

HB937 Abortion Care Coverage Consumer Information Workgroup

Session 2 – November 1, 2022



Welcome



This meeting will be recorded

Agenda

1:00 - 1:10 | Welcome

Emily Hodson & Allison Mangiaracino, Co-Chairs

1:10 - 1:30 | Status of abortion care coverage and availability of consumer information

Becca Lane, MHBE Senior Health Policy Analyst

Brenna Tan and Nic Nemec, UMBC Hilltop Institute

1:30 - 2:10 | Discussion

2:10 - 2:20 | Next Steps

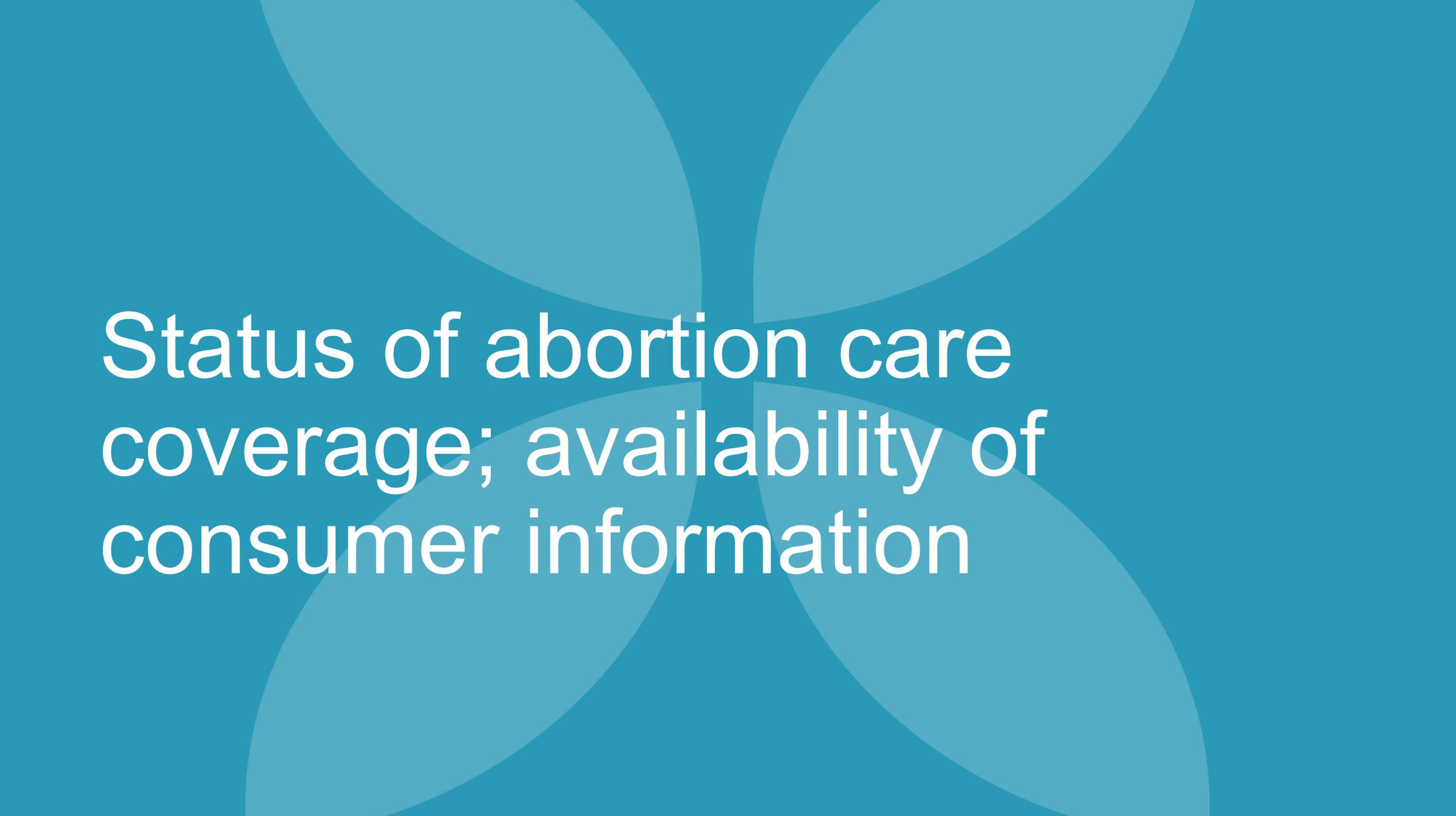
Becca Lane

2:20 - 2:30 | Public Comment

2:30 | Adjournment

Members

Member	Affiliation
Cynthia Baur	Horowitz Center for Health Literacy, University of Maryland
Kathryn Boyd	carafem
Robyn Elliott	Planned Parenthood of Maryland
Maya Greifer	UnitedHealthcare
Emily Hodson*	Chase Brexton Health Care FQHC
Allison Mangiaracino*	Kaiser Permanente
Patricia O'Connor	Office of the Attorney General, Health Education and Advocacy Unit
Zachary Peters	Aetna
Deb Rivkin	CareFirst
Lauren Rodgers	Consumer Advocate
Jamie Sexton	Maryland Insurance Administration

The background is a solid teal color. In the center, there is a stylized graphic of a flower or a four-petaled star. Each petal is a lighter shade of teal and overlaps the center and the other petals. The text is centered over this graphic.

Status of abortion care
coverage; availability of
consumer information

Updated HB 937 MIA Interpretation

As of October 20, 2022, the MIA updated its interpretation of HB 937's abortion care coverage requirement to **include** individual and small group non-grandfathered health plans.

Except for multi-state plans and HSA-compatible high deductible health plans (HDHPs), which are exempt from all the requirements of § 15-857, all individual and small group plans are required to cover abortion care without cost-sharing. Additionally, a religious organization may obtain an exclusion from the coverage and notice requirements of § 15-857 if the requirements conflict with the organization's bona fide religious beliefs and practices.

Abortion Care Carrier Information Request

- For all Individual & Small Group plans
- Data on cost-sharing by plan (now irrelevant)
- Any gestational limits on care coverage
- Terminology used in plan documents

Abortion Care Carrier Information Summary

- Gestational limits
 - For medication, 70 day gestational limit based on FDA approvals
 - Otherwise, no gestational limits imposed by carriers
- What is medication abortion called on plan documents?
