



Confirmations on the State's EHB-benchmark Plan

Instructions: All fields on this template are required to be completed. Please make sure to answer all fields and confirm that the new EHB-benchmark Plan covers all 10 EHB categories: (1) ambulatory patient services; (2) emergency services; (3) hospitalization; (4) maternity and newborn care; (5) mental health and substance use disorder services including behavioral health treatment; (6) prescription drugs; (7) rehabilitative and habilitative services and devices; (8) laboratory services; (9) preventive and wellness services and chronic disease management; and (10) pediatric services, including oral and vision care. Under Section D, please complete the "Explanation" column with sentences describing how the State is complying with the specific requirement; single word responses such as Yes, No, or N/A are not sufficient responses.

SECTION A

Points of Contact for the State's EHB- benchmark Plan Selection	Primary	Secondary
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SECTION B

State	South Dakota
Under which option of 45 CFR 156.111(a), is the State selecting its new EHB-benchmark Plan?	§ 156.111(a)(3) - Select a set of benefits that would become the State's EHB-benchmark plan
For what plan year is the State selecting its new EHB-benchmark Plan to begin applying?	Plan Year 2021
If using §156.111(a)(1), which other State's EHB-benchmark Plan is the State using for its EHB-benchmark plan?	Not Applicable to State's Selection Option

SECTION C

Criteria for a State EHB-benchmark Plan at 45 CFR 156.111		
Does the State's EHB-benchmark Plan cover the 10 EHB Categories in accordance with 45 CFR 156.110(a)?	Does the State's EHB-benchmark Plan cover the category?	If the State's is using §156.111(a)(2), select the other State's EHB-benchmark Plan being used for the particular category
1. Ambulatory patient services	Yes	Not Applicable to State's Selection Option
2. Emergency services	Yes	Not Applicable to State's Selection Option
3. Hospitalization	Yes	Not Applicable to State's Selection Option
4. Maternity and newborn care	Yes	Not Applicable to State's Selection Option
5. Mental health and substance use disorder services, including behavioral health treatment	Yes	Not Applicable to State's Selection Option
6. Prescription drugs*	Yes	Not Applicable to State's Selection Option
If the State is using the option under §156.111(a)(3), did the State provide a complete and accurate formulary drug list under the Appendix D entitled "Rx Template" in this workbook?	Yes	Not Applicable to State's Selection Option
7. Rehabilitative and habilitative services and devices	Yes	Not Applicable to State's Selection Option
8. Laboratory services	Yes	Not Applicable to State's Selection Option
9. Preventative, wellness, and chronic disease management	Yes	Not Applicable to State's Selection Option
10. Pediatric services, including oral and vision care	Yes	Not Applicable to State's Selection Option

SECTION D

Under Section D, please complete the "Explanation" column with sentences describing how the State is complying with the specific requirement; single word responses such as Yes, No, or N/A are not sufficient responses.

	State's Confirmations	Explanation
Does the State's EHB-benchmark Plan definition meet the requirements of §156.111(b)(1) with regard to scope of benefits?	Yes	The 2021 proposed EHB Benchmark is the 2020 benchmark plan with one additional benefit as such, by default, the state's proposed plan meets the requirements.
Is the State's EHB-benchmark Plan equal to, or greater than, to the extent any supplementation is required to provide coverage within each EHB category at §156.110(a), the scope of benefits provided under a typical employer plan as defined and established at §156.111(b)(2)(i)?	Yes	The 2021 proposed EHB benchmark is the 2020 benchmark plan with one additional benefit. Given that the 2020 benchmark plan met the requirement that it is equal to or greater than the scope of benefits under a typical employer plan, the proposed plan would meet those requirements.
Has an actuary, who is a member of the American Academy of Actuaries, in accordance with generally accepted actuarial principles and methodologies, affirmed that the State's new EHB-benchmark plan provides a scope of benefits that is equal to, or greater than, to the extent any supplementation is required to provide coverage within each EHB category at §156.110(a), to the scope of benefits provided under a typical employer plan as defined at §156.111(b)(2)(i) and in accordance with §156.111(e)(2)?	Yes	Please see actuarial certification and actuarial report provided.
Does the State's EHB-benchmark Plan not exceed the generosity of the most generous the plans listed at §156.111(b)(2)(iii) ?	Yes	The 2021 proposed EHB benchmark is the 2020 benchmark plan with one additional benefit. The value associated with the additional benefit falls within the generosity parameters. Please see the actuarial report provided.
Has an actuary, who is a member of the American Academy of Actuaries, in accordance with generally accepted actuarial principles and methodologies, affirmed that the new EHB-benchmark plan does not exceed the generosity of the most generous the plans listed at §156.111(b)(2)(iii) and in accordance with §156.111(e)(2)?	Yes	Please see actuarial certification and actuarial report provided.
Is the State's EHB-benchmark Plan unduly weighting benefits towards any of the categories of benefits (§156.111(b)(2)(iii))?	No	The 2021 proposed EHB benchmark is the 2020 benchmark plan with one additional benefit. As such, by default the state's proposed plan meets these requirements.
Does the State's EHB-benchmark Plan provide benefits for diverse segments of the population in accordance with §156.111(b)(2)(iv)?	Yes	The 2021 proposed EHB benchmark is the 2020 benchmark plan with one additional benefit. As such, by default the state's proposed plan meets these requirements.
Did the State provide reasonable public notice and an opportunity for public comment on the State's selection of its EHB-benchmark Plan that includes posting a notice on its opportunity for public comment with associated information on a relevant State Web site in accordance with §156.111(c)? Please provide the public notice dates and applicable website address in the "Explanation" column.	Yes	SDDOI held a public comment period from April 29, 2019 to May 15, 2019. A press release and notification to interested parties was issued requesting public comment on the proposed EHB benchmark. Information on the proposal was posted to the SDDOI website main page. Public comments were asked for in written form and received online (via website), by fax, or by regular mail. The press release is available at: https://news.sd.gov/newsitem.aspx?id=24428 .
Are non-EHB benefits excluded from the EHB-benchmark Plan in accordance with §156.115(d)? (Non-EHB benefits include adult vision, adult dental, long-term care, cosmetic orthodontia)	Yes	Yes
Has the State converted any benefits in its EHB-benchmark Plan restricted by annual or lifetime dollar limits as defined by §147.126 to non-dollar limit benefits?	No	The 2021 proposed EHB benchmark is the 2020 benchmark plan with one additional benefit. The one additional benefit added to the 2020 benchmark plan does not contain annual or lifetime limits (either dollar or non-dollar).

Does the EHB-benchmark Plan include benefits mandated by State action taking place after 2011, other than for purposes of compliance with Federal requirements, for which payment is required under §155.170?	No	The benchmark plan does not include benefits mandated by state action after 2011, other than for purposes of compliance with federal requirements, for which payment is required under 155.170.
Are the EHB-benchmark Plan's benefits designed such that they do not discriminate based on an individual's age, expected length of life, present or predicted disability, degree of medical dependency, quality of life, or other health conditions as prohibited by §156.125 and in accordance with §156.111(b)(2)(v)?	Yes	South Dakota does not believe the benefit plan design to be discriminatory.
* Note: Due to the availability of drugs in the market, the exact drug count for a given State will be established in the EHB drug count tool, but for the purposes of the State's EHB- benchmark Plan, the display will be the same drug count as the 2017 EHB-benchmark plan.		