BULLETIN 2013-8
MISSISSIPPI INSURANCE DEPARTMENT

NOTIFICATION OF THE UPCOMING
FEDERALLY-FACILITATED MARKETPLACE

SEPTEMBER 23, 2013

I. Purpose

The Patient Protection and Affordable Care Act (Pub Law 111-148) ("PPACA") requires that every State will have an operational health insurance exchange, either established by the state or federal government by January 1, 2014. Mississippi will have a marketplace established and operated by the Federal government, which is called the "Health Insurance Marketplace."

The Health Insurance Marketplace will provide individuals and families an Individual Marketplace where they can enroll for coverage as well as access premium tax credits. As a part of the Health Insurance Marketplace, the Federal government will be providing services for the Marketplace, including, but not limited to:

- A call center open 24 hours a day 7 days a week;
- A website (www.healthcare.gov) where consumers may view, compare, and purchase health insurance plans;
- A Navigator program to help consumers understand new coverage options;
- Registration for agents and brokers in order to sell products through the Marketplace; and
- Eligibility determinations for health insurance coverage and insurance affordability.
II. Federally-Facilitated Marketplace

The Federally-Facilitated Marketplace (FFM) is a new electronic way to obtain options for health insurance. The Marketplace simplifies the search for coverage by comparing plans based on price, benefits, and other features important to consumers. The Marketplace can be accessed at www.healthcare.gov. Beginning October 1st, Mississippians will be able to go to the website and view plans available.

III. Implementation In Mississippi

The Federal government will be responsible for providing services in the Marketplace for Mississippi. There are two companies offering coverage in the Individual Marketplace for Mississippi. Humana will offer health plans in forty (40) counties, and Magnolia Health Plan will offer health plans in forty-six (46) counties.

Only certified Quality Health Plans (QHPs) will be offered on the Marketplace. Four tiers of coverage will be available, and will help consumers compare different plans. All plans will offer the same level of coverage, but premiums may still vary from company to company. The four tiers are:

- Bronze- insurance covers sixty percent (60%) of covered expenses;
- Silver- insurance covers seventy percent (70%) of covered expenses;
- Gold- insurance covers eighty percent (80%) of covered expenses; and
- Platinum- insurance covers ninety percent (90%) of covered expenses.

All health plans must cover a core package of items and services known as “essential health benefits.” Mississippi selected the largest small group product (by enrollment) in the State to serve as the benchmark plan.

IV. Enrollment Periods

The initial open enrollment period begins on October 1, 2013, and concludes on March 31, 2014. Annual open enrollment periods will be October 15 to December 7, with coverage beginning January 1 of the following year.

V. Federal Navigator Program

A new Navigator program was created to assist individuals through the process of applying for coverage on the Federal Marketplace. These Navigators are managed by the Federal government without State involvement, unless found violating State laws. The following two entities in Mississippi have received Federal Navigator Grants:

- University of Mississippi Medical Center—Jackson, MS
- Oak Hill Missionary Baptist Church Ministries, Inc.—Hernando, MS

VI. Agent/Broker Participation

Licensed agents and brokers are required to complete training to be permitted to enroll consumers in the Individual Marketplace. Training is available online at
www.marketplace.MedicareLearningNetworkLMS.com. All agents and brokers who participate in the FFM are required to register on the website and electronically sign the Agreement(s) to comply with Federal and State laws, rules, standards, and policies. Upon completion of training courses and exams, agents and brokers will be granted access to the Marketplace.

VII. Employer Notification Requirement

The Fair Labor Standards Act (FLSA) requires employers to provide notice to employees no later than October 1, 2013, of coverage options through the FFM that becomes available January 1, 2014. Employers who meet any of these criteria are required to act:

- Federal, state, or local government agencies;
- Hospitals; institutions primarily engaged in the care of the sick, the aged, or the mentally ill or developmentally disabled who live on the premises (public or private, for profit or not-for-profit);
- Pre-schools, elementary or secondary schools or institutions of higher learning (e.g., college), or schools for mentally or physically handicapped or gifted children (public or private, for profit or not-for-profit);
- Companies/organizations with annual dollar volume of sales or receipts in the amount of $500,000 or more; and
- Employers that employ one or more employees who are engaged in, or produce goods for, interstate commerce.

Employers must:

- Present the existence of a new Marketplace as well as contact information and description of the services it provides;
- Inform employees that they may be eligible for a premium tax credit if they purchase a qualified health plan (QHP) through the Marketplace; and
- Inform employees that if they purchase a QHP through the Marketplace, they may lose the employer contribution (if any) to any health benefits plan offered by the employer and that all or a portion of such contribution may be excludable from income for Federal income tax purposes.

Role of Mississippi Insurance Department

The Mississippi Insurance Department will be responsible for assuring that the companies participating in the FFM are in compliance with all the certification standards, licensure requirements, and rate and form filing requirements. This includes all aspects of the company’s filings such as network adequacy, actuarial values, and compliance with the essential health benefits.

Issued this the 23rd day of September, 2013.

MIKE CHANEY
COMMISSIONER OF INSURANCE