5
Specialist Office Visit	\$80	\$70	\$50	\$30	\$15
Physical Therapy/Chiropractic	\$45	\$40	\$30	\$12	\$6
Urgent Care	\$90	\$80	\$60	\$40	\$25
Ambulance	\$100	\$100	\$100	\$100	\$50
Rx Generic	\$15	\$12	\$12	\$10	\$5
Rx Preferred Brand	\$60	\$60	\$60	\$50	\$20
Rx Non-Preferred Brand	50%	50%	50%	50%	30%
Rx Specialty	50%	50%	50%	50%	30%
Actuarial Value					
2022 DRAFT Federal AVC, Adjusted if Necessary	71.1%	74.0%	78.0%	88.0%	94.8%

Appendix A: 2022 QHP HDHPs

Deductible/OOP Max	Silver	Bronze
Type of Plan	HSA Q/HDHP	HSA Q/HDHP
Medical Ded	\$1,850	\$5,700
Rx Ded	\$1,400	\$1,400
Integrated Ded	Yes	Yes
Medical OOPM	\$6,900	\$7,100
Rx OOPM	\$1,400	\$1,400
Integrated OOPM	Yes	Rx -No, Medical - Yes
Family Deductible / OOP	Aggregate with Combined Medical/Rx embedded \$9,100 Single OOPM; 2x Individual	Aggregate with Combined Medical/Rx embedded \$9,100 Single OOPM; 2x Individual
Medical Deductible waived for:	Preventive	Preventive
Drug Deductible waived for:	Wellness scripts	Wellness scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance
Inpatient	30%	50%
Outpatient	30%	50%
ER	30%	50%
Radiology (MRI, CT, PET)	30%	50%
Preventive	0%	0%
PCP Office Visit	10%	50%
MH/SA Office Visit	10%	50%
Specialist Office Visit	30%	50%
Physical Therapy/Chiropractic	30%	50%
Urgent Care	30%	50%
Ambulance	30%	50%
Rx Generic	\$10	\$12
Rx Preferred Brand	\$40	40%
Rx Non-Preferred Brand	50%	60%
Rx Specialty	50%	60%
Actuarial Value		
2022 DRAFT Federal AVC, Adjusted if Necessary	70.7%	63.0%

Appendix A: 2022 QHP HDHPs – CSR Variations

Deductible/OOP Max	70% AV Silver	250-300% FPL (73% AV)	200-250% FPL (77% AV)	150-200% FPL (87% AV)	133-150% FPL (94% AV)
Type of Plan	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP	Deductible (NOT HSAQ)
Medical Ded	\$1,850	\$1,750	\$1,600	\$1,400	\$550
Rx Ded	\$1,400	\$1,400	\$1,400	N/A	N/A
Integrated Ded	Yes	Yes	Yes	Yes	Yes
Medical OOPM	\$6,900	\$5,200	\$4,400	\$1,400	\$550
Rx OOPM	\$1,400	\$1,400	\$1,400	N/A	N/A
Integrated OOPM	Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Yes	Yes
Family Deductible / OOP	Aggregate with Combined Medical/Rx embedded \$9,100 Single OOPM; 2x Individual	Aggregate with Combined Medical/Rx embedded \$9,100 Single OOPM; 2x Individual	Aggregate with Combined Medical/Rx embedded \$9,100 Single OOPM; 2x Individual	Aggregate, 2x Individual	Aggregate, 2x Individual
Medical Deductible waived for:	Preventive	Preventive	Preventive	Preventive	Preventive
Drug Deductible waived for:	Wellness scripts	Wellness scripts	Wellness scripts	Wellness scripts	Wellness scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance
Inpatient	30%	25%	25%	0%	0%
Outpatient	30%	25%	25%	0%	0%
ER	30%	25%	25%	0%	0%
Radiology (MRI, CT, PET)	30%	25%	25%	0%	0%
Preventive	0%	0%	0%	0%	0%
PCP Office Visit	10%	10%	10%	0%	0%
MH/SA Office Visit	10%	10%	10%	0%	0%
Specialist Office Visit	30%	25%	25%	0%	0%
Physical Therapy/Chiropractic	30%	25%	25%	0%	0%
Urgent Care	30%	25%	25%	0%	0%
Ambulance	30%	25%	25%	0%	0%
Rx Generic	\$10	\$10	\$10	\$0	\$0
Rx Preferred Brand	\$40	\$40	\$40	\$0	\$0
Rx Non-Preferred Brand	50%	50%	50%	0%	0%
Rx Specialty	50%	50%	50%	0%	0%
Actuarial Value					
2022 DRAFT Federal AVC, Adjusted if Necessary	70.7%	73.4%	77.3%	87.5%	93.7%

