



# Idaho 2020

Dean L. Cameron, Director  
Idaho Department of Insurance  
[www.DOI.Idaho.gov](http://www.DOI.Idaho.gov)

# Idaho Dept. of Insurance

Idaho is growing & so are our insurance markets

Over 2,200 insurance entities licensed, 19 domestic

Over 125,000 active licenses (90% are producer licenses)

Over 122,000 active producer licenses

Over 5,000 new form & rate submissions last year

Over \$8 billion premiums written

# Premium Taxes Collected

- New online system
- Improvements in reconciliation
  - FY2017 about \$87 million
  - FY2018 just over \$92 million
  - FY2019 just under \$100 million (\$99,829,267)
  - 9.25% increase in collections
- Improvements in collection of retaliatory taxes
  - \$1.1 million in corporate taxes



# Consumer Complaints



Feedback

Complaints

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# Consumer Services

- Responded to 6,872 public enquiries
- 887 complaints received  
(849 completed or closed)
- Est. \$872,759 monies recovered  
(for the consumers)
- 128 external review claims received

# External Review Claims

## STATISTICS

	2014	2015	2016	2017	2018	2019
<b>Total External Review Requests</b>	39	55	113	130	128	155
Standard	34	45	104	122	112	132
Urgent	5	10	9	8	16	23
<b>Review Outcomes</b>						
Denials Overturned	9	13	42	38	31	33
Denials Upheld	21	26	34	50	42	52
Not Eligible for Review	9	16	27	22	32	32

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# Important Information

- An external review request is FREE for the covered person (IRO bills the health carrier for the review).
- Binding Nature of Review: IRO decision is ALWAYS binding on the health carrier. IRO decision is also a binding decision for the covered person ALMOST all the time.\*\*\*

\*\*\*Non-individual health plans allow a covered person to retain some of their appeal rights following an external review, according to federal ERISA laws.

After the external review process, it is 100% out of the Department's hands.

# Top Consumer Complaints

1. 209 claim denials
2. 116 claim delays
3. 53 premium notices or billings
4. 69 coverage questions



# Complaints by Line

1. Property Casualty 42%
2. Health Insurance 34%
3. Life Insurance 11%
4. Bail 2%

# Medicaid Expansion

## Total Enrolled 60,423

### EXPANSION ENROLLMENT BY COUNTY

ADA	13,486	CASSIA	765	LEWIS	192
ADAMS	129	CLARK	18	LINCOLN	192
BANNOCK	3,778	CLEARWATER	239	MADISON	2,476
BEAR LAKE	229	CUSTER	158	MINIDOKA	630
BENEWAH	281	ELMORE	912	NEZ PERCE	1,009
BINGHAM	1,634	FRANKLIN	432	ONEIDA	129
BLAINE	450	FREMONT	564	OWYHEE	435
BOISE	230	GEM	627	PAYETTE	923
BONNER	1,778	GOODING	508	POWER	279
BONNEVILLE	4,979	IDAHO	483	SHOSHONE	637
BOUNDARY	474	JEFFERSON	1,011	TETON	307
BUTTE	107	JEROME	819	TWIN FALLS	3,378
CAMAS	30	KOOTENAI	5,091	VALLEY	284
CANYON	8,456	LATAH	920	WASHINGTON	351
CARIBOU	202	LEMHI	411		

\*Updated Thursday, Jan. 23, 2020

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# Waiver Updates

**COVERAGE CHOICE WAIVER:** This 1332 Waiver would allow Idahoans the choice to maintain their private insurance and a tax credit rather than enrolling in Medicaid.

**WORK REQUIREMENTS WAIVER:** This 1115 Waiver will require that individuals are working at least 20 hours a week as a condition of being eligible for Medicaid.

**FAMILY PLANNING SERVICES WAIVER:** This waiver will require individuals seeking family planning services to have a referral from their assigned medical home if the family planning service provider is outside the patient's established medical home.

**IMD WAIVER:** This waiver would allow individuals with Medicaid coverage to receive inpatient treatment for mental health and substance use disorders in a freestanding psychiatric hospital. These services are currently only available when rendered in the psychiatric unit of a full-service hospital.

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# Medicaid Expansion

STATE PLAN AMENDMENT (SPA) / MEDICAID EXPANSION (SB1204)	IMD WAIVER (SPA or 1115)	1332 COVERAGE CHOICE WAIVER	1115 COVERAGE CHOICE WAIVER	1115 WORK REQUIREMENTS WAIVER	1115 FAMILY PLANNING WAIVER
February 15 Submitted	April 25 Milliman contract	April 16 Drafting started	April 16 Drafting started	April 25 Milliman contract	April 25 Milliman contract (only actuarial and certifications)
May 16 Received Request for Additional Information (RAI) on SPA - additional questions from CMS on Idaho's State Plan Amendment. This restarts the 90-day clock as soon as Idaho provides response to the list of questions.	May 13 Tribal notice sent	April 25 Milliman contract	April 25 Milliman contract	May 13 Tribal notice sent	May 13 Tribal notice sent
August 16 RAI response submitted	June 13 Deadline for tribes to respond	May 13 Tribal notice Sent	May 13 Tribal notice sent	June 13 Deadline for tribes to respond	June 13 Deadline for tribes to respond
November 1 Open enrollment began	November 22 Released for public comment	May 31 Released for public comment	June 13 Deadline for tribes to respond	August 23 Released for public comment	September 11 Released for public comment
November 14 Received approval from CMS	Mid December Public comment period closes on 1115 Waiver	June 13 Deadline for tribes to respond	July 3 Released for public comment	September 22 Public comment period closes	October 12 Public comment period closed
January 1, 2020 Coverage begins	↓ AND ↑ September 30 Submitted SPA requesting approval under the SUPPORT Act to allow coverage of IMD services for individuals with substance use disorders	July 15 Submitted to CCIO	July 16 Public comment ended based on discussions with CMS that this waiver may not be necessary	September 27 Submitted to CMS for approval	October 21 Submitted to CMS for approval
		August 29 Received letter from CCIO stating the waiver was "incomplete." Working with the Department of Insurance to resubmit waiver by the end of December.		October 3 Received "Application Complete" letter from CMS	October 28 Received "Application Complete" letter from CMS
<p>December 30 (All Waivers and SPAs)</p> <p>Deadline to receive approval from CMS/CCIO to implement waivers on January 1, 2020. Without approvals, DHW will implement full Medicaid expansion, and implementation of waivers will occur after waivers are approved. (Last updated 11/21/19)</p>					

