



2020: OVERVIEW OF THE HEALTH INSURANCE MARKET IN KANSAS

Open Enrollment for Individuals and Families for Plan Year 2020

Kansas has a Federally Facilitated Marketplace (FFM) that utilizes the www.healthcare.gov platform. An enhanced direct enrollment pathway for consumers to enroll in health insurance coverage is available through the FFM.

The pathway allows the Centers for Medicare and Medicaid (CMS) to collaborate with the private sector to provide a more user-friendly enrollment experience for consumers by allowing them to apply for and enroll in an Exchange plan directly through an approved issuer or web-broker without being redirected to www.healthcare.gov or contacting the Exchange call center.

Consumers can visit <https://www.healthcare.gov/direct-enrollment/> for information on how to get health coverage through approved enrollment partner websites. A list of partners authorized to use the Enhanced Direct Enrollment pathway for the FFM is available by following instructions in the above link.

Consumers using the enhanced direct enrollment pathway should use caution regarding the plan options that are available for purchase. While the www.healthcare.gov website will only display major medical coverage that includes all of the benefits required by the Affordable Care Act (ACA) this is not necessarily the case when using other websites. Some of these websites may also ask for personal information that may be used to market other policies.

Open enrollment for plan year 2020 begins **November 1, 2019** and ends **December 15, 2019**. Open enrollment is an opportunity for Kansans to evaluate whether to enroll in coverage, stay on their current policy, if available, or enroll in a different policy from the same company or a different company. Consumers currently enrolled in a qualified health plan (QHP) through the FFM may be eligible for automatic re-enrollment.

Anyone wishing to have coverage effective January 1, 2020 **must** complete the application process by December 15, 2019. After December 15, 2019, the only way to obtain coverage is via a special enrollment period due to a qualifying event.

During open enrollment the federal government will be suggesting new plans for individuals on qualified health plans (QHPs) that companies are discontinuing after 2019. Consumers whose current plans will not be offered in 2020 do not have to enroll in the plan suggested to them. They are able to shop for any plan available to them depending on where they live. The new plan is effective only when the premium is paid.

It is important for Kansans to report changes to their income, address, and household information as soon as possible. If changes are not reported federal taxes could be affected. The FFM will re-determine enrollee eligibility for advance premium tax credits (APTC) and income-based cost-sharing reductions (CSRs) for those receiving financial assistance using the most recent income data available.

In addition, coverage may be purchased during the open enrollment period off the Marketplace from the same companies offering coverage on the Marketplace. Some plans are only available for purchase off the Marketplace. It is important to note that the only way to obtain coverage after open enrollment ends on December 15, 2019 is via a special enrollment period due to a qualifying event.

The tax credits and cost-sharing reductions are only available when purchasing on the FFM. If you qualify for cost-sharing reductions you must pick a silver plan to receive the extra savings.

It is important for consumers to understand how their policy works and especially important to understand the network requirement of any plan being considered. Companies may change the type of policy they sell from one year to the next resulting in potential network implications. Consumers should check to be certain that their physicians and all other medical providers are in the network for the plan they are considering purchasing. Companies may offer the following plans:

- **Exclusive Provider Organization (EPO)** – A type of managed care organization (health plan) that provides health care coverage through preferred health care providers only. The EPO may require a gatekeeper, a primary care professional who makes referrals for specialty care.
- **Health Maintenance Organization (HMO)** – A type of managed care organization (health plan) that provides health care coverage through a network of hospitals, doctors and other health care providers. Typically, the HMO only pays for care that is provided from an in-network provider.
- **Preferred Provider Organization (PPO)** – A type of health plan that provides health care coverage through a network of providers. Typically, the PPO requires the policyholder to pay higher costs when they seek care from an out-of-network provider.
- **Point of Service (POS)** – A managed care plan that gives members the option of seeking care from a specialist without a referral from a primary-care physician. Such services are subject to a higher deductible and/or coinsurance.

There are bronze, silver, gold and platinum metal levels. The various metal levels indicate how you and your plan will share in the costs of care.

