



# 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, 20 domestic

Over 130,000 active licenses (86% are producer licenses)

Over 112,000 active producer licenses

Over 28,000 forms filed last year

Over \$8 billion premiums written

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# 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



# Company Activities

- 5 exams of insurance companies and self-funded plans completed
- 66 title agency exams completed
- 282 TPA 2018 annual reports
- 39 applications reviewed

# Company Activities

- 20 domestic insurers filing annually (3-5 years)
- 14 self-funded plans, filing 6 routine financial reports each
- 1,373 foreign insurance carrier types requiring annual compliance review, certification & maintenance
- 16 foreign company applications reviewed

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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

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# 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%

# Recent Administration Action

Learning from your  
mistakes is smart.  
Learning from the  
mistakes of others  
**IS WISE.**



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# Recent Administrative Action



## Nampa insurance agent penalized \$46,000

By: Staff Writer  
Posted: Sep 18, 2019 05:35 PM MDT  
Updated: Sep 18, 2019 05:35 PM MDT



Bryce Joseph Vance, an insurance agent out of Nampa, lost his license and was fined \$46,000 for creating and submitting to an insurance company 46 applications for insurance without the knowledge, consent, or authorization of the consumers for whom the applications were submitted.

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# Recent Administrative Action



Rexburg insurance agent sells liability insurance for bogus dune buggy business

Idaho Department of Insurance press release Oct 4, 2019



**Example:** Reynold Boyd Leavitt, an insurance agent from Rexburg, charged customers for liability insurance at his dune buggy rental business on sixteen separate occasions when there was no insurance in effect on the vehicles. Mr. Leavitt was fined \$16,000, and his license was revoked by the Department.

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# Recent Administrative Action

Insurance agent from Eagle loses license

By IDAHO PRESS STAFF newsroom@idahopress.com Sep 19, 2019



**Example:** Stacia Ann Royster, an insurance agent in Eagle had her license revoked and was penalized \$7,000 for failing to maintain records of insurance transactions made under her signature. She allowed an unlicensed individuals to submit an application under her signature.

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# 5 Types of Fraud

1. Prior loss 16%
2. Application fraud 9.5%
3. False claims 7%
4. Agent fraud 5.3%
5. Fictitious theft 4.4%



# **FRAUD** Cases

- 336 fraud cases referred but only 146 opened
- 45 fraud cases closed
- 14 fraud prosecutions, 12 convictions and 1 administrative action
- Nearly \$87,000 in restitution ordered

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# Top 5 Fraud Cases



1. 44% Auto
2. 14% Homeowners
3. 9% Health
4. 9% Workers Comp
5. 8% Agent

# Top 5 Fraud Cases

## 1. 44% Auto

**Example:** Michael Wilson filed a false claim when he reported his car was damaged in a collision with a deer. The claim was false, as investigators determined that he damaged his car two days before his policy took effect. Mr. Wilson pled guilty to one count of insurance fraud and was ordered to pay \$908 in restitution to the Department to cover investigative costs, and \$362 in restitution to GEICO.



# Top 5 Fraud Cases

## 2. 14% Homeowners

**Example:** David Gress submitted a fictitious receipt with a claim for golf clubs he alleged were stolen from his garage. Mr. Gress was fined \$518.47 in restitution fees. He was also placed on two years supervised probation, ordered to pay \$200 in court fees, and ordered to complete 100 hours of community service with 60 hours suspended.



# Top 5 Fraud Cases

## 3. 9% Health



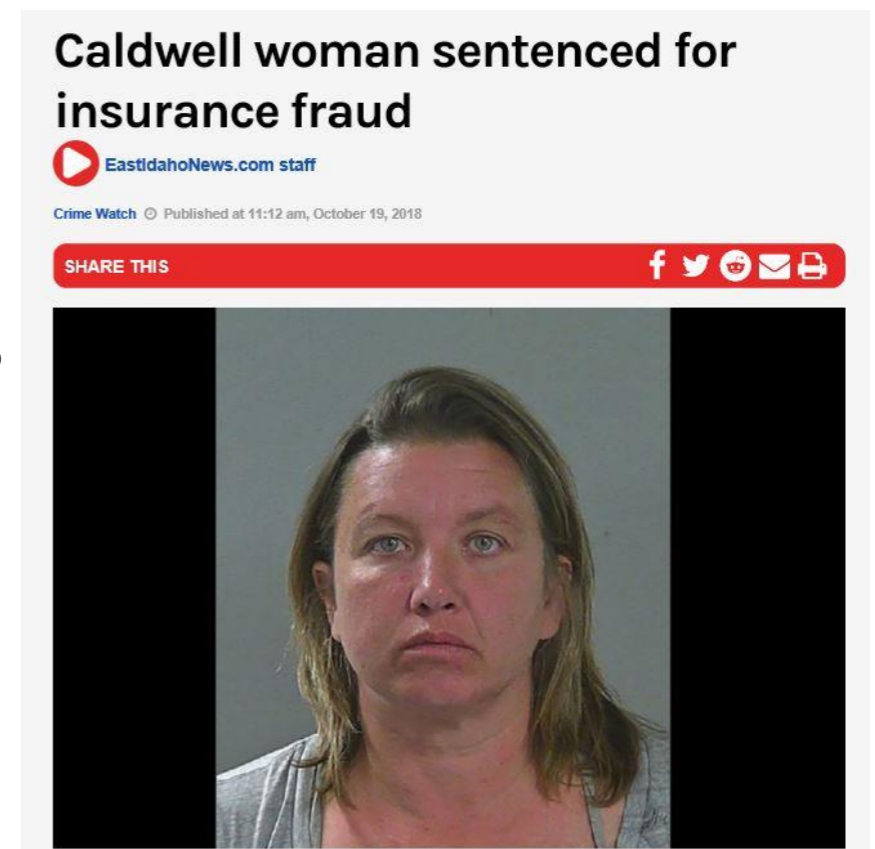
**Example:** Malorie J. Warner was an insurance producer for Aflac. While selling insurance, she filed fraudulent medical claims on behalf of herself and her immediate family. The state revoked her insurance license, and she was ordered to serve 15 days in jail, 100 hours of community service, and pay a \$500 fine. Warner was ordered to pay \$1,308 to the Department and \$750 to Aflac.

# Top 5 Fraud Cases

## 4. 9% Workers Comp

**Example:** Shannan C. Norris of Caldwell pled guilty to one count of insurance fraud. She co-owned and operated a trucking company and collected insurance premiums for three of her drivers but failed to turn the funds over to the insurance company. She also admitted to forging at least one insurance identification card as part of her scheme. She was ordered to pay \$6,294 in restitution to the drivers she scammed.

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# Top 5 Fraud Cases

## 5. 8% Agent

### Insurance agent sentenced for misappropriating client money



Local © Published at 11:42 am, February 1, 2018

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*The following is a news release from the state of Idaho Office of the Attorney General.*

BOISE — Attorney General Lawrence Wasden has announced an eastern Idaho man was sentenced Monday, Jan. 29, for one count of Diversion or Misappropriation of Fiduciary Funds.

