RESOLUTION

EXECUTIVE BOARD OF THE DISTRICT OF COLUMBIA
HEALTH BENEFIT EXCHANGE AUTHORITY

To establish certification requirements for Qualified Dental Plans.


WHEREAS, § 1311(d)(2)(B)(ii) of the Affordable Care Act of 2010 (P.L. 111-148 & P.L. 111-152) (“ACA”), 45 CFR § 155.1065, and § 5(b) of the Act (D.C. Official Code § 31-3171.04(b)) permit a health carrier to offer a limited scope dental benefit either separately or in conjunction with a Qualified Health Plan, if the plan provides pediatric dental benefits meeting the requirements of §1302(b)(1)(J) of the ACA;

WHEREAS, § 10(a) of the Act (D.C. Official Code § 31-3171.09(a)) permits a Qualified Health Plan to not offer pediatric dental benefits if it makes prominent disclosure at the time it offers the plan that it does not provide the full range of essential pediatric dental benefits;

WHEREAS, § 10(e) of the Act (D.C. Official Code § 31-3171.09(e)) applies the certification requirements of the Act to Qualified Dental Plan to the extent relevant and permits health carriers to jointly offer a comprehensive plan through the exchanges in which the dental benefits are provided by a health carrier through a Qualified Dental Plan and the other benefits are provided by a health carrier through a Qualified Health Plan; provided, that the plans are priced separately and are also made available for purchase separately at the same price;

WHEREAS, the Dental Plan Working Group, which included ten dental and health carriers, consumer groups, and an individual consumer, met and reached consensus on April 2, 2013 on three recommendations and did not reach consensus on one recommendation; and

WHEREAS, the Board received a series of consensus recommendations from the Dental Plan Working Group.

NOW, THEREFORE, BE IT RESOLVED that the Executive Board hereby approves the following consensus recommendations for the offering of Qualified Dental Plans:
1. **Certification Process:** Dental insurers will use the same general certification process adopted by the Board for Qualified Health Plans, with certain categories being modified or not applying as reflected in the Dental Plan Working Group April 13, 2013 report (attached).

2. **Non-Pediatric Dental Benefits:** Licensed District of Columbia issuers offering stand-alone pediatric dental plans may also offer non-pediatric dental benefits.

3. **QHP Dental Benefits:** A Qualified Health Plan must clearly label whether it does or does not include the pediatric dental essential health benefit.

**I HEREBY CERTIFY** that the foregoing Resolution was adopted on this ___18th___ day of _April__, 2013, by the Executive Board of the District of Columbia Health Benefit Exchange Authority in an open meeting.

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Khalid Pitts, Secretary/Treasurer     Date
District of Columbia Health Benefits Exchange Authority