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# Governor Little's Commitment



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# Dept. of Insurance



**“Golden Scissors” Award Winner!**

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“The Department of Insurance is a model of excellence for regulatory reform in Idaho. Director Dean Cameron and his team enthusiastically took the opportunity to clean up their rules while maintaining critical protections for Idaho citizens. They combined and consolidated chapters, eliminated unnecessary provisions, and renamed and re-numbered chapters. The result is a simpler insurance code that Idahoans are able to more easily navigate. I was proud to recognize the Department with our inaugural ‘Golden Scissors’ award, and I am sure their collective work will benefit Idahoans for years to come.”

**-Brad Little, Governor**

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# Dept. of Insurance

## 2020 UPDATED ACCOMPLISHMENTS

- DOI eliminated 35% of its total word count, reducing the total count from 242,736 words to 156,546 words for a net decrease of 86,190 words.
- DOI eliminated 99.83% of its restrictive words, totaling 3,489 words. Restrictive words include “shall”, “must”, “may not”, “prohibited”, and “required”. The number one restricted word “shall” was used 2,506 times! The DOI kept only six (6) restrictive words because they were quotes from statute.
- DOI eliminated 40% of its pages, reducing the page count from 536 pages to 321 pages for a net decrease of 215 pages.
- The Idaho Dept. of Insurance eliminated 33% of its chapters, reducing the total chapter count from 65 chapters to 44 chapters, reduced by 22 chapters with 1 chapter added (Enhanced Short-term Plans) for a net decrease of 21 chapters.

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# NAIC Mission

**(National Association of Insurance Commissioners)**

The mission of the NAIC is to:

- Protect the public interest
- Promote competitive markets
- Facilitate fair and equitable treatment of insurance consumers
- Promote reliability, solvency and financial solidity of insurance institutions
- Support and improve state regulation of insurance