Sixth District Judge Stephen Dunn sentenced 38-year-old Alan C. Rzeszutko, of Pocatello, after he pleaded guilty in October.



**Example:** Alan Rzeszutko pled guilty to insurance fraud when he diverted his customers' premium payments to his personal account. Mr. Rzeszutko was ordered to pay \$6,201 in restitution to Farmers Insurance, \$1,043 to the Dept. for investigative costs, a fine of \$750 and court costs of \$245. His producer's license was revoked by the Department in 2016.

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# Medicaid Expansion

## Total Enrolled 65,458

### EXPANSION ENROLLMENT BY COUNTY

ADA	14,458	CASSIA	848	LEWIS	212
ADAMS	151	CLARK	21	LINCOLN	194
BANNOCK	4,069	CLEARWATER	256	MADISON	2,646
BEAR LAKE	258	CUSTER	168	MINIDOKA	684
BENEWAH	336	ELMORE	975	NEZ PERCE	1,150
BINGHAM	1,738	FRANKLIN	449	ONEIDA	134
BLAINE	466	FREMONT	601	OWYHEE	487
BOISE	257	GEM	670	PAYETTE	999
BONNER	1,937	GOODING	543	POWER	316
BONNEVILLE	5,345	IDAHO	520	SHOSHONE	707
BOUNDARY	505	JEFFERSON	1,082	TETON	322
BUTTE	113	JEROME	884	TWIN FALLS	3,753
CAMAS	30	KOOTENAI	5,562	VALLEY	313
CANYON	9,242	LATAH	1,014	WASHINGTON	391
CARIBOU	216	LEMHI	436		

\*Updated Thursday, Feb. 27, 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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# Governor Little's

RED TAPE REDUCTION



## Idaho's Historic Regulatory Cuts

*IDAHO BECOMES LEAST-REGULATED STATE IN U.S.*

### OVERVIEW OF RULE CUTS - 2018 TO 2019

Restrictions  
Eliminated

30,936

Pages  
Eliminated

1,804

Chapters  
Eliminated

250



Idaho cut  
& simplified  
75% of rules  
in one year

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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

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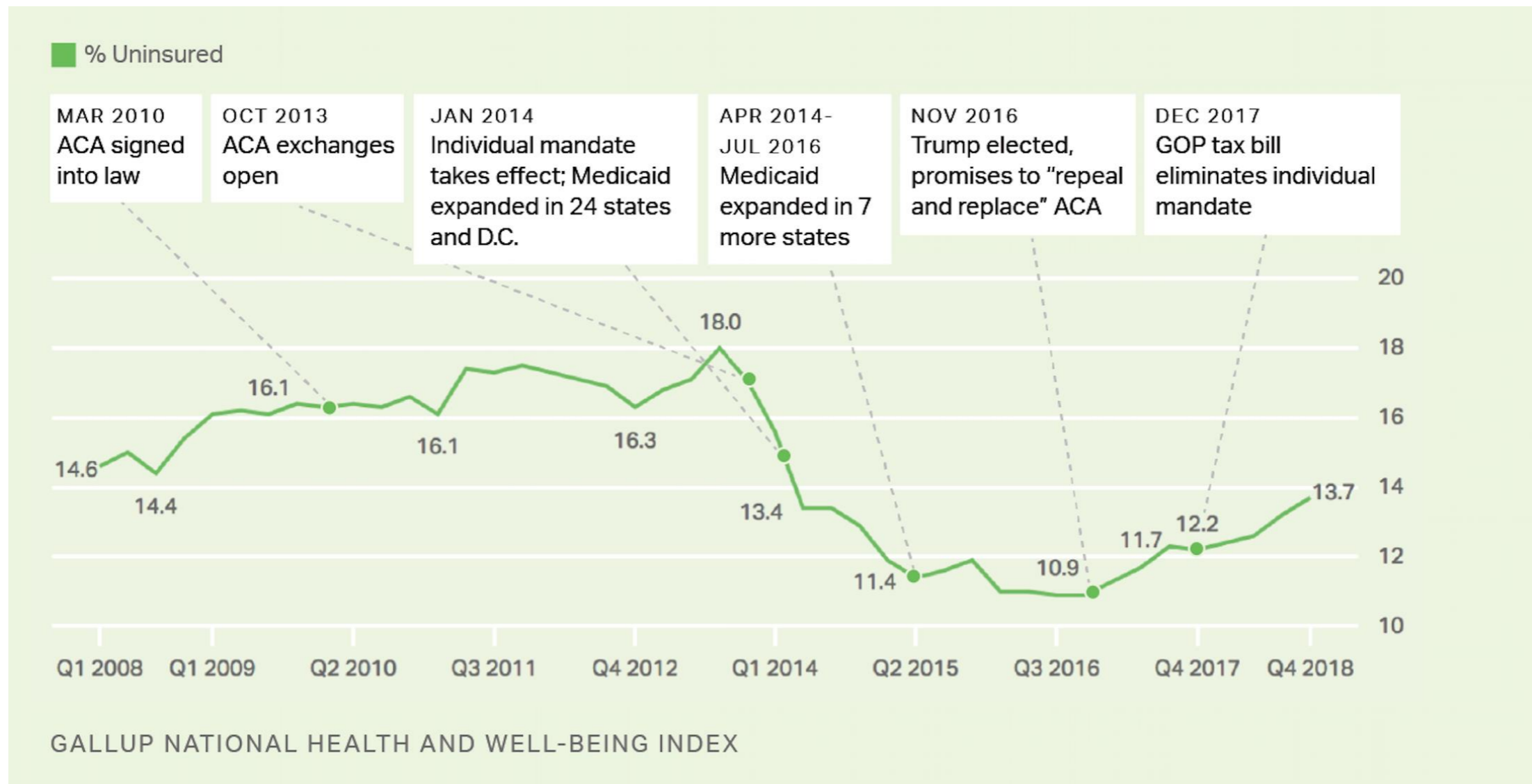
# NAIC Priorities