 - “Abortion care” (also now changed because of the new law)
 - “Abortion care services”
 - “Therapeutic surgical abortion”
- Are medication and procedural/surgical abortion listed as separate benefits?
 - No
- Other
 - Other diagnosis codes could lead to applicable cost sharing

i Abortion Coverage Information Access (2022): Analytical Framework

Consumer Health Care Service Information Pathway



Consumer Priorities

1. Easy to find.
2. Easy to understand.
3. Easy to compare.

Health Coverage Information Access Points

Consumers with specific health care service needs seek information on whether the service is a covered benefit, and at what cost, through coverage information access points.



Exchange

or



Direct to Carrier

Health Coverage Information Layers

Benefit Policy/ Plan Document (PDF)

- Extensive consumer navigation required
- Variable terminology
- Variable cost sharing information.
- Definitions for listed services available within document
- Cost sharing information not comparable across health plans
- Written in contract language

Summary of Benefits & Coverage (PDF)

- Some consumer navigation required
- Standardized service terminology
- Clear cost sharing information required.
- Definitions for listed services readily available
- Not comparable across health plans
- Written in plain language

Plan Shopping (Webpage)

- Minimal consumer navigation required
- Standardized service terminology
- Clear cost sharing information required
- Definitions for service & cost sharing terminology readily available
- Comparable across health plans
- Written in plain language

Consumer Navigation

At these access points, consumers navigate layers of webpages and plan documentation to find information on the services of interest.

KEY FINDING: Information on abortion coverage is only found in health plan benefit policies/plan documents with varying terminology, inconsistent cost sharing details, and varying navigation steps to access.

Least Accessible

Most Accessible

i Individual Market | Highlighted Findings (2022 plans)

- Table 1 provides highlighted findings across each carrier for the following domains:
 - Consumer navigation – number of clicks to access plan documents from Maryland Health Connection.
 - Service category & terminology – titling for “elective abortion services” & the service category within which the service is subsumed.
 - Cost sharing – details of expected consumer out of pocket costs for abortion services.