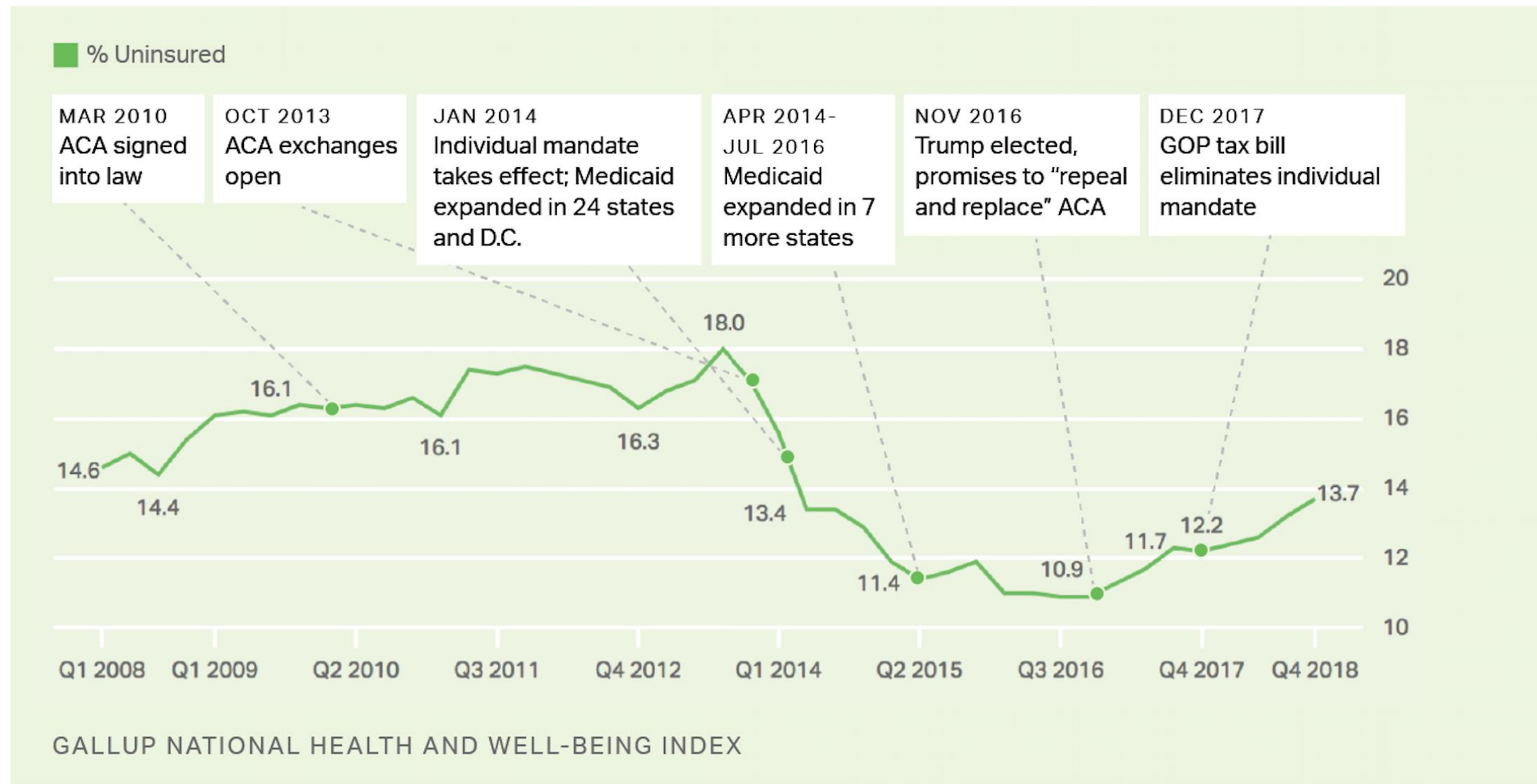
# NAIC Priorities

(National Association of Insurance Commissioners)

- Long-term Care Insurance
- Annuity Suitability & Best Interest Standard
- Climate/Natural Catastrophe Risks & Resiliency
- Data, Innovation & Cyber
- Group Capital Calculation (GCC)
- Health Insurance
- International Relations



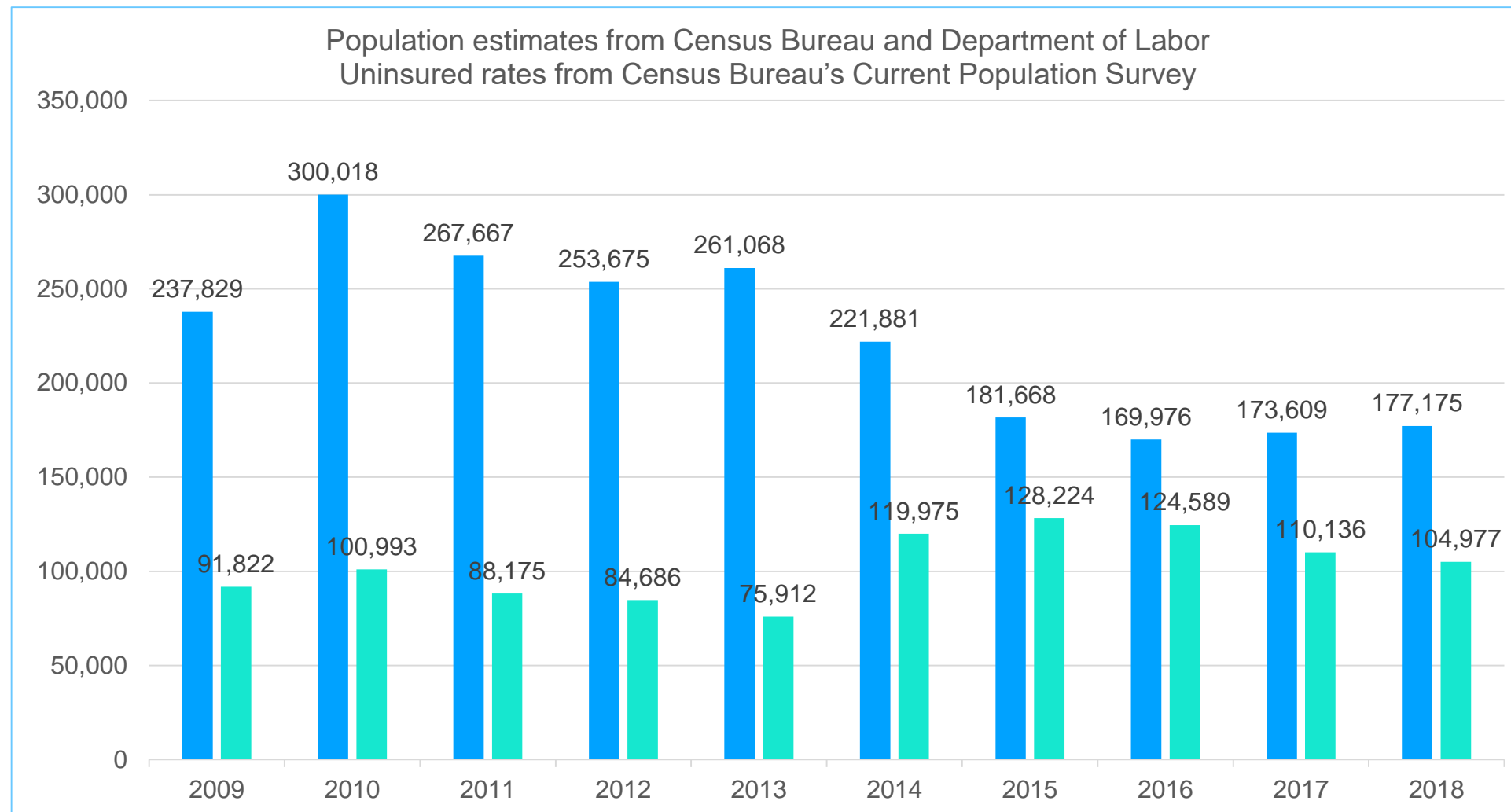
# US Adults without Health Insurance 2008-2018