(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



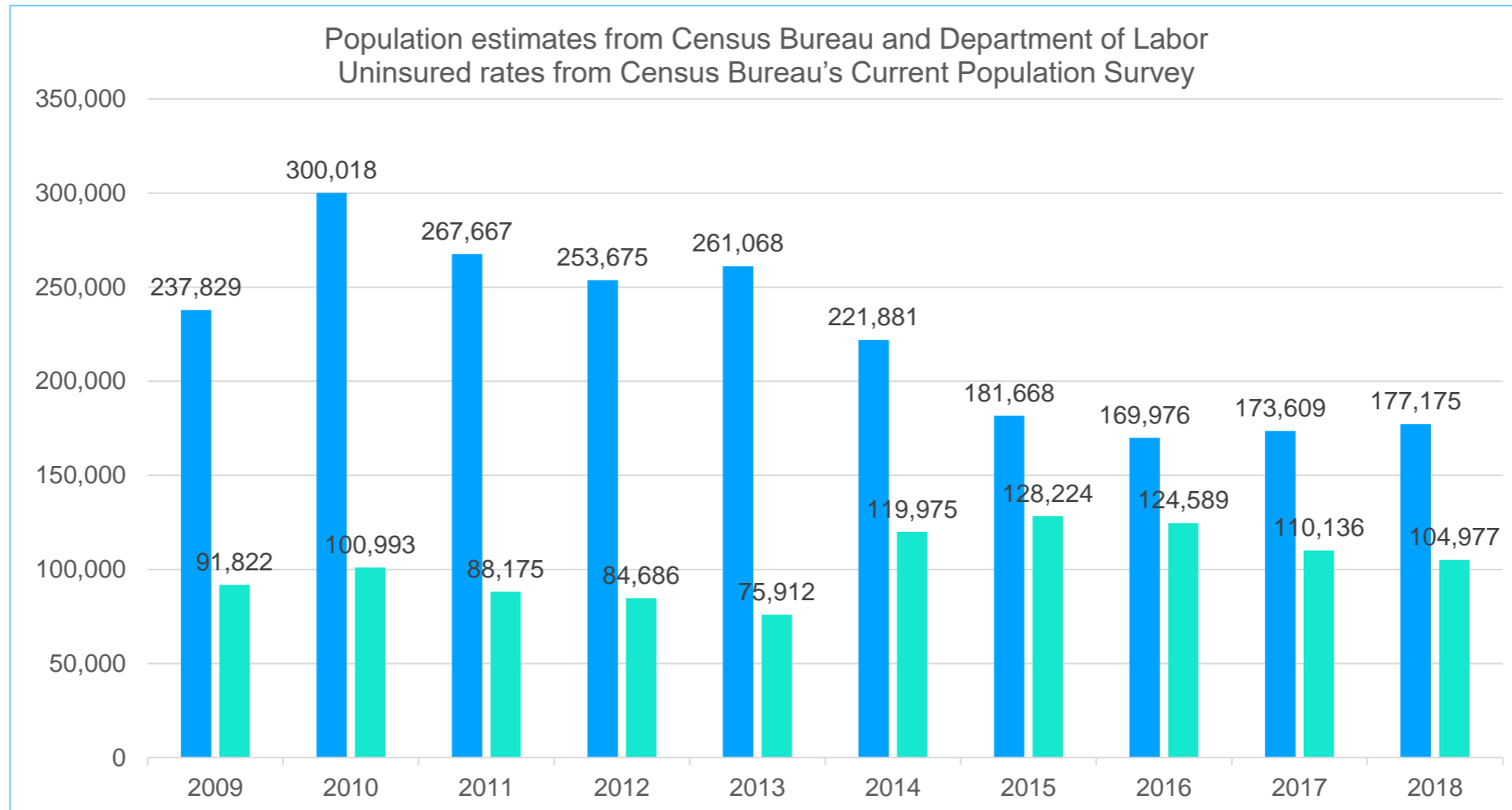
# US Adults without Health Insurance 2008-2018



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# Uninsured Trend in Idaho



Idahoans enrolled in Individual Plans  
Uninsured Population Total



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# How Idahoans are Insured

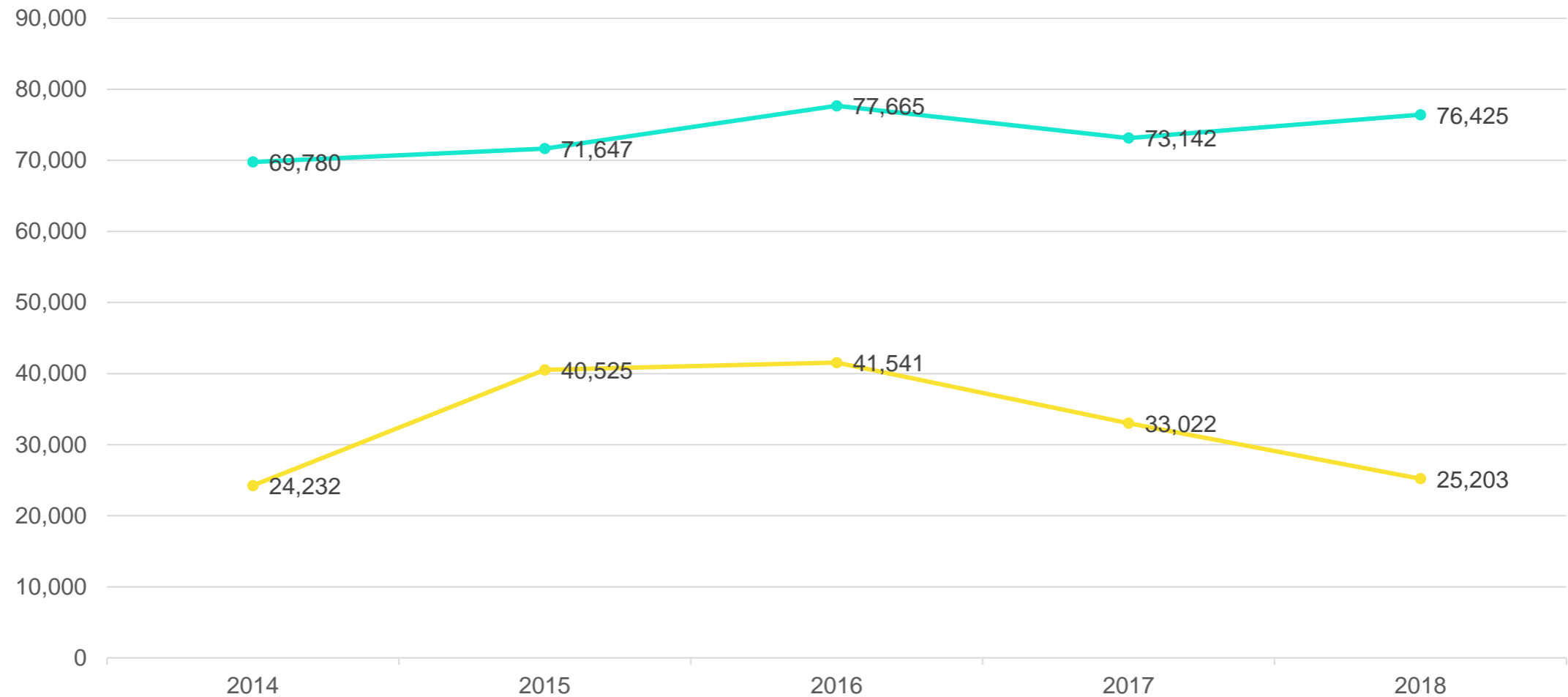
Coverage Type	2014	2015	2016	2017	2018
Individual	119,975	128,224	124,589	110,136	104,977
Small Group	80,270	78,906	75,977	80,382	86,132
Mid-Size Group	35,583	35,237	31,460	34,015	31,773
Large Group	165,179	141,859	130,856	134,386	151,760
Fed. Govt. Plans	41,374	42,024	41,456	42,990	42,562
MEWAs/Trusts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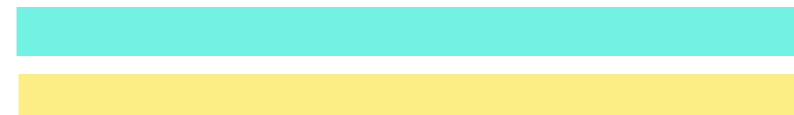


