



Idaho 2020

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Idaho Department of Insurance
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

Consumer Services

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

External Review Claims

STATISTICS

	2014	2015	2016	2017	2018	2019
Total External Review Requests	39	55	113	130	128	155
Standard	34	45	104	122	112	132
Urgent	5	10	9	8	16	23
Review Outcomes						
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 61,861

EXPANSION ENROLLMENT BY COUNTY

ADA	13,746	CASSIA	789	LEWIS	197
ADAMS	136	CLARK	18	LINCOLN	191
BANNOCK	3,863	CLEARWATER	249	MADISON	2,520
BEAR LAKE	240	CUSTER	161	MINIDOKA	649
BENEWAH	300	ELMORE	923	NEZ PERCE	1,041
BINGHAM	1,652	FRANKLIN	430	ONEIDA	133
BLAINE	444	FREMONT	574	OWYHEE	453
BOISE	237	GEM	632	PAYETTE	944
BONNER	1,835	GOODING	514	POWER	288
BONNEVILLE	5,104	IDAHO	505	SHOSHONE	653
BOUNDARY	465	JEFFERSON	1,025	TETON	304
BUTTE	112	JEROME	837	TWIN FALLS	3,517
CAMAS	27	KOOTENAI	5,217	VALLEY	289
CANYON	8,697	LATAH	955	WASHINGTON	367
CARIBOU	208	LEMHI	420		

*Updated Thursday, Feb. 6, 2020

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Medicaid Expansion

Enrollment Update

EXPECTED enrollments to move to Medicaid in 2019

18,600

ACTUAL enrollments that moved to Medicaid in 2019

12,900

Enrollments receiving a **TAX CREDIT** in 2020
due to an increase in income

5,700

***NOTE: 2020 enrollments will continue to fluctuate as the open enrollment dust settles.*

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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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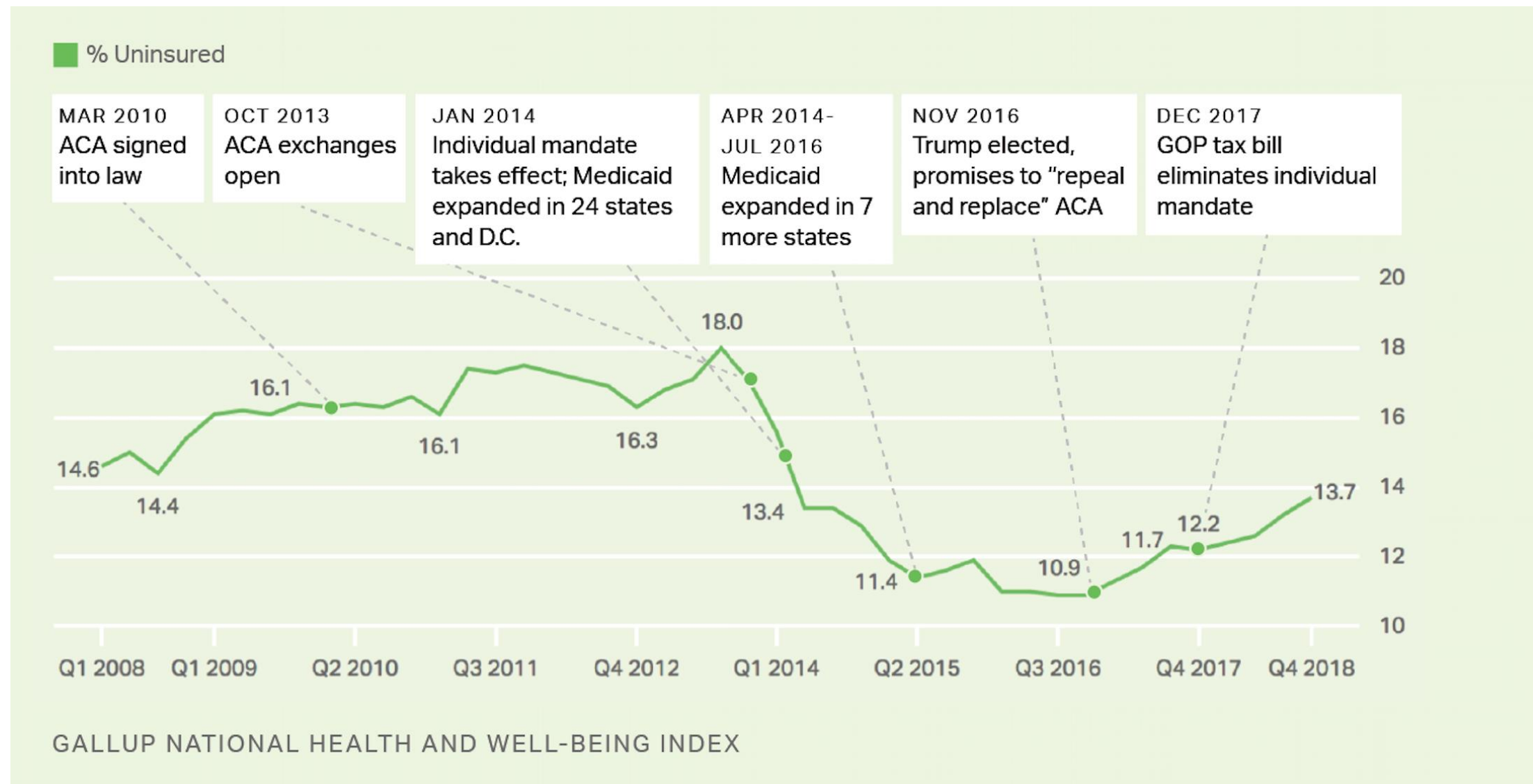
Medicaid Expansion