Table 1. Abortion Coverage Access | Individual Market Findings

	Consumer Navigation	Service Category & Terminology	Cost sharing
Carrier A	One-click: Plan-specific documents are directly linked from each SBC on MHC.	<i>Elective abortion</i> is subsumed within <i>Maternity & Related Services</i> as a non-preventive service.*	Consistency in cost sharing details: <ul style="list-style-type: none"> Copay (\$) per visit with a facility that is subject to deductible**
Carrier B	Two-clicks: Link from SBC brings consumer to landing page that requires additional navigation.	<i>Voluntary termination of pregnancy</i> is detailed as its own service within the Family Planning Services benefit category.	Inconsistency in cost sharing details: <ul style="list-style-type: none"> The applicable Cost Share will apply based on type and place of Service (21/30) Coinsurance (%) of <i>Allowable Charge</i> (6/30)***
Carrier C	Multiple-clicks: Link from SBC brings consumer to a generic carrier landing page. Significant searching required to access generic plan documentation.	Not covered.	Not covered.

Small Group Market | Highlighted Findings (2022 plans)

- Table 2 provides highlighted findings across each carrier for the following domains:
 - Consumer navigation – number of clicks to access plan documents from Maryland Health Connection.
 - Service category & terminology – titling for “elective abortion services” & the service category within which the service is subsumed.
 - Cost sharing – details of expected consumer out of pocket costs for abortion services.

Table 2. Abortion Coverage Access | Small Group Market Findings

	Consumer Navigation	Service Category & Terminology	Cost sharing
Carrier A	One-click: Plan-specific documents are directly linked from each SBC on MHC. There are no links to plan documents for off-SHOP plans that would provide interested employers with information on abortion coverage.	<i>Elective abortion</i> is subsumed within <i>Maternity & Related Services</i> as a non-preventive service.*	Consistency in cost sharing details: <ul style="list-style-type: none"> Copay (\$) per visit with a facility that is subject to deductible**
Carrier B	Two-clicks: Link from SBC brings consumer to landing page that requires additional navigation. Benefit detail is available online for <i>products</i> offered through SHOP on Maryland Health Connection and off-SHOP	<i>Voluntary termination of pregnancy</i> is detailed as its own service within the Family Planning Services benefit category.	Inconsistency in cost sharing details: <ul style="list-style-type: none"> For HMO/POS products cost sharing information for abortion is not available in publicly available, readily accessible plan documentation. For the POS product underwritten by Kaiser Permanente Insurance Company, cost sharing details for abortion services were available
Carrier C	Multiple-clicks: Link from SBC broken. access to the plan document is a link to a landing page (provided on the SBC) with an accordion drop down for the applicable plan year where you can search for each plan by product.	Within publicly available, readily accessible benefit policies there is no reference to abortion coverage.	No information available
Carrier D	ZIP file must be downloaded to access the plan document from a linked website via the publicly available, readily accessible SHOP SBC.	Abortion services are categorized under abortion (voluntary termination of pregnancy) .	Cost sharing for abortion services is clearly labelled and stratified for inpatient/outpatient & in-network/out-of-network services. Cost sharing for outpatient abortion services are not detailed



The Hilltop Institute

Abortion Care Coverage Information Analysis

Brenna Tan, Nic Nemec
11/1/2022



UMBC

Agenda

- Carrier Contract Analysis
- Website “Clicks”

Carrier Contract Analysis

- Accessed carrier contracts through SERFF Filing Access portal
 - Used specific codes provided by the MIA
 - Most comprehensive source of information, but effectively inaccessible to consumers
- 316 plans across the individual and small group markets

Carrier Contract Analysis

continued

- All documents reflected the new requirements:
 - 0 cost sharing
 - No deductible applies
- Exceptions:
 - HSA-eligible plans covered abortion with 0 cost sharing after deductible
 - Abortion not covered out-of-network for several plans that allow a limited number of out-of-network visits

Carrier Contract Analysis

continued

- Variation in terms used to categorize abortion care
 - “Family planning services”
 - “Maternity and related services”
 - “Covered services > Abortion care”
 - Separate sections for abortion services vs. prescription drugs for abortion care
- Variation in language and format of abortion care coverage information

Carrier Contract Analysis

continued

Carrier A

- f) Abortion care. Coverage will be provided for abortion care services. There is no Copayment or Coinsurance for abortion care. Except for Health Savings Account (HSA)-compatible plans to which the Member has contributed to his/her HSA during the Benefit Period, the Deductible, if any, does not apply to abortion care.