# Subsidized & Unsubsidized

## Individual Health Insurance Market APTC Average Monthly Enrollment



Subsidized  
Unsubsidized



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# Individual Market at a Glance

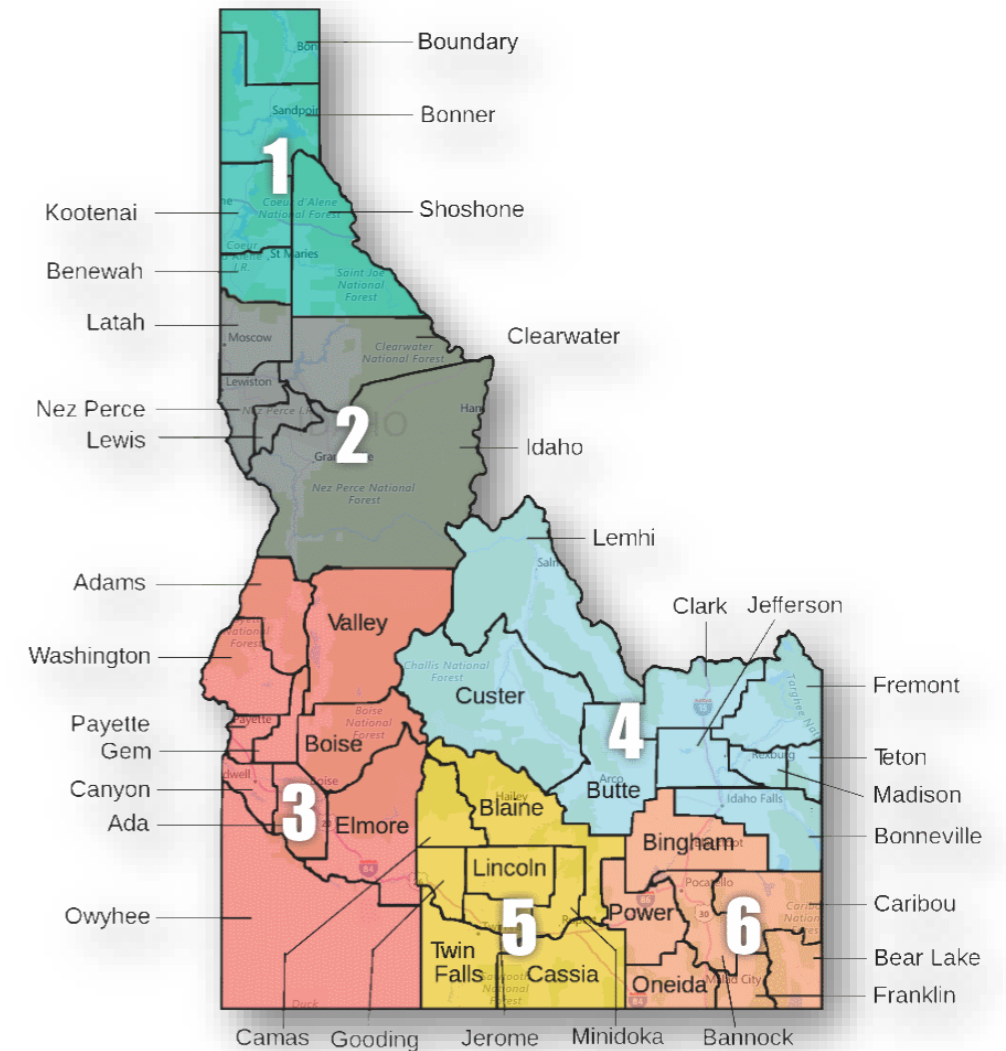
Year	Covered Lives	Claims Paid	Average Monthly Premium Per Insured
2009	91,119	\$140,873,957	\$159.59
2010	102,978	\$164,404,145	\$154.46
2011	98,190	\$191,765,397	\$174.17
2012	94,493	\$173,809,774	\$190.94
2013	85,060	\$167,271,538	\$215.77
2014	119,293	\$306,941,188	\$229.60
2015	128,185	\$535,270,995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

	1	2	3	4	5	6
<b>Blue Cross of Idaho</b>	23	23	31	30	23	23
<b>Mountain Health CO-OP</b>	7	7	7	7	7	7
<b>PacificSource Health Plan</b>	2	2	9	11	9	2
<b>SelectHealth</b>	12	0	12	12	12	12
<b>Grand Total</b>	<b>44</b>	<b>32</b>	<b>59</b>	<b>60</b>	<b>51</b>	<b>44</b>