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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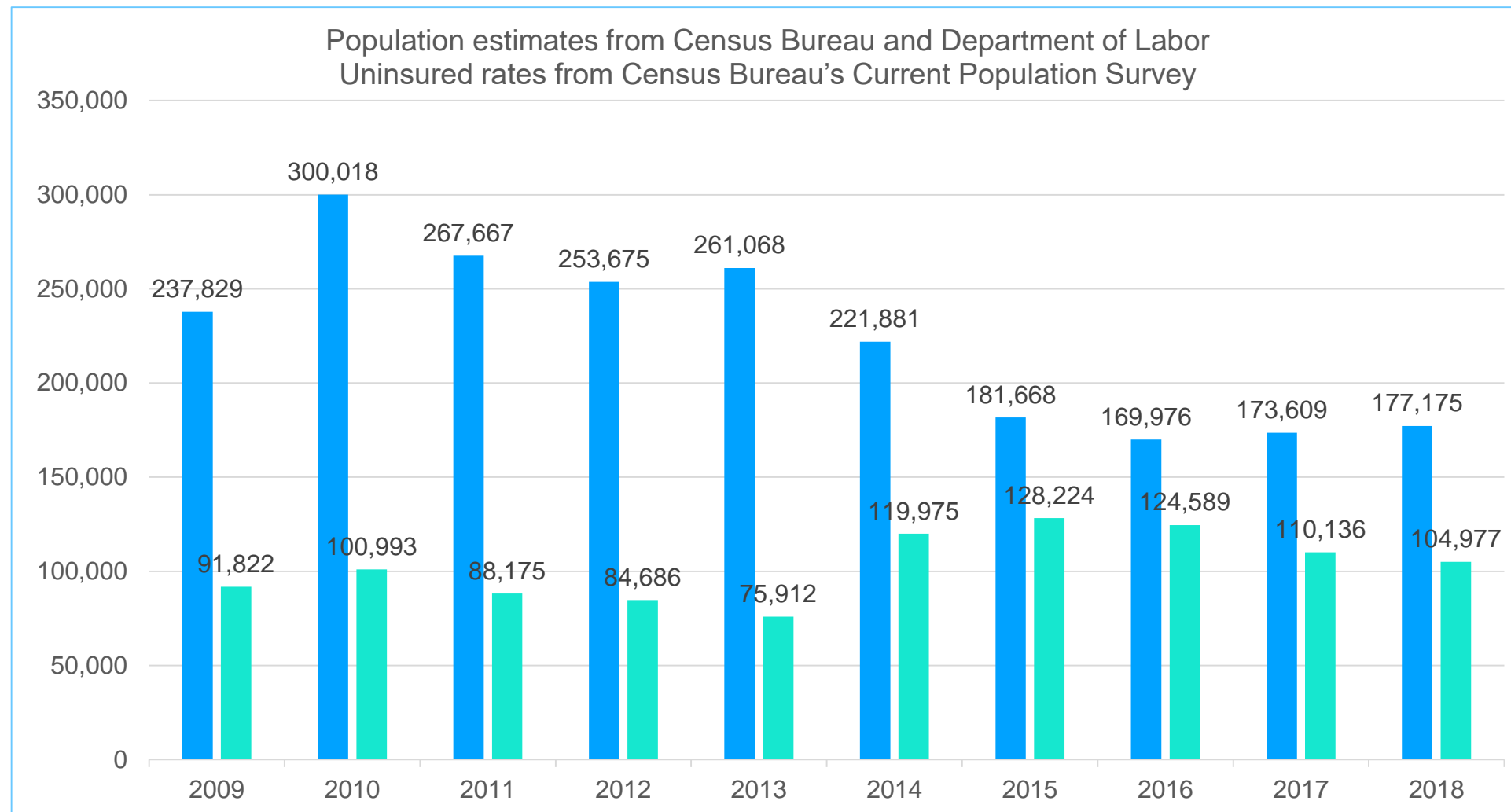
US Adults without Health Insurance 2008-2018



