January 4, 2013

The Honorable John Berry
Office of Personnel Management
1900 East Street, North West
Washington, DC 20415
RE: RIN 3206-AM47
Submitted via www.regulations.gov

Dear Director Berry,

The National Association of Dental Plans (NADP) appreciates the opportunity to provide comments on the proposed rule regarding RIN 3206-AM47 “Establishment of the Multi-State Plan Program” (Proposed Rule) released by the Office of Personnel Management on December 5, 2012.

NADP recommends dental carriers be allowed to apply as Multi-State Plan (MSP) issuers to meet the pediatric oral benefit described in the Affordable Care Act (ACA) Section 1302 (b)(1)(J) and for OPM to require medical MSP issuers to offer a medical policy without pediatric dental services where a separate dental policy is offered on the Exchange or as a Multi-State Dental Plan (MSDP).

In recognition of the fact that 99% of dental policies are written separately from consumers’ medical coverage today, ACA Section 1311(d)(2)(B)(ii) allows for stand-alone dental carriers to participate and offer dental coverage on an Exchange. One of the main goals of the ACA was to allow for consumers to maintain their health coverage if they like what the currently have, and by allowing separate dental policies, this goal is extended to dental coverage. Allowing dental carriers to apply and offer separate MSDPs will align offerings consistently on Exchanges, preserve a level playing field and promote consumer choice.

PRESERVE CONSISTENT OFFERINGS ON EXCHANGES & ENSURE CONSUMER CHOICE
Throughout the Proposed Rule, OPM rightly emphasizes its goal to ensure a level playing field such that neither MSPs nor plans offered by non-MSP Program issuers are advantaged or disadvantaged on Exchange Marketplaces.
ACA requires QHPs on Exchanges to include “pediatric oral services” in their medical policies to meet the required essential health benefit (EHB) package inside Exchanges, unless a stand-alone dental offering is available in the Exchange (ACA Section 1302 (b)(4)(F)). As the Proposed Rule on the MSP Program stands now, MSP issuers will not be allowed to offer benefits without pediatric dental and rely on stand-alone dental carriers in the same fashion.

Offering separate MSDPs in each state Exchange would eliminate the administrative confusion of MSPs and QHPs knowing whether a separate dental policy is offered in a state Exchange. HHS has conducted a survey of dental plans to learn that between 3 and 11 carriers are actively considering offering separate dental policies within state Exchanges. Based on this survey it is our understanding the Federally-facilitated Exchanges (FFE) will notify medical carriers that they can offer policies without pediatric dental services in a FFE. A similar notice would be yet another tool OPM could provide to QHPs so they have advance notice whether their policies must include pediatric oral services.

**ASSURE CONSUMER CHOICE**

By allowing separate MSDPs to be available in state Exchanges, OPM increases administrative simplicity for the states as well as widening consumer choice that better reflects today’s various options for dental policies in the private market. A scenario that demonstrates the potential restriction of consumer choice if MSDPs are not available on Exchanges:

If a family has children residing in multiple states (e.g. students living out of state or children residing with non-custodial parents, etc.) and that family either (1) prefers to purchase dental from a separate dental policy, or (2) must purchase dental from a QHP as are there are no separate dental policies on the Exchange, it could result in family members with multiple dental policies and various family dentists.

Disconnecting family coverage is not consumer-friendly and would cause an administrative burden not only on the states, but directly on the families. Without the option to purchase separate dental policies, families may be faced with a decision to purchase duplicative pediatric dental benefits or drop the current separate coverage in exchange for a medical plan with a network that does not include their current dentist.

Allowing dental carriers to apply for and offer separate MSDPs would allow households with members in multiple states to remain covered by the same dental policy or company. By requiring MSPs to offer at least one benefit plan without pediatric dental services when a stand-alone dental plan or MSDP is available on the Exchange, OPM would also ensure that families would not be forced to purchase duplicative pediatric dental benefits.

**RECOMMENDATIONS**

1. Allow dental carriers to apply as Multi-State Plan issuers to meet the pediatric oral benefit described in ACA Section 1302 (b)(1)(J)
2. Align ACA statute regarding essential health benefits (EHB) for the MSP Program by providing if a separate dental policy is offered on the Exchange or as a Multi-State Dental Plan, a MSP will not fail to meet the EHB package solely because the plan does not offer pediatric oral services.
3. Require MSP issuers to offer a plan without pediatric dental services where a separate dental policy is offered on the Exchange or as a Multi-State Dental Plan.

Again, NADP is appreciative of the opportunity to provide comments on OPM’s Proposed Rule and looks forward to future discussions on the critical issues we addressed above. Questions regarding our comments should be directed to Kris Hathaway, Director of Government Relations at khathaway@nadp.org or 972 458-6998 x111. Again, thank you for your consideration.

Sincerely,

Evelyn F. Ireland, CAE  
Executive Director  
National Association of Dental Plans

**NADP DESCRIPTION**

NADP is the largest non-profit trade association focused exclusively on the dental benefits industry, i.e. dental PPOs, dental HMOs, discount dental plans and dental indemnity products. NADP’s members provide dental benefits to over 92 percent of the 176 million Americans with dental benefits. Our members include the entire spectrum of dental carriers: companies that provide both medical and dental coverage, companies that provide only dental coverage, major national carriers, regional, and single state companies, as well as companies organized as non-profit plans.