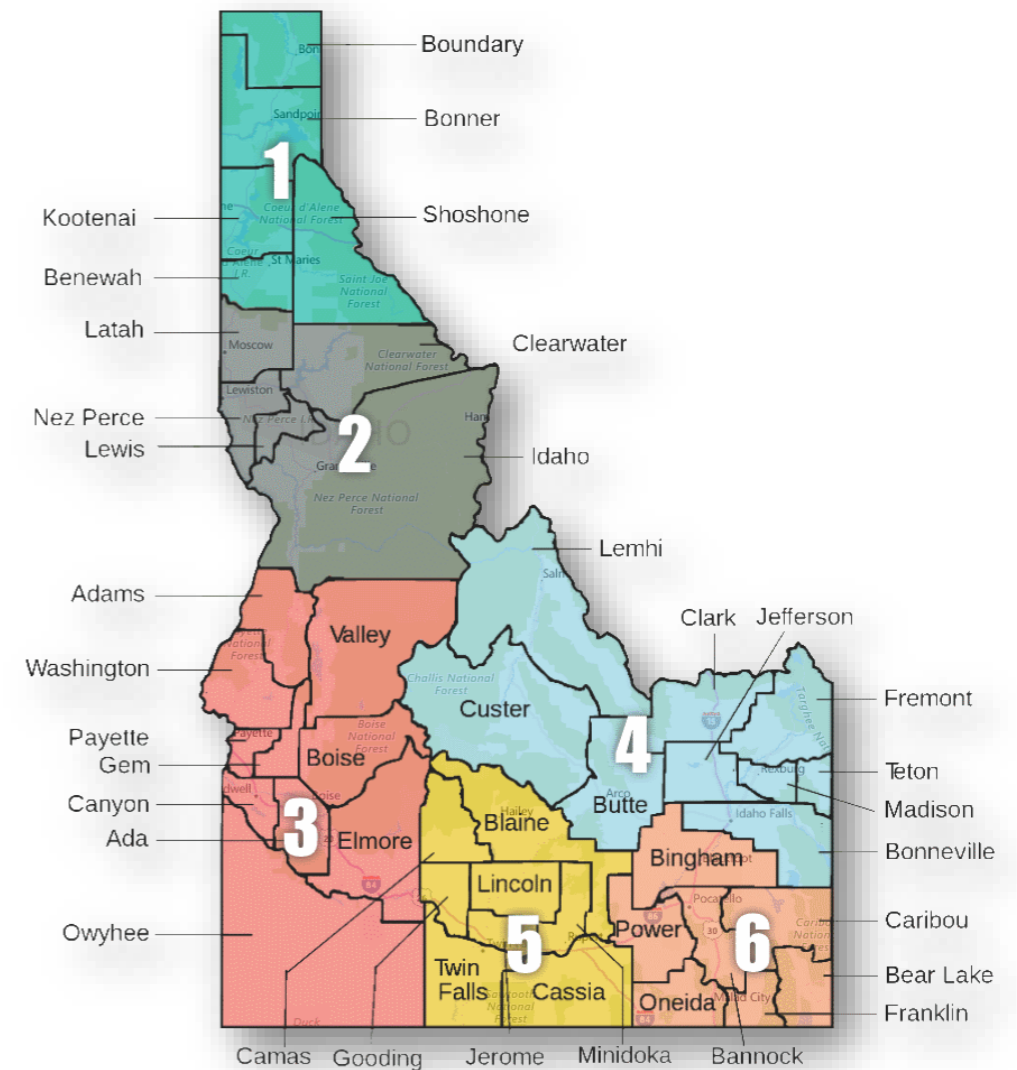


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# Individual Medical Plans by Metal and Area

	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>

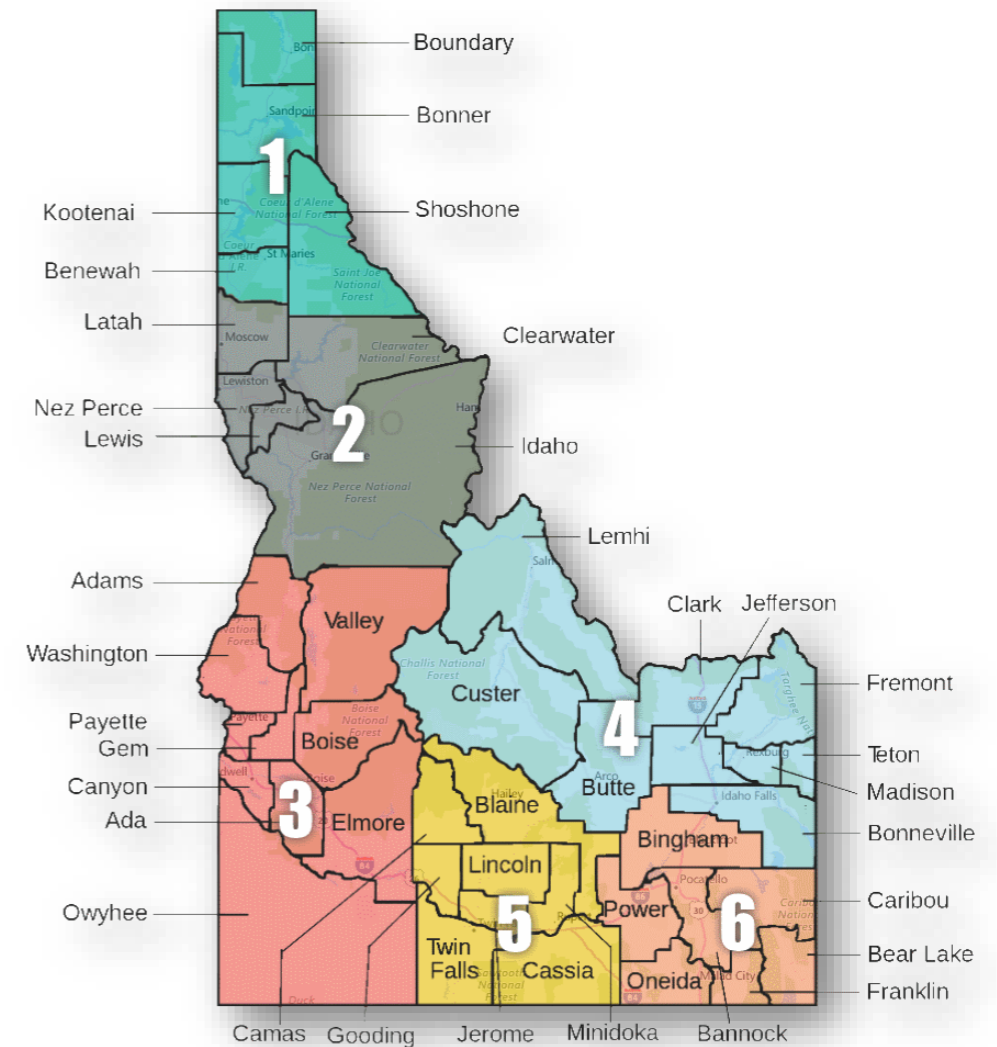


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# Small Group Medical Plans by Metal and Area

	1	2	3	4	5	6
<b>Bronze</b>	18	15	30	29	25	30
<b>Silver</b>	30	24	51	51	44	51
<b>Gold</b>	22	15	35	30	25	30
<b>Platinum</b>	0	0	0	0	0	0
<b>Grand Total</b>	<b>70</b>	<b>54</b>	<b>116</b>	<b>110</b>	<b>94</b>	<b>111</b>