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Uninsured Trend in Idaho



Idahoans enrolled in Individual Plans
Uninsured Population Total



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How Idahoans are Insured

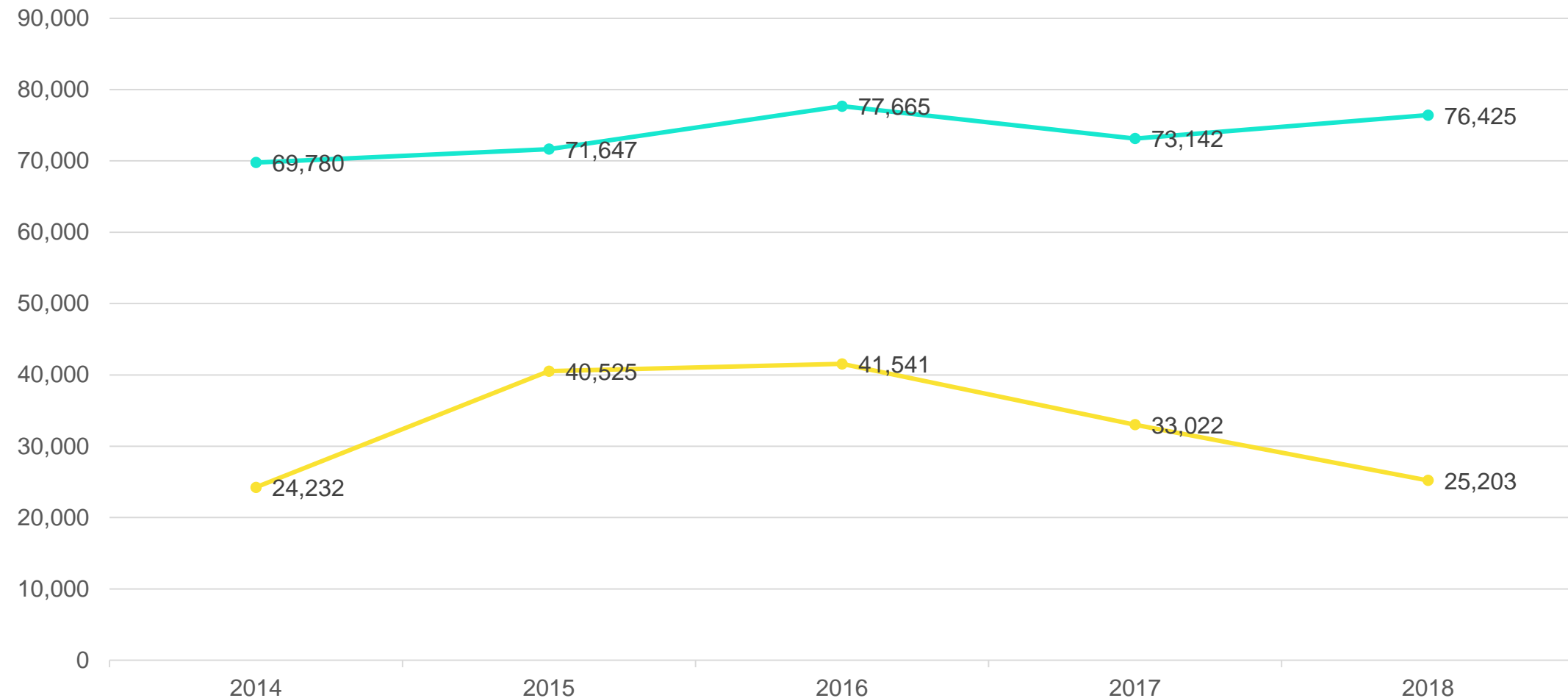
Coverage Type	2014	2015	2016	2017	2018
Individual	119,975	128,224	124,589	110,136	104,977
Small Group	80,270	78,906	75,977	80,382	86,132
Mid-Size Group	35,583	35,237	31,460	34,015	31,773
Large Group	165,179	141,859	130,856	134,386	151,760
Fed. Govt. Plans	41,374	42,024	41,456	42,990	42,562
MEWAs/Trusts	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
Total from DOI Data	862,317	920,352	853,763	794,684	853,923

