



February 26, 2014

Kevin J. Counihan
Chief Executive Officer
Access Health CT
280 Trumbull Street, 15th Floor
Hartford, CT 06103

Dear Mr. Counihan:

On behalf of NADP's member dental plans (attached), I am contacting you for information on several issues relating to stand-alone dental plans and Access Health CT:

1. The timeline for offering a competitive shopping experience for stand-alone dental plans on the Connecticut Marketplace;
2. The basis for assessing stand-alone dental plans for Access Health CT operations in 2014; and
3. Whether stand-alone dental plans are part of the "exchange in a box" that Access Health CT is promoting to other states.

1. Timeline for the Offer of Stand-Alone Dental Plans: In the January 2013 Report to the Governor and General Assembly, you reported Access Health CT's decision on the offer of pediatric dental benefits as follows:

"Based on their¹ analysis of how best to offer ACA-compliant dental benefits, the Advisory Committees recommended to the Board that the Exchange offer stand-alone dental benefits and require carriers to separately price the pediatric dental benefit.

The Board approved the Advisory Committees' recommendation in November 2012."

Despite this decision, on April 6, 2013, dental plans were informed that, "Due to a systems issue, the Exchange will not have the required functionality to allow comparison shopping for standalone dental plans for the first year. Therefore, during

¹ In this sentence, "their" refers to the Health Plan Benefits and Qualifications Advisory Committee, along with the Advisory Committee on Consumer Experience and Outreach of Access Health CT.

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this **transitional year, the 2014 plan year only**, (*emphasis added*) standalone dental plans may be offered on the Exchange through a link from the Access Health CT website to the Issuer's website for information on Plans and Enrollment." An Exchange staff presentation made during the March 2013 Board of Director's Meeting includes a bullet stating routine pediatric dental would be embedded within a QHP and the various dental benefit plan design options, including high, low, wellness and adult dental benefits. Our members attended all the board meetings up until the April memo and do not recall a discussion and decision to require embedded dental benefits other than the adoption of the benefit designs. Thus, the April memo came as a surprise to the dental benefits industry as Exchange staff had indicated up until this point that there were no issues with offering dental separately. Another reason the announcement came as a surprise to the industry was the IT vendor Connecticut contracted with had already built dental into other state Exchange offerings.

In the April communication, Access Health CT indicated for dental plans to have a link they "must" meet four criteria, i.e.

- (i) be licensed and in good standing with the Connecticut Insurance Department ("CID");
- (ii) offer benefit plans and rates that have been approved by the CID; and,
- (iii) have filed a Non-Binding Letter of Intent to offer a standalone Dental Plan with the Exchange in response to the Initial QHP Solicitation dated December 13, 2012; and,
- (iv) have agreed to offer the three required plan design options (high, standard and wellness options) for standalone dental benefits as part of the product portfolio offered through the company.

Access Health CT had earlier announced four stand-alone dental plans had filed non-binding letters of intent to offer a stand-alone dental policy: Delta Dental Plan of CT, Guardian, MetLife and Renaissance. None of these carriers pursued a website link on the Individual Exchange as linking to an offer of coverage off the Exchange is not equivalent to consumers shopping and enrolling in stand-alone dental coverage through the exchange.

The April 6 memo went on to indicate, "In future plan years, the Exchange expects to offer a full shopping experience and enrollment for standalone dental plans." There has been no further formal communication of Connecticut's plans to develop the "full shopping experience" with the four carriers that filed the 2013 non-binding letter of intent to offer, all of whom are NADP members. For this shopping experience and the ability of a QHP to offer a plan without pediatric dental, it is necessary to meet the provisions of the Affordable Care Act which requires:

- Marketplaces to allow a QHP without pediatric dental coverage when a separate dental policy meeting EHB requirements is offered (42 U.S.C. sec. 18022(b)(4)(F); and
- Marketplaces to allow stand-alone dental plans to offer pediatric dental EHB products either independently from a QHP or in conjunction with a QHP issuer, but cannot limit participation of stand-alone dental plans to only one of those options (77 Fed Reg. 18411, March 27, 2012).

Access Health CT staff has indicated informally to NADP that Connecticut is working on the capacity to offer stand-alone dental plans on the exchange; however, carriers have not received any updates on the progress of separate dental policy offerings and time is short to develop new dental products and file



those products for offering coverage in your state. Since the 2013 letters of intent were solicited in December of the prior year and we are nearing the end of February, dental carriers are concerned whether the promised 2015 stand-alone dental shopping experience will materialize.

QUESTIONS: What can dental plans expect in 2015 with regard to a dental plan shopping experience on Access Health CT?

1. Will dental plans be offered directly on the Access Health CT?
2. Are plans required to file any application or letter of intent to offer on Access Health CT?
3. Are QHPs required to embed pediatric dental as they did in 2013 or separately price and offer as Access Health CT decided in 2012 and the legal basis for that requirement?

2. Basis for Assessing Dental Only Carriers for Operations of Access Health CT: Several of NADP's members, both those that filed non-binding letters of intent and those that did not, have received assessment invoices for the operation of Access Health CT. To clarify, the assessment is based on only those products capable of offering policies on the Exchange, and therefore stand-alone dental policies as well as all other non-medical products listed within the Schedule T premiums would therefore not be included. Contributing to the operations of Access Health CT was not anticipated by any of these carriers, and therefore the potential for an assessment was not considered in development of 2014 CT rates.

