

State of Idaho
DEPARTMENT OF INSURANCE

C.L. "BUTCH" OTTER
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THOMAS A. DONOVAN
Acting Director

BULLETIN NO. 15-03

DATE: May 11, 2015
TO: Disability / Health Insurance Carriers
FROM: Thomas A. Donovan, Acting Director
SUBJECT: Submission and Rate Review Requirements for Individual and Small Employer Health Benefit Plans and Small Employer Association Health Benefit Plans in Idaho - Effective Rate Review for Plans with Effective Dates of June 1, 2015, or Later

The Idaho Department of Insurance (Department) secured a waiver from Idaho Governor C.L. "Butch" Otter and modified its premium rate filing and review process pursuant to Idaho law for small employer and individual health coverage to also provide rate review pursuant to Section 2794 of the Public Health Service Act (PHSA), added by Section 1003 of the federal Patient Protection and Affordable Care Act (PPACA), Pub. L. 111-148. The Department of Health and Human Services (HHS) issued the final federal rule entitled "Rate Increase Disclosure and Review," codified at 45 CFR Part 154, implementing Section 2794 of the PHSA on May 23, 2011. The federal statute and rule supplement Idaho's existing rate review process, pursuant to Idaho Code title 41, chapters 47 and 52, and IDAPA 18.01.69 and IDAPA 18.01.72. On September 2, 2011, the Department issued [Bulletin No. 11-07](#), which provided health disability insurers with information required to meet these requirements by clarifying rate filing procedures in the small employer and individual health insurance markets. On July 18, 2012, the Department issued Bulletin No. 12-05, which provided notice to the health disability insurers that effective August 1, 2012, the Department would conduct effective rate review for small employer (but not individual) association coverage to be delivered or issued for delivery in Idaho as if it had not been issued through an association, in the same manner that small employer coverage rates are reviewed.

The purpose of this bulletin is to update the Idaho Carrier Acknowledgement & Consent to Publishing of Rate Information & Determination to include Part III as part of the form along with Parts I and II of the Rate Filing Justification under 45 CFR § 154.215. A copy of the updated form is attached.

In addition, the Department will use the 2016 Unified Rate Review Instructions Rate Filing Justification: Parts I, II, and III dated as of February 21, 2015 as issued by Centers for Medicare & Medicaid Services (CMS) and the Rate Review Justification Instructions for Transitional Policies and Student Health Plans, updated April 1, 2015, by CMS. It is

the intent of the Department to continue to use the updated version of these instructions as issued by CMS unless otherwise noted by the Department.

Any questions concerning these new rate filing procedures should be directed to Weston Trexler at 208-334-4315 or Weston.trexler@doi.idaho.gov.

Idaho - Carrier Acknowledgement & Consent to Publishing of Rate Information & Determination

Please print or type Carrier's full legal name and address:

Carrier	
Address	
Signature	
Name	
Title	
Consent Date	

Idaho Code §§ 41-5206(4)(c) and 41-4706(5)(c) expressly prohibit the Director of the Idaho Department of Insurance (Director) from disclosing Individual and Small Group premium rate information (Information) submitted by each carrier for review by the Idaho Department of Insurance (Department), unless the carrier agrees or a court orders. The Idaho Code considers this Information Proprietary and Trade Secrets. Rate filing information submitted pursuant to the above sections may also be exempt from public disclosure under Idaho Code §§ 9-340D(1) (trade secret information) and 9-340C(5) (examination, operating, or condition reports and all documents related thereto). This Information does not include otherwise published information, such as carrier name, telephone number, and address; such information is not subject to the Idaho Code restrictions.

The Patient Protection and Affordable Care Act (PPACA) and its rate review implementing regulations (PPACA Rate Review Regulations) expressly provide at 45 CFR 154.301(b) that any state with an effective rate review program must provide, for public comment, access on its website to the information in Parts I, II and III of the Preliminary Justification that a carrier must submit to the federal Centers for Medicare and Medicaid Services (CMS) in connection with a proposed rate increase subject to the PPACA Rate Review Regulations. Because the State of Idaho desires to provide an effective rate review program for carriers licensed in this state, the Department is requesting consent to publish and provide for public comment access on its website to the information required in Parts I, II and III of a Preliminary Justification for a proposed rate increase specified in the PPACA Rate Review Regulations at 45 CFR 154.215. Alternatively, the Department will link to the Part I, II and III information from the CMS website and provide the public with an opportunity to comment. To facilitate the public release of the Part III Actuarial Memorandum and posting of Part III to the CMS website, carriers are required to upload two versions: a version that contains all the data elements and information required by the CMS manual with no redactions and the public version that redacts any information that is a trade secret or confidential commercial or financial information. Following its review, the Department will share its determination and brief analysis with CMS, which information will also be available to the public.

By signing, and submitting via SERFF, this consent the above carrier grants the Department permission to, and acknowledges that the Department will, publish and provide website access to the information required in Parts I, II and III (redacted) of a Preliminary Justification (either by linking to the information on the CMS website or by making information filed with the Department publicly available) for a proposed rate increase as specified in 45 CFR 154.215 in order to receive public comment on a proposed rate increase. Additionally, the above named carrier acknowledges that the Department will, and grants its consent for the Department to, provide its determination of whether a rate increase is unreasonable and a brief explanation of its analysis to CMS and the public. This consent does not change or alter Idaho law related to the Director's authority to review rate filings in accordance with Idaho Code Sections 41-2136, 41-3420, and 41-3915.