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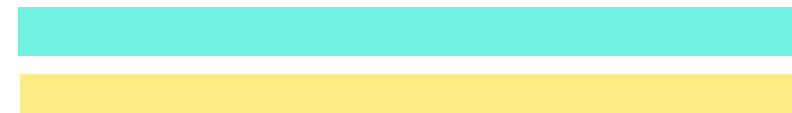


Subsidized & Unsubsidized

Individual Health Insurance Market APTC Average Monthly Enrollment



Subsidized
Unsubsidized



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Individual Market at a Glance

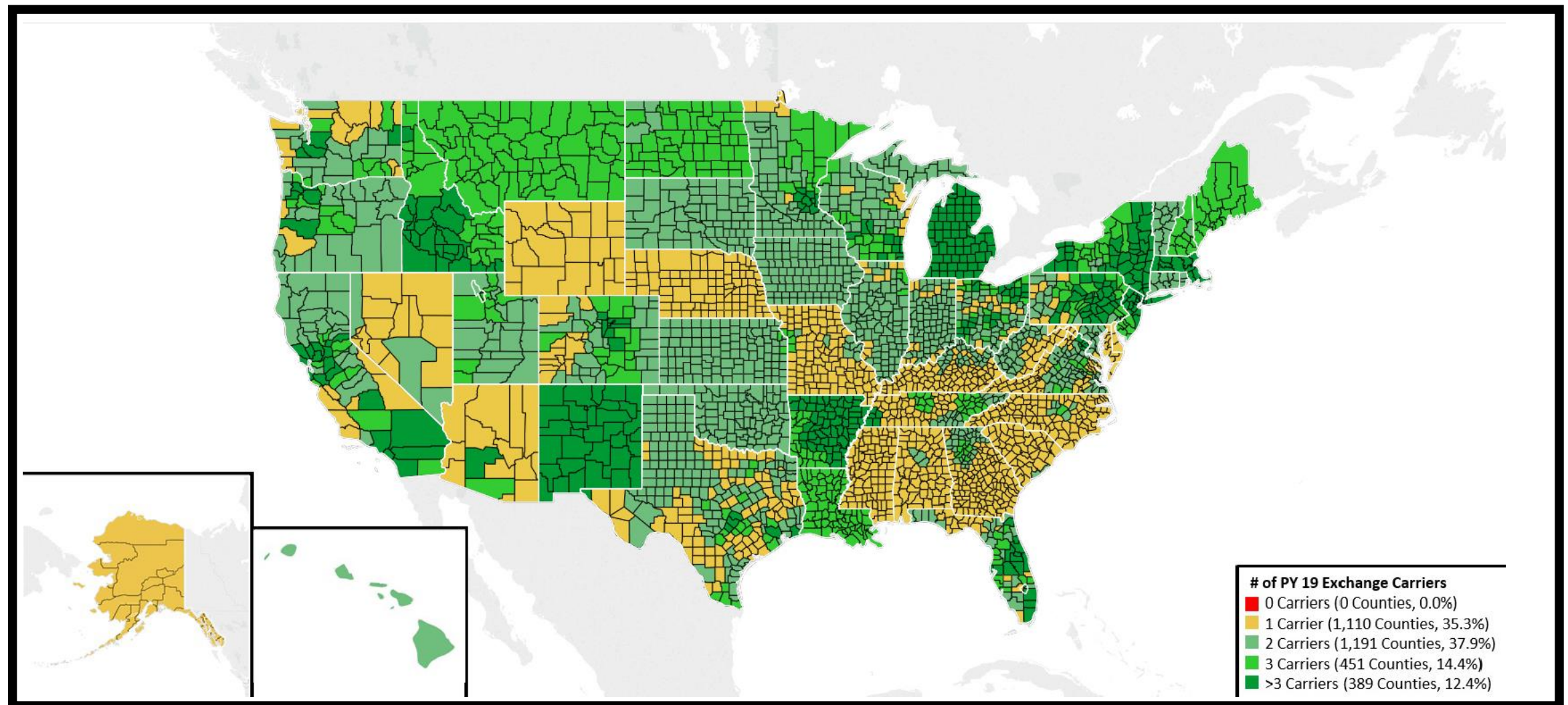
Year	Covered Lives	Claims Paid	Average Monthly Premium Per Insured
2009	91,119	\$140,873,957	\$159.59
2010	102,978	\$164,404,145	\$154.46
2011	98,190	\$191,765,397	\$174.17
2012	94,493	\$173,809,774	\$190.94
2013	85,060	\$167,271,538	\$215.77
2014	119,293	\$306,941,188	\$229.60
2015	128,185	\$535,270,995	\$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

