

STATE OF NEW HAMPSHIRE  
INSURANCE DEPARTMENT

Docket No.: INS. No. 13-035-AR

In Re: The New Hampshire Individual Health Plan Benefit Association  
And The New Hampshire High Risk Pool

SUPPLEMENTAL ORDER

Pursuant to my authority under RSA 404-G:12, I make this supplemental order regarding the high risk pool authorized under RSA 404-G:5-b (“NH Health Plan”) and operated by the New Hampshire Individual Health Plan Benefit Association (“Association”).

On March 18, 2014, I ordered the NH Health Plan to cease providing coverage on June 30, 2014. On April 30, 2014, the federal government will terminate coverage to NH residents enrolled in the PreExisting Condition Program (PCIP). NH Health Plan and PCIP products involve deductibles and coinsurance cost sharing that are reset on a calendar year basis. The Affordable Care Act requires all products issued on or after January 1, 2014 to calculate deductibles and coinsurance based on a calendar year reset. NH residents replacing coverage lost through one of these programs, absent any intervention, would be subject to having to satisfy two sets of deductibles and two sets of coinsurance requirements in 2014.

Therefore, I order the following, relative to medical deductibles:

- (1) NH Health Plan shall use reasonable best efforts to procure federal funds to reimburse, or partially reimburse, carriers who insure those previously covered through PCIP for medical deductibles credited by such carriers pursuant to this order.
  - a. If such funds are procured, NH Health Plan shall give notice to its members writing individual health insurance
    - i. Of their obligations under this order
    - ii. How to file with NH Health Plan for reimbursements of medical deductibles credited.
  - b. Within ten days of this order, or as soon as practicable thereafter, NH Health Plan shall advise the Commissioner of its efforts and whether federal funds have been procured.
- (2) The Association’s plan of termination shall be amended in accordance with the following:
  - a. The Association shall provide notice to all individuals who were enrolled in NH Health Plan at any time during 2014 regarding the possible availability of a credit for out-of-pocket medical deductible costs pursuant to this order. Such notice shall include instructions to the enrollee as to how to authorize NH Health Plan to share information with the enrollee’s succeeding carrier for out-of-pocket medical deductible credit consideration. Such notices shall be issued within 30 days of this order. Explanations

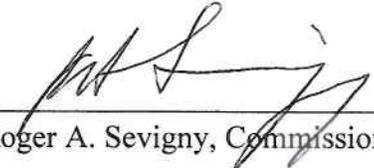
- of Benefits (EOBs) processed after the issuance of such notice shall also include such notice or portions thereof as appropriate.
- b. Once authorized, the Association shall provide information to the succeeding carrier on a timely basis.
  - c. After paying all claims and obligations of the NH Health Plan and reserving for anticipated costs of winding down and liquidating the Association (including any contingent liabilities), and before distributing remaining assets to Association members, the Association shall reimburse succeeding carriers for credits provided to previously insured NH Health Plan enrollees in (3) below based on documentation submitted by the carriers. The Association shall reimburse succeeding carriers only for medical deductible credits. If the Plan does not have sufficient assets to fund this obligation, the Plan shall reimburse what it can on a pro-rata basis based on credit claims submitted. No new assessments shall be collected to fund this obligation.
  - d. The Association shall identify the procedures necessary to implement this order, including applicable deadlines, in the form of an amendment to the Association's Plan of Termination, and submit the amendment to me for my approval within 45 days of this Order.
- (3) Succeeding carriers who enroll anyone previously insured with NH Health Plan in 2014, where the enrollee does not experience any gap in creditable coverage pursuant to RSA 420-G:7, shall give credit for the satisfaction, or partial satisfaction, of any medical (non-pharmacy) deductible under a NH Health Plan policy for the same or similar coverage provided under the policy issued by the succeeding carrier. Further, succeeding carriers who enroll anyone previously insured through PCIP in 2014, where the enrollee does not experience any gap in creditable coverage pursuant to RSA 420-G:7, upon receiving notice from NH Health Plan of available federal funds, shall give credit for the satisfaction, or partial satisfaction of any medical (non-pharmacy) deductible under PCIP coverage for the same or similar coverage provided under the policy issued by a succeeding carrier.
- a. Such credit shall only be for out-of-pocket expenses incurred for medical deductibles in 2014.
  - b. Succeeding carriers shall accept submissions for medical deductible credit claims through December 31, 2014.
  - c. Claim settlement rules, NHCAR Part INS 1000, shall apply for policyholders making deductible credit claims. A claim will be deemed to be made from the date the insured either first notices the carrier or from the date that NH Health Plan first notices the carrier on behalf of the insured, whichever is earlier.

So ordered,

New Hampshire Insurance Department

Dated: \_\_\_\_\_

4-30-14

  
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Roger A. Sevigny, Commissioner