Bronze plans offer the lowest monthly premium and the highest cost when you seek care.

Expanded bronze plans either cover and pay for at least one major service, other than preventive services before the deductible or meet the requirements to be a high deductible health plan. Covered major services could include primary care visits, specialist visits, emergency room services, inpatient hospital services, generic drugs, preferred brand drugs, or specialty drugs.

At the other end of the spectrum, platinum plans offer the highest monthly premium and the lowest costs when you receive care. For 2020, there are no platinum plans available in the individual market. There are companies offering platinum plans in the small group market.

Key Dates to Remember

- **November 1, 2019** - Open Enrollment begins.
- **December 15, 2019** - Open Enrollment ends.
- **January 1, 2020** - Coverage for 2020 can begin.



Policy Options for Individuals and Families

In 2020 consumers shopping on the FFM in Kansas will have the opportunity to purchase individual policies offered by five health insurance companies depending on where they live. The companies include Medica Insurance Company (105 counties); Blue Cross and Blue Shield of Kansas (103 counties); Ambetter from Sunflower Health Plan (16 counties); Oscar Insurance Company (2 counties); and Cigna Health and Life Insurance Company (8 Counties). There are 82 individual policies available on the Marketplace depending on geographic location.

Marketplace Policies Available in Kansas in 2020

Company	Type	Availability by County	Catastrophic	Bronze	Silver	Gold
Blue Cross and Blue Shield of Kansas, Inc.	EPO	Not available in Johnson and Wyandotte	0	2	2	1
Medica Insurance Company	EPO	Plans available statewide	2	12	4	5
Ambetter from Sunflower Health Plan	HMO	Johnson, Wyandotte, Leavenworth, Miami, Allen, Bourbon, Butler, Cherokee, Cowley, Crawford, Douglas, Harvey, Linn, Sedgwick, Sumner and Woodson	0	6	24	4
Cigna Health and Life Insurance Company	EPO	Johnson, Wyandotte, Leavenworth, Miami, Harvey, Sumner, Butler and Sedgwick	0	4	4	2
Oscar Insurance Company	EPO	Johnson and Wyandotte	1	4	4	1
		Total Individual: 82	3	28	38	13

Note: Companies offering plans on the Marketplace must also offer those plans off the Marketplace. Expanded bronze plans are included in the bronze plan column above.

Consumers who wish to purchase coverage off the FFM may do so and will have the opportunity to purchase individual policies from the same five companies, depending on where they live. It is important to remember that tax credits and cost-sharing reductions are only available when purchasing on the FFM.

Small Business Health Insurance

Plan year 2020 will not have any issuers offering policies on the Small Business Health Options Program (SHOP) Exchange. However, coverage off the SHOP is available in the small group market from Blue Cross and Blue Shield of Kansas City; Blue Cross and Blue Shield of Kansas, Inc.; UnitedHealthcare Insurance Company; Aetna Life Insurance Company; Aetna Health Inc.; Humana Health Plan, Inc.; and Humana Insurance Company.

Off SHOP Policies Available in Kansas in 2020

Company	Type	Total	Bronze	Silver	Gold	Platinum
Aetna Health Inc.	POS	1	0	1	0	0
Aetna Life Insurance Company	EPO	1	0	1	0	0
Blue Cross and Blue Shield of Kansas, Inc.	EPO	5	2	2	1	0
Blue Cross and Blue Shield of Kansas, Inc.	PPO	13	3	4	3	3
Blue Cross and Blue Shield of Kansas City	EPO	20	9	7	4	0
Blue Cross and Blue Shield of Kansas City	PPO	14	5	4	5	0
Humana Health Plan, Inc.	POS	53	13	19	19	2
Humana Insurance Company	Indemnity	1	0	1	0	0
Humana Insurance Company	PPO	106	26	38	38	4
UnitedHealthcare Insurance Company	PPO	36	1	10	22	3
Total Small Group:		250	59	87	92	12

Other Health Insurance and Benefit Coverage Options

Short-term, Limited Duration Insurance

Short-term, limited duration insurance (STLDI) policies in Kansas may include policy terms of either six or twelve months with one renewal for a maximum policy duration of twenty-four months pursuant to state law.

