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## **BULLETIN NO. 19-06**

TO: ALL CARRIERS THAT ISSUE INDIVIDUAL AND SMALL EMPLOYER

HEALTH BENEFITS PLANS IN NEW JERSEY

FROM: MARLENE CARIDE, COMMISSIONER

RE: AMENDMENT TO MINIMUM STANDARDS FOR HEALTH BENEFITS

PLANS TO FACILITATE THE AVAILABILITY OF BRONZE HIGH

DEDUCTIBLE HEALTH PLANS EFFECTIVE FOR PLAN YEAR 2020

## **Background**

The 2010 Federal Patient Protection and Affordable Care Act, P.L. 111-148, as amended, and the Federal rules promulgated thereunder require that health benefits plans issued in the individual and small employer markets satisfy specific actuarial value ("AV") standards where the AV is calculated using the AV calculator for the applicable plan year. The AV calculator the Federal Government adopted for 2020 produces generally higher AVs than the AVs calculated using the current calculator for the same plans. Therefore, carriers seeking to offer individual and small employer plans in 2020 must ensure that the AVs for such plans are within the permissible AV ranges for a Bronze, Silver, Gold, or Platinum plan, as determined using the 2020 AV calculator.

High deductible health plans ("HDHPs") that could be sold in conjunction with a Health Savings Account ("HSA") must comply with specific deductible and out of pocket requirements. The most current requirements apply to 2019 plans and specify that the single deductible must be at least \$1,350 and the single out of pocket maximum cannot exceed \$6,750. The requirements applicable to 2020 are expected to be released in mid to late May 2019.

Carriers offering health benefits plans must also comply with the Minimum Standards requirements of New Jersey set forth in N.J.A.C. 11:22-5. N.J.A.C. 11:22-5.3(a)2 addresses the per person network deductible and specifies that it cannot exceed \$2,500. However, as provided in Bulletin No. 15-04, carriers for plan year 2016 to the present were permitted to use a deductible of up to \$3,000 per person with respect to Bronze plans offered in the individual and small employer markets.

## 2020 Bronze High Deductible Health Plans

The Department has learned that when using the maximum permissible deductible under New Jersey rules of \$3,000 for a Bronze plan and the highest maximum out of pocket permitted for a HDHP of \$6,750, it is impossible to satisfy the AV requirements for a Bronze HDHP. Specifically, the AV, using the Federal Government's 2020 calculator, exceeds the maximum permissible AV for a Bronze plan. Even if the out of pocket maximum limit increases as expected for 2020, it remains impossible to have a Bronze HDHP in 2020.

Therefore, the Department will permit carriers in the individual and small employer markets only to use an individual network deductible of up to \$3,500 for Bronze HDHPs that could be used in conjunction with an HSA.

## **Other Plans**

5/13/19

The \$2,500 individual network deductible limit set forth in N.J.A.C. 11:22-5.3(a)2 will continue to apply to any large group health benefits plans and those Gold, Silver, and Platinum health benefits plans offered in the individual and small employer markets. Bronze plans that are not HDHPs may use an individual network deductible of up to \$3,000, as was previously set forth in Bulletin No. 15-04.

Marlene Caride Commissioner

AV Amendment to minimum standards to facilitate the availability of bronze high deductive health plans/Bulletins