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**BULLETIN 2021-01**

**EXTENSION OF TRANSITIONAL POLICY FOR NON-ACA COMPLIANT PLANS  
THROUGH CALENDAR YEAR 2022**

**Effective March 3, 2021**

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On January 19, 2021, the Center for Consumer Information and Insurance Oversight (“CCIIO”) issued an Insurance Standards Bulletin extending CCIIO’s transitional policy through calendar year 2022, provided that all policies begin on or before October 1, 2022 and end by December 31, 2022. Some previous bulletins referred to this topic as a “transitional policy” and CCIIO is now calling the policy a “non-enforcement policy,” but the substance of the policy remains unchanged from previous years. As with previous transitional policies, this policy applies to non-grandfathered health insurance plans in the individual and small group markets that would otherwise terminate or require modification as a result of the federal health insurance market reforms required under the Patient Protection and Affordable Care Act (“ACA”).

In light of CCIIO’s extended transitional policy, insurers in Ohio may offer their insureds the ability to continue/renew non-ACA compliant individual and small group coverage, at the insured’s option. Insurers wishing to extend coverage shall follow CCIIO’s transitional policy, including federal notice requirements, offering reenrollment or extended coverage to impacted policyholders in the individual and/or small group market in a uniform and non-discriminatory manner in accordance with Ohio law (Ohio Revised Code (“ORC”) 3924.03 and 3923.57). Thus, renewals shall be treated uniformly and without regard to health status.

Please note that individual coverage includes sickness and accident insurance made available in the individual market to individuals, with or without family members or dependents, through group policies issued to one or more associations, trusts, or other entities. Small group coverage applies to employer-sponsored plans only.

To take advantage of CCIIO’s transitional policy, filings must meet the requirements specified below.

**Filing Guidance**

For purposes of transitional policy rate filings, issuers should submit updated rates for 2022 no less than 30 days before the effective date. Filings must comply with all rate increase filing requirements, including, but not limited to, the submission of an actuarial memorandum that quantitatively supports all premium and trend factors and the

actuarial soundness of premium rates to be charged (ORC 3923.021 and 1751.12), and must comply with applicable federal law.

For purposes of form filings, issuers should submit updated forms for 2022 to incorporate state law changes effective on or prior to January 1, 2022, if applicable. All transitional policy filings must clearly indicate that they are being filed pursuant to this Bulletin.

Superintendent of Insurance

A handwritten signature in black ink that reads "Judith L. French" with a long, sweeping horizontal line extending to the right.

Judith L. French,  
Director