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# Uninsured Trend in Idaho



Idahoans enrolled in Individual Plans  
Uninsured Population Total



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# How Idahoans are Insured

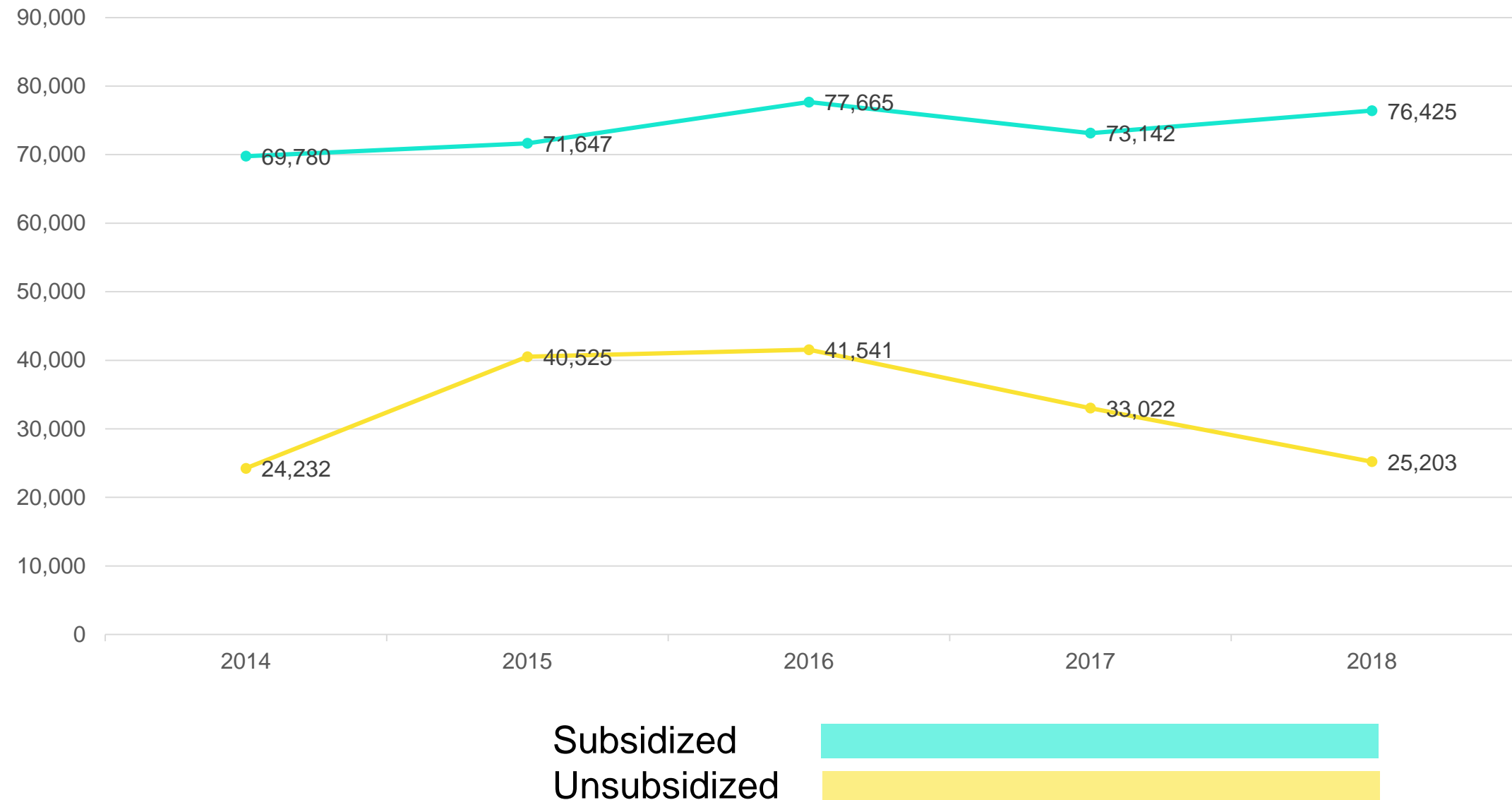
Coverage Type	2014	2015	2016	2017	2018
Individual	119,975	128,224	124,589	110,136	104,977
Small Group	80,270	78,906	75,977	80,382	86,132
Mid-Size Group	35,583	35,237	31,460	34,015	31,773
Large Group	165,179	141,859	130,856	134,386	151,760
Fed. Govt. Plans	41,374	42,024	41,456	42,990	42,562
MEWAs/Trusts	1,804	951	1,063	1,015	1,118
Short Term	4,071	4,305	3,769	2,976	3,860
Medicare Advantage	85,629	81,688	79,687	75,964	102,216
Self-Funded Plans	328,432	407,158	364,906	312,820	329,525
<b>Total from DOI Data</b>	<b>862,317</b>	<b>920,352</b>	<b>853,763</b>	<b>794,684</b>	<b>853,923</b>

