# Colorado Reasonable Modifications Filing Instructions for ACA Compliant Plans



COLORADO Department of Regulatory Agencies

Division of Insurance



## INTRODUCTION

The purpose of this document is to provide carriers with guidance on health benefit reasonable modifications filing procedures, and to ensure that reasonable modifications documentation for Affordable Care Act (ACA) health benefit plans are submitted properly, pursuant to Colorado Insurance Regulations 4-2-27, and federal laws and regulations. The Colorado Division of Insurance (DOI or the Division) has prepared these instructions for ACA-specific Reasonable Modifications filing submissions. Instructions may be accessed in "<u>Reasonable Modifications</u>" Filing Type on the <u>ACA Annual Filings Information</u> page on the DOI website.

#### NOTE: RED text signifies new information for plan year 2026.

#### APPLICABILITY

These instructions are intended for all carriers renewing individual and small group health benefit plans, in Colorado, that are required to comply with the ACA. Reasonable modification filings are not required for pediatric stand-alone dental plans.

#### FILING DEADLINES

Carriers renewing individual and small group health benefit plans, on or off the exchange, are required to submit reasonable modification filings to the DOI no later than the date specified by DOI in notifications to the carriers prior to filing submissions for each plan year. DOI will transmit due dates for Reasonable Modifications filings for each plan year as soon as they are available.

Please follow this link to see the current plan year timeline: Current Plan Year Timeline.

#### All dates are dependent on CMS/CCIIO and SERFF and are subject to change.

## SUBMISSION REQUIREMENTS FOR REASONABLE MODIFICATIONS

All carriers must file reasonable modification filings for all individual and small group health benefit plans that are being renewed. This applies to carriers making reasonable modifications to benefits, changes based on Federal or State requirements or not making any modifications to plans being renewed in the new policy year. All reasonable modification filings shall be filed in SERFF by the date specified by DOI. The filings must be filed under the correct TOI code (H21 Health - Other or HOrg03 Health - Other), using the "Reasonable Modifications" filing type, and include required documents and appendices. In the Filing Description, indicate this filing is for the Plan Year 20XX filing season reasonable modifications. Reasonable modification filings are not required for pediatric stand-alone dental plans.

The three documents described in Section 6 of Colorado Insurance Regulation 4-2-27, and the appropriate Individual or Small Group Policyholder Notice documents described in Sections 5, 9, 11, or 12 of Colorado Insurance Regulation 4-2-82, must be included in the reasonable modifications filling. Templates for each of the documents are attached to the regulations, and provided on the DOI website at this link: <u>DOI Regulations</u>

**Note:** The applicable policyholder notice documents must be submitted in the reasonable modification filing. Please do not submit policyholder notices in the form filing.

**Note:** If necessary, during the filing review process, DOI will work with individual carriers to revise items that require revisions after Reasonable Modifications filing submissions.

Any changes to the process or content of reasonable modifications filings will be transmitted via email or other method to all affected carriers approximately 30 days before reasonable modification filings are due. This will include revisions or amendments to applicable bulletins and regulations, CMS's proposed maximum annual limitations on cost sharing, and the status of CMS notices and guidelines for the coming plan year.

### MHPAEA AND FILINGS

Reasonable modification and MHPAEA filings must be submitted separately. However, if it is determined that carriers must make cost-sharing changes due to MHPAEA QTL requirements, any changes to the actuarial value will be reviewed for compliance with \$10-16-103.4 C.R.S. If any plans fall out of compliance with AV, the Division will work with the carriers to make reasonable changes necessary to achieve compliance with AV requirements.