



# Essential Health Benefits expansion

*Policy and Rates, Forms, and Provider Networks*

December 10, 2024



OFFICE of the  
**INSURANCE  
COMMISSIONER**  
WASHINGTON STATE

# Welcome

*Jennifer Kreidler*

*Provider Network Oversight Program Manager*

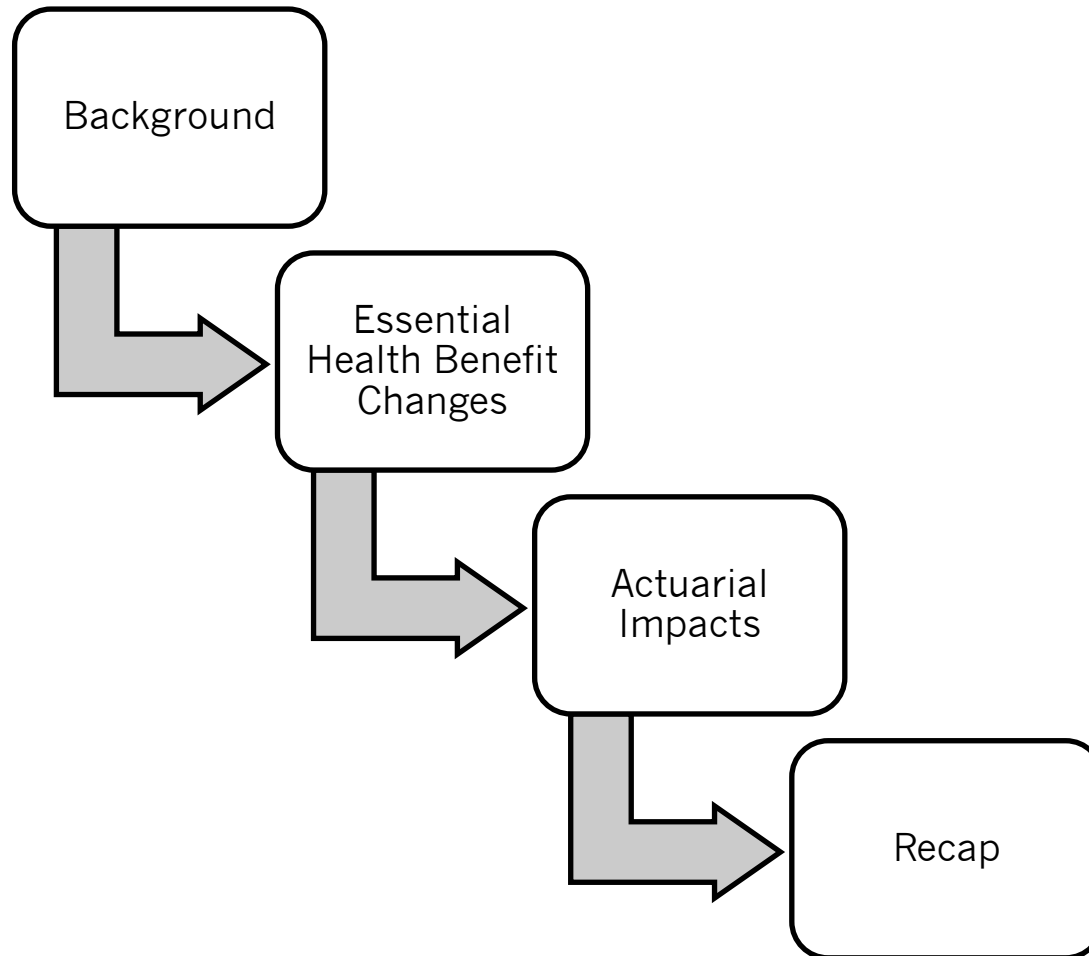
# Housekeeping

---

- This PowerPoint Deck will be posted on the OIC website after the presentation.
- A link will be sent out via a GovDelivery email.
- Ask questions using the Chat feature in TEAMS.
  - We will post questions and answers as the webinar progresses.
- If we don't answer your question, email it to [RFHealthplan@oic.wa.gov](mailto:RFHealthplan@oic.wa.gov)

# Agenda

---



# Background

*Jane Beyer*

*Senior Health Policy Advisor*

# Essential Health Benefits

---

The Affordable Care Act (ACA) requires non-grandfathered health plans in the individual and small group markets to cover essential health benefits (EHB).

“Essential health benefit categories” outlined in the ACA and in [RCW 48.43.005](#) (21):

- Ambulatory patient services
- Emergency services
- Hospitalization
- Maternity and newborn care
- Mental health and substance use disorder services, including behavioral health treatment
- Prescription drugs
- Rehabilitative and habilitative services and devices
- Laboratory services
- Preventative and wellness services and chronic disease management
- Pediatric services, including oral and vision care

# SSB 5338

---

[Substitute Senate Bill 5338](#) (2023) directed the OIC to review Washington's benchmark plan and determine whether to request federal approval to update the plan. This review required consultation with interested parties and entities.

Benefits that must be included if Washington's EHB benchmark plan is modified:

- Donor human milk (per [RCW 48.43.815](#))
- Hearing instruments and associated services (per [RCW 48.43.135](#))

# Washington EHB “Benchmark Plan”

---

Under the ACA, each state must designate an EHB “benchmark plan” to serve as a benchmark (i.e., minimum coverage) for all individual and small group health plans offered in the state.

[RCW 48.43.715](#) directs OIC to select the largest small group plan in the state by enrollment as the EHB benchmark plan in Washington state.

Since 2016, the EHB benchmark plan has been the Regence BlueShield Regence Direct Gold+ small group plan.



