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August 20, 2013

Hearings Unit, DIC
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VIA EMAIL AND U.S. MAIL

Hearings Unit
Office of the Insurance Commissioner
PO Box 40255
Olympia, WA 98504-0255
hearings@oic.wa.gov

Re: Demand for Expedited Hearing
Disapproval of 2014 KPIF Health Benefits Plans Binder, Rate Filings, and Form Filings

To Whom it May Concern:

Kaiser Foundation Health Plan of the Northwest ("KFHPNW"), through its undersigned counsel, hereby requests an expedited hearing, pursuant to RCW 48.04.010(b), to challenge the Washington State Office of the Insurance Commissioner's ("OIC's") disapproval of KFHPNW's 2014 KPIF¹ Health Benefit Plans Binder, rate filings, and form filings (collectively, "the KPIF Binder").² The OIC's rejection of the KPIF Binder exceeded the scope of the OIC's authority and was arbitrary and capricious.

KFHPNW filed the KPIF Binder, consisting of a bundle of 7 on-Exchange and 6 off-Exchange health plans, in the System for Electronic Rate and Form Filing ("SERFF"), as required by OIC instructions. The OIC disapproved the KPIF Binder due solely to technical errors in two cells of the Plans and Benefits Template. Specifically, the Cost Share Variance Tab of the Plans and

¹ Kaiser Permanente for Individuals and Families.

² SERFF Tracking #: KFNW-WA14-125003421. The OIC's disposition notifications are attached to this letter as "Exhibit 1." Although a disposition was issued for each rate and form filing, the sole reason for all of the denials was the technical errors described in this letter.



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Benefits Template inadvertently stated that “Eye Glasses for Children” were subject to the deductible under the pediatric vision benefits of two off-Exchange plans.³ The contract forms themselves, including the schedules of benefits,⁴ correctly provided that eyeglasses and contact lenses were not subject to the deductible, as did the Plans and Benefits Template for the similar on-Exchange plans.⁵ There were no issues with the material content of the contract forms; the only basis for disapproval identified by the OIC was the technical errors in the Plans and Benefits Template for the two off-Exchange plans.

KFHPNW challenges the OIC’s disposition of the KPIF Binder on the basis that the decision was contrary to law and arbitrary and capricious, as explained below. The OIC’s action, if not corrected immediately, will prevent KFHPNW from offering any individual health benefit plans on the Washington Health Benefit Exchange in 2014. Therefore, prompt review and reversal of the OIC’s disposition is necessary to prevent imminent and irreparable harm to KFHPNW.

1. The OIC lacked the authority to disapprove the KPIF Binder based solely on technical errors in the Plans and Benefits Template.

The OIC is only authorized to disapprove a plan based on errors in an actual contract form, *i.e.* in the plan itself. RCW 48.44.020 provides the sole statutory basis for the OIC to reject a plan. The OIC cited the following provisions of RCW 48.44.020 in disapproving KFHPNW’s plans:

³ Attached as “Exhibit 2” to this letter is a screenshot of the Plans and Benefits Template for the off-Exchange plans, containing the technical errors at issue.

⁴ Schedules of benefits are alternatively known as “benefit summaries.”

⁵ Attached as “Exhibit 3” to this letter is a screenshot of the Plans and Benefits Template for the on-Exchange plans, which KFHPNW corrected to remove references to the deductible for pediatric eyeglasses and contacts lenses in the “Eye Glasses for Children” field, column KZ. Attached as “Exhibit 4” is a sample screenshot of the schedule of benefits (here titled “Health Plan Benefit Summary”), which KFHPNW similarly corrected to remove references to the deductible for pediatric eyeglasses and contact lenses for both on-Exchange and off-Exchange plans.



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The commissioner may on examination, subject to the right of the health care service contractor to demand and receive a hearing under chapters 48.04 and 34.05 RCW, disapprove any individual or group *contract form* or any of the following grounds:

(a) If it contains or incorporates by reference any inconsistent, ambiguous or misleading clauses, or exceptions and conditions which unreasonably or deceptively affect the risk purported to be assumed in the general coverage of the contract; or

* * *

(e) If it violates any provision of this chapter[.]⁶

(Emphasis added)

The Plans and Benefits Template is not a “contract form,” as defined by the regulations and is not “incorporated by reference” in the contract forms.⁷ Rather, the Plans and Benefits Template is simply a supplemental document intended to assist the OIC in reviewing contract forms. Thus, a technical error within the Plans and Benefits Template does not support disapproval of the contract forms.

⁶ RCW 48.44.020(2) (emphasis added).

⁷ A “contract form” is “the prototype of a ‘*contract*’ and any *associated riders and endorsements* filed with the commissioner by a health care service contractor or health maintenance organization.” WAC 284-43-910(12) (emphasis added). “Contract” is, in turn, defined as “*an agreement* to provide health care services or pay health care costs for or on behalf of a ‘subscriber’ or group of ‘subscribers’ and such eligible dependents as may be included therein.” WAC 284-43-910(11) (emphasis added).



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2. Even if the technical errors had appeared in a contract form, rather than the Plans and Benefits Template, the OIC lacks the statutory authority to reject the entire group of health plans on that basis.

RCW 48.44.020 allows the OIC to disapprove an individual or group contract form if that contract form fails to meet statutory requirements. The rejection of all 13 plans included in the KPIF Binder, based upon non-substantive errors applicable to only two off-Exchange plans, exceeds the OIC's authority under RCW 48.44.020.

3. The OIC exceeded its rule-making authority when it implemented the Washington State SERFF Health and Disability Binder Filing General Instructions.

RCW 48.02.060(3)(a) authorizes the Insurance Commissioner to "make *reasonable* rules for effectuating any provision of this code..." (Emphasis added). RCW 48.44.050 states:

The insurance commissioner shall make *reasonable* regulations in aid of the administration of this chapter which may include, but shall not be limited to regulations concerning the maintenance of adequate insurance, bonds, or cash deposits, information required of registrants, and methods of expediting speedy and fair payments to claimants.

(Emphasis added).