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# Subsidized & Unsubsidized

## Individual Health Insurance Market APTC Average Monthly Enrollment



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# Individual Market at a Glance

Year	Covered Lives	Claims Paid	Average Monthly Premium Per Insured
2009	91,119	\$140,873,957	\$159.59
2010	102,978	\$164,404,145	\$154.46
2011	98,190	\$191,765,397	\$174.17
2012	94,493	\$173,809,774	\$190.94
2013	85,060	\$167,271,538	\$215.77
2014	119,293	\$306,941,188	\$229.60
2015	128,185	\$535,270,995	\$282.07
2016	124,571	\$601,728,947	\$363.04
2017	110,136	\$517,851,023	\$438.98
2018	104,977	\$523,175,576	\$520.85

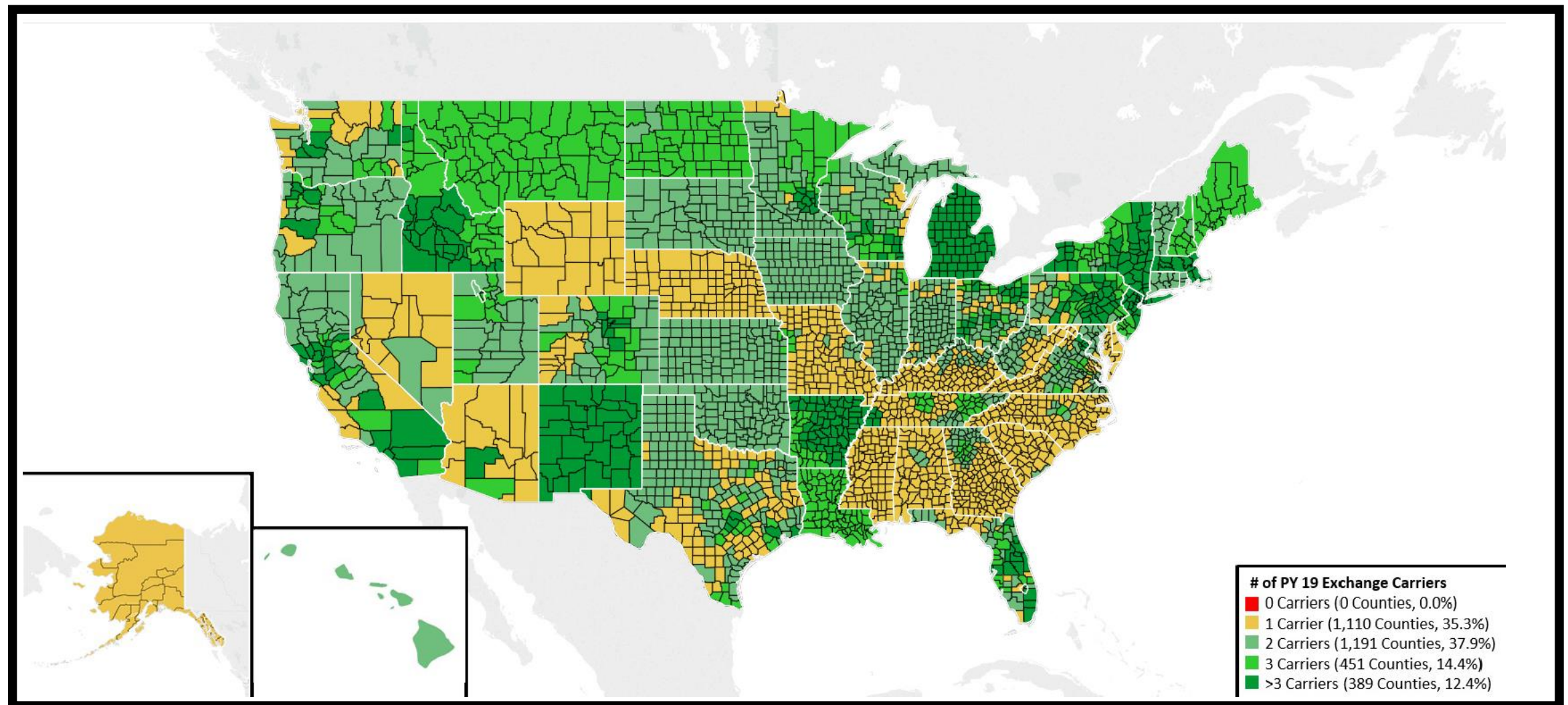
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# County by County Plan Year 2019

