HEALTH CARE REFORM IMPLEMENTATION KEY DEADLINES

Reform	Effective Date	Notes
High Risk Pools	June 21, 2010	Letter sent to Governors on April 2 requesting contact person by April 9 and a letter from the state expressing intent to participate in the program by April 30 .
Immediate Market Reforms	Plan years beginning on or after September 23, 2010	Limits on rescissions; no cost-sharing for preventive services; no lifetime limits; restrictions on annual limits; no pre-ex for minors; dependent coverage for under 26; nondiscrimination provisions – regulations to be developed by HHS this month. Grandfathering details may also be forthcoming shortly. Appeals rights and patient protections may come out in the summer.
Medical Loss Ratio	Rebates begin for plan years beginning on or after January 1, 2011	HHS shall request NAIC develop uniform definitions and standardized methodologies for calculating the medical loss ratio to be used to determine rebates. The report is due December 31, 2010 , but should be completed much sooner to ensure smooth implementation.
State Ombudsman	March 23, 2010	Secretary shall provide \$30 million in grants to states to establish an <i>independent</i> office to assist consumers. States that receive grants must report on types of inquiries received. No date set for grant announcement.
Rate Review	March 23, 2010	HHS is developing standards for reviewing "unreasonable" premium increases and requirements for carriers to submit justification information to the Secretary and post on their website. States that meet the minimum standards for rate review may apply for grants - \$250 million over 5 years is available. NAIC will soon receive a request from the Secretary to assist with this project.
Standardized Definitions and Uniform Explanation of Coverage	Standards developed by March 23, 2011 Uniform document implemented by March 23, 20112	HHS shall request the NAIC develop the standardized definitions and uniform explanation of coverage in conjunction with a working group that includes consumer and industry groups. NAIC will soon receive a request from the Secretary.
Submission of Information	September 23, 2010	All plans (including TPAs) must submit claims, financial, enrollment, rating, cost-sharing and other information to the Secretary and the state insurance department. No timeline from HHS on this project.
Web Portal	July 1, 2010	HHS shall develop a website through which individuals and small businesses may receive information about their coverage choices – including public programs. Secretary must develop in consultation with states. NAIC and states providing information to HHS.
Medigap Reform	January 1, 2015	NAIC requested to add cost-sharing requirements to Medigap Plans C and F, in consultation with consumer and

		industry groups. Under current Medigap law, the NAIC must complete its work by December 23, 2010 , even though the changes do not become effective until 2015.
Reform	Effective Date	Notes
Exchanges	January 1, 2014	HHS shall develop minimum standards for state-based Exchanges in consultation with the NAIC. The Secretary will determine by January 1, 2013 , whether a state intends to establish a qualified Exchange – if not, the Secretary will create one.
		HHS shall develop a uniform enrollment form that must be used by the state Exchanges. The NAIC is asked to provide criteria for the form. NAIC will receive a request from HHS soon.
Market Reforms	January 1, 2014	State individual and group market regulations must meet or exceed minimum federal standards by January 1, 2014 , or federal law will preempt them. State laws that "do not prevent the application" of the federal rules are preserved.
Interim Reinsurance Program	January 1, 2014	The temporary (2014-2016) reinsurance program is to be developed by the HHS in consultation with the NAIC, with recommendations from the Amer. Academy of Actuaries. NAIC will receive a request from HHS soon.
Interstate Compact	July 1, 2016	States <u>may</u> enter into compacts which allow carriers to sell their products across state lines. The guidelines for these "health care choice compacts" are to be developed by the NIAC no later than July 1, 2013.
Fraud Reporting Form	March 23, 2010	HHS shall request the NAIC develop a uniform fraud reporting form. NAIC will receive a request from HHS soon.

Source: The National Association of Insurance Commissioners