



July 28, 2014

The Honorable Marilyn Tavenner
Centers for Medicare & Medicaid Services
Department of Health and Human Services
200 Independence Avenue SW
Washington, DC 20201
Submitted via regulations.gov

RE: **CMS-9941-P**, Annual Eligibility Redeterminations for Exchange Participation and Insurance Affordability Programs; Health Insurance Issuer Standards Under the ACA, Including Standards Related to Exchanges

Dear Administrator Tavenner;

The National Association of Dental Plans (NADP) appreciates the opportunity to provide comments on the proposed rule related to renewals, redeterminations and discontinuances of Marketplace enrollees. As tax subsidies are currently rarely applied to dental policies, NADP will focus comments specific to issues and questions impacting dental carriers related to renewals. And while the requirements may not be directly applicable to dental policies due to their HIPAA-excepted benefits status and exemption from guaranteed renewability, NADP is aware that reenrollment for dental policies will likely follow the same path as renewals for Qualified Health Plans (QHPs), at least during this first year of reenrollment from 2014 to 2015.

While not in the proposed rule, there are scenarios which CMS has not addressed but should be considering:

- If a consumer is currently enrolled in a QHP that embeds pediatric dental benefits and that policy is no longer offered, will CMS contemplate whether the new QHP includes dental coverage?
- If a consumer wishes to reenroll and maintain their QHP but change their stand-alone dental plan (SADP), is that an option? And from the opposite perspective, what are the steps when an enrollee wants to change their QHP but not their SADP?
- While the proposed rule focuses on QHP auto-renewals, reenrollment in dental plans may not follow the same decision logic regarding metal levels as there are only two metal levels for dental plans.

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The proposed rule also discusses the required notices that were released in draft guidance. NADP commented on those notices, and has attached an updated version.

NADP is thankful of the opportunity to provide comments on the proposed rules regulating renewals for 2014 to 2015 Exchange enrollees. Please contact me at khathaway@nadp.org or 972 458-6998 x111. Again, thank you for your consideration.

Sincerely,



Kris Hathaway
Director of Government Relations

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 approximately 90 percent of the 187 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.

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July 28, 2014

Ms. Mandy Cohen, Acting Director
Center for Consumer Information & Insurance Oversight
Department of Health and Human Services
200 Independence Ave. SW
Washington, DC 20201
Sent via Email

Re: Comments to 6/26/14 CCIIO Memo on Draft Standard Notices When Discontinuing or Renewing a Product in the Small Group or individual Market

Dear Director Cohen,

The National Association of Dental Plans (NADP) is providing comments on the draft notices released by CCIIO on June 26, 2014 (Memo). The Memo accurately footnotes that the draft notices are not applicable to stand-alone dental plans (SADPs); however, our dental plan members have been encouraged to utilize them in communications to enrollees. While dental carriers will consider using the notices, there are several sections that would need to be changed to use them verbatim.

- The notices discuss eligibility and encourage enrollees to review the applicability of tax credits. Until the IRS corrects the formula to better align tax credits between medical and dental policies if purchased separately, it is rare the Advanced Premium Tax Credits (APTC) will be applied to the separate dental premium. To make the APTC a focus of a dental renewal notice will only confuse the consumer.
- The notices state that enrollees can choose a plan outside the state Marketplace; however, for standalone dental coverage, there is variation between “Exchange Certified” dental plans and non-EHB dental plans – both of which are available in most states. In addition, the availability of these plans will depend on how the state is interpreting “reasonable assurance.”
- The QHP notices should include a reminder that if an individual or family is currently enrolled in a QHP with embedded pediatric or family dental benefits and they intend to select a new plan, they should be made aware that their new QHP may not include dental, but may be purchased separately.

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While not specific to the Notices, the process is unclear regarding a situation when an enrollee may want to change their SADP but not their QHP. Currently, the FFM only allows the purchase of a SADP after a QHP is selected and therefore direct enrollment of dental on a Federally-facilitated Exchange is not an option. While this scenario may be infrequent, it should be discussed. We will also include this recommendation within our comments on the proposed rule.

As Exchanges continue to develop and allow greater flexibility in the purchase of SADPs, many of these issues will be resolved; however, CCIIO must elevate the availability of purchasing dental plans as a priority. As we've seen in Nevada, there is a demand by consumers to have the options of purchasing dental separately with or without a QHP. We look forward to continuing our conversations with CCIIO through 2014 and the upcoming years.

NADP appreciates the opportunity to provide comments on this important issue, and are happy to answer any questions you may have; please contact me directly at khathaway@nadp.org or (972)452-6888 x111.

Sincerely,



Kris Hathaway
Director of Government Relations

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