The OIC has incorporated specific SERFF filing instructions into the Washington regulatory scheme. WAC 284-44A-040; WAC 284-46A-040; WAC 284-46A-050(3). The specifically-referenced filing instructions do *not* include the Washington State SERFF Health and Disability Binder Filing General Instructions ("the Binder Filing Instructions"). The binder filing requirement was newly introduced in 2013 as a way to assist the OIC in reviewing plans. The Binder Filing Instructions were not properly adopted in accordance with rulemaking requirements, RCW 34.05.310 *et seq.*, and cannot provide a basis for rejection of contract forms that meet all statutory and regulatory requirements. *See* RCW 48.44.020. Although the



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regulations purport to adopt rules simply by posting them on the OIC website, such an approach does not comply with legal requirements for rulemaking.⁸

4. Interpretation of the Binder Filing Instructions to allow or require rejection of all plans in the KPIF Binder is arbitrary and capricious.

Even with the presence of the technical errors in the Plans and Benefits Template, all of KFHPNW's plans were compliant and, as such, should be approved by the OIC. The OIC's disapproval of the entire KPIF Binder based upon two minor errors in the Plans and Benefits Template was not warranted. Even if the technical errors had occurred in a "contract form," the OIC has the discretion to approve a filing under these circumstances. The rules requiring health care service contactors (such as KFHPNW) to utilize the SERFF system are set forth in WAC 284-44A. WAC 284-44A-070 provides: "The commissioner *may* reject and close any filing that does not comply with WAC 284-44A-040, 284-44A-050, 284-44A-060." (emphasis added) The decision to reject KFHPNW's filing based on technical errors in the Plans and Benefits Template was arbitrary and capricious. This is particularly so because KFHPNW could easily correct the errors had it not been for the OIC's refusal to consider corrections made after July 31, 2013. The OIC has denied KFHPNW the opportunity to do so knowing that the OIC had no objection to the contract forms.

5. The OIC is not precluded by federal or state law from permitting KFHPNW to correct the technical errors following the OIC's self-imposed filing deadline of July 31, 2013.

The only applicable deadline established by federal law is that qualified health plan ("QIIP") certification must be completed before the start of open enrollment on October 1, 2013.⁹ While

⁸ The regulations themselves confirm that "SERFF is a dynamic application that the NAIC will revise and enhance over time." WAC 284-44A-040. Thus, the regulations improperly adopt processes that can be changed over time without the requisite public notice and comment, and OIC has applied them in an unreasonable manner to KFHPNW.

⁹ 45 CFR § 155.1010.



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exchanges are required to transmit certain plan data to the Center for Medicare and Medicaid Services ("CMS"), there is no deadline in federal law for when such data must be submitted. The OIC's discretion extends to allowing KFHPNW the opportunity to edit plan data even after submission.

In addition to the lack of a mandatory deadline of July 31, 2013, there is also no requirement that the data submissions to CMS, when made, must be error free. To the contrary, CMS's system for federally-facilitated and state-partnership exchanges anticipates that submissions to CMS may contain errors, and expressly provides for a time period following data submission for states or issuers to correct errors in plan data.¹⁰

In sum, two non-substantive errors in a supplemental template did not justify the OIC's decision to reject the two off-Exchange plans to which the template referred, let alone the entire group of plans filed as the KPIF Binder. The OIC's decision to reject the KPIF Binder and to prohibit KFHPNW from promptly correcting two technical errors was arbitrary and capricious.

KFHPNW respectfully requests that this matter be heard on an expedited basis due to the impending deadline for submission of data regarding health plans to CMS. A failure to provide a timely resolution would result in imminent and irreparable harm to KFHPNW because it will lose the opportunity to participate on the Exchange in 2014. Because the factual background of the OIC's decision is not in dispute and this matter deals purely with legal issues, KFHPNW requests that the expedited consideration of its appeal be based upon written submissions of the parties. KFHPNW requests that the Commissioner hold a pre-hearing conference as soon as possible to discuss the procedures and timelines of this appeal.

¹⁰ See Plan Management Plan Preview, Qualified Health Plan (QHP) Certification Series VII (available at https://www.regtap.info/uploads/library/PM_QHP_Slides_072513_5CR_072513.pdf); Letter to Issuers on Federally-facilitated and State Partnership Exchanges, April 5, 2013, describing timeline including July 31 data submission from federally-facilitated and state-partnership exchanges with a Plan Preview period to correct submitted data (available at http://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/2014_letter_to_issuers_04052013.pdf).



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Very truly yours,

Maren R. Norton
Barbara L. Nay

Cc: Kelly Cairns
AnnaLisa Gellermann

EXHIBIT 1

SERFF Tracking #:

KFNW-WA14-125003421

State Tracking #:

257364

Company Tracking #:

23371WA0450001

State: Washington Company Name: Kaiser Foundation Health Plan of the Northwest
Plan Binder Name: 2014 KPFF Health Benefit Plans Binder Plan Year: 2014
Market Type: Individual Binder Type: Medical

Disposition

Date Submitted: 08/01/2013 01:58 AM

Comments:

Dear Filer,

Your binder, form and rate filings are disapproved and closed per RCW 48.44.020(2)(a) and (e) for containing inconsistent information and failure to conform to the filing requirements set forth by the Insurance Commissioner's Office in WAC 284-44A-090(1) and the "Washington State SERFF Health and Disability Binder Filing General Instructions", section V.

As directed in our objection letter dated July 31, 2013, the Plans and Benefits template Cost Share Variance tab containing HIOS Product 23371WA051 [plans 23371WA051002 –Silver 1750/HSA with PDB-Off Exchange and 23371WA0510001 –Bronze 5000/30%/HSA with PDB-Off Exchange] required modification to be consent with the pending Form Filings. These modifications were not made in response to the objection letter; therefore the binder cost share information does not support the filed form.

