Title 19 Mississippi Administrative Code, Part 3, Chapter 16: Form and Manner of Notices When Renewing a Product in the Individual Market.

Rule 16.01: Authority

This regulation is adopted and promulgated pursuant to the authority granted by *Miss. Code Ann*. Section 83-5-1 (Rev. 2011), and in accordance with the provisions of the Administrative Procedures Act found at *Miss Code Ann*. 25-43-1, et seq., and the Mississippi Insurance Department Regulation 19 Miss. Admin. Code, Part 1, Chapter 15, said regulation being the "Rules of Practice and Procedure before the Mississippi Insurance Department".

Source: *Miss. Code Ann*. § 83-5-1 (Rev. 2011).

Rule 16.02: Purpose

The Centers for Medicare and Medicaid Services (CMS) issued a Bulletin entitled *Form and Manner of Notices when Discontinuing or Renewing a Product in the Small Group or Individual Market* on September 2, 2014. Under 45 CFR Sections 146.152, 147.106, and 148.122 an issuer that discontinues or renews a particular individual product must provide notice of such discontinuation or renewal in a form and manner specified by the Secretary of Health and Human Services. States that are enforcing the Affordable Care Act may, without obtaining further approval from CMS, develop their own notice for renewal, provided the State-developed notice is at least as protective as the Federal standard notice. The purpose and intent of this regulation is to provide issuers with a State-developed renewal notice to be used when renewing an individual product.

Source: 45 CFR §§ 146.152, 147.106, and 148.122; *Miss. Code Ann*. § 83-5-1 (Rev. 2011).

Rule 16.03: Adoption of a Mississippi Renewal Form for Individual Products

In accordance with CMS guidance, the Mississippi Department of Insurance ("Department") has created a form entitled "Renewal Form for Individual Products" ("Form"), which is found in Rule 16.06 of this Regulation. Issuers may begin using this form immediately, without the necessity of obtaining prior approval from the Department. Minor non-substantive changes which identify the issuer or which provide contact information are allowed. Material changes or additions to the form are not allowed.

Source: 45 CFR §§ 146.152, 147.106, and 148.122; *Miss. Code Ann*. § 83-5-1 (Rev. 2011).

Rule 16.04: Severability Clause

If any provision of this regulation, or the application thereof to any person or circumstance, is held invalid, such determination shall not affect other provisions or applications of this regulation which can be given effect without the invalid provision or application, and to that end the provisions of this regulation are severable.

Source: *Miss. Code Ann.* § 83-5-1 (Rev. 2011).

Rule 16.05: Effective Date

This Regulation shall be effective thirty (30) days after final adoption with the Office of the Secretary of State.

Source: *Miss. Code Ann.* §§ 25-43-3.108; 25-43-3.112; 83-5-1 (Rev. 2011).

Rule 16.06: Renewal Form for Individual Products

RENEWAL FORM FOR INDIVIDUAL PRODUCTS OFFERED OUTSIDE OF THE MARKETPLACE

Important: We are continuing to Offer Your Health Coverage.

Dear (First Name of Subscriber):

Your health insurance coverage is coming up for renewal. **On (Date of Renewal), you will be automatically re-enrolled and can keep your current coverage. If you do not want to be automatically re-enrolled, you need to contact (Insurer's Name) by (Date).**

Each year, insurance companies can make changes to the plans and coverage options they offer. You can find these changes, if any, in Attachment A along with your monthly premium (Note: Insurer should add changes to the Insured's coverage in the attachment which includes monthly premium and benefit plan changes. Insurers providing this notice electronically may refer to a tab that would contain monthly premium and benefit changes).

Please note your current plan is not offered by (Insurer's Name) through the Marketplace. This plan does not allow you to receive financial assistance to lower your monthly premiums or lower your out-of-pockets costs.

What if I want to look into other plans? You have three ways to look into other plans and enroll.

- The (Plan Year) Open Enrollment period for the Marketplace is from (Enrollment Period). If you want a new plan with coverage that starts on January 1, 20___ in the Marketplace, the deadline to enroll is (Deadline Date).Visit HealthCare.gov and look at other Marketplace plans.
- Visit HealthCare.gov and see if you qualify or your family qualifies for Medicaid or the Children's Health Insurance Program (CHIP).

- Look at other plans outside of the Marketplace. Just keep in mind that if you qualify for financial assistance to lower your monthly or out-of-pocket costs, you can only get these savings if you enroll through Healthcare.gov.

What else should I look at before deciding to keep or change my plan?

Call (Name of Insurer) at (Insurer's phone number) or visit (Name of Insurer) website to make sure your doctor and other health care providers will be in the plan network next year. Also check to make sure any prescription medications you take will be covered (This provision is optional. Insurer may elect to delete this provision).

Questions?

- Call (Name of Insurer) at (Insurer's phone number) or visit (Insurer's website). You can also work with a licensed insurance agent or broker.
- Visit HealthCare.gov or call 1-800-318-2596 (TTY: 1-855-889-4325) to learn more about the Health Insurance Marketplace.

