

From: [DMHC Licensing eFiling](#)
Subject: All Plan Letter - Rule 1300.65 Compliance
Date: Friday, September 18, 2015 4:29:00 PM
Attachments: [All Plan Letter re Rule 1300.65 Compliance Final.doc](#)

Please see attached, the All Plan Letter regarding Rule 1300.65 Compliance.

Health plans should e-file an Exhibit I-9 within thirty (30) days of the date of this letter. The title of the filing should be "Rule 1300.65 Compliance."

ALL PLAN LETTER

DATE: September 18, 2015

TO: Full Service Health Plans

FROM: Nancy P. Wong
Deputy Director, Office of Plan Licensing

SUBJECT: RULE 1300.65 COMPLIANCE

The Department has received a large number of inquiries from plans and consumers regarding cancellations for non-payment of premiums under Rules 1300.65 and 1300.65.2. Therefore, in order to ensure compliance with Section 1365 and Rule 1300.65¹, we are asking the Plans to provide any policies and procedures or other documents related to cancellation for non-payment of premiums:

- Individuals On-exchange receiving APTC.
- Individuals On-exchange not receiving APTC.
- Individuals Off-exchange.

In addition please provide the following documents either in template format or a redacted example of the document.

1. The notice of consequences issued to the enrollee.
2. The notice of cancellation issued to the enrollee.
3. The notice of reinstatement issued to the enrollee.
4. Any grace period notice if it is a separate document from numbers 1 and 2 above.
5. The request for review of cancellation, rescission or non-renewal of plan contract form.
6. The disposition notice and the pending status notice under Rule 1300.65(d)(2). Include examples of where the Plan has reinstated, upheld, or any other common category of disposition.
7. The Plan's response to the Department after being notified that the Department accepted a request for review. If the Plan does not use a template for this response, please provide examples or checklists showing what types of information the Plan generally sends to comply with the requirement to provide the Department with the information it used and the information necessary for the Director's review.

¹ California Health and Safety Code Sections 1340 et seq. (the "Act"). References herein to "Section" are to Sections of the Act. References to "Rule" refer to the regulations promulgated by the Department at Title 28 California Code of Regulations.

8. A Ledger or other format the Plan uses to illustrate the payments, amounts and dates. If the Plan does not have a standard template, please explain how the Plan documents these items.
9. The Plan's notice to providers under Rule 1300.65.2(d).

Health plans should e-file an Exhibit I-9 within thirty (30) days of the date of this letter. The title of the filing should be "Rule 1300.65 Compliance."

Plans are reminded that although this request is limited to the Plans' individual product lines the requirements set forth at Health and Safety Code Section 1365 and Rule 1300.65 for cancellation for non-payment of premiums apply to all individual and group products and to both full-service and specialized plans.

If you have any questions about submitting your health plan's filing, please contact me at 916-323-1228.