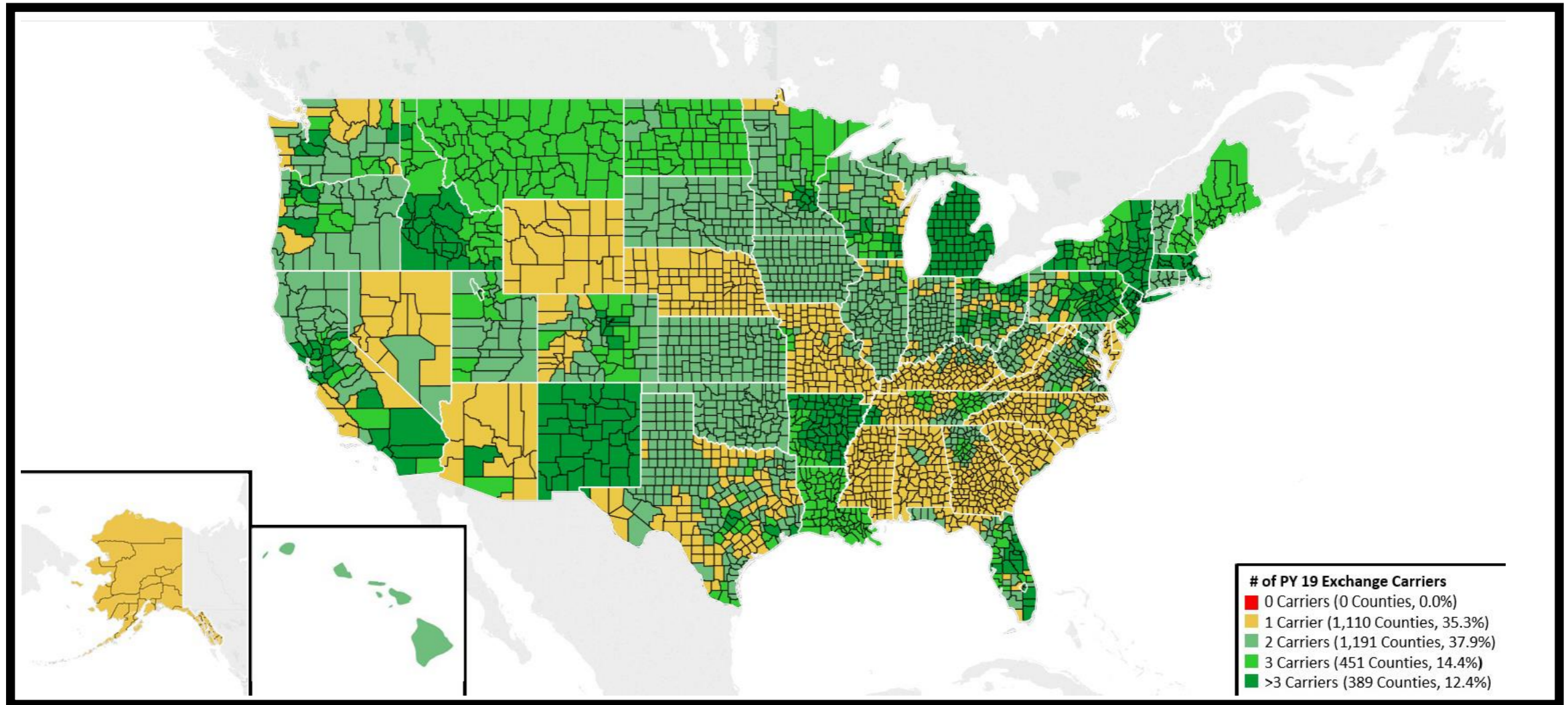
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# County by County Plan Year 2019

## Insurer Participation in Health Insurance Exchanges

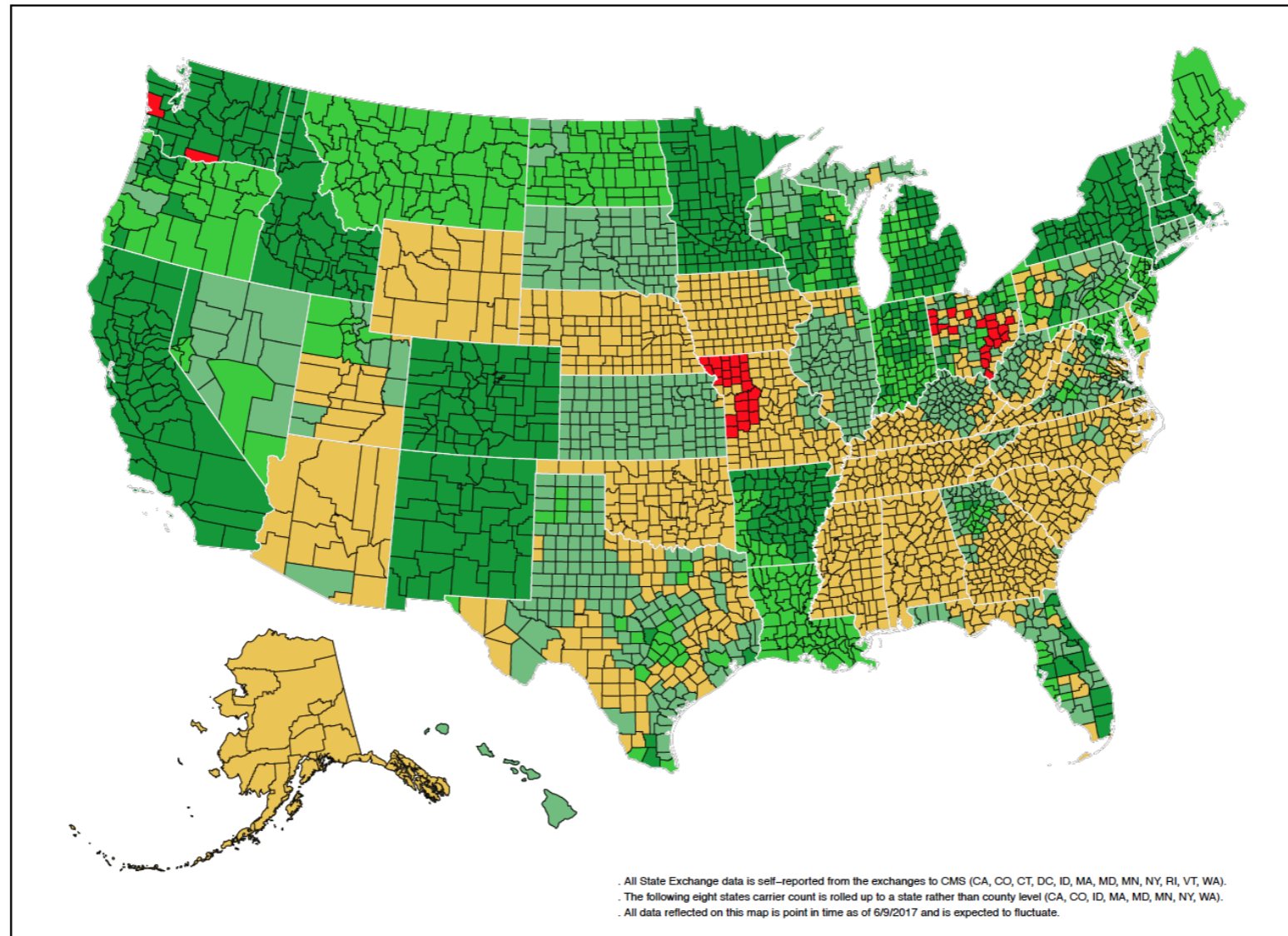


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# County by County Plan Year 2017

## Insurer Participation in Health Insurance Exchanges



Exchange Carrier Number ■ 0 Carriers (47 Counties) ■ 1 Carrier ■ 2 Carriers ■ 3 Carriers ■ > 3 Carriers