Plans:

SERFF Tracking #: KFNW-WA14-125003421 State Tracking #: 257364 Company Tracking #: 23371WA0450001

State: Washington Company Name: Kaiser Foundation Health Plan of the Northwest
 Plan Binder Name: 2014 KPIF Health Benefit Plans Binder Plan Year: 2014
 Market Type: Individual Binder Type: Medical

Plan Name	Standard Component ID	Availability	Plan Disposition Status	Plan State Status	Action Date
KP WA Gold 1000/20	23371WA0450001	On Exchange	Complete	Disapproved	08/01/2013
KP WA Silver 1500/30	23371WA0460001	On Exchange	Complete	Disapproved	08/01/2013
KP WA Silver 2500/30	23371WA0460002	On Exchange	Complete	Disapproved	08/01/2013
KP WA Bronze 4500/50	23371WA0460003	On Exchange	Complete	Disapproved	08/01/2013
KP WA Silver 1750/0/HSA	23371WA0480001	On Exchange	Complete	Disapproved	08/01/2013
KP WA Bronze 5000/30%/HSA	23371WA0480003	On Exchange	Complete	Disapproved	08/01/2013
KP WA Gold 1000/20 with Pediatric Dental	23371WA0490001	Off Exchange	Complete	Disapproved	08/01/2013
KP WA Bronze 4500/50 with Pediatric Dental	23371WA0500001	Off Exchange	Complete	Disapproved	08/01/2013
KP WA Silver 1500/30 with Pediatric Dental	23371WA0500002	Off Exchange	Complete	Disapproved	08/01/2013
KP WA Silver 2500/30 with Pediatric Dental	23371WA0500003	Off Exchange	Complete	Disapproved	08/01/2013
KP WA Bronze 5000/30%/HSA with Pediatric Dental	23371WA0510001	Off Exchange	Complete	Disapproved	08/01/2013
KP WA Silver 1750/0/HSA with Pediatric Dental	23371WA0510002	Off Exchange	Complete	Disapproved	08/01/2013
KP WA Catastrophic 6350/0	23371WA0520001	On Exchange	Complete	Disapproved	08/01/2013

Attachments:

SERFF Tracking #:

KFNW-128963702

State Tracking #:

253745

Company Tracking #:

EWIDIXDEDD0114

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest
 TOI/Sub-TOI: H161 Individual Health - Major Medical/H161.005C Individual - Other
 Product Name: HCR Std Master Cont 2010 KPIF Silver-Bronze Deductible Plan
 Project Name/Number: EWIDIXDEDD0114/EWIDIXDEDD0114

Disposition

Disposition Date: 08/01/2013

Implementation Date:

Status: Disapproved

HHS Status: HHS Denied

State Review:

Comment: Dear Filer,

Your binder, form and rate filings are disapproved and closed per RCW 48.44.020(2)(a) and (e) for containing inconsistent information and failure to conform to the filing requirements set forth by the Insurance Commissioner's Office in WAC 284-44A-090(1) and the "Washington State SERFF Health and Disability Binder Filing General Instructions", section V.

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Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Expense Product Outline of Coverage - L&D		Yes
Supporting Document	Filing Instructions		Yes
Supporting Document	Individual Form Filing Requirements - L&D, HCSC		Yes
Supporting Document	PPACA Exemption Request		Yes
Supporting Document	PPACA Uniform Compliance Summary		Yes
Supporting Document (revised)	Individual In-Exchange Analyst Checklist - Revised		Yes
Supporting Document	Individual In-Exchange Analyst Checklist		Yes
Supporting Document	Redlines - 7/3/13 Amendment		Yes
Supporting Document	Redlines - 7/21/13 Amendment		Yes

SERFF Tracking #:

KFNW-128963702

State Tracking #:

253745

Company Tracking #:

EWIDIXDFDD0114

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest
 TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005C Individual - Other
 Product Name: HCR Std Master Cont 2010 KPIF Silver-Bronze Deductible Plan
 Project Name/Number: EWIDIXDFDD0114/EWIDIXDEDD0114

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Certification of Compliance - 7/21/13 Amendment		Yes
Supporting Document	Redlines - 7/26/13 Amendment		Yes
Form (revised)	Individuals and Families Deductible Plan Evidence of Coverage	Disapproved	Yes
Form	Individuals and Families Deductible Plan Evidence of Coverage	Withdrawn	Yes
Form	Individuals and Families Deductible Plan Evidence of Coverage	Withdrawn	Yes
Form (revised)	Deductible Plan Benefit Summary Bronze Plan	Disapproved	Yes
Form	Deductible Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form (revised)	Deductible Plan Benefit Summary Silver Plan	Disapproved	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form (revised)	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form (revised)	Deductible Plan Benefit Summary Silver Plan	Disapproved	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form (revised)	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Coordination of Benefits Consumer Explanatory Booklet	Disapproved	Yes
Form	Frequently asked questions about your pharmacy benefits	Disapproved	Yes
Form	Individuals and Families Deductible Plan Evidence of Coverage	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Bronze Plan	Withdrawn	Yes

SERFF Tracking #:

KFNW-128963702

State Tracking #:

253745

Company Tracking #:

EWIDIXDEDD0114

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest
TO/Sub-TOI: H16I Individual Health - Major Medical/H16I.005C Individual - Other
Product Name: HCR Std Master Cont 2010 KPIF Silver-Bronze Deductible Plan
Project Name/Number: EWIDIXDEDD0114/EWIDIXDEDD0114

Schedule	Schedule Item	Schedule Item Status	Public Access
Form	Deductible Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes

SERFF Tracking #:

KFNW-128963924

State Tracking #:

253746

Company Tracking #:

EWIDIXCAT0114

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest
 TO/Sub-TOI: H16I Individual Health - Major Medical/H16I.005C Individual - Other
 Product Name: HCR Std Mastor Cont 2010 KPII- Catastrophic Deductible Plan
 Project Name/Number: EWIDIXCAT0114/EWIDIXCAT0114

Disposition

Disposition Date: 08/01/2013

Implementation Date:

Status: Disapproved

HHS Status: HHS Denied

State Review:

Comment: Dear Filer,

Your binder, form and rate filings are disapproved and closed per RCW 48.44.020(2)(a) and (e) for containing inconsistent information and failure to conform to the filing requirements set forth by the Insurance Commissioner's Office in WAC 284-44A-090(1) and the "Washington State SERFF Health and Disability Binder Filing General Instructions", section V.

