

Maine Bureau of Insurance

Clear Choice Response to January 30, 2025 Comments Regarding 2026 Plan Designs

All comments are posted on the Bureau (BOI) website. An updated final plan design chart is also posted.

Comments were received from Consumers for Affordable Healthcare (CAHC), American Heart Association-AHA and Leukemia and Lymphoma Society-LLS referred to as the CAHC comments below and Maine Office of Affordable Health Care and Health Plan Benefits. Comments were received from carriers: Anthem, Community Health Options (CHO), Harvard (Point32Health) and UnitedHealthcare (UHC).

1. Anthem suggested a uniform filing date instead of the early date for form filings. They referenced the requirement in Rule 940 for rates and forms to be filed together. This will be addressed in the upcoming Bulletin.
2. Silver and Gold Plan Actuarial Values (AV):
 - a. Harvard suggested adjustments to bring the AV value of the Silver plans down to allow carrier specific adjustments that affect the AV calculation to keep it within the requirements. Those adjustments have been evaluated and the design changed by increasing maximum out-of-pocket and deductibles. AV are lower but not below 71%. BOI will continue to work with carriers on AV questions for plans during filing review.
 - b. UHC made suggestions for the Gold plans to meet AV requirements. The maximum out of pocket was raised to \$6,000 for the Gold \$2,500 plan for AV requirements.
3. Comments about the CSR plan designs included:
 - a. Anthem was opposed to standardization of CSR plans and requested a delay until 2027 to study it further. They provided specific suggestions that the Silver \$3,500 and \$4,400 87% plans should have different deductibles. Also, that coinsurance is different for the different CSR plans and recommending rounding to provide simplicity for the consumer. These adjustments have been made.
 - b. CAHC requested that the BOI also standardized the copays for the CSR variants. The BOI is attempting to strike a balance between too much standardization and reducing confusion for consumers. We will explore the copay standardization for future years.
 - c. CHO provided specific adjustments to the CSR standard plans.
 - d. Harvard requested adjustments to the 73% CSR to meet AV requirements. Those changes have been made.
4. Concern about the tiering coverage in plans.
 - a. CAHC and UHC suggested if tiered networks continue to be permitted in clear choice plans, we strongly urge the Bureau to ensure that the clear choice cost-sharing amounts, as specified in the benefit designs established by the Bureau. Cost-share differences are allowed in Rule 851 for tiered plans but this does not extends to all cost-sharing. We are restricting the maximum out of pocket to only

what is defined in the Clear Choice plan with no tiering differences this year. We will look to more restrictions for other cost-share in future years.

- b. The Office of Affordable Health Care suggested requiring cost-sharing structures apply to the lowest-level tier of each network and limit carriers' ability to introduce plans of the same design with minimal differences in network or other factors.
5. Reduce Out-of-Pocket Costs
 - a. CAHC encourages more copay over coinsurance cost-sharing and pre-deductible benefits. BOI is balancing AV restrictions and premium impact. There are a variety of plan coverage options including CSR with reduced cost-share for consumers to select.
6. Maximize Value and Strengthen Consumer Purchasing Power
 - a. CAHC stressed that Silver plans have the maximum amount of coverage permitted. We are restricted by AV limits when creating the cost-share structure and need to allow a certain amount of room for carrier specific AV values.
7. Pediatric Dental Benefits
 - a. CAHC suggests requiring embedding pediatric dental in all plans to ensure affordable coverage for families. BOI will continue to allow plans to either offer separate pediatric dental or embed the benefit.
8. Number of Plan Designs:
 - a. CAHC suggested further reducing the number of plans. BOI eliminated the highest deductible Bronze plan as there are lower premium plans offered by carriers and it is no longer needed as a low cost option.
9. Naming Conventions:
 - a. Anthem suggested allowing acceptable abbreviations for Off Market plans such as "Off MP." BOI finds this approach acceptable.
 - b. CAHC, Office for Affordable Health Care and CHO suggested that the CSR names should reflect the deductible for the CSR variant to reduce confusion. BOI adopts this approach.