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SENIOR ISSUES (B) TAS K FORCE

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Draft: 11/24/24

Senior Issues (B) Task Force
Denver, Colorado
November 17, 2024

The Senior Issues (B) Task Force met in Denver, CO, Nov. 17, 2024. The following Task Force members participated:
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(AK); Mark Fowler represented by Sanjeev Chaudhuri (AL); Andrew N. Mais represented by Paul Lombardo (CT);
Karima M. Woods represented by Michael Ross (DC); Trinidad Navarro represented by Sally Frechette (DE);
Michael Yaworsky represented by Alexis Bakofsky (FL); Doug Ommen represented by Andria Seip (IA); Dean L.
Cameron represented by Randy Pipal (ID); Amy L. Beard represented by Alex Peck (IN); Vicki Schmidt represented
by Julie Holmes (KS); Sharon P. Clark represented by Angi Raley (KY); Timothy J. Temple represented by Vicki
Dufrene (LA); Michael T. Caljouw represented by Kevin Beagan (MA); Marie Grant represented by Jamie Sexton
(MD); Robert L. Carey represented by Marti Hooper (ME); Anita G. Fox represented by Renee Campbell (MI);
Chlora Lindley-Myers represented by Jo LeDuc (MO); Mike Chaney represented by Bob Williams (MS); Mike Causey
represented by Robert Croom (NC); Jon Godfread represented by Chrystal Bartuska (ND); Eric Dunning and Martin
Swanson (NE); D.J. Bettencourt represented by Michelle Heaton (NH); Justin Zimmerman (NJ); Alice T. Kane
represented by Blanca Ramirez (NM); Judith L. French represented by Laura Miller (OH); Andrew R. Stolfi
represented by Numi Griffith (OR); Michael Humphreys represented by Dave Yanick (PA); Larry D. Deiter
represented by Jill Kruger (SD); Carter Lawrence represented by Scott McAnally (TN); Cassie Brown represented
Debra Diaz-Lara (TX); Jon Pike represented by Tanji Northrup (UT); Scott A. White represented by Jackie Myers
(VA); Kevin Gaffney represented by Emily Brown (VT); Mike Kreidler represented by Todd Dixon (WA); Nathan
Houdek represented by Darcy Paskey (WI); and Allan L. McVey represented by Joylynn Fix (WV).

1. Adopted its Oct. 21, Sept. 20, and Summer National Meeting Minutes

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The goal is to make timely decisions, ensuring beneficiaries are informed of their rights and options for changing
plans or Medigap coverage promptly. CMS remains committed to this approach and will continue to communicate
as needed.

Another question asked is how this criteria impacts people in employer-sponsored plans and how network change
is determined, as people are being told by their providers about the network change. Turco said provider
terminations that occur within an employer-sponsored MA plan are subject to the same CMS requirements and
processes for determining whether a Special Enrollment Period (SEP) is applicable. MA plans, including employer-sponsored MA plans, are required to report to CMS any time they have experienced a significant network change.
CMS then determines if the provider termination is significant and if it is, this would be communicated to the plan.
Existing CMS guidance requires the plan to notify impacted enrollees if they are eligible for a SEP and Medigap GI
rights. She said CMS is working on standardizing these communications to enrollees.

Turco explained that plans must notify enrollees of this change, regardless of SEP eligibility. CMS provides
resources for plans to contact them with any process-related questions. She also noted that providers may not
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their employer to understand additional coverage options and how decisions might affect their employer-sponsored coverage.

Another question that was asked during the Nov. 8 meeting was that although determination is communicated
quickly, how long does it take to make the determination? CMS thoroughly reviews each case and works quickly
so that affected enrollees are notified as fast as possible. When CMS determines the network's change is
significant, the plan must notify its affected enrollees of their eligibility for a SEP, including their GI rights and how
to use a SEP. CMS provides model language for this notification, but this is another area where CMS is open to
feedback about timeliness and other related issues.

Turco said that another question asked was who at CMS prompts the plans to send notifications to beneficiaries
when a provider network decides to no longer accept MA plans. MA plans are required to report to CMS anytime
they are experiencing a network change. CMS then works

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Kruger acknowledged that the question was answered, but pointed out that for rural states, the situation is
challenging. Unlike urban areas with multiple hospital systems, rural areas often have only one hospital, so when
that hospital leaves a network, it becomes nearly impossible to meet the required standards. This approach does
not make sense for rural states. Coleman said they have different standards based on county type, and CMS looks
at access based on that type of county. CMS has four different categories of counties: urban, suburban, rural, and
counties with extreme access concerns. She said CMS would be happy to talk with South Dakota about this
matter. Commissioner Kipper asked if that discussion could be shared with the other rural states.

Commissioner Kipper said the Task Force and the NAIC look forward to continuing this discussion with CMS. He
said CMS clearly understands the frustration of regulators and recognizes the significant communication
opportunities. He encouraged CMS to leverage the expertise around the table and reiterated that state regulators
and the NAIC, as always, are ready to assist CMS in addressing these issues.

Bonnie Burns (California Health AdvocatesͶCHA) said she supports the SHIPs in California with training materials
and information. This has been a particularly difficult annual enrollment period for many different reasons, and
due to the Presidential E

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Draft: 10/21/24

Senior Issues (B) Task Force
E-Vote
October 21, 2024

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Draft: 9/20/24

Senior Issues (B) Task Force
E-Vote
September 20, 2024

The Senior Issues (B) Task Force conducted an e-vote that concluded Sept. 20, 2024. The following Committee
members participated: Scott Kipper, Chair (NV); Peni Itula Sapini Teo, Vice Chair (AS); Lori Wing-Heier (AK); Ricardo
Lara (CA); Andrew N. Mais (CT); Karima Woods (DC); Trinidad Navarro (DE); Doug Ommen (IA); Dean L. Cameron
(ID); Amy L. Beard (IN); Vicki Schmidt (KS); Sharon P. Clark (KY); Timothy J. Temple (LA); Kevin Beagan (MA); Joy
Hatchette (MD); Robert L. Carey (ME); Anita G. Fox (MI); Chlora Lindley-Myers (MO); Grace Arnold (MN); Mike
Causey (NC); :ŽŶථ'ŽĚĨƌĞĂĚ;EͿ͖ƌŝĐƵŶŶŝŶŐ;EͿ͖D.J. Bettencourt (NH); Glen Mulready (OK); Michael
Humphreys (PA); Carter Lawrence (TN); Jon Pike (UT); Scott A. White (VA); Kevin Gaffney (VT); Mike Kreidler (WA);
Nathan Houdek (WI); and Allan L. McVey (WV).
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2. Adopted a Letter Regarding Provider Withdrawals from Medicare Advantage
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The Task Force conducted an e-vote to consider the adoption of a letter to the Centers for Medicare & Medicaid
Services (CMS) regarcW* n
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