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Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Expense Product Outline of Coverage - L&D		Yes
Supporting Document	Filing Instructions		Yes
Supporting Document	Individual Form Filing Requirements - L&D, HCSC		Yes
Supporting Document	PPACA Exemption Request		Yes
Supporting Document	PPACA Uniform Compliance Summary		Yes
Supporting Document	Individual In-Exchange Analyst Checklist		Yes
Supporting Document	Redlines - 7/21/13 Amendment		Yes
Supporting Document	Certification of Compliance - 7/21/13 Amendment		Yes
Supporting Document	Redlines - 7/26/13 Amendment		Yes

SERFF Tracking #:

KFNW-128963924

State Tracking #:

253746

Company Tracking #:

EWIDIXCAT0114

State: *Washington* Filing Company: *Kaiser Foundation Health Plan of the Northwest*
 TOI/Sub-TOI: *H16I Individual Health - Major Medical/H16I.005C Individual - Other*
 Product Name: *IICR Std Master Cont 2010 KPIF Catastrophic Deductible Plan*
 Project Name/Number: *EWIDIXCAT0114/EWIDIXCAT0114*

Schedule	Schedule Item	Schedule Item Status	Public Access
Form (revised)	Individuals and Families Catastrophic Deductible Plan Evidence of Coverage	Disapproved	Yes
Form	Individuals and Families Catastrophic Deductible Plan Evidence of Coverage	Withdrawn	Yes
Form	Individuals and Families Catastrophic Deductible Plan Evidence of Coverage	Withdrawn	Yes
Form (revised)	Catastrophic Deductible Plan Benefit Summary	Disapproved	Yes
Form	Catastrophic Deductible Plan Benefit Summary	Withdrawn	Yes
Form	Catastrophic Deductible Plan Benefit Summary	Withdrawn	Yes
Form	Coordination of Benefits Consumer Explanatory Booklet	Disapproved	Yes
Form	Frequently asked questions about your pharmacy benefits	Disapproved	Yes

SERFF Tracking #:

KFNW-128963753

State Tracking #:

253747

Company Tracking #:

EWIDOXDED0114

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest
 TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005C Individual - Other
 Product Name: KPIF Outside Market Gold Deductible Plans
 Project Name/Number: FWIDOXDFD0114/FWIDOXDFD0114

Disposition

Disposition Date: 08/01/2013

Implementation Date:

Status: Disapproved

HHS Status: HHS Denied

State Review:

Comment: Dear Filer,

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Supporting Document	PPACA Exemption Request		Yes
Supporting Document	PPACA Uniform Compliance Summary		Yes
Supporting Document (revised)	Individual Out-Exchange Analyst Checklist - Revised		Yes
Supporting Document	Individual Out-Exchange Analyst Checklist		Yes
Supporting Document	Redlines - 7/21/13 Amendment		Yes
Supporting Document	Certification of Compliance - 7/21/13 Amendment		Yes

SERFF Tracking #:

KFNW-128963753

State Tracking #:

253747

Company Tracking #:

EWIDOXDED0114

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest
 TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005C Individual - Other
 Product Name: KPFI Outside Market Gold Deductible Plans
 Project Name/Number: EWIDOXDED0114/EWIDOXDED0114

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Redlines - 7/26/13 Amendment		Yes
Form (revised)	Individuals and Families Deductible Plan Evidence of Coverage	Disapproved	Yes
Form	Individuals and Families Deductible Plan Evidence of Coverage	Withdrawn	Yes
Form	Individuals and Families Deductible Plan Evidence of Coverage	Withdrawn	Yes
Form (revised)	Deductible Plan Benefit Summary Gold Plan	Disapproved	Yes
Form	Deductible Plan Benefit Summary Gold Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Gold Plan	Withdrawn	Yes
Form (revised)	Application for health coverage	Disapproved	Yes
Form	Application for health coverage	Withdrawn	Yes
Form	Application for health coverage	Withdrawn	Yes
Form (revised)	Enrollment Form for Newborn, Newly Adopted, or Placed for Adoption Dependents	Disapproved	Yes
Form	Enrollment Form for Newborn, Newly Adopted, or Placed for Adoption Dependents	Withdrawn	Yes
Form	Enrollment Form for Newborn, Newly Adopted, or Placed for Adoption Dependents	Withdrawn	Yes
Form	Declaration Form for Reduced Non-Tobacco Premium	Disapproved	Yes
Form	Coordination of Benefits Consumer Explanatory Booklet	Disapproved	Yes
Form	Frequently asked questions about your pharmacy benefits	Disapproved	Yes

SERFF Tracking #: KFNW-128963788

State Tracking #: 253744

Company Tracking #: EWIDXDED0114

State: Washington

Filing Company:

Kaiser Foundation Health Plan of the Northwest

TO/Sub-TO: H161 Individual Health - Major Medical/H161.005C Individual - Other

Product Name: HCR Std Master Cont 2010 KPIF Gold-Silver Deductible Plans

Project Name/Number: EWIDXDED0114/EWIDXDED0114

Disposition

Disposition Date: 08/01/2013

Implementation Date:

Status: Disapproved

HHS Status: HHS Denied

State Review:

Comment: Dear Filer,

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Rate data does NOT apply to filing.

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Supporting Document	PPACA Exemption Request		Yes
Supporting Document	PPACA Uniform Compliance Summary		Yes
Supporting Document (revised)	Individual In-Exchange Analyst Checklist - Revised		Yes
Supporting Document	Individual In-Exchange Analyst Checklist		Yes
Supporting Document	Redlines - 7/3/13 Amendment		Yes
Supporting Document	Redlines - 7/21/13 Amendment		Yes

SERFF Tracking #:

KFNW-128963788

State Tracking #:

253744

Company Tracking #:

EWIDIXDED0114

State:

Washington

Filing Company:

Kaiser Foundation Health Plan of the Northwest

TOI/Sub-TOI:

H16I Individual Health - Major Medical/H16I.005C Individual - Other

Product Name:

HCR Std Master Cont 2010 KPIF Gold-Silver Deductible Plans

Project Name/Number:

EWIDIXDED0114/EWIDIXDED0114

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Certification of Compliance - 7/21/13 Amendment		Yes
Supporting Document	Redlines - 7/26/13 Amendment		Yes
Form (revised)	Individuals and Families Deductible Plan Evidence of Coverage	Disapproved	Yes
Form	Individuals and Families Deductible Plan Evidence of Coverage	Withdrawn	Yes
Form	Individuals and Families Deductible Plan Evidence of Coverage	Withdrawn	Yes
Form (revised)	Deductible Plan Benefit Summary Gold Plan	Disapproved	Yes
Form	Deductible Plan Benefit Summary Gold Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Gold Plan	Withdrawn	Yes
Form (revised)	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form (revised)	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Coordination of Benefits Consumer Explanatory Booklet	Disapproved	Yes
Form	Frequently asked questions about your pharmacy benefits	Disapproved	Yes
Form	Individuals and Families Deductible Plan Evidence of Coverage	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Gold Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Gold Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes

SERFF Tracking #:

KFNW-128963934

State Tracking #:

253748

Company Tracking #:

EWIDIXHDHP0114

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest
 TOI/Sub-TOI: H161 Individual Health - Major Medical/H161.005C Individual - Other
 Product Name: HCR Std Master Cont 2010 KPIF High Deductible Health Plans
 Project Name/Number: EWIDIXHDHP0114/EWIDIXHDHP0114

Disposition

Disposition Date: 08/01/2013

Implementation Date:

Status: Disapproved

HHS Status: HHS Denied

State Review:

Comment: Dear Filer,

Your binder, form and rate filings are disapproved and closed per RCW 48.44.020(2)(a) and (e) for containing inconsistent information and failure to conform to the filing requirements set forth by the Insurance Commissioner's Office in WAC 284-44A-090(1) and the "Washington State SERFF Health and Disability Binder Filing General Instructions", section V.

As directed in our objection letter dated July 31, 2013, the Plans and Benefits template Cost Share Variance tab containing HIOS Product 23371WA051 [plans 23371WA051002 -Silver 1750/HSA with PDB-Off Exchange and 23371WA0510001 -Bronze 5000/30%/HSA with PDB-Off Exchange] required modification to be consistent with the pending Form Filings. These modifications were not made in response to the objection letter; therefore the binder cost share information does not support the filed form.

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Expense Product Outline of Coverage - L&D		Yes
Supporting Document	Filing Instructions		Yes
Supporting Document	Individual Form Filing Requirements - L&D, HCSC		Yes
Supporting Document	PPACA Exemption Request		Yes
Supporting Document	PPACA Uniform Compliance Summary		Yes
Supporting Document	Individual In-Exchange Analyst Checklist		Yes
Supporting Document	Redlines - 7/3/13 Amendment		Yes
Supporting Document	Redlines - 7/21/13 Amendment		Yes
Supporting Document	Certification of Compliance - 7/21/13 Amendment		Yes

SERFF Tracking #:

KFNW-128963934

State Tracking #:

253748

Company Tracking #:

EWIDIXHDHP0114

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest
 TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005C Individual - Other
 Product Name: HCR Std Master Cont 2010 KPIF High Deductible Health Plans
 Project Name/Number: EWIDIXHDHP0114/EWIDIXHDHP0114

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Redlines - 7/26/13 Amendment		Yes
Form (revised)	Individuals and Families High Deductible Health Plan Evidence of Coverage	Disapproved	Yes
Form	Individuals and Families High Deductible Health Plan Evidence of Coverage	Withdrawn	Yes
Form	Individuals and Families High Deductible Health Plan Evidence of Coverage	Withdrawn	Yes
Form (revised)	High Deductible Health Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form (revised)	High Deductible Health Plan Benefit Summary Bronze Plan	Disapproved	Yes
Form	High Deductible Health Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form (revised)	High Deductible Health Plan Benefit Summary Silver Plan	Disapproved	Yes
Form	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form (revised)	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form (revised)	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form (revised)	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Coordination of Benefits Consumer Explanatory Booklet	Disapproved	Yes
Form	Frequently asked questions about your pharmacy benefits	Disapproved	Yes
Form	Individuals and Families High Deductible Health Plan Evidence of Coverage	Withdrawn	Yes

SERFF Tracking #:

KFNW-128963934

State Tracking #:

253748

Company Tracking #:

EWIDIXHDHP0114

State: *Washington* Filing Company: *Kaiser Foundation Health Plan of the Northwest*
 TOI/Sub-TOI: *H16I Individual Health - Major Medical/H16I.005C Individual - Other*
 Product Name: *HCR Std Master Cont 2010 KPIF High Deductible Health Plans*
 Project Name/Number: *EWIDIXHDHP0114/EWIDIXHDHP0114*

Schedule	Schedule Item	Schedule Item Status	Public Access
Form	High Deductible Health Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes

SERFF Tracking #: KFNW-128963825 State Tracking #: 253750 Company Tracking #: EWIDOXHDHP0114

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest
TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005C Individual - Other
Product Name: KPIF Outside Market High Deductible Health Plans
Project Name/Number: EWIDOXHDHP0114/EWIDOXHDHP0114

Disposition

Disposition Date: 08/01/2013

Implementation Date:

Status: Disapproved

HHS Status: HHS Denied

State Review:

Comment: Dear Filer,

Your binder, form and rate filings are disapproved and closed per RCW 48.44.020(2)(a) and (e) for containing inconsistent information and failure to conform to the filing requirements set forth by the Insurance Commissioner's Office in WAC 284-44A-090(1) and the "Washington State SERFF Health and Disability Binder Filing General Instructions", section V.

As directed in our objection letter dated July 31, 2013, the Plans and Benefits template Cost Share Variance tab containing HIOS Product 23371WA051 [plans 23371WA051002 -Silver 1750/HSA with PDB-Off Exchange and 23371WA0510001 -Bronze 5000/30%/HSA with PDB-Off Exchange] required modification to be consistent with the pending Form Filings. These modifications were not made in response to the objection letter; therefore the binder cost share information does not support the filed form.

