From: <u>DMHC Licensing eFiling</u>

Subject: APL 21-005 - Plan Year 2022 QHP and QDP Filing Requirements

Date: Friday January 15, 2021 11:30 AM

Attachments: APL 21-005 - Plan Year 2022 QHP and QDP Filing Requirements (1.15.2021).pdf

Dear Health Plan Representative,

Please see attached All Plan Letter (APL) 21-005, regarding Plan Year 2022 filing requirements for Qualified Health Plans (QHPs) and Qualified Dental Plans (QDPs).

Thank you.



Gavin Newsom, Governor State of California Health and Human Services Agency DEPARTMENT OF MANAGED HEALTH CARE 980 9th Street, Suite 500 Sacramento, CA 95814 Phone: 916-324-8176 | Fax: 916-255-5241

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ALL PLAN LETTER

DATE: January 15, 2021

TO: All Full Service Plans

FROM: Nancy Wong

Acting Deputy Director Office of Plan Licensing

SUBJECT: APL 21-005 (OPL) Plan Year 2022 QHP and QDP Filing Requirements

The DMHC offers current and prospective Qualified Health and Dental Plans, Covered California for Small Business Issuers, and health plans offering non-grandfathered Individual and Small Group product(s) outside of the California Health Benefit Exchange (Covered California), guidance to assist in the preparation of Plan Year 2022 regulatory submissions, in compliance with the Knox- Keene Act at California Health and Safety Code Sections 1340 et seq. (Act) and regulations promulgated by the DMHC at California Code of Regulations, title 28 (Rules).

Qualified Dental and Health Plans on Covered California

For Qualified Health Plans (QHPs) and Qualified Dental Plans (QDPs) licensed pursuant to the Act, the DMHC has primary responsibility for regulatory review and preliminary recommendations with respect to certain selection criteria identified by the Exchange in evaluation of whether an applicant is in "good standing." All licensure, regulatory and product requirements of the Act and Rules apply to QHPs and QDPs offered through the Exchange.

QHPs, QDPs, or prospective applicants should review the Checklist and attachments provided for regulatory requirements, deadlines, and filing expectations. Please see the checklist and accompanying attachments on the <u>DMHC website</u>.

Product(s) Off of Covered California

For health plans offering non-grandfathered Individual and Small Group product(s) off of Covered California (outside of the Exchange), product(s) and/or benefit plan designs amended for the 2022 Plan Year must have DMHC approval of necessary filings, including, but not limited to, licensure, networks, product, benefit plan design, and rate filings.

Health plans should review the Checklist and attachments provided for regulatory requirements, deadlines, and filing expectations. Please see the checklist and accompanying attachments on the DMHC website.