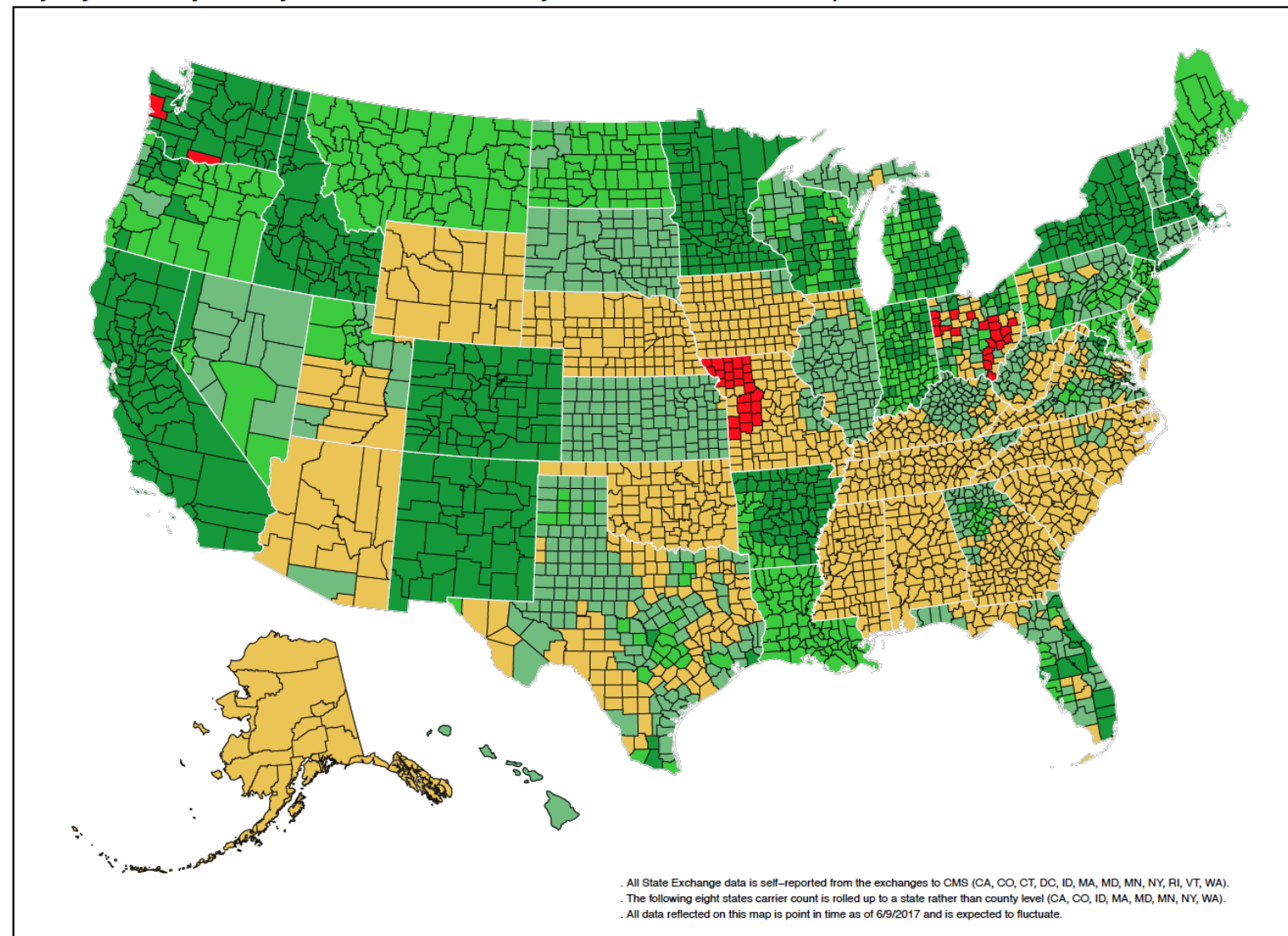


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County by County Plan Year 2017

