



## Small Group Clear Choice Plans

### Questions from Briefing on December 20, 2021

- What is timeline for the independent merged market study? What is the date for deciding on a merged market?
- Should the markets merge, it appears that each carrier would only have three alternate plans that can be sold across both the newly combined individual and small group market. What is the Bureau's view on the matter of guaranteed issue for present day alternate plans (i.e., not a Clear Choice plan design)?
- The \$1500 Gold small group plan is very similar to the 2022 Individual Clear Choice gold plan. Should the markets merge, will those plans be consolidated? If so, which would port to the other, and how would that be conveyed to affected consumers?
- Will there still be the opportunity for small groups to purchase on-exchange SHOP plans? (In 2023 it is expected that CoverME.gov will manage these credits)
- Inpatient physician, rehabilitation, and surgical services benefits are all grouped together. There is a wide range of cost sharing options across the metal levels including a \$35 co-pay with no deductible for in-patient physician, surgical services and rehabilitative services in the Silver \$3,000/\$8,500 30%. This would make in-patient services less expensive than out-patient on this plan. Is this an accurate interpretation of this benefit? Some additional clarifying questions in this regard include the following:
  - Would these grouped services include physical therapy, occupational therapy, speech therapy, chiropractic, osteopathic manipulation, cardiac rehabilitation and pulmonary rehabilitation rendered inpatient?
  - Would this \$35 co-pay be per day or per admission?
  - Would the co-pay be charged for each in-patient service rendered?
- For laboratory outpatient and professional services – Would this include professional consults?
- For outpatient surgery and physician/surgical services – Would this include Anesthesia services?