Getting Help in Other Languages

English: For help in (Language) call (Phone number) and an interpreter will assist you with this notice at no cost.

SPANISH (Espanol): Para obtener asistencia en Espanol, llame al (Phone Number)

Source: 45 CFR §§ 146.152, 147.106, and 148.122; *Miss. Code Ann*. § 83-5-1 (Rev. 2011).

Title 19 Mississippi Administrative Code, Part 3, Chapter 16: Form and Manner of Notices When Renewing a Product in the Individual Market.

Rule 16.01: Authority

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Source: *Miss. Code Ann*. § 83-5-1 (Rev. 2011).

Rule 16.02: Purpose

The Centers for Medicare and Medicaid Services (CMS) issued a Bulletin entitled *Form and Manner of Notices when Discontinuing or Renewing a Product in the Small Group or Individual Market* on September 2, 2014. Under 45 CFR Sections 146.152, 147.106, and 148.122 an issuer that discontinues or renews a particular individual product must provide notice of such discontinuation or renewal in a form and manner specified by the Secretary of Health and Human Services. States that are enforcing the Affordable Care Act may, without obtaining further approval from CMS, develop their own notice for renewal, provided the State-developed notice is at least as protective as the Federal standard notice. The purpose and intent of this regulation is to provide issuers with a State-developed renewal notice to be used when renewing an individual product.

Source: 45 CFR §§ 146.152, 147.106, and 148.122; *Miss. Code Ann*. § 83-5-1 (Rev. 2011).

Rule 16.03: Adoption of a Mississippi Renewal Form for Individual Products

In accordance with CMS guidance, the Mississippi Department of Insurance ("Department") has created a form entitled "Renewal Form for Individual Products" ("Form"), which is found in Rule 16.06 of this Regulation. Issuers may begin using this form immediately, without the necessity of obtaining prior approval from the Department. Minor non-substantive changes which identify the issuer or which provide contact information are allowed. Material changes or additions to the form are not allowed.

Source: 45 CFR §§ 146.152, 147.106, and 148.122; *Miss. Code Ann*. § 83-5-1 (Rev. 2011).

Rule 16.04: Severability Clause

If any provision of this regulation, or the application thereof to any person or circumstance, is held invalid, such determination shall not affect other provisions or applications of this regulation which can be given effect without the invalid provision or application, and to that end the provisions of this regulation are severable.

Source: *Miss. Code Ann.* § 83-5-1 (Rev. 2011).

Rule 16.05: Effective Date

~~The information called for by this regulation is necessary and appropriate in the public interest and for the protection of the policyholders in this State and therefore must be adopted as an emergency regulation to be effective immediately.~~ This Regulation shall be effective thirty (30) days after final adoption with the Office of the Secretary of State.

Source: *Miss. Code Ann.* §§ 25-43-3.112; 25-43-3.112; 83-5-1 (Rev. 2011).

Rule 16.06: Renewal Form for Individual Products

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Important: We are continuing to Offer Your Health Coverage.

Dear (First Name of Subscriber):

Your health insurance coverage is coming up for renewal. **On (Date of Renewal), you will be automatically re-enrolled and can keep your current coverage. If you do not want to be automatically re-enrolled, you need to contact (Insurer's Name) by (Date).**

Each year, insurance companies can make changes to the plans and coverage options they offer. You can find these changes, if any, in Attachment A along with your monthly premium (Note: Insurer should add changes to the Insured's coverage in the attachment which includes monthly premium and benefit plan changes. Insurers providing this notice electronically may refer to a tab that would contain monthly premium and benefit changes).

Please note your current plan is not offered by (Insurer's Name) through the Marketplace. This plan does not allow you to receive financial assistance to lower your monthly premiums or lower your out-of-pockets costs.

What if I want to look into other plans? You have three ways to look into other plans and enroll.

- The (Plan Year) Open Enrollment period for the Marketplace is from (Enrollment Period). If you want a new plan with coverage that starts on January 1, 20___ in the Marketplace, the deadline to enroll is (Deadline Date).Visit HealthCare.gov and look at other Marketplace plans.

- Visit HealthCare.gov and see if you qualify or your family qualifies for Medicaid or the Children's Health Insurance Program (CHIP).
- Look at other plans outside of the Marketplace. Just keep in mind that if you qualify for financial assistance to lower your monthly or out-of-pocket costs, you can only get these savings if you enroll through Healthcare.gov.

What else should I look at before deciding to keep or change my plan?

Call (Name of Insurer) at (Insurer's phone number) or visit (Name of Insurer) website to make sure your doctor and other health care providers will be in the plan network next year. Also check to make sure any prescription medications you take will be covered (This provision is optional. Insurer may elect to delete this provision).

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- Call (Name of Insurer) at (Insurer's phone number) or visit (Insurer's website). You can also work with a licensed insurance agent or broker.
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Source: 45 CFR §§ 146.152, 147.106, and 148.122; *Miss. Code Ann*. § 83-5-1 (Rev. 2011).