## Insurer Participation in Health Insurance Exchanges

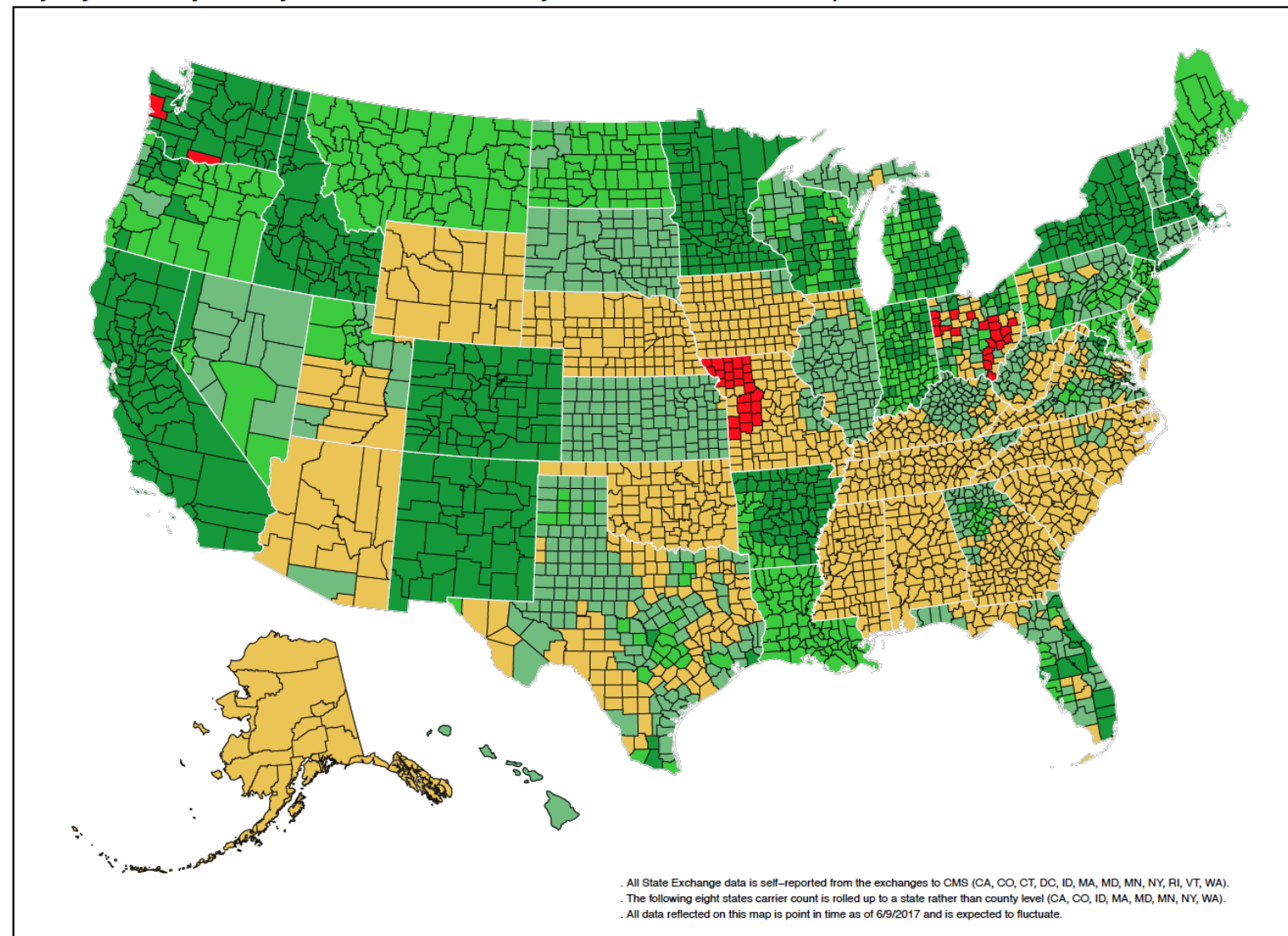


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# County by County Plan Year 2017

## Insurer Participation in Health Insurance Exchanges



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# Executive Order



The plan to get the “young and healthy” to buy insurance in Idaho

*Photo courtesy of the IdahoStatesman.com*

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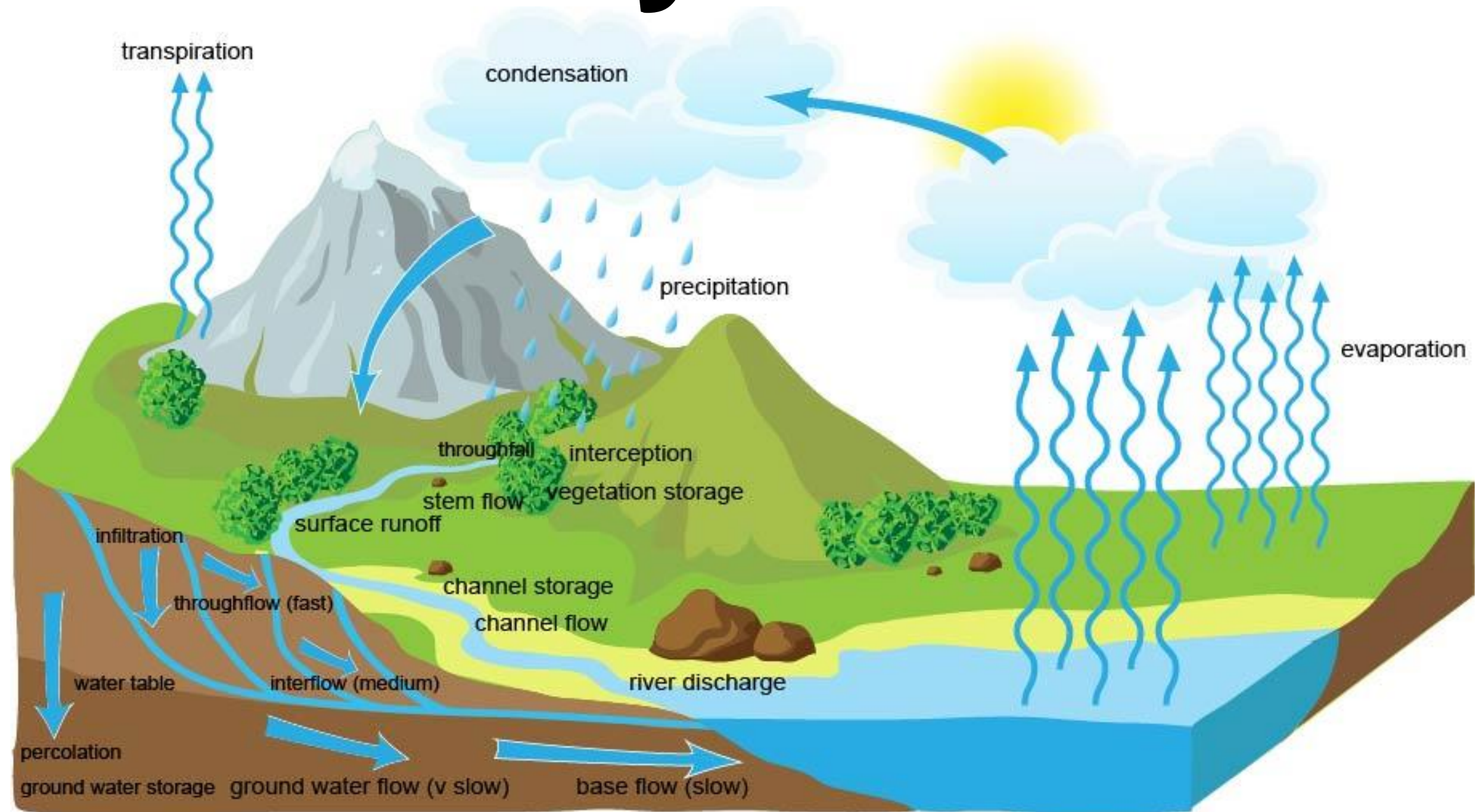
# “Substantially enforced”

