

October 22, 2015

Mr. Kevin Counihan Director & Marketplace Chief Executive Officer Center for Consumer Information and Insurance Oversight 7501 Wisconsin Avenue Bethesda, MD 20814

Re: Adult Services & Dental Icon Issue

Mr. Counihan:

We are writing to request the discontinuation of the Center for Consumer Information and Insurance Oversight's (CCIIO) technical requirement stated in the annual Plan Preview User Guide (User Guide) that is related to adult dental benefits offered on the Federally-facilitated Marketplaces (FFM). The dental industry has also requested CCIIO to correct an error identified in plan preview that is related to the identification of these adult policies.

The October 9, 2015 Center for Medicare and Medicaid Services (CMS) FAQ "Dental Plan Preview and Plan Compare Display" informed carriers that adult dental benefit plans offered on the FFM must include services in three categories (Routine, Basic and Major), as was identified in the User Guide. If dental plans do not include these three categories of service, they will not be designated as providing adult benefits. This policy was not in effect until after the conclusion of this year's Plan Preview open window.

The User Guide is a technical document with instructions for carriers on accessing and providing information within the plan preview system of the FFM. The User Guide is not a policy setting instrument and does not allow for public comment. Furthermore, that document was not likely to have been read at the time it was first released by the issuer staff in best position to respond to it, or raise it as a policy issue with CCIIO.

Recommendation: Remove the adult dental benefit policy from the User Guide. If CMS wants to prescribe adult dental benefit, it should be discussed within proposed FFM regulations and open to comments from stakeholders.

Dental carriers impacted by this policy report that the more basic adult plan, which includes services designated as Routine and Basic, is the most popular policy with consumers in some states. As of April 2014, over one million Americans had enrolled in stand-alone dental plans (SADPs) on the FFM. Of these, one in three was an adult age 18-34. These "young invincibles" want to have their Routine and Basic services covered, but may otherwise have good oral health habits and do not want to pay for more expensive major services they may not require. In addition, the states' Departments of Insurance review all policies and certify that they meet strict requirements. Because the dental individual market is small

and needs innovation to grow, we encourage CMS to allow flexibility for consumers to purchase products which best meet their dental needs with an appropriate price structure.

The Adult dental benefit is not an essential health benefit and is a highly requested voluntary product. The majority of consumers on the FFM are adults receiving subsidies. They will be scrutinizing their dental purchases carefully and may opt not to purchase a dental benefit priced to include Major services.

SADPs providing only Routine and Basic benefits offer expansive coverage. For example, one issuer reported in PY 2014 almost 72% of services in the adult population were diagnostic and preventive. Fillings account for an additional 12% of services. Thus, 84% of covered adult services were Routine and Basic services.

Recommendation: For PY 2016, discontinue use of the dental check mark which is mislabeling some dental policies. CCIIO's unilateral action will confuse consumers by mislabeling adult SADPs as child plans. The dental industry is working with CCIIO to improve the consumer dental shopping experience and believes the current User Guide "policy" is a step in the wrong direction. SADPs were approved and certified for sale on HealthCare.gov with the expectation these policies would be labeled correctly.

As associations representing dental carriers on the FFM, we ask that CCIIO correct the adult designation icon for SADPs offering adult Routine and Basic coverage or simply remove all identifying dental icons. If it remains, Healthcare.gov will confuse consumers and complicate their shopping experience. If CMS requires a more prescriptive adult benefit design, we ask this policy decision be subject to the administrative rulemaking process.

Sincerely,

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