These policies may be medically underwritten and the end of a short-term, limited duration policy does not qualify the insured for a special enrollment period. This means that if someone cannot pass medical underwriting they will have to wait until the next open enrollment period to purchase major medical coverage and it will not be effective until January 1 of the following year. Exceptions to this would be if someone experiences a qualifying event that triggers a special enrollment period.

For a list of companies that write short-term, limited duration insurance policies in Kansas please go to <https://www.ksinsurance.org/documents/healthlife/health/Individual-short-term-carriers.pdf>.

Stand-Alone Dental Plans

For individual policies that do not include pediatric dental, stand-alone dental plans are available. Exchange certified stand-alone dental plans include pediatric dental to meet the essential health benefits. The annual limitation on cost sharing for 2020 is \$350 for one child and \$700 for two or more children.

In 2020, consumers shopping on the FFM in Kansas will have the opportunity to purchase individual dental policies offered by BEST Life and Health Insurance Company, Dentegra Insurance Company, Renaissance Life & Health Insurance Company of America and TruAssure Insurance Company. There are 12 individual policies available on the Marketplace.

Marketplace Dental Policies Available in Kansas in 2020 (Individual or Family)

Company	Total
BEST Life and Health Insurance Company	4
Dentegra Insurance Company	2
Renaissance Life & Health Insurance Company of America	4
TruAssure Insurance Company	2
Total Individual:	12

Consumers who wish to purchase coverage off the FFM have the opportunity to purchase individual policies. Consumers shopping off the FFM in Kansas will have the opportunity to purchase certified stand-alone dental policies offered by the following companies: BEST Life and Health Insurance Company, Renaissance Life & Health Insurance Company of America and TruAssure Insurance Company.

Off the Marketplace Dental Policies Available in Kansas in 2020 (Individual or Family)

Company	Total
BEST Life and Health Insurance Company	4
Renaissance Life & Health Insurance Company of America	4
TruAssure Insurance Company	2
Total Individual:	10

Off SHOP Dental Policies Available in Kansas in 2020 (Small Group)

Company	Total
Metropolitan Life Insurance Company	1

Premium Rates for Individual and Small Group Markets

Kansas is an effective rate review state meaning that the Kansas Insurance Department conducts the actuarial review of premium rate filings. KHIIS (Kansas Health Insurance Information System) claims data is utilized during the rate review process to verify the claims experience submitted by the companies.

Individual plan premium rates may vary by age, rating area, family composition and tobacco usage. For example, a person living in Lawrence, Kansas (rating area 2) may pay a different rate than someone living in Manhattan, Kansas (rating area 3) based on the claims data by rating area. See the last page of this document for a map of the counties included in each rating area.

The following table provides details regarding the average requested rate revisions for plan year 2020 for companies writing individual policies in Kansas.

Company Name	Average Filed Increase	On Marketplace	Off Marketplace
Blue Cross and Blue Shield of Kansas, Inc.	2.96%	Yes	Yes
Medica Insurance Company	-3.19%	Yes	Yes
Ambetter from Sunflower Health Plan	-8.73%	Yes	Yes
Oscar Insurance Company	New in 2020	Yes	Yes
Cigna Health and Life Insurance Company	New in 2020	Yes	Yes

