

p 503 775 3497

10117 SE Sunnyside Rd.
Suite F-408
Clackamas, OR 97015



February 27, 2015

Chair Greenlick,
Members of the House Committee on Healthcare

Re: Testimony in support of HB 2605, Rate Filings.

Chair Greenlick & Members of the Committee:

On behalf of One in Four Chronic Health, thank you for the opportunity to submit testimony in support of HB 2605.

One in Four advocates for transparency in all areas of healthcare, including health insurance plans. For this reason we support this bill and other measures to strengthen consumer protections in Oregon.

HB 2605 offers protections for insurers by allowing them to continue participating in the Exchange even while they appeal a rate filing, and will improve communications between insurers and the Division of Business and Consumer Services (DCBS), the regulatory agency.

Regarding the requirement for earlier rate filing for plans, we believe that this will ultimately benefit consumers allowing them more time to make plan choices. Respectfully, we do not agree with the testimony provided by Moda Health, which states earlier filings will harm consumers "because insurance companies will have less time to evaluate the results of open enrollment for the current year". Insurers have been using the argument of time and cost as a defense against transparency and will continue to do so as long as they are able.

We would prefer to see transparency increased to areas of plans that are inline with the recent Centers for Medicare and Medicaid Services ruling Final HHS Notice of Benefit and Payment Parameters for 2016 (1) , including:

- Enhanced transparency in the rate setting process by use of a uniform timeline.
- The requirement for Qualified Health Plans (QHP) to provide issuers to publish up-to-date, accurate, and complete provider directories and formularies.
- Formulary transparency. Plans will be required to have complete formularies with tiering and utilization management information posted online with a direct link from the Summary of Benefits and Coverage document.
- Non-discrimination in access to drugs, such as placing all or most medicines to treat a specific condition on the highest formulary tier.

Thank you for the opportunity to provide testimony on this issue, if you should have any questions please feel free to contact me at BJ@1-in-4.org.

Sincerely,

A handwritten signature in black ink, appearing to read "BJ Cavnor", with a long horizontal flourish extending to the right.

BJ Cavnor
Executive Director

Reference:

(1)Final HHS Notice of Benefit and Payment Parameters for 2016 <https://www.federalregister.gov/articles/2015/02/27/2015-03751/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2016> Accessed February 2015.