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Expense Product Outline of Coverage - L&D		Yes
Supporting Document	Filing Instructions		Yes
Supporting Document	Individual Form Filing Requirements - L&D, HCSC		Yes
Supporting Document	PPACA Exemption Request		Yes
Supporting Document	PPACA Uniform Compliance Summary		Yes
Supporting Document	Individual Out-Exchange Analyst Checklist		Yes
Supporting Document	Redline - 7/3/13 Amendment		Yes
Supporting Document	Redlines - 7/21/13 Amendment		Yes
Supporting Document	Certification of Compliance - 7/21/13 Amendment		Yes

SERFF Tracking #:

KFNW-128963825

State Tracking #:

253750

Company Tracking #:

EWIDOXHDHP0114

State: Washington

Filing Company:

Kaiser Foundation Health Plan of the Northwest

TOI/Sub-TOI: H161 Individual Health - Major Medical/H161.005C Individual Other

Product Name: KPIF Outside Market High Deductible Health Plans

Project Name/Number: EWIDOXHDHP0114/EWIDOXHDHP0114

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Redlines - 7/26/13 Amendment		Yes
Form (revised)	Individuals and Families High Deductible Health Plan Evidence of Coverage	Disapproved	Yes
Form	Individuals and Families High Deductible Health Plan Evidence of Coverage	Withdrawn	Yes
Form	Individuals and Families High Deductible Health Plan Evidence of Coverage	Withdrawn	Yes
Form (revised)	High Deductible Health Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form (revised)	High Deductible Health Plan Benefit Summary Bronze Plan	Disapproved	Yes
Form	High Deductible Health Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form (revised)	High Deductible Health Plan Benefit Summary Silver Plan	Disapproved	Yes
Form	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form (revised)	Application for health coverage	Disapproved	Yes
Form	Application for health coverage	Withdrawn	Yes
Form	Application for health coverage	Withdrawn	Yes
Form (revised)	Enrollment Form for Newborn, Newly Adopted, or Placed for Adoption Dependents	Disapproved	Yes
Form	Enrollment Form for Newborn, Newly Adopted, or Placed for Adoption Dependents	Withdrawn	Yes

SERFF Tracking #:

KF-NW-128963825

State Tracking #:

253750

Company Tracking #:

EWIDOXHDHP0114

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest
 TOI/Sub-TOI: H161 Individual Health - Major Medical/H161.005C Individual - Other
 Product Name: KPIF Outside Market High Deductible Health Plans
 Project Name/Number: EWIDOXHDHP0114/EWIDOXHDHP0114

Schedule	Schedule Item	Schedule Item Status	Public Access
Form	Enrollment Form for Newborn, Newly Adopted, or Placed for Adoption Dependents	Withdrawn	Yes
Form	Declaration Form for Reduced Non-Tobacco Premium	Disapproved	Yes
Form	Coordination of Benefits Consumer Explanatory Booklet	Disapproved	Yes
Form	Frequently asked questions about your pharmacy benefits	Disapproved	Yes
Form	High Deductible Health Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	High Deductible Health Plan Benefit Summary Silver Plan	Withdrawn	Yes

SERFF Tracking #:

KFNW-128963728

State Tracking #:

253773

Company Tracking #:

EWIDOXDEDD0114

State: Washington **Filing Company:** Kaiser Foundation Health Plan of the Northwest
TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005C Individual - Other
Product Name: KPIF Outside Market Silver-Bronze Deductible Plan
Project Name/Number: EWIDOXDEDD0114/EWIDOXDEDD0114

Disposition

Disposition Date: 08/01/2013

Implementation Date:

Status: Disapproved

HHS Status: HHS Denied

State Review:

Comment: Dear Filer,

Your binder, form and rate filings are disapproved and closed per RCW 48.44.020(2)(a) and (e) for containing inconsistent information and failure to conform to the filing requirements set forth by the Insurance Commissioner's Office in WAC 284-44A-090(1) and the "Washington State SERFF Health and Disability Binder Filing General Instructions", section V.

As directed in our objection letter dated July 31, 2013, the Plans and Benefits template Cost Share Variance tab containing HIOS Product 23371WA051 [plans 23371WA051002 –Silver 1750/HSA with PDB-Off Exchange and 23371WA0510001 –Bronze 5000/30%/HSA with PDB-Off Exchange] required modification to be consistent with the pending Form Filings. These modifications were not made in response to the objection letter; therefore the binder cost share information does not support the filed form.

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Expense Product Outline of Coverage - L&D		Yes
Supporting Document	Filing Instructions		Yes
Supporting Document	Individual Form Filing Requirements - L&D, HCSC		Yes
Supporting Document	PPACA Exemption Request		Yes
Supporting Document	PPACA Uniform Compliance Summary		Yes
Supporting Document (revised)	Individual Out-Exchange Analyst Checklist - Revised		Yes
Supporting Document	Individual Out-Exchange Analyst Checklist		Yes
Supporting Document	Redline - 7/3/13 Amendment		Yes
Supporting Document	Redlines - 7/21/13 Amendment		Yes

SERFF Tracking #:

KFNW-128963728

State Tracking #:

253773

Company Tracking #:

EWIDOXDEDD0114

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest
 TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005C Individual - Other
 Product Name: KPFF Outside Market Silver Bronze Deductible Plan
 Project Name/Number: EWIDOXDEDD0114/EWIDOXDEDD0114

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Certification of Compliance - 7/21/13 Amendment		Yes
Supporting Document	Redlines - 7/26/13 Amendment		Yes
Form (revised)	Individuals and Families Deductible Plan Evidence of Coverage	Disapproved	Yes
Form	Individuals and Families Deductible Plan Evidence of Coverage	Withdrawn	Yes
Form	Individuals and Families Deductible Plan Evidence of Coverage	Withdrawn	Yes
Form (revised)	Deductible Plan Benefit Summary Bronze Plan	Disapproved	Yes
Form	Deductible Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Bronze Plan	Withdrawn	Yes
Form (revised)	Deductible Plan Benefit Summary Silver Plan	Disapproved	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form (revised)	Deductible Plan Benefit Summary Silver Plan	Disapproved	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes
Form	Deductible Plan Benefit Summary Silver Plan	Withdrawn	Yes

SERFF Tracking #:

KFNW-128963728

State Tracking #:

253773

Company Tracking #:

EWIDOXDEDD0114

State: Washington

Filing Company:

Kaiser Foundation Health Plan of the Northwest

TOI/Sub-TOI: H161 Individual Health Major Medical/H161.005C Individual - Other

Product Name: KPIF Outside Market Silver-Bronze Deductible Plan

Project Name/Number: EWIDOXDEDD0114/EWIDOXDEDD0114

Schedule	Schedule Item	Schedule Item Status	Public Access
Form (revised)	Application for health coverage	Disapproved	Yes
Form	Application for health coverage	Withdrawn	Yes
Form	Application for health coverage	Withdrawn	Yes
Form (revised)	Enrollment Form for Newborn, Newly Adopted, or Placed for Adoption Dependents	Disapproved	Yes
Form	Enrollment Form for Newborn, Newly Adopted, or Placed for Adoption Dependents	Withdrawn	Yes
Form	Enrollment Form for Newborn, Newly Adopted, or Placed for Adoption Dependents	Withdrawn	Yes
Form	Declaration Form for Reduced Non-Tobacco Premium	Disapproved	Yes
Form	Coordination of Benefits Consumer Explanatory Booklet	Disapproved	Yes
Form	Frequently asked questions about your pharmacy benefits	Disapproved	Yes

SERFF Tracking #: KFNW-129008172 State Tracking #: 254739 Company Tracking #: EWIDIXDEDB0114,EWIDOXDEDB0114,EWIDIXCAT0114,EWIDIXHDHP0114,EWIDOXHDHP0114,EWIDIXTRAD0114

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest
 TOI/Sub-TOI: H161 Individual Health - Major Medical/H161.005C Individual - Other
 Product Name: Individual Health Plan Rate Filing
 Project Name/Number: Individual Health Plan Rate Filing/EWIDIXDEDB0114,EWIDOXDEDB0114,EWIDIXCAT0114,EWIDIXHDHP0114,EWIDOXHDHP0114,EWIDIXTRAD0114

Disposition

Disposition Date: 08/01/2013
 Implementation Date:
 Status: Disapproved

HHS Status: HHS Denied
 State Review: Reviewed by Actuary

Comment: Your binder, form and rate filings are disapproved and closed per RCW 48.44.020(2)(a) and (e) for containing inconsistent information and failure to conform to the filing requirements set forth by the Insurance Commissioner's Office in WAC 284-44A-090(1) and the "Washington State SERFF Health and Disability Binder Filing General Instructions", section V.

As directed in our objection letter dated July 31, 2013, the Plans and Benefits template Cost Share Variance tab containing HIOS Product 23371WA051 [plans 23371WA051002 –Silver 1750/HSA with PDB-Off Exchange and 23371WA0510001 –Bronze 5000/30%/HSA with PDB-Off Exchange] required modification to be consistent with the pending Form Filings. These modifications were not made in response to the objection letter; therefore the binder cost share information does not support the filed form.

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Kaiser Foundation Health Plan of the Northwest	New Product	%	%		5,627	\$1,872,681	%	%

Percent Change Approved:

Minimum: %
 Maximum: %
 Weighted Average: %

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document (revised)	Actuarial Memorandum and Certifications		Yes

SERFF Tracking #: KFNW-129008172 State Tracking #: 254739 Company Tracking #: EWIDIXDEDB0114,EWIDOXDEDB0114,EWIDIXCAT0...

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest
 TOI/Sub-TOI: H161 Individual Health Major Medical/H161.005C Individual Other
 Product Name: Individual Health Plan Rate Filing
 Project Name/Number: Individual Health Plan Rate Filing/EWIDIXDEDB0114,EWIDOXDEDB0114,EWIDIXCAT0114,EWIDIXHDHP0114,EWIDOXHDHP0114,EWIDIXTRAC0114

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Actuarial Memorandum and Certifications		Yes
Supporting Document	Actuarial Memorandum and Certifications		Yes
Supporting Document	Actuarial Memorandum and Certifications		Yes
Supporting Document	Actuarial Memorandum and Certifications		Yes
Supporting Document	Actuarial Memorandum and Certifications		Yes
Supporting Document	Consumer Disclosure Form Descriptions		Yes
Supporting Document (revised)	Unified Rate Review Template		Yes
Supporting Document	Unified Rate Review Template		Yes
Supporting Document	Unified Rate Review Template		Yes
Supporting Document	Unified Rate Review Template		Yes
Supporting Document	Unified Rate Review Template		Yes
Supporting Document	Unified Rate Review Template		Yes
Supporting Document	Cover Letter		Yes
Supporting Document (revised)	WAC 284-43-945.pdf		Yes
Supporting Document	WAC 284-43-945.pdf		Yes
Supporting Document	WAC 284-43-945.pdf		Yes
Supporting Document	WAC 284-43-945.pdf		Yes
Supporting Document	WAC 284-43-945.pdf		Yes
Supporting Document (revised)	AV Calculations		Yes
Supporting Document	AV Calculations		Yes
Supporting Document	AV Calculations		Yes
Supporting Document	AV Calculations		Yes
Supporting Document	AV Calculations		Yes

SERFF Tracking #:

KFNW-129008172

State Tracking #:

254739

Company Tracking #:

EWIDIXDEDB0114,EWIDOXDEDB0114,E
WIDIXCATG...

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest

TOI/Sub-TOI: H161 Individual Health - Major Medical/H161.005C Individual - Other

Product Name: Individual Health Plan Rate Filing

Project Name/Number: Individual Health Plan Rate Filing/EWIDIXDEDB0114,EWIDOXDEDB0114,EWIDIXCAT0114,EWIDIXHDHP0114,EWIDOXHDHP0114,EWIDIXTRAD0114

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	AV Calculations		Yes
Supporting Document	AV Calculations		Yes
Supporting Document	WAC 284-43-930.pdf		Yes
Supporting Document (revised)	Rating Example		Yes
Supporting Document	Rating Example		Yes
Supporting Document	Rating Example		Yes
Supporting Document	Rating Example		Yes
Supporting Document	Rating Example		Yes
Supporting Document (revised)	KFHP Individuals Rates 2014 04292013 Duplicate.xls		Yes
Supporting Document	KFHP Individuals Rates 2014 04292013 Duplicate.xls		Yes
Supporting Document	Objection Q12 Reinsurance Response		Yes
Supporting Document	Objection Q14 Smoker and Area Normalization		Yes
Supporting Document	Objection Responses 06132013		Yes
Supporting Document (revised)	July 2 Objection Response		Yes
Supporting Document	July 2 Objection Response		Yes
Supporting Document (revised)	Non EHB Explanation		Yes
Supporting Document	Non EHB Explanation		Yes
Rate (revised)	Rate Table		Yes
Rate	Rate Table		Yes
Rate	Rate Table		Yes
Rate	Rate Table		Yes
Rate	Rate Table		Yes
Rate	Rate Table		Yes

SERFF Tracking #: KFNW-129008172 State Tracking #: 254739 Company Tracking #: EWIDIXDEDB0114,EWIDOXDEDB0114,EWIDIXCAT0...

