

Concise Explanatory Statement of the Rule
**Rule Subject: Issuer filing of attestation form regarding transparency tools for
consumer information on health care cost and quality**

Matter No. 2015-03

per RCW 34.05.325(6)

I. History:

A CR 101 was filed on: May 19, 2015

The comment period was open until: July 1, 2015

A CR 102 was filed on: August 12, 2015

The comment period was open until: September 30, 2015

A rule-making hearing was held on: September 30, 2015

- II. **Commissioner's Reasons for Adopting the Rule:** Revised Code of Washington 48.43.007 requires health plan issuers in Washington to attest to the Office of the Insurance Commissioner that their member transparency tools meet the requirements in the statute and that access to the tools is available on the issuer's home page with the health plan's secured member web site. This rule directs health plan issuers to file with the OIC one annual attestation for each market level of plans offered in Washington (e.g., individual, small group and large group). The rule provides guidance to issuers as to how the attestation(s) should be provided to OIC.

- III. **Text Differences between CR 102 published text and CR103 text to be adopted:** No changes were made to CR 102 published text.

- ☐ Editing changes only
- ☐ Differences and reasons for them:

IV. Summary of Received Comments on the Proposed Rule

A. Summary of all comments received [de-identified, arranged by category or subject matter]

1. During the CR 101 comment period

An issuer commented with a request that the rule be written to allow filing of attestations at the issuer level, rather than the market level, in order to reduce the administrative burden on health plan issuers.

Commissioner's response:

The Commissioner accommodated this request in drafting the rule language in order to reduce the administrative burden on both the issuers and the OIC.

2. During the CR 102 comment period

An issuer requested that the rule language be amended to read that attestations be required at the issuer or "corporate family group" level, rather than only the issuer level. This change

could allow a parent company for multiple health plan issuers to file on behalf of all of the health plans within that corporate family group.

Commissioner's response:

The Commissioner declines to make the requested change. The Commissioner would like to note that the format for the attestation is not set in rule, but will be available on the Commissioner's website for annual submission. The Commissioner's intent is to include space in the attestation form to allow an issuer to indicate if the form is for a single issuer or a parent corporation filing on behalf of all health plan issuers within the corporation. The parent corporation must file one annual attestation for each line of business offered in Washington (individual, small group and large group) and indicate within the attestation that it is attesting on behalf of all of the health plan issuers within that corporate family group which offer plans in Washington.

3. During the CR 102 comment period

An issuer requested clarification regarding whether the OIC would provide the form to be used by issuers, along with instruction for completing and filing it. The issuer also requested that the OIC clarify when the form itself would be available.

Commissioner's response:

The Commissioner will provide the form to be used by issuers, along with instruction for completing and filing the form. The form and instructions will be available more than 60 days prior to the filing deadline.

4. During the CR 102 comment period

An issuer requested that the OIC consider an alternative submission option for those situations where an issuer offers all its transparency tools to all members regardless of the line of business applicable to their plans.

Commissioner's response:

The Commissioner intends to accommodate this request in the form and filing instructions. The OIC anticipates the form will allow the submitting issuer to indicate that the single attestation is being submitted for more than one line of business, thus reducing the administrative burden on both the issuers and the OIC.

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