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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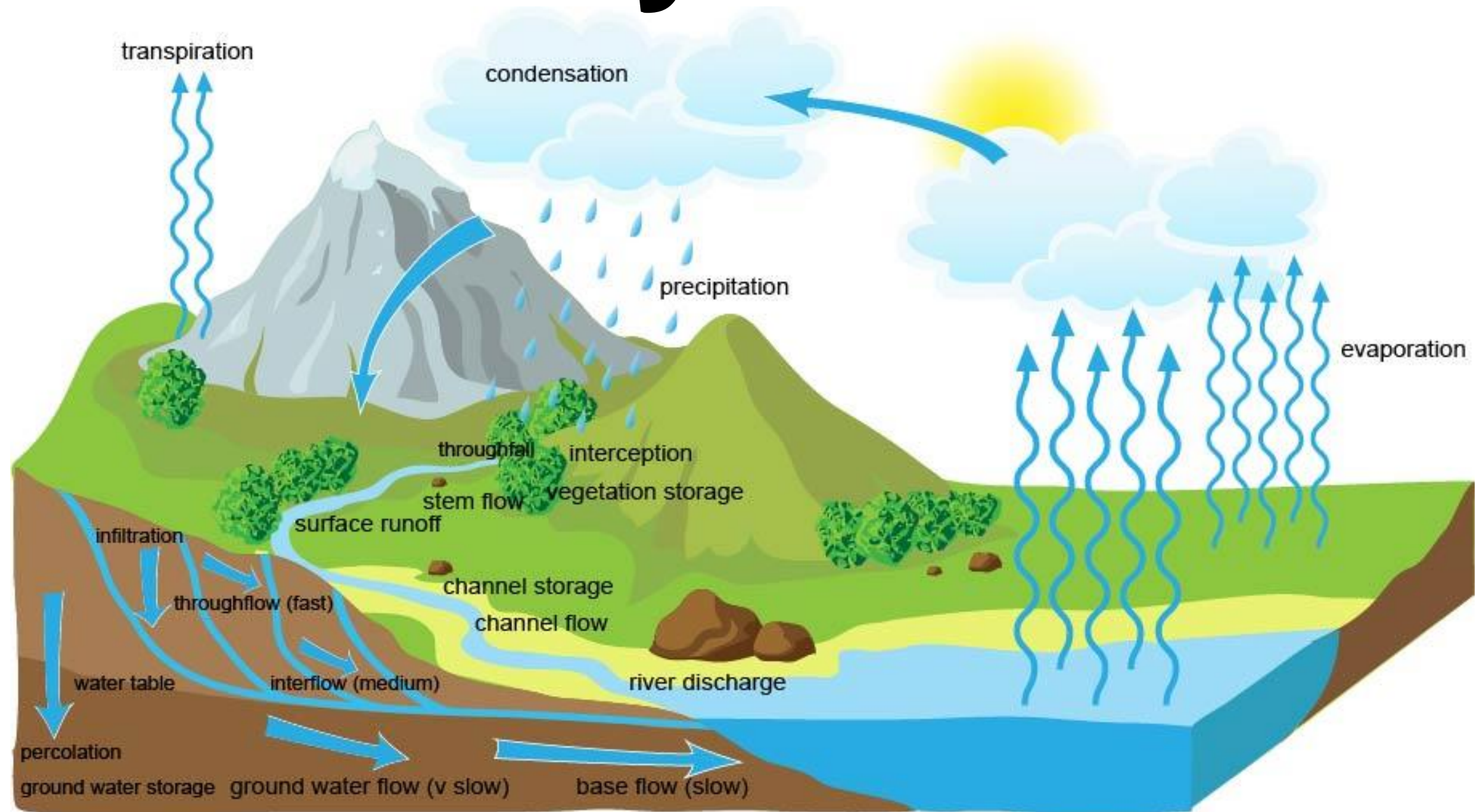


“Substantially enforced”

