



Stand Alone Dental Plan (SADP)-Only Termination Update

*Center for Consumer
Information and Insurance
Oversight (CCIIO)*

January 30, 2017

The information provided in this presentation is not intended to take the place of the statutes, regulations, and formal policy guidance that it is based upon. This material summarizes current policy and operations as of the date it was uploaded to RegTap. Links to certain source documents may have been provided for your reference. We encourage persons taking the course to refer to the applicable statutes, regulations, and other interpretive materials for complete and current information

Overview of Former Termination Process

- Prior to January 8, 2017, an individual enrolled in both a QHP and Qualified Dental Plan (QDP) could not terminate their QDP without terminating their QHP as well. A consumer had to terminate **ALL** active policies associated with an application
- Enrollees could request to terminate their QDP in three ways:
 - Directly with the issuer (optional)
 - Through the Marketplace Call Center (Health Insurance Casework System (HICS) ticket sent to dental issuer)
 - Through Regional Caseworkers (HICS ticket sent to dental issuer)
- The previous workflow led to redundant work, a poor user experience, and increased manual input by both issuers and the Marketplace

Overview of Updated Termination Process

- Beginning January 8, 2017, the FFM introduced functionality that allows consumers to terminate QDPs independent of other QHPs or QDPs associated with the application, and thus enhanced the process for the Call Center to terminate SADPs.
- The following enhancements were made to the “My- Account” Tenant page :
 - User Interface (UI) flow provides a button and confirmation modal that allows users to terminate single dental policies
 - Modification of the enrollment termination/cancellation logic to support single, dental-only policy termination/cancellations (i.e. sending a termination 834 instead of generating a HICS case and updating termination status via Recon)
 - Modification of the used Advance Payment of the Premium Tax Credit (APTC) amount to reflect any changes (if applicable) from terminating or cancelling dental policies

Important Reminders

- “SADP-Only Termination” refers to the termination of one or more, active dental plan policies for a given application household without terminating health plans that provide medical coverage. “SADP-Only Termination” does not refer to:
 - Termination of one or more – but less than all – enrollment group members within an active plan policy
 - Termination of one or more – but less than all – health plans
- APTC will not be redistributed when a dental policy is terminated
- Issuers **MAY** term a dental policy at the consumer’s request
- No new Maintenance 834 codes will be required to support SADP-only cancellation or termination (INSo3 of 024 will continue to be sent for terminations and cancellations)
- The user will not be able to cancel their cancellation/ termination action, or modify their termination date, once they have completed the cancellation/ termination flow