Appendix B: 2022 Silver On/Off Exchange Plans

Deductible/OOP Max	2022 Plan Designs – Silver Deductible Plan	
	On the Exchange	Off the Exchange
Type of Plan	Deductible	Deductible
Medical Ded	\$3,400	\$3,400
Rx Ded	\$400	\$400
Integrated Ded	No	No
Medical OOPM	\$8,550	\$8,550
Rx OOPM	\$1,400	\$1,400
Integrated OOPM	Rx -No, Medical - Yes	Rx -No, Medical - Yes
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual
Medical Deductible waived for:	Prev, OV, UC, Amb	Prev, OV, UC, Amb
Drug Deductible waived for:	Generic scripts	Generic scripts
Service Category	Copay / Coinsurance	Copay / Coinsurance
Inpatient	50%	50%
Outpatient	50%	50%
ER	\$250	\$250
Radiology (MRI, CT, PET)	50%	50%
Preventive	\$0	\$0
PCP Office Visit	\$35	\$35
MH/SA Office Visit	\$35	\$35
Specialist Office Visit	\$80	\$80
Chiropractic	\$45	\$45
Physical Therapy	\$45	\$45
Urgent Care	\$90	\$90
Ambulance	\$100	\$105
Rx Generic	\$15	\$15
Rx Preferred Brand	\$60	\$60
Rx Non-Preferred Brand	50%	50%
Rx Specialty	50%	50%
Actuarial Value		
2022 DRAFT Federal AVC, Adjusted if Necessary	71.1%	71.1%

2022 Plan Designs – Silver HDHP	
On the Exchange	Off the Exchange
HSA Q/HDHP	HSA Q/HDHP
\$1,850	\$1,850
\$1,400	\$1,400
Yes	Yes
\$6,900	\$6,900
\$1,400	\$1,400
Yes	Yes
Aggregate with Combined Medical/Rx embedded \$9,100 Single OOPM; 2x Individual	Aggregate with Combined Medical/Rx embedded \$9,100 Single OOPM; 2x Individual
Preventive	Preventive
Wellness scripts	Wellness scripts
Copay / Coinsurance	Copay / Coinsurance
30%	30%
30%	30%
30%	30%
30%	30%
30%	30%
0%	0%
10%	10%
10%	10%
30%	30%
30%	30%
30%	30%
30%	30%
30%	35%
\$10	\$10
\$40	\$40
50%	50%
50%	50%
Actuarial Value	
70.7%	70.7%

Differences from the on-Exchange plan design are shaded in orange in the off-Exchange plan design.

Disclosures and Limitations

Responsible Actuaries. Julie Peper and Brittney Phillips are the actuaries responsible for this communication. Julie is a Member of the American Academy of Actuaries and a Fellow of the Society of Actuaries. Brittney is a Member of the American Academy of Actuaries and an Associate of the Society of Actuaries. They meet the Qualification Standards of the American Academy of Actuaries to issue this report.

Intended Users. This information has been prepared for the sole use of the State of Vermont and issuers within that state that will be submitting standard plan designs. Distribution to such parties should be made in its entirety. This report cannot be distributed to or relied on by any third party without the prior written permission of Wakely.

Risks and Uncertainties. The assumptions and resulting estimates included in this report and produced by the model are inherently uncertain. Users of the results should be qualified to use it and understand the results and the inherent uncertainty. Actual results may vary, potentially materially, from our estimates. Wakely does not warrant or guarantee that actual experience will tie to the AV estimated for the placement of plan designs into tiers. The developed actuarial values are for the purposes of classifying plan designs of similar value and do not represent the expected actuarial value of a plan or pricing AV used to determine premium rates. Actual AVs will vary based on a plan's specific population, utilization, unit cost, and other variables.

Conflict of Interest. Wakely provides actuarial services to a variety of clients throughout the health industry. Our clients include commercial, Medicare, and Medicaid health plans, the federal government and state governments, medical providers, and other entities that operate in the domestic and international health insurance markets. Wakely has implemented various internal practices to reduce or eliminate conflict of interest risk in serving our various clients. Except as noted here, the responsible actuaries are financially independent and free from conflict concerning all matters related to performing the actuarial services underlying this analysis. In addition, Wakely is organizationally and financially independent to the state of Vermont.

Data and Reliance. We have relied on others for data and information used in the actuarial value adjustments. We have reviewed the data for reasonableness, but have not performed any independent audit or otherwise verified the accuracy of the data/information. If the underlying information is incomplete or inaccurate, our estimates may be impacted, potentially significantly. Below is a list of data and assumptions provided by others and assumptions required by law.

- Draft 2022 Federal AVC Model was relied on for the original AV. While reasonability tests have shown there are some assumptions and methodologies that are not consistent with expectations, the AVC was developed for plan classification and not pricing. Thus, the model is being used as such and we make no warranties for the accuracy of the AVs that result from the AVC.
- 2017 VHCURES data supplied by the state was used in the development of the HDHP model.

Subsequent Events. Subsequent events to the date of this report that could impact the plan designs presented include, but are not limited to:

1. The 2022 Notice of Benefit and Payment Parameters (NBPP) is still in draft form. Should there be regulation changes from the draft to final version of the NBPP, the plan designs presented here may need to change to maintain compliance with the new regulations.
2. The federal HDHP minimum deductible and Maximum Out of Pocket (MOOP) limits are not yet released for 2022. The 2021 minimum deductible and MOOP are \$1,400 and \$7,000, respectively. The plan designs presented are compliant with the 2021 HDHP limits and may need to change once the final 2022 HDHP limits are released, should they differ.
3. Other changes to regulations passed subsequent to this report.

Contents of Actuarial Report. This document and the supporting exhibits/files constitute the entirety of actuarial report and supersede any previous communications on the project.

Deviations from ASOPS. Wakely completed the analysis using sound actuarial practice. To the best of my knowledge, the report and methods used in the analysis are in compliance with the appropriate Actuarial Standards of Practice (ASOP) with no known deviations.