# EHB Benchmark Plan update option

---

[Final 2019 HHS Notice of Benefits and Payment Parameters](#) gives states an opportunity to update their EHB benchmark plans for years 2020 and beyond.

If a state meets the requirements in the federal rules, benefits added to the state EHB through the EHB-benchmark plan update process meet the definition of EHB and are exempt from the ACA mandated benefit defrayal requirement.

EHB benchmark plans cannot include discriminatory benefit designs.

# OIC review & application submission to CMS

---

The OIC retained Wakely Consulting Group, LLC, to analyze potential changes to its state Essential Health Benefit benchmark plan in the individual and small group health plan ACA markets.

As part of this process, the OIC:

- Established a [webpage](#) for the project
- Held four public meetings
- Provided ongoing opportunities for public comment

As part of this process, Wakely:

- Discussed potential changes with the OIC and EHB interest groups (issuers, providers, and consumer advocacy organizations)
- Conducted analysis on the potential actuarial impact of the various proposed benefit changes

# OIC review & application submission to CMS

---

- April 30, 2024
  - OIC submitted an application to CMS to revise Washington state's EHB benchmark plan for plan years beginning **on or after January 1, 2026**
- October 7, 2024
  - CMS approved the OIC's application

# Essential Health Benefit Changes

*Heather Shimoji*  
*Health Forms Manager*

# EHB changes for PY2026

---

## New

- Hearing Aids
- Donor Human Milk
- Artificial Insemination

## Modifications\*

- Infertility Treatment
- Rehabilitation Services
- Acupuncture
- Pediatric Dental – Major Dental Services  
– Crowns and Crown Build-ups
- Routine Foot Care

\* Related to nondiscrimination and compliance with 45 CFR § 156.125

# NEW Essential Health Benefits

---

- Hearing Aids
  - Adds hearing aid benefit that includes an annual hearing exam and one hearing aid per ear with hearing loss every three years
    - No dollar limit
    - Differs from current maximum benefit for large group policies
    - As of 1/1/2026, large group policies with hearing aid benefit will not be allowed to have a dollar limit
- Donor Human Milk
  - Adds coverage for donor human milk
  - Includes medically necessary donor human milk in an inpatient setting for an infant who is medically or physically unable to receive maternal human milk
    - The infant must meet at least one of the criteria outlined in [RCW 48.43.815](#)

# NEW Essential Health Benefits

---

- Artificial Insemination
  - Adds artificial insemination in vivo benefit
  - Covers placement of sperm into the cervix or uterus to achieve a pregnancy
  - Includes simple sperm preparation such as sperm washing and isolation
  - Does not include donor sperm or eggs, or services related to procuring or storing these materials

# MODIFIED Essential Health Benefits

---

- Infertility Treatment
  - Clarifies that preliminary infertility evaluation and diagnosis is covered and may be required prior to receiving artificial insemination benefit coverage
- Rehabilitation Services
  - Covers neurodevelopmental therapy and rehabilitation services to treat the same condition
  - Clarifies that outpatient rehabilitative speech, occupational, and physical therapy services combined are limited to a maximum of 25 visits per Member per Calendar Year



# MODIFIED Essential Health Benefits

---

- Routine Foot Care
  - Expands coverage of routine foot care services, including treatment of corns and calluses, trimming of nails, and foot care appliances for preventative care when medically necessary
  - Previously limited to people with a diagnosis of diabetes
- Acupuncture
  - Removes yearly visit limitation for acupuncture care
- Pediatric Dental – Major Dental Services – Crowns and Crown Build-ups
  - Removes age limit for permanent indirect crowns
  - Covers an indirect crown in a five-year period, per tooth, for permanent anterior teeth that are fully erupted

# Actuarial Impacts

*Lichiou Lee*  
*Chief Health Actuary*

# Allowed cost impact

---

In the Wakely EHB actuarial report submitted with OIC's EHB Benchmark application to CMS, the projected increase of the recommended benefits as a percentage of allowed total claims relative to the current benchmark:

- a) Hearing Aids: 0.07%
- b) Human Donor Milk: 0.02%
- c) Artificial Insemination in Vivo: 0.01%

For more information, see [Wakely EHB actuarial report](#)

# Recap

*Jennifer Kreidler*

*Provider Network Oversight Program Manager*

# Resources

---

Resources on the OIC's [EHB benchmark plan webpage](#):

- [CMS approval letter](#)
- [Appendix B - Washington Essential Health Benefits Benchmark Plan](#)
- [Appendix C – State EHB Benchmark Summary Benefits](#)
- [Wakely EHB actuarial report](#)
- [EHB update table](#)

# Sign up for GovDelivery emails

---

How to sign up for GovDelivery emails:

- Subscribe to OIC news through our GovDelivery system by entering your email address at:  
<https://public.govdelivery.com/accounts/WAOIC/subscriber/new>
- Under industry information choose topic “Health care filing information” to receive updates on webinars, changes related to our filing instructions, and general news related to PY25 and PY26.

You can also sign up for any other topics you want to receive information on such as rulemaking.

Thank you for attending our  
Essential Health Benefits  
Expansion webinar!

Any questions?

# Questions?

---

Ned Gaines

Deputy Commissioner, Rates, Forms, and Provider Networks

Ned.Gaines@oic.wa.gov

Connect with us!

- Facebook: <https://www.facebook.com/WSOIC>
- Twitter: [https://twitter.com/WA\\_OIC](https://twitter.com/WA_OIC)
- [www.insurance.wa.gov](http://www.insurance.wa.gov)