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## **Study Resolution**

## Health insurance affordability in the individual market

Authorized by the Joint Commission on Healthcare on December 15, 2020

WHEREAS, there are approximately 270,000 Virginians who purchase health insurance on the individual market through the ACA marketplace; and

WHEREAS, affordability concerns exist for low income individuals who qualify for federal premium subsidies but are unable to afford to seek medical care because of high out of pocket costs, and for higher income individuals who struggle to afford premiums because they are not eligible for federal subsidies; and

WHEREAS, the ACA marketplace is intended to be a one-stop shop for individuals and small businesses to purchase affordable health insurance coverage; and

WHEREAS, uncertainties and instability in the market have led to a lack of affordable health insurance coverage offered by insurers on the marketplace; and

WHEREAS, the number of Virginians who are uninsured because of affordability remains a concern; and

WHEREAS, multiple state initiatives in Virginia, including adoption of Medicaid expansion, authorization to create a state-based marketplace exchange and authorization to study a state reinsurance program to cover high-cost claims for insurers are now underway; and

WHEREAS, policy proposals to address affordability in the individual market were referred to the Joint Commission on Health Care during 2020, including the use of Association Health Plans, the Basic Health Program, and a public option, now, therefore be it

RESOLVED, by the Joint Commission on Health Care that staff be directed to study additional strategies Virginia can adopt that will help the state create a more stable individual health insurance marketplace that can offer more affordable coverage, regardless of income.

In conducting its study, staff shall (i) review policy options being implemented in other states directed at stabilizing the individual marketplace; (ii) identify options that may make health coverage more affordable and available to individuals regardless of income; (iii) assess the methods of achieving stability and affordability to maximize any federal funds that may be available to offset any increased costs; and (iv) determine, where possible, the impact of each option on the state, insurers, providers and consumers, including any unintended consequences.

The Joint Commission on Health Care shall make recommendations as necessary and review other related issues as warranted.

In accordance with § 30-169.1 of the Code of Virginia, all agencies of the Commonwealth, including the Virginia State Corporation Commission and the Virginia Department of Medical Assistance Services shall provide assistance, information, and data to the JCHC for this study upon request.