

Essential Health Benefits and Dental

Qualified Health Plans: Part 3 of 4



Introduction

Marketplace plans, also known as qualified health plans (QHP), must include coverage for 10 essential health benefits (EHB). Other coverage benefits, such as dental or vision, are not considered to be part of the EHB. In addition to health benefits, the BeWell Marketplace also offers dental plans. Assistors (a collective term for agents, brokers, and enrollment counselors (ECs)) should be able to discuss these different benefits with consumers.

Main Topics

- Essential health benefits
- Prescription drug benefits
- Dental coverage options

The Essential Health Benefits



- Essential health benefits (EHB) are a set of 10 categories of services health insurance plans, both inside and outside of the health insurance marketplace, must cover under the Affordable Care Act (ACA).
 - **Note:** “Covered” does not mean “pre-deductible,” that the service is free, or that the benefit is covered with only a copayment due at the time of service.” “Covered” means the benefits are included within the maximum out-of-pocket allowable amounts.

Benchmark Plans

- The ACA gave all states the flexibility to choose a plan to represent the “benchmark” of coverage for their state.
- The benchmark plan must include the statutory EHB categories.
- All other plans on the individual and small group market must offer benefits substantially equal to the benchmark benefits and reflect the scope of services and limits.
- Carriers have the flexibility to develop the costs of benefits for their plans through cost-sharing like deductibles, copayments, and coinsurance amounts.
- Carriers can include additional benefits beyond EHB. They must allocate the cost of the non-EHB benefits separately from EHB costs.

Prescription Drug Benefits



- All health plans must cover at least one drug in every category and class of drugs or the same number of drugs in the EHB benchmark plan.
 - This does not mean that each plan provides the same brand of drug.

Dental Coverage Options



- BeWell provides both medical and dental plans.
- There are two types of dental coverage for adults:
 - Integrated Dental Plans: Dental plans that are part of the covered benefits of a health plan. If a health plan includes dental, the premium covers both health and dental coverage.
 - Stand-alone Dental Plans (SADP): A dental plan that is not integrated into a health plan. If the consumer chooses a separate dental plan, they will pay a separate, additional premium.
- For dental insurance purchased with a health plan, the same Open Enrollment Period (OEP) and Special Enrollment Periods (SEP) apply. However, consumers may shop and enroll in a SADP year-round, although they may only change or enroll in a SADP once per month.

Dental Coverage Options (Continued)



- Pediatric dental coverage
 - Dental coverage is an EHB for children (not for adults).
 - This means if the consumer is getting health coverage for someone 18 or younger, dental coverage must be available for the child either as part of a health plan or as a separate dental plan.
 - Households with dependents are not required to purchase a QHP with embedded pediatric dental included in the QHP benefits, or child-only dental plans.
 - Premium subsidies may be used to purchase the portion of a SADP that will apply to consumers under the age of 19.

Key Points

- Marketplace plans must include coverage for the 10 EHB. These services still incur regular cost-sharing expenses, such as copayments and coinsurance.
- Under the ACA, states can choose their own benchmark plans. All other plans must include the EHB categories, offer benefits equal to the benchmark benefits, and reflect the scope of services and limits.
- All health plans must cover at least one drug in every category and class of drugs or the same number of drugs in the EHB benchmark plan.
- The two types of dental coverages for adults are integrated dental plans and stand-alone dental plans.
- Carriers are required to offer pediatric dental, unless the carrier has confirmed that dental coverage has been covered for the consumer in another way, outside of the Marketplace.



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