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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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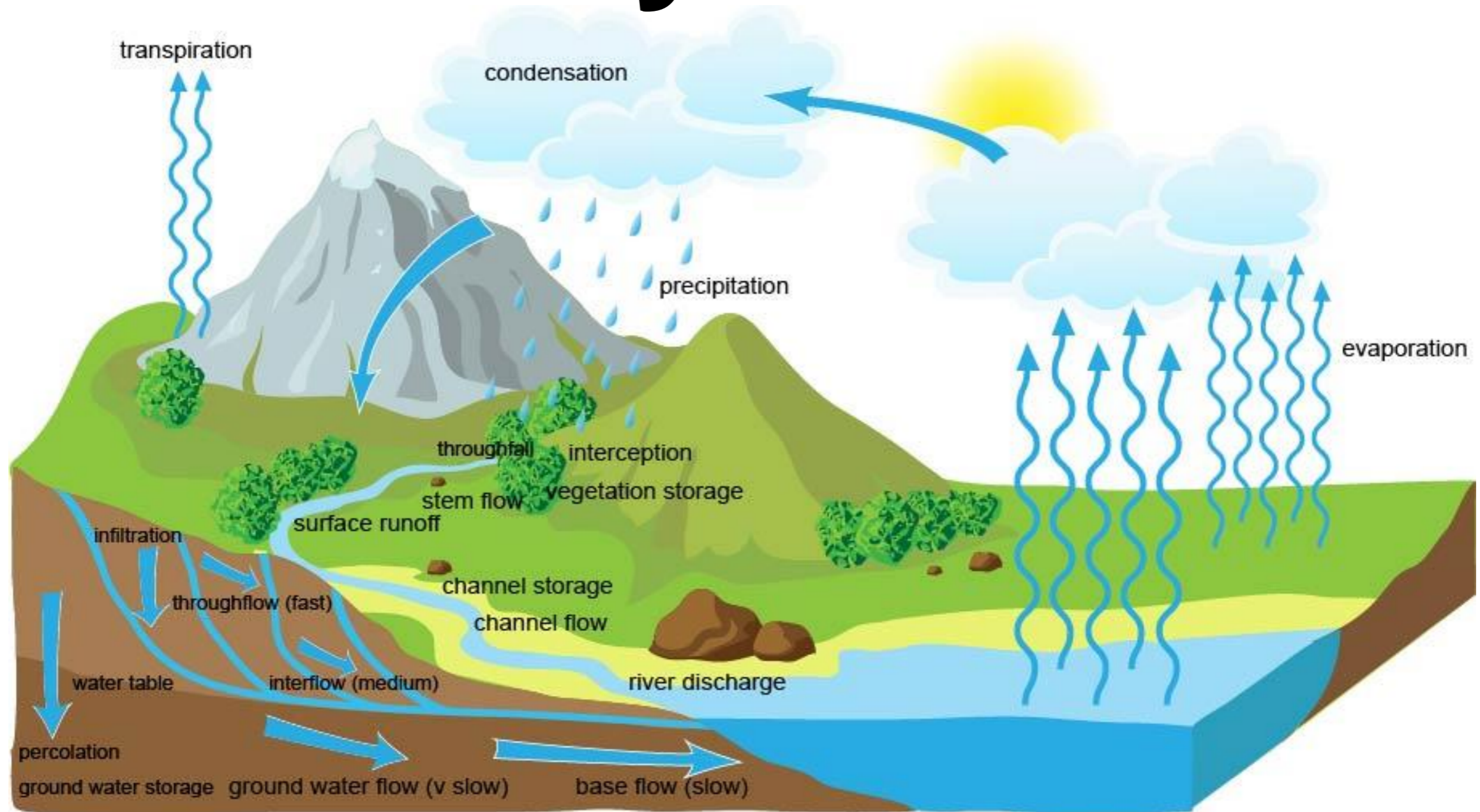
**“Substantially  
enforced”**

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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 Plans



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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

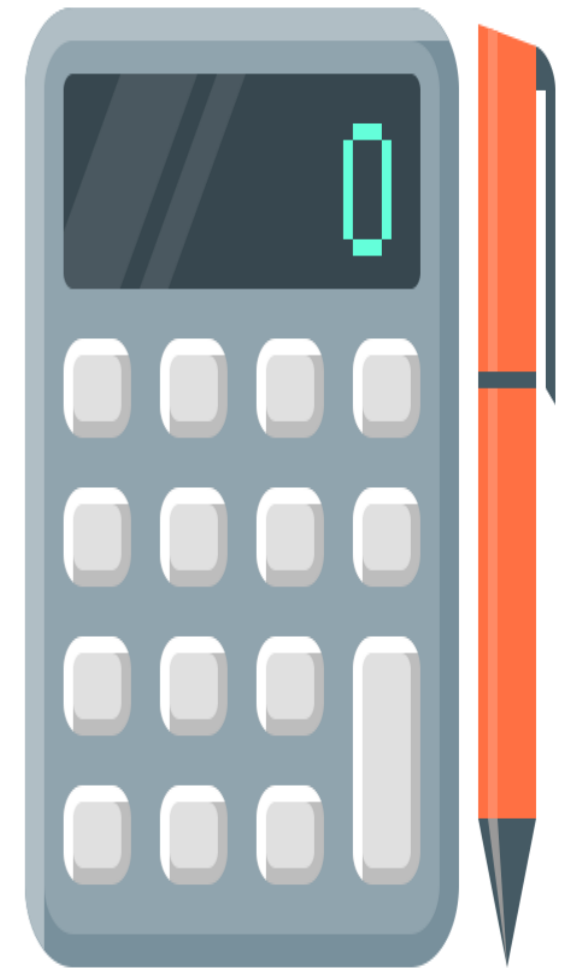
# Enhanced vs Traditional

- 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.