- J. Abortion care. Coverage will be provided for abortion care Prescription Drugs. There is no Copayment or Coinsurance for abortion care Prescription Drugs. Except for Health Savings Account (HSA)-compatible plans to which the Member has contributed to his/her HSA during the Benefit Period, the Deductible, if any, does not apply to abortion care Prescription Drugs.

Carrier Contract Analysis

continued

Carrier B

Family Planning Services

Family planning Services that are defined as preventive care under the Affordable Care Act are covered at no charge.

Women's Preventive Services (WPS), including all Food and Drug Administration approved contraceptive methods, sterilization procedures, and patient education and counseling for women with reproductive capacity are covered under Preventive Health Care Services at no charge.

Male Sterilization	No charge
Abortion care Services	No charge

Carrier Contract Analysis

continued

Carrier B (continued)

[Family Planning Services]		
<p>Family planning Services that are defined as preventive care under the Affordable Care Act are covered at no charge.</p> <p>Women's Preventive Services (WPS), including all Food and Drug Administration approved contraceptive methods, sterilization procedures, and patient education and counseling for women with reproductive capacity are covered under Preventive Care at no charge.</p>	No charge	20% of AC* after Deductible
[Male Sterilization]	[No charge]	[No charge]
[Abortion Care Services]	[No charge]	[No charge]

Carrier Contract Analysis

continued

Carrier B (continued)

[Family planning Services that are defined as preventive care under the Affordable Care Act are covered at no charge]	No charge	No charge – applies to 10 visit limit]
[Male Sterilization]	[No charge]	[Not covered]
[Abortion Care Services]	[No charge]	[Not covered]]

Carrier Contract Analysis

continued

Carrier B (continued)

[Family Planning Services

The Family Planning provision will be omitted when the employer group requests the exclusion of family planning services as permitted under 45 CFR §147.131 for non-grandfathered plans. With respect to contraceptive methods and counseling, these provisions will be omitted from the form when the following employers elect to exclude coverage for contraceptive methods and counseling required under 45 CFR §147.133 and 45 CFR 147.130(a)(1)(iv): (1) small employers that qualify for the religious employer exemption under 45 CFR 147.131 and (2) small employers that both qualify for the eligible organization accommodation and provide their self-certification to the Health Plan as required under 45 CFR 147.131(c)(3). Subsequent benefits will be

4. *[Included for all groups except for religious organizations that elect not to cover these Services as permitted under §15-826(c)(1) of the Insurance Article of the Annotated Code of Maryland.] [Abortion care services: elective and therapeutic termination of pregnancy, as permitted under state law]; and*

Carrier Contract Analysis

continued

Carrier C

[Drafting note: For religious exempt ('RE') plans, do not include the bracketed content below when the form prints.]

[

Abortion care

Description	Out-of-network
Termination of pregnancy	0% no deductible applies

]

[Drafting note: For religious exempt ('RE') plans, do not include the bracketed content below for outpatient prescription contraceptive drugs and devices when the form prints.]

[

Abortion care

Description	Network	Out-of-network
Termination of pregnancy	0% after deductible	0% after deductible

]

Click Analysis

- Methodology
 - Selected one plan from each metal level for each carrier
 - Selected one HSA-eligible plan for each carrier
 - Counted how many “clicks” to reach abortion coverage information

Click Analysis: Individual Market

- Findings: Individual Market
 - *Summary of Benefits and Coverage* (includes abortion coverage) was one click away for all carriers (improvement over previous analysis)

United Healthcare UHC Bronze Value (3 \$0 Virtual Visits)
2023-72375MD0070027-01

METAL LEVEL: **BRONZE** QUALITY RATING: Not yet rated [Details](#)

ESTIMATED MONTHLY PREMIUM i	ANNUAL DEDUCTIBLE i	ANNUAL OUT-OF-POCKET MAX i	PRIMARY CARE CO-PAY i	URGENT CARE CENTER i	GENERIC DRUG
\$199.58 Price after estimated \$0.00 tax credit	\$8700 per person \$17400 per group	\$8700 per person \$17400 per group	\$40.00 Copay	\$80.00 Copay	\$3.00 Copay

YOUR TOTAL YEARLY COST ESTIMATE [i](#) \$3,770 per household (Select the "Edit Health Care Use" button to change the yearly cost estimate.)