State: Washington Filing Company: Kaiser Foundation Health Plan of the Northwest

TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I 005C Individual - Other

Product Name: Individual Health Plan Rate Filing

Project Name/Number: Individual Health Plan Rate Filing/EWIDIXDEDB0114,EWIDOXDEDB0114,EWIDIXCAT0114,EWIDIXHDHP0114,EWIDOXHDHP0114,EWIDIXTRAD0114

Schedule	Schedule Item	Schedule Item Status	Public Access
Rate	KFHP Individuals Rates 2014 04292013		Yes
Rate	KFHP Individuals Rates 2014 04292013		Yes
Rate	KFHP Individuals Rates 2014 04292013		Yes

EXHIBIT 2

Plan and Benefits Template Screenshots (7/31/13) of off-Exchange Plans

HIOS Product ID: 23371WA051

HIOS Plan ID: 23371WA0510001 and 23371WA0510002 (with error)

In the screenshot below, please refer to Column KZ, rows 4 and 5. In the spreadsheet, two cells (KZ4 and KZ5) were not corrected to read \$0 as required by the OIC objection. Instead, the cells continued to contain erroneous information: "\$0 Copay after deductible".

Eye Glasses for Children									
HIOS Plan ID* (Standard Component + Variant)	Plan Marketing Name*	Level of Coverage* (Metal Level)	CSR Variation Type*	Copay			Coinsurance		
				In-Network (Tier 1)	In-Network (Tier 2)	Out of Network	In-Network (Tier 1)	In-Network (Tier 2)	Out of Network
23371WA0510002-CKP WA Silver 1750/0/ISA with Pediatric Dental	Silver	Standard Silver Off Exchange Plan	Standard Silver Off Exchange Plan	\$0 Copay after deductible	\$0	\$0	No Charge		100%
23371WA0510001-CKP WA Bronze 5000/30%/ISA with Pediatric Den	Bronze	Standard Bronze Off Exchange Plan	Standard Bronze Off Exchange Plan	\$0 Copay after deductible	\$0	\$0	No Charge		100%

EXHIBIT 3

Plan and Benefits Template Screenshots (7/31/13) of on-Exchange Plans

HIOS Product ID 23371WA048 (corrected as requested by OIC)

HIOS Plan ID: 23371WA0480001 and 23371WA0480003

In the screenshot below, please refer to please see Column KZ, rows 4 through 12. The change was corrected to read \$0 as required by the OIC objection.

Plan Benefits Template VLSM - Microsoft Excel

File Home Insert Page Layout Formulas Data Review View DYMOLabel Acrobat

Clipboard Font Paragraph Styles Lists Editing

KZ1 Eye Glasses for Children

				KZ	LA	LB	LC	LD	LE
				Eye Glasses for Children					
				Cost Sharing R		Copy		Coinsurance	
HIOS Plan ID* (Standard Component + Variant)	Plan Marketing Name*	Level of Coverage* (Metal Level)	CSR Variation Type*	In Network (Tier 1)	In Network (Tier 2)	Out of Network	In Network (Tier 1)	In Network (Tier 2)	Out of Network
4	23371WA0480001-01 KP WA Silver 1750/0/HSA	Silver	Standard Silver On Exchange Plan	\$0		\$0	No Charge		100%
5	23371WA0480001-02 KP WA Silver 1750/0/HSA	Silver	Zero Cost Sharing Plan Variation	\$0		\$0	0%		0%
6	23371WA0480001-03 KP WA Silver 1750/0/HSA	Silver	Limited Cost Sharing Plan Variation	\$0		\$0	No Charge		100%
7	23371WA0480001-04 KP WA Silver 1750/0/HSA	Silver	73% AV Level Silver Plan	\$0		\$0	No Charge		100%
8	23371WA0480001-05 KP WA Silver 1750/0/HSA	Silver	87% AV Level Silver Plan	\$0		\$0	No Charge		100%
9	23371WA0480001-06 KP WA Silver 1750/0/HSA	Silver	94% AV Level Silver Plan	\$0		\$0	No Charge		100%
10	23371WA0480003-01 KP WA Bronze 5000/30%/HSA	Bronze	Standard Bronze On Exchange Plan	\$0		\$0	No Charge		100%
11	23371WA0480003-02 KP WA Bronze 5000/30%/HSA	Bronze	Zero Cost Sharing Plan Variation	\$0		\$0	0%		0%
12	23371WA0480003-03 KP WA Bronze 5000/30%/HSA	Bronze	Limited Cost Sharing Plan Variation	\$0		\$0	No Charge		100%

Benefits Package 4 | Cost Share Variances 4 | Benefits Package 5 | Cost Share Variances 5 | Benefits Package 6

EXHIBIT 4

Here is a sample screen shot of the benefit summary correction that was made to all four benefit

Pediatric Vision Services (for Members age 18 years and younger)	You Pay
Routine eye exam (limited to one exam per Calendar Year)	\$0
Low vision evaluation and/or follow up exams (evaluations limited to once every five years; follow up exams limited to four exams every five years)	30% Coinsurance after Deductible
Eyeglasses (limited to one pair per Calendar Year)	\$0 after Deductible
Contact lenses in lieu of eyeglasses (limited to 12-month supply of disposable lenses per Calendar Year)	\$0 after Deductible
Medically necessary contact lenses (limited to one pair per Calendar Year, prior authorization required)	\$0 after Deductible
Low vision aids (limited to one device per Calendar Year, prior authorization required)	\$0 after Deductible

summaries