Dental carriers did not anticipate being assessed for the operation of the Access Health CT as they are not capable of offering plans "on" Access Health CT. While there is a link to a medical plan's offering of stand-alone dental, the set of criteria for offering stand-alone dental plans on your exchange as set out in the April 6 memo has not been met. As well, Access Health CT has released a [document](#) which lists carriers and plan designs for brokers, and it does not include any information on Anthem's dental offering which is the only carrier that is currently linked from the home page of the website, nor to MetLife, which is linked on a landing page for employers that have completed an application for the SHOP.

While our plans are open to contributing to Access Health CT when there is a shopping experience for their products and there is time to build factors for recovery of the required assessment into their rates, 2014 assessments do not appear to be justified.

QUESTION: What is the basis for assessing stand-alone dental plans for 2014 Access Health CT operations?

3. Exchange in a Box: There have been several news stories recently about Access Health CT's intent to provide its operational structure to other states on a turn-key basis. In a story dated February 20 in "the Connecticut Mirror" titled "[Access Health CT marketing Obamacare exchange in a box,](#)" you are quoted as having discussions with at least five states. We applaud this entrepreneurship as it will assist in minimizing the operating costs that have to be funded through premiums in your state. However, NADP and our member dental plans are concerned that Access Health CT's current approach is not fully

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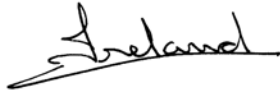
compliant with federal exchange rules requiring the offer of stand-alone dental plans through state exchanges, i.e. § 155.1065(a) which reads, "General requirements. The Exchange must allow the offering of a limited scope dental benefits plan through the Exchange."

QUESTION: Will the "exchange in a box" that Access Health CT is discussing with other states include the offer of stand-alone dental plans?

We look forward to your response. Dental plans are required to file a response to Access Health CT's assessment on or before this Friday, February 28 and cannot appropriately do so without your response.

Please contact me at eireland@nadp.org or 972.458.6998x101 if you or your staff has questions regarding these issues.

Sincerely,



Evelyn F. Ireland, CAE
Executive Director

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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Last Updated: February 2014



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Aetna Dental

Altus Dental Ins Co

Delta Dental of RI

American Dental Professional Svcs

American Dental Partners

American Enterprise Group

AmeriPlan Corporation

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First Ameritas Life Ins Corp.

Argus Dental Plan, Inc.

Assurant Employee Benefits

Dental Health Alliance, LLC

DentCare, Inc. a Kentucky corporation

DentiCare of Alabama, Inc.

DentiCare of Oklahoma, Inc.

DentiCare, Inc. a Florida corporation

First Fortis Life Ins Co

Fortis Benefits DentalCare of New Jersey In

Fortis Benefits DentalCare of WI, Inc.

Fortis Benefits Ins Co

Fortis Dental Benefits

Georgia Dental Plan, Inc.

UDC Life and Health Ins Co

Union Security Life Ins Co of NY

United Dental Care Ins Co

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United Dental Care of Utah, Inc.

United Dental Ins. Company

Avesis Third Party Admin. Inc.

Best Life and Health Ins Co

Blue Cross Blue Shield of AZ

Blue Cross Blue Shield of MA

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Blue Shield of Hawaii

Blue Cross of Florida

Florida Combined Life Ins Co

USAbile Life

Life & Specialty Ventures

Blue Cross Blue Shield of MI

Blue Care Network

Blue Care Network of East MI

Blue Cross Blue Shield of NC

Blue Cross Blue Shield of SC

Blue Shield of CA

CareFirst BlueCross BlueShield

The Dental Network, Inc.

CAREINGTON INTERNATIONAL

The CDI Group

Cigna Dental & Vision Care

Great West Healthcare

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Delta Dental of AZ

Delta Dental of CA, NY, PA & Affiliates

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Denti-Cal

Delta Dental of IA

Delta Dental of MI, OH, IN

Delta Care

Delta Dental of AR

Delta Dental of TN

Renaissance Dental Network

Renaissance Health Inc. Company of NY

Renaissance Life & Health Ins. Company

Delta Dental of MO

Advantica Benefits

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Blue Cross Blue Shield of IL
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Colorado Bankers Life
Dearborn National
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Kaiser Permanente Dental Care Program

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Liberty Dental Plan

Lifemap Assurance

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MetLife

SafeGuard Dental and Vision
SafeGuard Health Plans, Inc
SafeGuard Health Enterprises

Mutual of Omaha

National Guardian Life Ins Co

Nevada Dental Benefits

Nippon Life Ins Co of America

Northeast Delta Dental

Pacific Source Health Plans

Pan American Life

Premera Blue Cross

Blue Cross of WA and AK
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TruAssure

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Blue Cross Blue Shield of WV (Mountain St)
Highmark Blue Cross Blue Shield
United Concordia Life & Health

United Healthcare Specialty Benefits

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National Pacific Dental
Nevada Pacific Dental
Oxford Health Plans
Pacific Union Dental
PacifiCare Dental & Vision
PacificDental Benefits, Inc.
Solstice Benefits
United Health Care Corporation

UPMC Health Plan

WellPoint Dental Svcs

Anthem Blue Cross Blue Shield
Anthem Health & Life Ins Co
Blue Cross Blue Shield of GA
Blue Cross Blue Shield of MO
Blue Cross Blue Shield of WI
Blue Cross of CA
DeCare
Golden West Dental & Vision Plan
Unicare Health Ins Co of the Midwest
Unicare Life and Health Ins Co

Western Dental Svcs

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*Willamette Dental Group
Willamette Dental Management Corporation
Willamette Dental of Idaho, Inc.
Willamette Dental of Washington, Inc.
Willamette Dental Group (Skoutes, Inc.)*

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DentalOne Partners
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Pacific Dental Services
Park Dental
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