

Private Insurance Advocacy Checklist:

Getting to Know Your State's Health Insurance Landscape

The Affordable Care Act

This checklist explains how private health insurance is regulated and outlines how consumers and advocates can influence state decision-makers to protect consumers' interests.

Department of Insurance

Note that this department might be combined with others (financial services, banking, etc.)

- » Who is the **commissioner**? What is his or her background? What does he or she see as the department's major accomplishments around health insurance?
- » Is there a **separate health division** within the insurance department? How is it staffed?
- » Are there **advisory committees** to the department that consumer representatives can sit on? What kinds of issues is the department considering?
- » Is the department active in the health insurance committees of the **National Association of Insurance Commissioners** (NAIC)? When NAIC sets forth a model act or rule (for example, a rule on network adequacy or grievances and appeals), does the state usually consider and adopt it?
- » Where can you find the state's **laws and rules that pertain to health insurance**? What kinds of things has the state done to protect health insurance consumers that might go beyond federal requirements? Are there laws about network adequacy, drug formularies, continuity of care when a provider leaves a network or the plan year ends, misleading marketing of health insurance, appeals of health insurers' decisions, tobacco rating, or unexpected medical bills for emergency services? What other laws are there?
- » How does the insurance department **review proposed premium rates**? Is there a public comment process? When are proposed rates posted and how can the public learn about them and follow the process? Did the state have money through federal grants to hire an actuary (or to strengthen its rate review process in a different way)? If so, will the state continue that work when the grant ends?
- » Who do consumers call when they have **complaints** about a health plan? How does the department track and resolve those complaints? Has it

identified recurring issues that could be resolved through a policy solution or better consumer education? How can the public access data on complaints?

- » When consumers file a grievance or appeal because a plan denied them care, is there a **consumer assistance program** that helps them prepare their case for review? Does the department collect data about the types of issues that consumers appealed and make sure plans are doing something to address those issues?

State-run marketplace

- » Who is the **director**? Who is on the board?
- » When are **meetings** scheduled? Do meetings include a public comment period? How can you learn about the agenda and the decisions? Are there advisory committees that you can sit on?
- » What types of **decisions** will your state's exchange be making this year? For example, does the exchange set further requirements for plans? Might it require plans to offer more services pre-deductible? Might it set network adequacy or

quality standards? How is it funding navigators in the years to come? How is it improving outreach and enrollment?

Health department

- » What are the **community's critical public health concerns**? Does the health department communicate with private insurance companies about initiatives that might improve the health of residents in the community or address common health problems? How does the health department foster opportunities for collaboration with the community, its residents, and advocates?
- » Is the health department working on any **health literacy campaigns**? If so, does it include efforts to help people understand how to use health insurance (what is a deductible, etc.)?
- » Does the department conduct **initiatives to improve minority health** (for example, encouraging health plans to produce materials in other languages or ensuring that customer service departments communicate in other languages)?

Legislative committees that oversee health insurance

- » Who is the **chair**, and who are the members of these committees?
- » What are some of their recent **legislative initiatives**?
- » What actions have other **stakeholders** asked those committees to do this year?

- » What types of issues come up in the **budget**? For example, does the Department of Insurance have the resources it needs for consumer assistance, rate review, and health insurance oversight? Are there adequate resources for navigator and marketplace functions? How will outreach be funded in the next open enrollment period?

Health insurers

- » Do insurers have **consumer advisory committees**?
- » What sorts of **initiatives** are insurers undertaking to control costs, improve quality, address health literacy, and ensure that benefits packages meet consumer needs?
- » What do insurers see as **enrollment challenges or successes**?
- » What types of **consumer complaints** are insurers receiving? Do insurers have an internal process to evaluate patterns of consumer complaints and grievances and appeals (for example, is there a process to make changes in their utilization guidelines)?
- » Are insurers pursuing any **legislative or administrative reforms** in the state?
- » Do nonprofit insurers provide **community benefits**, and how do they receive input on that from the community?
- » Who are the appropriate **contacts** for an organization like yours? For example, the insurer's government affairs or member services department?

Members of Congress

- » Does your state have any members of Congress who serve on **congressional committees** and play a major role in health insurance issues or in funding for health care and health reform?
- » What are their **views** about health care issues?
- » How do they handle **constituent feedback** about what is going well with health reform and where improvements are needed?
- » Who are the **legislative assistants** and **constituent services staff members** with whom you should communicate?

Publication ID: ACA011915

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