

Immediate 2017 Actions to Stabilize the Private Health Insurance Market

A. Legislative:

- a. **Do no harm by maintaining the cost-sharing reductions program and making final payments for the temporary reinsurance program. Both can be done administratively.**
- b. **To minimize significant premium increases and ensure access to care in 2018:**
 - **Keep individual mandate until Congress can enact:**
 - High risk pool funding starting in 2018
 - Fairer tax credits for younger consumers and a 5:1 age band
 - Incentives to encourage people to maintain continuous coverage
 - **Permanently repeal (or delay) ACA taxes and fees**

B. Administrative:

Immediate regulatory and administrative actions are needed in three key areas to shore up the individual health insurance market while Congress works on legislation:

Timeline

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| 1. Allow people to keep their choice of health plans | March |
| <ul style="list-style-type: none">• Allow states to continue expiring “grandmothered” individual and small group policies (expires 2017)• Allow “grandfathered” policies to continue regardless of whether their deductibles and benefits have changed | |
| 2. Close coverage loopholes and cut back fees that lead to higher costs | Early April |
| <ul style="list-style-type: none">• Prevent 2018 premium increase of 6.5% by delaying the health insurance tax (3%) and eliminating the federal exchange user fee (3.5%)• Limit number of special enrollment periods to life-changes; require all individuals to show proof of eligibility before coverage starts• Prohibit steering of Medicare/Medicaid eligibles into private health insurance• Require people to pay their outstanding debts before re-enrolling• Streamline reporting and notice requirements• Reduce the burdensome Section 1557 non-discrimination rules | |
| 3. Return regulatory authority to the states | Early April |
| <ul style="list-style-type: none">• Return authority for rate review, benefit design and provider network adequacy• Give states more flexibility on 1332 waivers | |