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# A Healthy Risk Pool



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# State-based Health Plans

- Idaho's State-based plans, non-ACA compliant plans, are less expensive plans.
- They provide options to incentivize the young and healthy to return to the insurance market.
- They provide flexibility in our healthcare policies.
- Idaho State-based plans stabilize our markets.

# State-based Health Plans



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# Short-term

# Health Plan

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# Traditional Short-term Plans

- Not guaranteed issue
- Non-renewable - cannot be reissued within 63 days of effective date.
- Total duration may not exceed 12 months
- No requirement for carrier to offer Exchange Plans
- Offered year round
- More limited benefits and consumer protection requirements



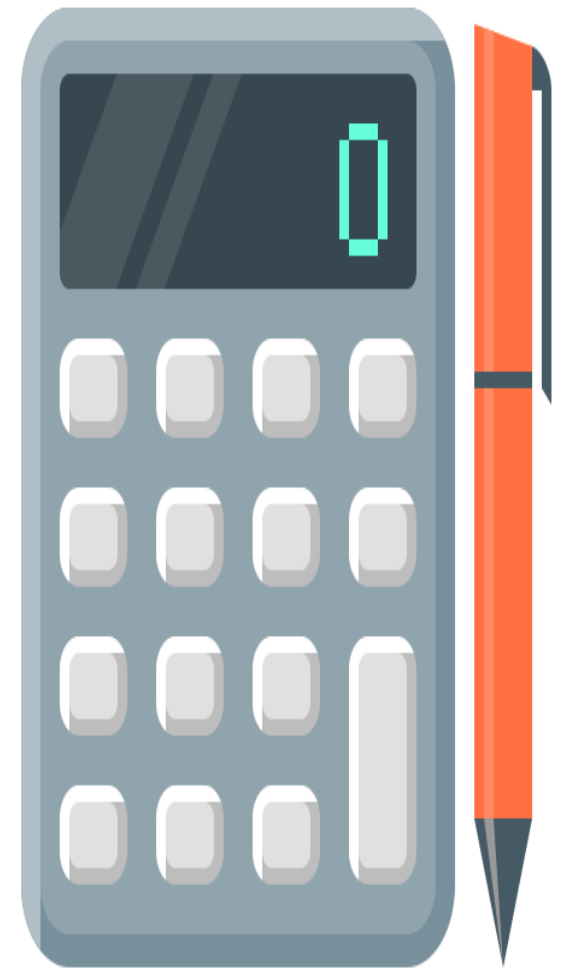
# Enhanced vs Traditional

- Guaranteed Issue
  - Guaranteed renewable & converting to ACA plans
  - Total duration (with renewals) may not exceed 36 months
  - Carrier must also offer Exchange Plans
  - May be offered year-round or through an Open Enrollment Period
  - Protection against preexisting condition exclusion periods under certain circumstances
  - More robust benefits and consumer protection requirements
- Not guaranteed issue
  - Non-renewable; cannot be reissued within 63 days of effective date
  - Total duration may not exceed 12 months
  - No requirement for carrier to offer Exchange Plans
  - Offered year round
  - More limited benefits and consumer protection requirements

# Determining Actuarial Values

The Dept. of Health and Human Services (HHS) requires health insurance plans offered in the individual and small group markets to have BRONZE, SILVER, GOLD, or PLATINUM plans.

The Actuarial Value (AV) Calculator determines a plan's metal levels based on cost-sharing—the percentage the insurance company pays for each claim.