H.S.A. Qualified : No

Find a Health Care Provider Important Plan Information [Plan Costs & Benefits](#) Drug Search

[Email Quote](#) [Add to Compare](#) [APPLY](#)

Click Analysis: Individual Market continued

- Abortion included in the “Other Covered Services” section for all carriers, but there was variation in the language
- May still leave consumers with questions

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document .)		
<ul style="list-style-type: none"> • Abortion • Acupuncture - - 	<ul style="list-style-type: none"> • Bariatric surgery • Chiropractic (manipulative) care - 20 visits per calendar year 	<ul style="list-style-type: none"> • Hearing aids • Infertility treatment

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document .)		
<ul style="list-style-type: none"> • Abortion Care • Acupuncture with limits (Covered when medically necessary) • Bariatric Surgery 	<ul style="list-style-type: none"> • Chiropractic Care with limits (Limited to 20 visits per condition, per calendar year) • Hearing Aids with limits (Limited to one hearing aid per hearing impaired ear every 36 months) 	<ul style="list-style-type: none"> • Infertility Treatment (Includes In vitro fertilization) • Routine Eye Care (Adult)

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document .)		
<ul style="list-style-type: none"> • Abortion, except in limited circumstances • Acupuncture • Bariatric surgery 	<ul style="list-style-type: none"> • Chiropractic care • Coverage provided outside the United States. See www.carefirst.com • Hearing aids 	<ul style="list-style-type: none"> • Infertility treatment • Routine eye care (Adult)

Click Analysis: Individual Market continued

- Attempted to find plan documents not directly accessible through MHC for more info
 - Were able to find one carrier's *Membership Agreement and Evidence of Coverage*, which elaborated
- 2. Family planning counseling, including pre-abortion and post-abortion care counseling;
Note: Counseling does not include instruction for fertility awareness based methods;
- 3. Male sterilization;
- 4. Abortion care Services: elective and therapeutic termination of pregnancy, as permitted under state law; and

Note: We also cover Services for interruption of pregnancy, limited to the following circumstances:

1. If the fetus is believed to have an incapacitating chromosomal, metabolic or anatomic defect or deformity that has been certified by a Plan Provider; or
2. When the life of the mother is endangered by a physical disorder, physical illness, or physical injury, including a life-endangering physical condition caused by or arising from the pregnancy itself; or
3. When the pregnancy is the result of an alleged act of rape or incest.

Click Analysis: Small Group Market

- More variation than in the individual market
- 1 carrier did not have updated coverage documents available through MHC
- 1 carrier was 1 click away, and the abortion coverage description was identical to the language used in the individual market
 - The same non-specific language about limitations is present
- 2 carriers' documents did not address abortion coverage

