April 24, 2020

Jessica K. Altman
Chair, NAIC Health Insurance and Managed Care (B) Committee
Pennsylvania Insurance Department
Harrisburg, PA  17120

Re: 2021 Rate Filing Deadlines

Dear Commissioner Altman:

The health and well-being of American families is our highest priority, and America’s Health Insurance Plans (AHIP) and the Blue Cross Blue Shield Association (BCBSA) greatly appreciate the NAIC’s commitment to working with states to uniformly fight the COVID-19 pandemic. Health insurance providers continue to take decisive steps to ensure people have coverage for needed testing, help patients who are infected receive the care and treatment they need and help prevent the spread of the disease.

Addressing COVID-19 will be an ongoing process that will require close coordination at all levels of government. We commend the steps the NAIC has taken to address the crisis and welcome the opportunity to continue to work collaboratively with federal, state, and local policymakers to assure we are doing our part to ensure the health and safety of Americans. We appreciate the willingness and receptiveness of the NAIC in ongoing evaluations of the situation and to consider steps that will be necessary to assure everyone receives the care they need during this critical time.

In the spirit of that partnership, AHIP and BCBSA recommend states assess their current rate filing deadlines and delay them if possible. We recommend states target July 22 to give issuers time to incorporate the most recent data on the impact of COVID-19 when finalizing 2021 rates. More importantly, we encourage states to allow issuers to revise their rate filings utilizing the latest information available prior to states finalizing rates in HIOS.

As policymakers, regulators and industry look to 2021 to determine how COVID-19 will impact rates, the only certainty we have is that time is needed for issuers to gather the most recently available data to support assumptions for next year. There is tremendous uncertainty related to the severity and duration of the COVID-19 outbreak, which will vary by state and region. In addition, we are just now beginning to understand the costs associated with treatment of COVID-19 as well as the after-effects of COVID-19 on its victims. Issuers need as much time as possible to gather credible, up-to-date information on: COVID-19 testing and treatment claims; the potential impacts of delayed or deferred care; state requirements related to coverage, cost-sharing and special enrollment periods; federal regulatory and legislative developments; and potential developments in treatment and vaccines.

Allowing issuers additional time to file rates and to update their rate filings will provide actuaries time to incorporate the most recent COVID-19 data into assumptions for 2021 rates—including most recent COVID-19 claims information, developments in testing and treatment, legislative and regulatory activity,
as well as time to incorporate 2019 risk adjustment information (which will now be published July 15 instead of June 30) without impacting November 1 open enrollment.

To accommodate extended state rate filing deadlines, we have recommended to CMS they adopt the following changes to the timelines for Qualified Health Plan (QHP) certification in the Federally Facilitated Exchange (FFE) and rate review for single risk pool coverage:

- Move the submission deadline for issuers in a state without an effective rate review program from June 3 to July 22.
- Move the target date for CMS to publish proposed rate changes from July 31 to August 17.
- Move the deadline for states to finalize rates in HIOS from August 19 to September 2, providing additional time for states to review and approve rates. (In 2017, CMS similarly extended this deadline to September 20 due to last minute rate adjustments to accommodate cost-sharing reduction (CSR) loading practices.)

AHIP and BCBSA recognize review and approval of proposed rates is a significant undertaking for states. However, during this unique period of a national emergency which is placing significant strain on all aspects of the healthcare system, we believe the ability to use the latest information available is critical to developing appropriate rates based on credible assumptions. In 2017, many states similarly provided flexibility for issuers to make late adjustments to rates to accommodate CSR loading practices. With close coordination between states, issuers, and CMS, we can once again make later rate filing deadlines successful without adversely impacting the start of open enrollment.

We plan to work with individual states on timelines and encourage NAIC to host continued dialogue on 2021 rates so that all stakeholders have the latest data and information. Moving forward, additional flexibility may be necessary this summer and fall to ensure best estimates.

We continue to appreciate the cooperative working relationship between health insurers, regulators and the NAIC as we meet the challenges of the pandemic. We are grateful for regulators’ and the NAIC’s patience and hard work in these difficult times.

Sincerely,

Elizabeth Goodman
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America’s Health Insurance Plans

John Cerisano, Vice President
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Blue Cross Blue Shield Association

cc:
Mike Consedine
Chief Executive Officer
National Association of Insurance Commissioners