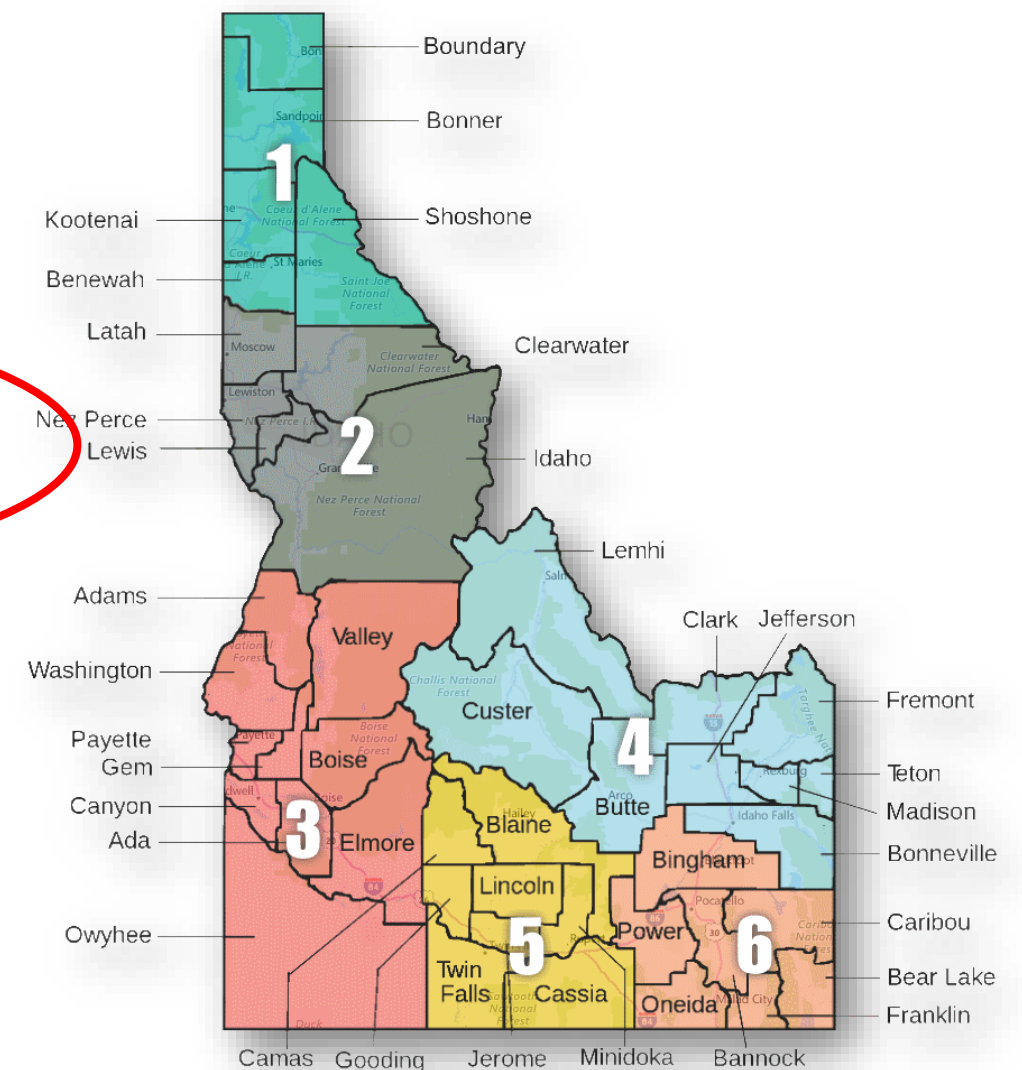


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# Individual Medical Plans by Metal and Area

	1	2	3	4	5	6
<b>Catastrophic</b>	5	4	7	7	6	5
<b>Bronze</b>	18	12	24	24	21	18
<b>Silver</b>	16	12	21	22	18	16
<b>Gold</b>	5	4	7	7	6	5
<b>Platinum</b>	0	0	0	0	0	0
<b>Grand Total</b>	<b>44</b>	<b>32</b>	<b>59</b>	<b>60</b>	<b>51</b>	<b>44</b>



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# Metal Plan Comparisons of 5 Enhanced Short-Term Plans

● ESTP Blue Cross of Idaho Access Protector Plan at 48% AV

**Bronze Plans are between 56% and 65% AV**

● ESTP Blue Cross of Idaho Access Safeguard Plan at 62% AV

● ESTP SelectHealth 5000 Plan at 65% AV

**Silver Plans are between 66% and 72% AV**

● ESTP Blue Cross of Idaho Access Secure Plan at 70% AV

● ESTP SelectHealth 2000 Plan at 71% AV

**Gold Plans are between 76% and 82%**

# Faith-based Plans

## (Health Care Sharing Ministries)



“A health care sharing ministry shall not be considered to be engaging in the business of insurance for purposes of this title.”

# Faith-based Plans (Health Care Sharing Ministries)

In **2017**, Idaho members  
totaled 15,874.

In **2018**, Idaho members increased  
to 24,282.



# Faith-based Plans



## ‘Sham’ Sharing Ministries Test Faith Of Patients And Insurance Regulators

By JoNel Aleccia

MAY 17, 2019

[REPUBLIC THIS STORY](#)



Sheri Lewis of Seattle, who was enrolled in a health care sharing ministry, found out that the hip transplant she desperately needed was not covered. She got the procedure in Tijuana, Mexico, with the help of a GoFundMe account. (Dan DeLong for KHN)

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# Autism



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# Hearing Aids



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# Thank you!

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