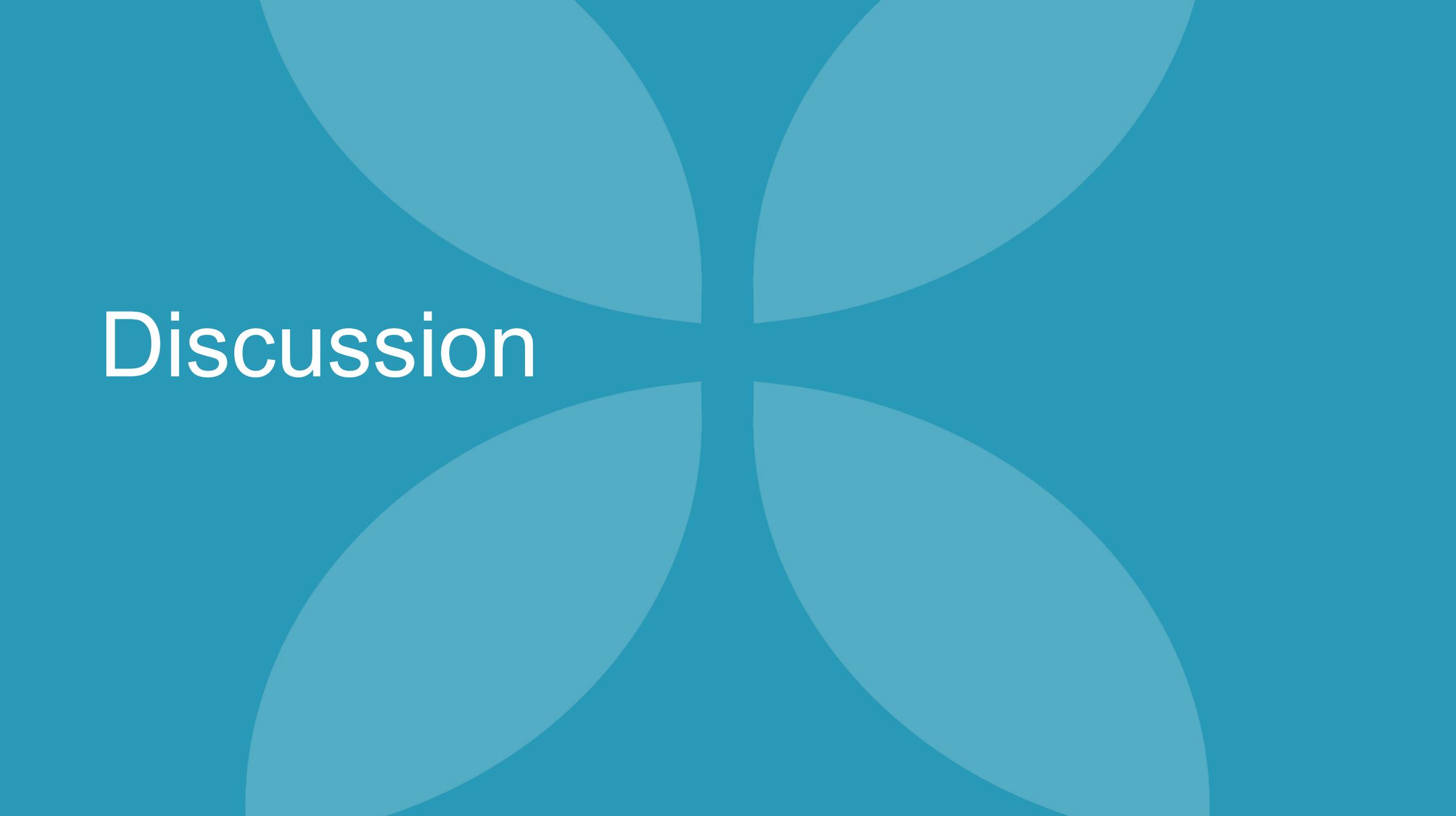
Click Analysis: Limitations

- Waiting for updated contract documents from one carrier
- Click analysis
 - Analysis could be expanded
 - Some external plan documents may have been missed in preliminary review
 - Can expand analysis based on Workgroup feedback

Click Analysis: Overall Findings

- Abortion coverage information more easily accessible than in previous analysis
- Initial findings indicate areas where document transparency could be improved
 - This is true of the individual market and especially the small group market

Discussion

The background features a teal color with a central graphic of four overlapping, light blue, petal-like shapes arranged in a cross pattern, resembling a stylized flower or a four-leaf clover.

Discussion

- **What can MHBE do to improve access to abortion care information?**
 - Add fact sheet on abortion care coverage to MHBE website, alongside fact sheets on immigration status and other issues?
 - Add a line about abortion care coverage to each plan's Plan Details list on MHC plan shopping page?
- **What can carriers do to improve access to abortion care information?**
 - **Navigation:** Include information on abortion care coverage in [specific location] in plan documents (EOB, contract, etc.)? Where/which documents?
 - **Service category and terminology:** What “benefit category” should abortion fall under in the plan documents? Medication vs. procedural/surgical?
 - What language should be used to describe the benefit?
 - Should the terminology be consistent for individual and small group plans?



Next Steps

Next steps

Next meeting: Tuesday, November 15, 1 - 2:30pm

Nov 15 (#3)	Discussion of possible recommendations to improve accessibility and transparency
Nov 29 (#4)	Discuss draft report and recommendations
Dec 13 (#5)	Vote to finalize recommendations and report to legislature



Public Comment

Appendix



House Bill 937 of 2022 (Abortion Care Access Act)

SECTION 3. AND BE IT FURTHER ENACTED, That:

(a) The Maryland Health Benefit Exchange, in consultation with the Maryland Insurance Administration, shall convene a workgroup of interested stakeholders to make **recommendations to improve the transparency and accessibility of consumer information about abortion care coverage.**

(b) **On or before January 1, 2023**, the Maryland Health Benefit Exchange shall report the recommendations made by the workgroup convened under subsection (a) of this section to the Senate Finance Committee and the House Health and Government Operations Committee, in accordance with § 2–1257 of the State Government Article.