

# What's New

West Virginia Offices of the Insurance Commissioner



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## Laws and Regulations

On August 14, 2012, the U.S. Department of Health and Human Services (HHS) released the final Health Insurance Exchange Blueprint highlighting the legal and operational requirements that states must follow to ensure HHS certification of their Exchanges. The final Blueprint is located [here](#).

## Grant Announcements and Other Funding

The U.S. Department of Health and Human Services announced on August 23, 2012, the awards of Establishment Grants to eight states. At the sixth Exchange announcement, four states received Level One Grants and four states received Level Two Grants. The HHS Press Release is located [here](#).

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**California**— *Level One Exchange Establishment Grant Award Amount: \$196,479,629*

They will use this second award to plan, research, and continue early implementation as appropriate in all 11 core areas identified in the federal Department of Health and Human Services application. Additional information is available at the following links: [California Health Benefit Exchange Establishment Grant Award Fact Sheet](#); [Level 1.2 Grant Application](#)

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**Connecticut**— *Level Two Exchange Establishment Grant Award Amount: \$107,358,676*

They will use this grant to continue the design, planning, and development of a Health Insurance Exchange. Additional information is located at the following link: [Connecticut Exchange Establishment Grant Award Fact Sheet](#).

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**Hawaii**— *Level One Exchange Establishment Grant Award Amount: \$61,815,492*

They will use this second Level One grant to hire staff to support consumer assistance and education and outreach. Also they plan on beginning the solicitation process for IT. Additional information is located at the following links:

[Hawaii Exchange Establishment Grant Award Fact Sheet](#); [State Press Release](#)

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**Iowa**— *Level One Exchange Establishment Grant Award Amount: \$26,623,003*

Iowa will use this award to conduct market research, integration of the Medicaid and CHIP eligibility systems, and further automation of eligibility business processes. Additional information is located at the following link: [Iowa Exchange Establishment Grant Award Fact Sheet](#)

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**Maryland**— *Level Two Exchange Establishment Grant Award Amount: \$123,048,693*

Maryland will use this amount to accomplish the activities to implement their exchange, including IT systems, business operations, and program integration with state and federal agencies, stakeholder engagement, consumer assistance, as well as outreach and education. Additional information is located at the following link: [Maryland Exchange Establishment Grant Award Fact Sheet](#)

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**Disclaimer:** The information presented in this document does not necessarily reflect the views and opinions of the state of West Virginia or the West Virginia Offices of the Insurance Commissioner. Many hyperlinks are also tied to state-specific Exchange websites that frequently change over time, thus links may not always work. Please contact us if you need assistance in locating a document.

## Grant Announcements and Other Funding

**Nevada**—Level Two Exchange Establishment Grant Award Amount: \$50,016,012

Nevada will use this amount to accomplish the activities to implement their Exchange, receive certification and become self-sustainable by January 2015. Additional information is located at the following link: [Nevada Exchange Establishment Grant Award Fact Sheet](#).

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**Vermont**—Level Two Exchange Establishment Grant Award Amount: \$104,178,965

Vermont will use this amount to complete projects to ensure that the Exchange is ready to begin operations in October 2013. This funding will primarily be used to develop the IT systems to facilitate the critical functions of the Exchange, and ensure operability with other State health care systems built as part of the greater eligibility modernization project. Additional information is located at the following link: [Vermont Exchange Establishment Grant Award Fact Sheet](#).

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## RFP Activity In Other States

**Maryland**—On August 3, 2012, the Maryland Health Benefit Exchange issued a request for information (RFI) seeking input on the design of its Navigator Program. The RFI is located [here](#).

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**Nevada**—On August 9, 2012, the Silver State Health Insurance Exchange released an RFP on seeking qualified vendors to provide consulting services regarding the implementation of the Exchange. The RFP is located [here](#).

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## Reform Activity In Other States

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**Kentucky**—On August 13, 2012, Kentucky's Department of Insurance announced on their website they will be analyzing the various benefit options for the state's Essential Health Benefits. Additional information is located at the following links: [DOI EHB Summary](#); [EHB Information](#).

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**Maryland**— has announced the name for Maryland's Health Benefit Exchange: "Maryland Health Connection" (MHC). The following links provide additional information: [Press Release](#); [Maryland Health Connection Website](#).

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**Michigan**— Gov. Rick Snyder announced that Michigan will pursue a joint partnership with the federal government to create an Exchange. The Detroit News article is located [here](#).



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## Exchange Activity In Other States

**Minnesota's** Governor Mark Dayton announced that Minnesota had submitted an additional Exchange Establishment grant application to CMS requesting \$42.5 million. The funds requested would be used to continue design and development of Minnesota's Health Insurance Exchange. The information is located at the following links: [Letter from Governor Mark Dayton](#); [Minnesota Public Radio News Article](#).

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**Vermont**— Governor Shumlin's Administration announced its recommendation of Blue Cross Blue Shield of Vermont as the Essential Health Benefit benchmark plan for the State. Additional information is located [here](#).

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**Washington**—During the week of August 13th, 2012, the Washington Health Benefit Exchange held a number of meetings. Materials for each are located at the following links: [Policy Committee](#); [Plan Management Workgroup](#); [Consumer Workgroup](#); [Exchange Board](#); [Navigator Technical Advisory Committee](#).

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**Utah**—The Salt Lake City Tribune reported that the state will use the Legislative Health Reform Task Force's unanimous decision of the Public Employee Health Plan (PEHP) Basic Plus Plan as the State's benchmark for Essential Health Benefits. The article is located [here](#).

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**Vermont**—Robin Lunge, Director of Health Reform, and Lindsey Tucker, Deputy Commissioner of the Vermont Health Benefit Exchange, gave their recommendation during a presentation for "a hybrid approach of state-specified plan designs and some 'choice' plans designed by insurance carriers within set parameters." The meeting materials are located [here](#).

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# September 2012

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Additional information is available on our web site: [www.bewv.com](http://www.bewv.com)

Upcoming Calendar Meetings	
<b>Tuesday September 11</b>	<b>Tuesday September 25</b>
Carrier 10:00 AM	Consumer and Providers 10:00 AM
Producer 1:00 PM	

## Other Reference Materials, Notices and Related Information

The Daily Mail reported on August 29, 2012, that recent polling by R.L. Repass & Partners shows that West Virginians favor parts of the ACA. The article is located [here](#).

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The Washington Post reported that a recent survey of 512 large employers shows that zero plan to drop health insurance benefits. The article is located [here](#).

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Healthcare Payer news reported that a recent poll conducted by Pitney Bowes Research found that consumers split on how they want insurers to communicate with their insurers. Most notable, 78 percent of respondents said they'd prefer to talk to insurers over the phone rather than email, live online chat or physical mail. The article is located [here](#).

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USA Today reported an Aflac study that showed that the majority of American workers do not understand their health insurance benefits. For addition information click [here](#).

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The New York Times reported on August 4, 2012, the efforts of the federal government to set up and operate exchanges in about half of the states. The article is located [here](#).

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Kaiser Health News reported on newly released Institute of Medicine report that states the U.S. health care system wastes \$750 billion a year or an estimated 30 cents of every medical dollar. The waste often occurs through unneeded care, byzantine paperwork, fraud and other waste. For additional information click [here](#).