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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

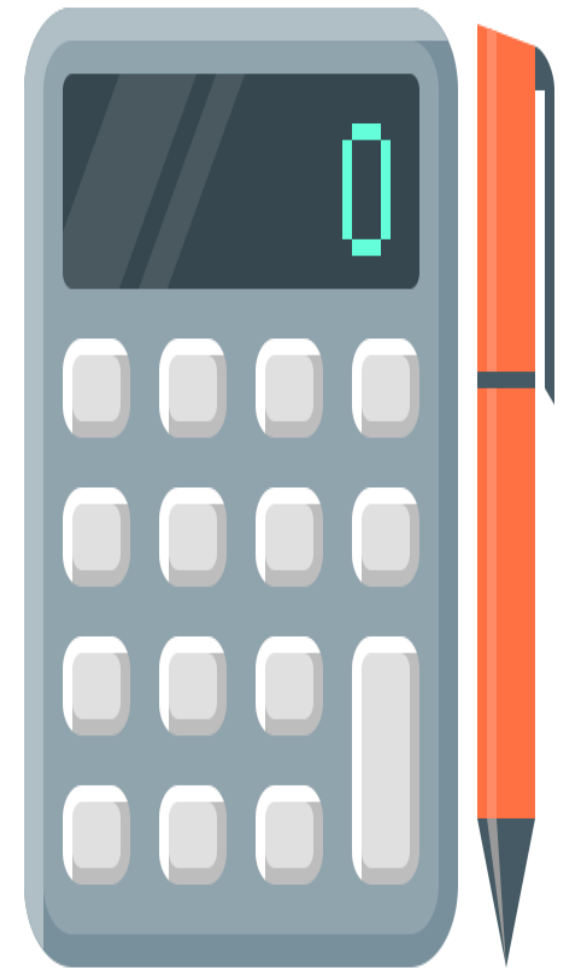
Enhanced vs Traditional

- 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.

