

New York Health Benefit Exchange

Blueprint Summary for Section 4.0 Plan Management October 26, 2012

<u>Item Number</u>	<u>Topic</u>
4.6	Policies and Procedures for Recertification, Decertification and Appeals

Note: 155.1075(a) and 155.080 (b) excepts CO-OPs and multi-state plans from recertification and decertification.

Recertification:

The New York Health Benefit Exchange has established the following parameters for the annual recertification of qualified health plans, including dental plans. The process has many similarities to the proposed initial certification process and is supplemented with review of post-certification monitoring in collaboration with other state agencies.

The Exchange proposes to initiate the recertification process for offering in the upcoming plan year by issuing notice of renewal to qualified health plans and dental plans. The recertification parameters as proposed below will be assessed by Exchange staff and in collaboration with respective agencies.

Proposed QHP recertification parameters:

- Confirm valid licensure and financial standing
- Confirm Rate, Benefit, Actuarial Value compliance analysis
- Review of service area, assess for change from prior plan year
- Assess adherence to requirements for essential health benefits, metal levels and limits on cost sharing
- Assess compliance with data standards, submission and reporting requirements, including but not limited to:
 - Pharmacy
 - Risk
 - Complaints and Grievances
 - Quality
- Assess compliance with Risk Adjustment Program ongoing
- Assess adherence to applicable federal and state marketing rules

- Assess adherence to non-discrimination requirements
- Assess adherence to network adequacy requirements, including essential community provider requirements
- Assess quality improvement strategy and outcomes
- Assess transparency in coverage requirements ongoing

Timeline of Recertification:

Notification of Recertification will be provided to issuers no later than May 1st of each year.

Rates and forms must be filed in accordance with the timeline established by the Department of Financial Services, but no later than June 1st of each year.

Notice of recertification will occur on or before September 15 of each year.

Non-renewal:

Qualified health plans may opt not to renew participation in the Exchange. The QHP must notify the Exchange of its decision to not renew participation within the same timeframe it is required to notify the Department of Health or the Department of Financial Services. The QHP must follow applicable laws and regulations in terminating the respective QHP from the Exchange, including notification to enrollees.

Exchange Plan Management staff will monitor the transition process, coordinating processes with Exchange Customer Service to facilitate transition.

QHP Suspension:

The Exchange may suspend enrollment in a QHP in the event a respective state agency requires suspension, or in the event the Exchange determines it is in the best interest of the public. Notification of such suspension shall occur in accordance with applicable laws and regulations.

Decertification:

The Exchange shall continuously monitor QHPs in collaboration with state agencies. Decertification includes the following circumstances:

- Upon the recommendation of the Department of Financial Services, failure to maintain licensure;
- Upon the recommendation of the Department of Financial Services, failure to maintain financial solvency;
- Unresolved state agency sanctions upon the recommendation of the respective agency;
- Failure to recertify;
- Exchange determines it is in the best interest of the public;

Notification of decertification shall occur in accordance with all applicable laws and regulations governing the removal of a product from the market, including notification to enrollees.

Appeals:

In the event that the Exchange determines that a QHP must be decertified, the QHP will receive written notice of this determination and the opportunity for a hearing prior to decertification. The hearing will be before the Commissioner of Health or his designee.