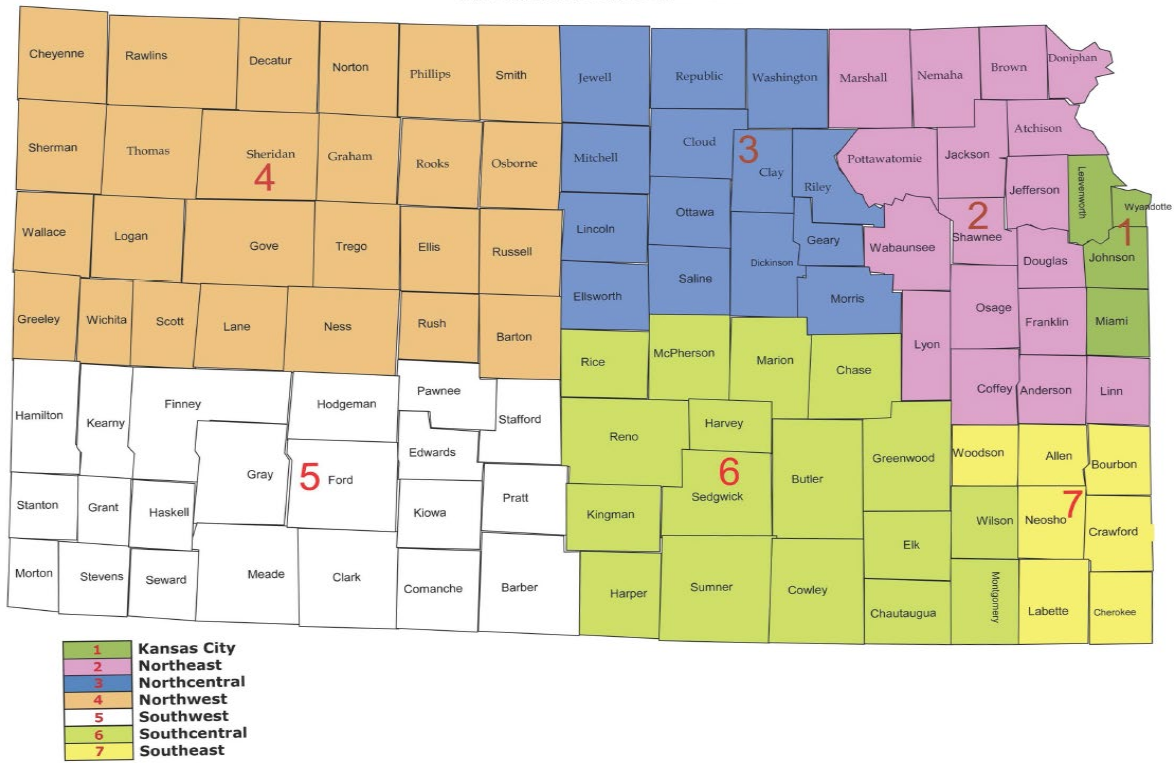
Small Business Health Insurance Rates

The range of average rate revisions by insurance companies for policies sold off the 2020 federally facilitated SHOP is 1.34% percent to 13.3% percent.

The following table details the average rate revisions requested by the companies that write small business health insurance in Kansas.

Company Name	Average Filed Increase
Aetna Health Inc.	4.23%
Aetna Life Insurance Company	8.85%
Blue Cross and Blue Shield of Kansas, Inc.	8.37%
Blue Cross and Blue Shield of Kansas City	1.34%
Humana Health Plan, Inc.	8.49%
Humana Insurance Company	10.58%
UnitedHealthcare Insurance Company	13.30%

**Kansas Rating Areas Established Pursuant to 45 CFR 147.102(b)(3)(ii)
For Plan Years Beginning in 2014**



Kansas Federal Marketplace Enrollment Comparison 2015-2019					
	2015	2016	2017	2018	2019
Total Number of Individuals with Plan Selection Through the Marketplace	96,197	101,555	98,780	98,238	89,993
Number of Plan Selections with Financial Assistance	80%	83%	84%	83%	86%
Total Consumers Reenrolling in Coverage Through the Marketplace	46,393	60,661	67,292	70,905	70,035
Total Active Reenrollees	23,398	50,743	52,378	52,465	52,261
Active Reenrollees Who Switched Plans	13,922	38,412	26,435	26,404	16,953
Age < 18	9%	10%	11%	11%	10%
Age 18 - 25	11%	11%	11%	10%	10%
Age 26 - 34	19%	19%	18%	18%	17%
Age 35 - 44	16%	15%	15%	15%	16%
Age 45 - 54	19%	18%	17%	17%	17%
Age 55 - 64	25%	26%	27%	28%	30%
Age ≥ 65	< 1%	< 1%	< 1%	< 1%	< 1%