

Douglas Furness Senior Director, Government & Regulatory Affairs

September 1, 2023

Katie Merritt, Director of Policy and Planning Office of Insurance Commissioner 1326 Strawberry Square Harrisburg, PA 17120

Re: Pennsylvania Insurance Department (Department) Request for Comment Commonwealth Essential Health Benefits Benchmark Plan

Dear Ms. Merritt:

Thank you for the opportunity to comment on potential updates to the Commonwealth's Essential Health Benefits (EHB) benchmark plan. As a leading health insurer in 21 counties in Central Pennsylvania and the Lehigh Valley, Capital Blue Cross has been instrumental in providing affordable healthcare coverage to Pennsylvania citizens for over 85 years and has actively participated in Pennsylvania's Affordable Care Act (ACA) Health Insurance Marketplace since its inception. We appreciate that the Department is seeking input from its constituents and look forward to the Department's continued transparency in this process as it evaluates modifications to the EHB benchmark plan.

Pennsylvania's EHB's currently follow Keystone Health Plan East's Small Group 2017 Gold Premier HMO plan, as amended by state mandated benefits passed by the Pennsylvania legislature and signed into law since that time (e.g., coverage of all costs associated with one supplemental breast screening – MRI or ultrasound – every year for women who are believed to be at an increased risk of breast cancer). The benchmark plan covers dozens of services in the ten required benefit categories including drugs in each United States Pharmacopeia (USP) therapeutic category and class. The scope of benefits offered include benefits provided under a typical employer plan such as hospitalization, outpatient services, mental health and substance use disorder services, preventive services, etc. Further, the benchmark plan provides benefits for all segments of the population including women, children, persons with disabilities, and other groups; and over the years, insurers, in conjunction with the Department, have worked to ensure that the benefit design is not discriminatory. Thus, the original legislation and subsequent changes have ensured that Pennsylvania has a robust health benefit package for the Commonwealth's

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population that meets the goal and intent of the ACA to make available for everyone a comprehensive benefit package without annual or lifetime dollar limitations on necessary services.

While ensuring comprehensive coverage is an important policy imperative under the ACA, affordability of coverage is paramount. However, the addition of new benefits to health benefit plans comes at a cost to consumers, and for this reason, CMS imposes generosity limitations on EHB benchmark plans to safeguard against the plans becoming an undue financial burden on consumers who seek to obtain health insurance coverage. Capital Blue Cross strongly believes that the current EHB benchmark plan appropriately balances the two goals of affordability and comprehensive coverage; meeting or exceeding benefits in all the required benefit categories listed in the ACA. Therefore, our position is that there is currently no need to add benefits that may negatively tip the balance, likely making the benchmark plan unaffordable for consumers.

We look forward to working with the Department in the EHB selection process, as well as having the opportunity to review other stakeholders' comments, the supporting medical data for any additional benefits, and the actuarial impact on potential updates to the EHBs.

Sincerely,

Douglas Furness

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