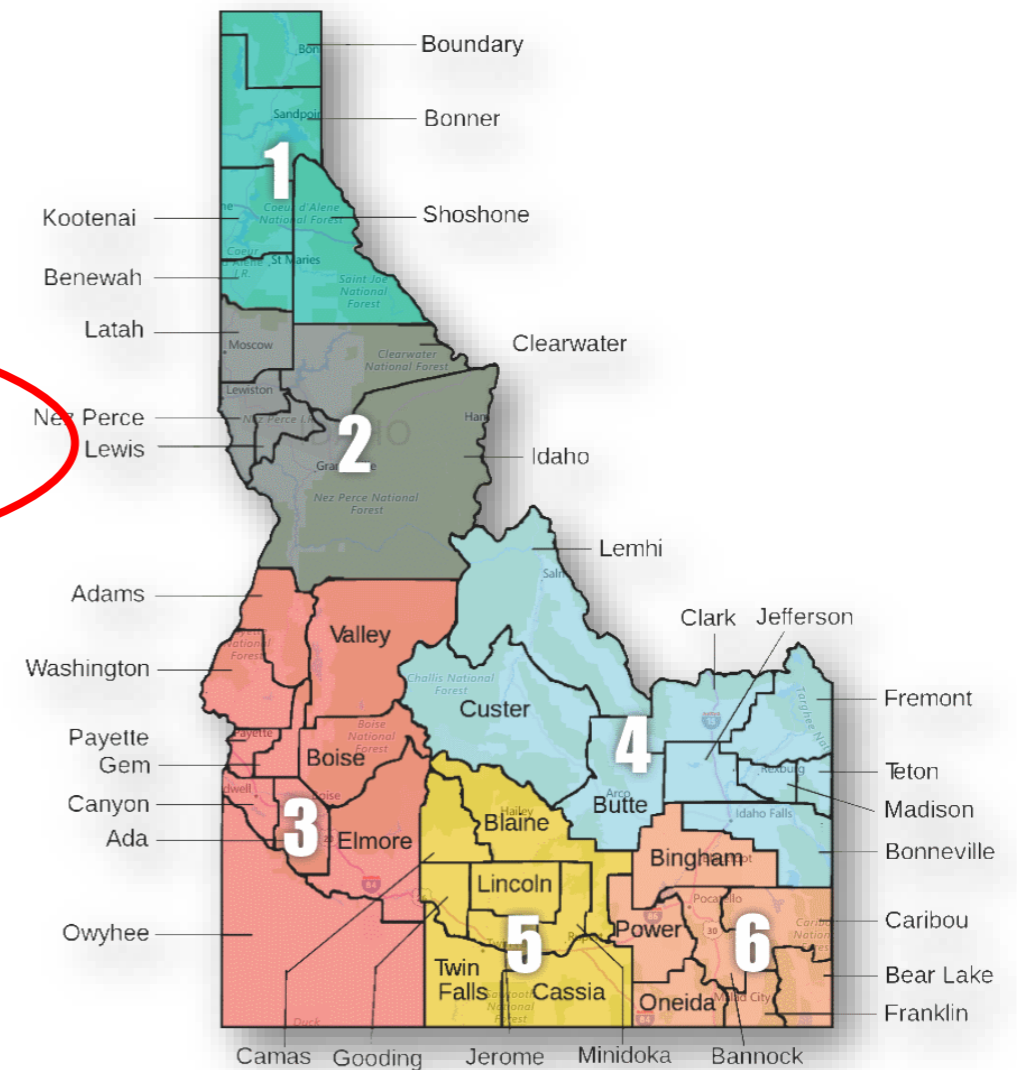


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# Individual Medical Plans by Metal and Area

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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

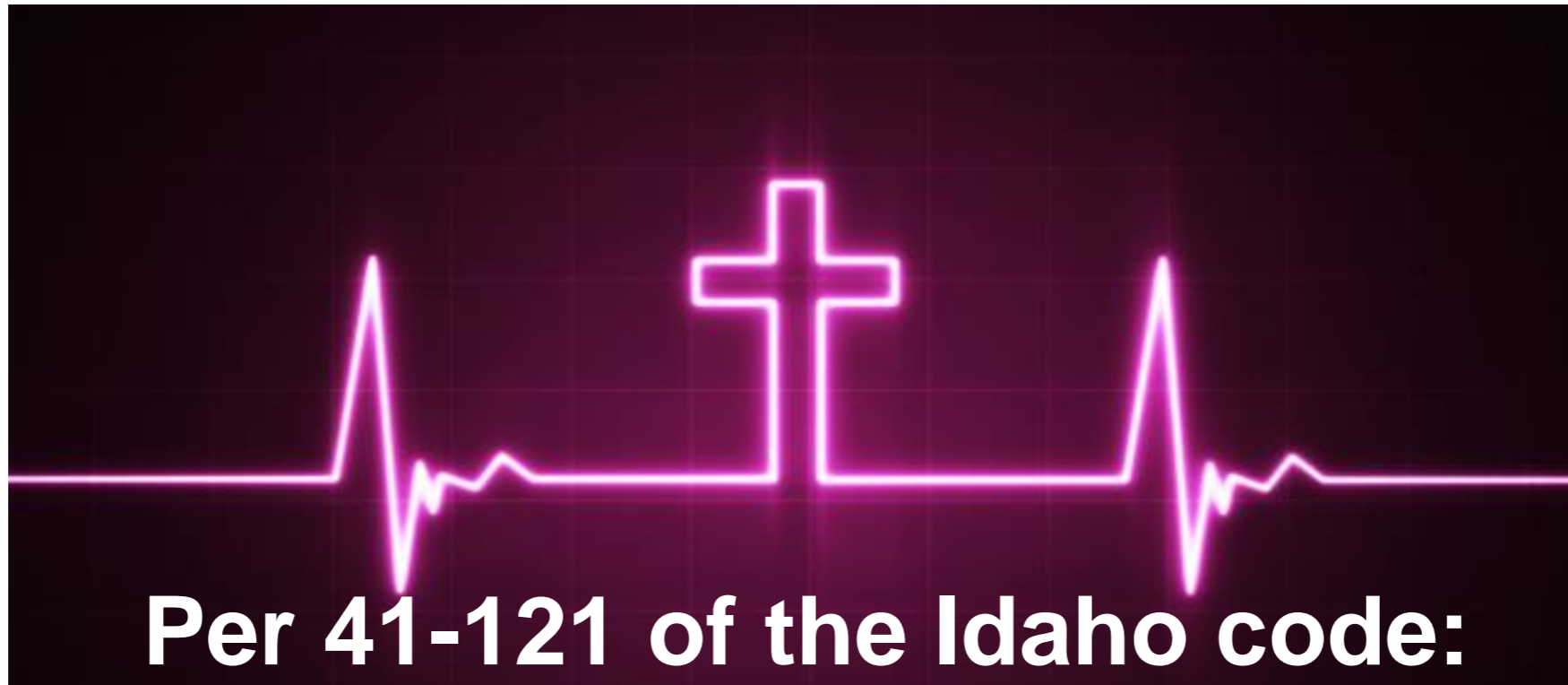
**Silver Plans are between 66% and 72% AV**

● 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

[REPUBLISH 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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# Association Health Plans

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

- Long standing insurance options, for small employers, self-employed, and individuals
- Business and trade associations often offer AHP as a membership benefit
- Unfortunate number of insolvencies and bad behavior, sometimes leaving members with unpaid claims

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# Overview of AHP Regulations

- Generally, states regulate health insurance plans unless federal regulations preempt - ERISA
  - AHPs were exempted from federal ERISA preemptions, subject to both state and federal as a MEWA
  - States established AHP/MEWA specific regulations due to insolvencies and poor practices
- Federal “look-through” policy (2011-present) subjected many associations to ACA individual or small market reforms

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# Autism



Dean L. Cameron, Director  
Idaho Department of Insurance  
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# Hearing Aids



Dean L. Cameron, Director  
Idaho Department of Insurance  
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# Thank you!

Dean L. Cameron, Director  
Idaho Department of Insurance

[www.DOI.Idaho.gov](http://www.DOI.Idaho.gov)

Phone: 208-334-4250