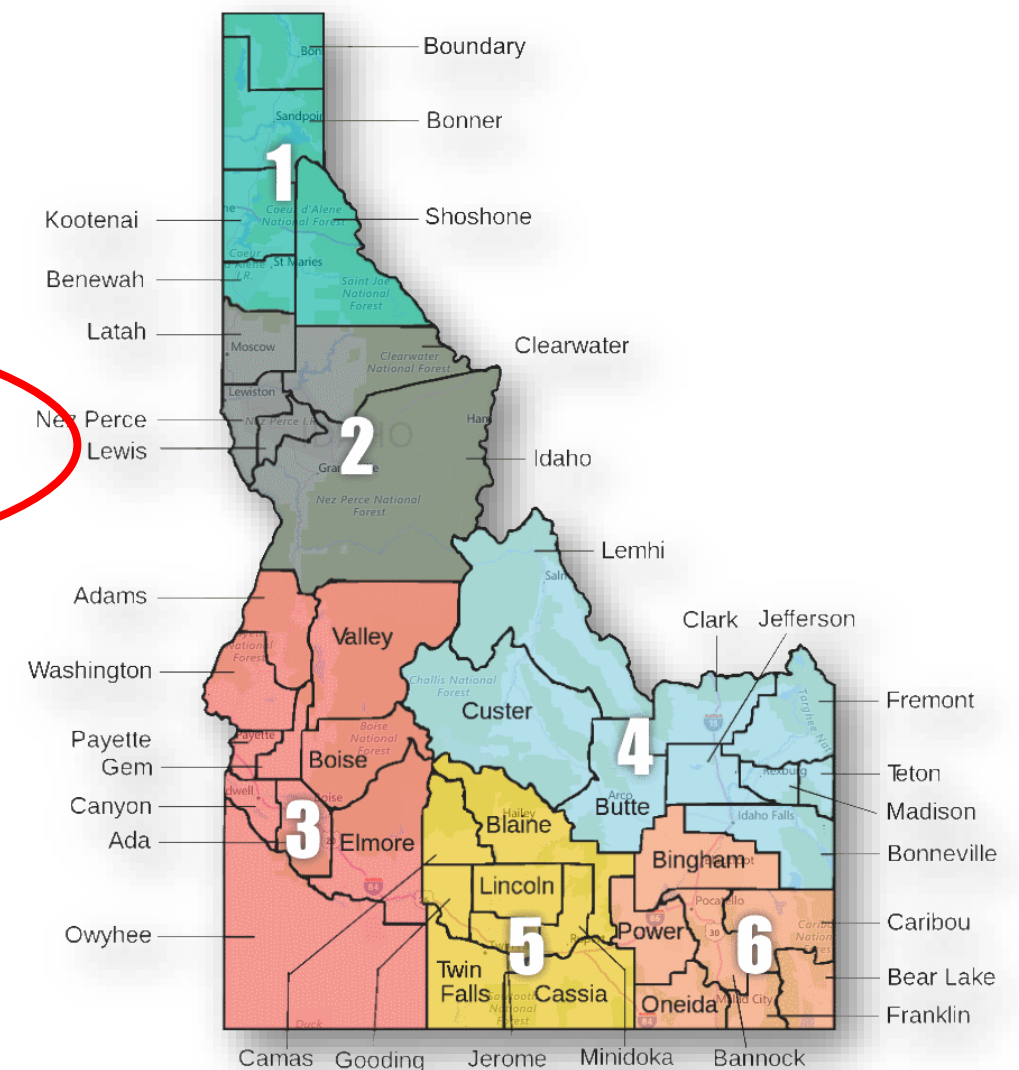


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Individual Medical Plans by Metal and Area

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



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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



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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